Zimbabwe
Multihazard Situation Report # 5 September 1 – October 31, 2021

Highlights

- 7,016 children (3,947 girls and 3,069 boys), constituting 32% of the target, were admitted to community and facility-based programmes for the treatment of severe wasting from January to October 2021.

- Between January and October 2021, a total of 1,733,598 women and children (1,324,645 females; 408,953 males) were reached with primary health care services against an annual target of 2.7 million.

- A total of 736,225 people (382,837 females; 353,388 males; including 5,322 people with disabilities) were reached with safe water, surpassing the annual target of 610,057.

- UNICEF reached a total 19,644 (12,404 females and 7,240 males) survivors of GBV with post GBV services against the annual target of 18,500.

- 9,725 households (comprising over 41,152 people including 18,632 children) against an operational target of 8,250 households benefitted from emergency cash transfers in Highfields, Gutu and Mufakose districts.

UNICEF’s Response and Funding Status

Situation in Numbers as of October 31, 2021

- 132,977 cumulative COVID-19 cases
- 127,700 total recoveries
- 4,678 deaths
- 653,710 PCR tests conducted
- 599 active cases

Source: Zimbabwe COVID-19 Daily Sitrep 31/10/2021, Ministry of Health and Child Care

UNICEF Appeal 2021
US$ 65.8 million
Funding Overview and Partnerships

UNICEF is appealing for US$ 47.2 million to meet the humanitarian needs in the country in 2021 as a result of the multiple hazards of residual impacts of Cyclone Idai and floods, COVID-19 and diarrheal disease outbreaks, and the economic crisis. As of 30 August 2021, funds totalling US$ 18,004,250 (28 per cent of the total 2021 funding requirement) had been received from various donors that include China, ECHO, Germany, Japan, US Fund for UNICEF, CDC, USA (OFDA), FCDO, SIDA, Denmark, Danish Committee for UNICEF and UNICEF Global Thematic Humanitarian. Other donors, including, the HDF group (FCDO, Irish Aid, EU, SIDA, GAVI) have approved reprogramming of the development funds amounting to over US$ 18.4 million to support the COVID-19 response as well as EDF and GPE.

Situation Overview & Humanitarian Needs

Zimbabwe is still grappling with the impact of COVID-19 Pandemic which has had significant social, economic and health implications on the affected population. In the short term, the economic outlook is hinged on public health and the evolution of the COVID-19 vaccination process. Although government extended the Level 2 lockdown, the associated measures have significantly been eased, including opening of contact-intensive sectors, resumption of intercity travel and opening of other non-essential services. However, as observed at the end of 2020, the upcoming festive season poses a risk of increased infections, particularly considering that most places of social gatherings, including bars and restaurants have been allowed to open. Government has indicated that only vaccinated people will access restaurants and bars.

As of 31 October 2021, Zimbabwe had recorded 132,977 COVID-19 cases. The epidemiological trend is showing a general reduction in the rates of infections from August 2021. A total of 4,678 deaths had been recorded by 31 August, which is a slight increase from the 4,419 reported in August 2021. Harare continues to have the highest incidence per capita at 1,299 a slight increase from the 1,274 cases per 100,000 reported in August, followed by Matabeleland South with 1,346 cases up from 1,221 cases per 100,000 recorded in August, and Mashonaland West and Matabeleland North provinces, both at 1,091 cases per 100,000. The Government of Zimbabwe re-opened schools on 30 August beginning with examination classes with the rest of the classes reopening on 8 September 2021. In October, schools experienced a surge in COVID-19 infections with 2,882 school children (1,127 males; 755 females) & 204 teachers (78 males and 126 females) having tested positive cumulatively. More than 50% of the new cases were driven by 2.56% of the schools in the country. There was 1 death, 1,043 recoveries and 2,042 active cases. Below is the table showing number of COVID-19 infections in schools per province.

Table 1: COVID-19 Cases in Schools by Province

<table>
<thead>
<tr>
<th>Province</th>
<th>Number Schools</th>
<th>Teachers and Staff Affected</th>
<th>Learners Affected</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bulawayo</td>
<td>9</td>
<td>2</td>
<td>25</td>
<td>27</td>
</tr>
<tr>
<td>Harare</td>
<td>28</td>
<td>56</td>
<td>10</td>
<td>66</td>
</tr>
<tr>
<td>Manicaland</td>
<td>37</td>
<td>17</td>
<td>169</td>
<td>186</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>6</td>
<td>3</td>
<td>172</td>
<td>175</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>24</td>
<td>10</td>
<td>315</td>
<td>325</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>13</td>
<td>17</td>
<td>14</td>
<td>31</td>
</tr>
<tr>
<td>Masvingo</td>
<td>49</td>
<td>48</td>
<td>737</td>
<td>785</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>31</td>
<td>19</td>
<td>658</td>
<td>677</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>24</td>
<td>15</td>
<td>245</td>
<td>260</td>
</tr>
<tr>
<td>Midlands</td>
<td>25</td>
<td>17</td>
<td>537</td>
<td>554</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>246</strong></td>
<td><strong>204</strong></td>
<td><strong>2,882</strong></td>
<td><strong>3,086</strong></td>
</tr>
</tbody>
</table>

Source: Ministry of Health and Child Care

1 Ministry of Health and Child Care Daily Sitrep, 30 August 2021
The national COVID-19 vaccination campaign has continued to progress steadily between September and October 2021. By 31 August, a total of 3,310,575 people had received first doses of the vaccine up from 2,582,705 in August 2021. A total of 2,595,159 people had received the second doses of the vaccine up from 1,636,498 in August 2021. Currently there is a general lax by the public to abide by the COVID-19 mitigation protocols, which further poses a threat especially going into the festive season. This underscores the need to continue to reinforce the general COVID-19 safety measures and intensify the national vaccination campaign.

The second round of the Crop and Livestock Assessment 2020/2021 Season conducted in April 2021 predicted a significantly improved cereal security in Zimbabwe as a result of an anticipated increase in maize yield in 2021. However, in 2022, pockets of food insecurity are anticipated particularly during the lean season (October-March), when poor households in some deficit producing southern and extreme northern areas will be market reliant with lower purchasing power due to the macroeconomic challenges exacerbated by the economic impact of the COVID-19 pandemic. UNICEF may need to expand its current emergency social cash transfer intervention to cover the most affected geographic locations. The 2021-2022 rainfall seasonal forecast predicts normal to above normal rainfall, underscoring the risk of flooding and the accompanying water borne disease outbreaks particularly during the first quarter of 2022, UNICEF-led clusters have collaborated with the Inter-cluster Coordination Group (ICCG) to develop an inter-agency contingency plan for the upcoming rainfall season.

Summary Analysis of Programme Response

**Nutrition**

The Nutrition Sector led by UNICEF and co-led by GOAL continues to strengthen coordination of nutrition interventions at national and subnational levels through the Nutrition Cluster and Technical Working Group. The cluster meetings have offered a platform to discuss the evolution of COVID-19 pandemic, progress on the implementation of cluster activities, and plan on the response for any nutrition related needs.

From January to September 2021, a monthly average of 293,145 children aged 6-59 months (149,504 girls and 143,641 boys), constituting 70% of the target, were screened for wasting in the selected districts. Of the 22,176 children targeted for treatment of severe wasting in 2021, 7,016 children (3,947 girls and 3,069 boys), constituting 32% of the target, were admitted for treatment at community and facility-based nutrition programmes from January to September 2021. The household cereal security in the country which has improved following improved harvests and the increased household access to maize from own production and other foods from the local markets has contributed to the decline in children being admitted with acute malnutrition in 2021 compared to other years. The number of children admitted for acute malnutrition is expected to increase in the last 3 months of 2021 as an estimated 2.4 million people in the country are expected to be cereal insecure during the lean season of the year (ZIMVAC, 2021).

The cure rate for children admitted for treatment in the prioritised 32 districts for the nine months (January to September) was 69% which is still falling below the target of ≥75%. Improvements were achieved in decreasing the defaulter rate (12%) and the death rate (4%) putting them within the ≤15% and ≤5% acceptable thresholds, respectively.

From July to September, 33,388 children received the second dose of Vitamin A supplements at health facilities as well as from village health workers at community level in the 32 targeted districts. Between January to June 2021, 368,883 (81% of the target) children aged 6-59 months had received one dose of Vitamin A supplements. The MOHCC with support from UNICEF will accelerate

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2Second Round Crop and Livestock Assessment Report, 2020/2021 Season
local level campaigns in November and December to provide an opportunity for more children to receive the second dose of vitamin A supplements. From January to September, a monthly average of 118,954 mothers and caregivers of children under 2 years of age, constituting 33% of the target, were supported with counselling and messages on IYCF-e both in the communities and at Health facilities.

UNICEF will continue to prioritize identification of children with malnutrition getting into the lean season through intensifying family led MUAC approach. Distribution of essential nutrition commodities will also be supported. To improve outcomes of children admitted with acute malnutrition, mentorship activities for stabilization centers will be prioritized and these will be intensified going forward since COVID-19 containment restrictions have been eased. To improve vitamin A supplementation coverage, UNICEF will support MoHCC on local level campaigns in the last 2 months of the year to enable access for hard to reach populations.

Health

Between September and October 2021, UNICEF, coordinating with WHO and other UN agencies in collaboration with the Ministry of Health and Child Care (MOHCC) prioritized implementation of emergency response activities in schools and surrounding communities which were reporting a surge in COVID-19 cases after schools re-opening. In response to the surge in COVID-19 cases in schools, UNICEF distributed IPC supplies (Soap bars x10,000 units and liquid soap x 1,200 units of 5L) and PPE (cloth face masks x 47,000) to 66 most affected schools in 9 provinces reaching at least 50,000 pupils. Additional IPC supplies (hand sanitizers x 10,000, liquid soap x 5,000 and chlorine solution x 5,000) and PPE (Face masks-N95 and surgical, latex gloves) were procured and are in pipeline expected to be delivered between November and December 2021.

Furthermore, at least 2 million people accessed hand washing facilities supported by UNICEF in COVID-19 hotspots and through support from VHWs between September and October 2021. The cumulative number of people accessing hand washing facilities supported by UNICEF since July 2021 is 4.5 million against a target of 5 million. As part of strengthening COVID-19 response in schools, UNICEF conducted a U-report poll to gather perceptions of teachers on COVID-19 vaccines and prevention in schools reaching 3,890 respondents from the 10 provinces. Key highlights indicate that 93% of the respondents were vaccinated while main reason for not getting vaccinated were access (33%) and lack of trust in the vaccine (15%). The findings point to the need to address pockets of vaccine hesitancy amongst objectors and the need to strengthen IPC in schools.

UNICEF continues to strengthen continuity of essential services in the context of COVID-19. On-the-job integrated COVID-19 case management, IPC, and Basic Emergency Obstetric and Neonatal Care (BEmONC) trainings were rolled out and 56 participants have been reached against a target of 120. Refresher trainings were also conducted for 12,660 VHWs on integrated community-based management of cases. The trained cadres contributed to improving results for women and children reached with primary health care service. At least 143,357 women and children (114,716 females; 28,641 males) were reached with primary health care services in UNICEF supported facilities in October 2021. Since January 2021, a total of 1,733,598 women and children (1,324,645 females; 408,953 males) have been reached with primary health care services against an annual target of 2.7 million. In addition, a total of 270,498 children (60% of the annual target) between 6 to 59 months (133,085 Girls; 137,413 Boys) were vaccinated against measles out of the yearly target of 453,326 (DHIS 2).

UNICEF will continue to prioritise strengthening preparedness activities in preparation for emergencies prevalent during the rainy season and community engagement activities to promote resilience to the multi-hazard shocks. Mass media, advocacy, and social behaviour change campaign to increase COVID-19 IPC and vaccine uptake will be prioritized in 63 districts during the next reporting period.
During the reporting period, ten (10) Emergency Strategic Advisory Group (ESAG) meetings were conducted virtually, bringing a total of 37 WASH Cluster Coordination meetings in 2021. The WASH sector is currently reviewing and updating the contingency plans in line with the projected normal-to-above-normal rainfall season that is often associated with flooding, increase in diarrheal diseases in addition to a potential fourth wave of COVID-19 during the festive season.

A total of 13 solar powered piped water schemes were commissioned during the reporting period with no additional boreholes repaired or drilled. Cumulatively, 27 solar powered piped water systems were commissioned, 1,025 boreholes repaired, 26 new boreholes drilled, 5 gravity fed water systems established, and 3 springs upgraded since January 2021. These interventions reached a total of 809,208 people (428,886 females; 373,024 males; including 7,298 people with disabilities) with safe water, surpassing the annual target of 610,057. The targeted water points (boreholes and piped water schemes) served more people than those estimated using the SPHERE standards, especially in urban areas where there is a high concentration of people per unit area thus contributing to an overachievement of the planned target. A total of 2,737,243 people (1,423,366 females, 1,313,877 males including 35,654 people with disabilities) out of a targeted 1,479,245 people were reached with key health and hygiene messages on the prevention of COVID-19 and water borne diseases. This was achieved through conducting 10,957 hygiene sessions, establishing 1,061 community health clubs, and training of 1,716 community health workers. In addition, 22,133 WASH hygiene kits3 were distributed to vulnerable households, reaching 220,314 people (114,563 females, 105,751 males) in vulnerable districts within Harare, Bulawayo, Manicaland, Midlands, Masvingo, Matebeleland South and North and Mashonaland East, and Mashonaland West provinces. A total of 18,500 menstrual hygiene management (MHM) kits were distributed to adolescent girls and vulnerable women. Furthermore, 17 public toilets were rehabilitated in high risk urban areas. Five of these were converted into pay-toilets that are manned by community health clubs, serving an average of 200 people per day.

A total of 340 schools (out of the targeted 340 schools) benefitted from group handwashing stations and girl-friendly latrines since January 2021 with 107 schools equipped with new boreholes and 233 schools through borehole rehabilitation. A total of 946 schools benefitted through the WASH school improvement grant, resulting in repairs, and upgrading of water points. Through these interventions, a total of 189,040 (98,300 males, 90,740 females) learners and teachers were reached.

Since January 2021, a total of 66 health care facilities (HCFs) were supported with improved WASH and Infection Prevention and Control (IPC) services among which 17 benefitted from repaired water points, 12 with improvements in sanitation facilities and 37 received cleaning materials and disinfectants. These HCFs serve a monthly average of 450 people. Healthcare staff at 100 HCFs in 7 districts (Harare, Bulawayo, Chitungwiza, Chimanimani, Chipinge, Mutare, Beitbridge) were trained on the Water and Sanitation for Health Facility Improvement Tool4 (WASHFIT) followed by data collection.

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3 Each kit comprises: 20L buckets with tap and lid, 20L jerrycans, 1kg bars of all-purpose soap, household water treatment chemicals and IEC materials.

4 https://washfit.org/#/
The projection of the normal to above normal 2021/22 rainfall season is associated with tropical cyclones, flooding and increase in waterborne diseases. In line with this, UNICEF is facilitating reviewing and updating the National WASH Sector Contingency Plan which is expected to be finalized in November. Additionally, as part of preparedness planning, UNICEF and partners will be conducting an inventory of contingency stocks and preposition stock in hotspot areas.

**Education**

UNICEF convened bi-weekly Education in Emergencies cluster meetings with Save the Children, the co-lead, to coordinate the implementation of emergency response activities outlined in line with the Zimbabwe COVID-19 Preparedness and Response Strategy. The meetings reflected on progress against set goals, as well as emergent challenges. In line with the Strategy goal to ensure the continuity of education during the pandemic, UNICEF’s technical and financial support to the Ministry of Primary and Secondary Education has contributed to the development of primary and secondary radio lessons. To date, a cumulative total of 612 radio lessons for Cycle 4 have been broadcast (442 primary and 170 secondary). During the reporting period, 373 lessons were broadcasts through national and community radio stations.

The distribution of 3,167 solar radio sets procured to support disadvantaged schools has been completed, and the procurement of an additional 1,500 additional solar radio sets is in progress. Although the actual numbers of learners reached through radio lessons is difficult to measure because there is no mechanism for defining listenership based on radio ownership, we project that 750,000 learners will benefit from radio learning through the provision of radio sets in the disadvantaged communities while 1,183,791 learners (591,071 girls and 592,720 boys) out of the targeted 4.6 million learners have already been reached with radio lessons in the country since January 2021.

Since its launch, the Zimbabwean Learning Passport (LP) supported by UNICEF has increased access to digital teaching and learning materials. To date, the MoPSE has uploaded 4,152 lessons on the LP site, to enable users to have a varied range of content. The number of registered users increased from 77,774 to 79,454 as a direct result of promotional campaigns to increase the utility of the LP using radio and social media platforms and promotional school visits that have reached more than 38,263 in 24 schools in Bulawayo, Masvingo and Matebeleland South provinces. Recognizing that many learners may not have access to the internet, two offline learning passport units have been received and 6 more are expected to arrive by end of November 2021. The distribution of 708,732 copies of Grade 7 Maths and English Self-study guides (354,366 each) through 6,009 Primary schools has been completed reaching 345,306 learners (176,036 males and 178,270 females).

To date, the distribution of face masks, hand washing soaps and disinfectants and essential commodities to 89 schools in seven districts from Manicaland, Masvingo and Mashonaland East Provinces has been completed. Post distribution monitoring on utilization of the materials distributed is currently underway, with evidence suggesting that these materials have had a positive impact on benefiting schools, which would have otherwise been unable to procure these materials due to lack of resources owing reduced income from school fees. To support school feeding UNICEF disbursed a total of $300,000 School Improvement Grants to support 100 schools in Makoni, Gokwe North and Masvingo districts. These grants will be used to support the school feeding programme, enabling schools to buy relish and provide meals. It is hoped that the provision of meals will not only increase students’ attendance rates and participation, but also reduce dropout rates due to high food insecurity. For the next reporting period, SIG WASH will be transferred to 350 schools to support access to water by schools.

**Child Protection**

UNICEF Child Protection continues to support and co-lead the monthly Child Protection Working Group (CPWG) meeting with the Ministry of Public Service, Labour and Social Welfare (MOPSLSW). During the period, the CPWG focused on development of the 2022 preparedness plan as guided by the revised child protection core commitments. The contingency plan is informed by the risk of potential floods and associated protection risks. A total of 22 districts have been identified as key priority in the CP sub-sector contingency plan for flooding preparedness.

A total of 280 (170 females and 110 males) community social workers were trained on Child Protection in Emergency (CPiE). During the reporting period CCWs supported a total of 8,135 children (4,090 girls and 4,045 boys) with psychosocial support, justice services and case management services. Through the GBV and VAC awareness, a total
of 2220 adults (1,976 women and 244 men) were reached with protection information and positive parenting issues. UNICEF has reached 123,529 (67,789 female and 55,740 male) children and caregivers including 12,989 children with disabilities with critical child protection services since January 2021, surpassing the annual target of 90,000 children and caregivers.

As the COVID-19 pandemic (and ensuing lockdowns) exacerbated protection risks, UNICEF reached a total 19,644 (12,404 females and 7,240 males) survivors of GBV with post GBV services against the annual target of 18,500. The GBV survivors received emergency shelter, counselling mental health and psychosocial support (MHPSS) and were referred to the Police Victim Friendly Unit (VFU) and Legal Resources Foundation (LRF) for legal assistance. Through a partnership with Child Protection Society, UNICEF supported 899 unaccompanied and separated children (565 boys and 334 girls) with family tracing and reunification services. In addition, UNICEF provided technical assistance and support to the Department of Social Development to strengthen the National Case Management System in 5 drought affected districts of Chitungwiza, Chivi, Lupane, Mbire and Zaka reaching 15,000 children (8,993 females and 6,007 males).

In the next quarter, focus will be on continued implementation of the COVID-19 third wave response plan, provision of critical child protection, mental health and psychosocial support (MHPSS) including in the school setting. UNICEF will also provide comprehensive post GBV services, GBV risk mitigation and prevention of sexual exploitation and abuse, as well as support towards birth registration including mobile outreach services in COVID-19 hotspots.

HIV and AIDS

The MOHCC was supported to update messaging for infomercials on HIV, treatment and COVID-19 in children, adolescents, and pregnant and lactating women. These provide additional information for COVID-19 vaccination in these groups as the eligible age groups are expanded in the national program. These were aired in three languages (English, Shona and Ndebele) and on 3 radio stations with a combined reach of almost 45% of the country's listenership. UNICEF provided technical and financial support to NAC to implement the HIV Community empowerment project. This involves training and orientation of Community Network members of PLHIV and community leaders. An additional 117 persons were sensitized in the package which incorporates updated COVID-19 vaccination program and addresses vaccine hesitancy; these have managed to reach 1568 community members of which 465 were children and adolescents. It is anticipated that the increasing vaccine coverage and lifting of the lockdown restrictions will result of more community activities and more people reached with messaging, particularly on addressing vaccine hesitancy. To date, there are 18,174 children (0 – 14 years) and 18,607 pregnant and lactating women who continue to receive HIV medicines in UNICEF supported districts.

Social Protection

Between September and October 2021, UNICEF in partnership with GOAL Zimbabwe continued the implementation of the Emergency Social Cash Transfer Programme (ESCT) in the three districts of Highfields, Gutu and Mufakose in Harare, directly benefitting a total of 9,725 beneficiary households (comprising over 41,152 people including 18,632 children) against an operational target of 8,250 households. During the September payment cycle the programme generated payment vouchers for 9,693 beneficiary households, (administered during the second week of the following month), with 9,77 households collecting their payments (i.e. collection rate of over 98%) at the time of reporting. The programme introduced disability top ups in households with persons living with disability during its June payment cycle, providing these households with an additional $15 of support. In the September payment 2,282 households received disability top ups.

The programme is also providing complementary child protection and nutrition support services. Cases of child abuse and protection are identified on routine basis and handled by dedicated officers with close link to the National Child Protection Case Management System. For all the reported child protection cases in the three targeted districts, we have managed to meet our 100% target of all reported cases by providing all services as per case plan. These included 13 cases of neglect and emotional abuse and one case of sexual abuse.

In October 2021 the programme carried out stakeholder engagements with provincial and district officials in preparation for its expansion in the five districts of Chitungwiza, Beitbridge, Bulawayo, Lupane and Binga. The response aims to reach a further 18,000 households during the expansion period. This expansion is being carried out in partnership with GOAL and World Vision. A large number of the beneficiaries during the expansion period will receive their first payment during the January 2022 payment cycle.
Communications for Development (C4D), Community Engagement & Accountability

Between January and October 2021, UNICEF provided technical support to the Ministry of Health and Child Care (MOHCC) on the coordination of the COVID-19 Risk Communication and Community Engagement (RCCE) pillar, and three UNICEF funded RCCE partners, namely Apostolic Women Empowerment Trust (AWET), Goal Zimbabwe and Vuka Africa Performing Arts. Following the reopening of schools in September, UNICEF and partners collaborated with the Ministry of Health and Child Care (MOHCC) Health Promotions team to strengthen RCCE targeting schools and communities.

UNICEF conducted a U-Report poll with teachers on the COVID-19 vaccine uptake and hesitancy in September with 3,890 respondents from 10 provinces of Zimbabwe. The majority of teachers (91%) have been vaccinated and 61% indicate schools have adequate measures in place to prevent COVID-19. A follow up survey was conducted in October with Village Health Workers and Behaviour Change Facilitators on perceptions of COVID-19 in schools. About 91% of VHWs/BCFs have conducted activities in schools and 92% of VHWs have conducted community-based surveillance activities in schools. The top drivers for children not practicing prevention behaviors are low-risk perception, mask fatigue and overcrowding. The two surveys informed development of a costed cross sectoral response workplan involving Health, Education, Child Protection and WASH teams to support implementation of the recommendations.

During the period September to October, AWET reached 5,630,162 people (2,702,477 males and 2,927,685 females) with lifesaving key messages out of the targeted 5 million, 122,036 people have shared feedback through established community feedback platforms (AWET hotline, WhatsApp groups administered by BCFs and community meetings). Between September and October, UNICEF mobile awareness campaign on RCCE in schools was rolled out targeting demand creation for vaccination uptake in hotspot areas and reached 5,243,183 people out of the targeted 4.5 million. The Live Well Zimbabwe cross sectoral radio campaign kicked off on the 18th of October seeking to empower communities with knowledge and foster positive behaviours across Health, Nutrition, WASH, Child Protection, HIV and adolescent development programmes. In October 15 COVID-19 related Public Service Announcements were flighted 147 times across the 5 radio stations in Ndebele and Shona, with an estimated reach of 1.5 million people.

UNICEF will continue to support communication for development, community engagement and accountability across the sectors of health, nutrition, WASH and education and coordinating with the Ministry of Health and Child Care on COVID-19 response. Using the socio ecological model, C4D initiatives will continue to equip individual, family, community, organizations and policy makers with behaviour change information as well as vaccination promotion targeted at village communities through interpersonal activities as well as interactive digital and mass multimedia targeted at the general population with an emphasis on amplifying community voices especially inclusive of children voices.

Strategy

UNICEF and partners are working in collaboration with the Government to respond to the complex multi-hazard situation compounded by the COVID-19 outbreak in Zimbabwe. To address the increased risk of natural disasters and disease outbreaks and the ongoing economic challenges, UNICEF is scaling up its support to government-led national and district coordination structures to provide multi-sectoral life-saving services to affected communities, including interventions to prevent cholera outbreaks and acute malnutrition and to contain the COVID-19 outbreak. This includes expanding outreach for emergency multi-sectoral services, including essential and life-saving health care, nutrition, and antiretroviral therapy, for crisis-affected children, adolescents and pregnant and lactating women, including those living with HIV and those with disabilities. UNICEF is also scaling up education, child protection, WASH, and social protection interventions for the most affected populations. UNICEF leads and co-leads the WASH, Nutrition, and Education clusters as well as the Child Protection sub-cluster. UNICEF is also actively engaged in six of the eight response pillars of the COVID-19 response, providing support to overall coordination leveraging of partnerships and focused interventions in identified hotspots.

Human Interest Stories and External Media

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5 Coordination, Case Management, Infection Prevention and Control, Risk Communication and Community Engagement, Points of Entry and Supply and Logistics.
As part of continued education for an estimated 4.6 million children affected by COVID-19 pandemic, UNICEF Zimbabwe supported the back to school for children:

Additional stories can be found on UNICEF’s website and social media channels:
UNICEF Zimbabwe stories: https://www.unicef.org/zimbabwe/stories

https://www.unicef.org/zimbabwe/stories/school-improvement-grant-enhancing-access-education-zimbabwe-children


UNICEF Zimbabwe Social Media: Facebook, Twitter, LinkedIn

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**Annex A**

**Summary of Programme Results**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Cluster/Sector Response*</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2021 target</td>
<td>Total results</td>
</tr>
<tr>
<td>Nutrition</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children aged 6 to 59 months affected by SAM and moderate acute malnutrition admitted to community-based treatment programmes</td>
<td>22,176</td>
<td>7,016 ▲1,326</td>
</tr>
<tr>
<td># of children aged 6-59 months receiving Vitamin A supplementation</td>
<td>476,926</td>
<td>385,846 ▼59,419</td>
</tr>
<tr>
<td>Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children and women accessing primary health care in UNICEF-supported facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>1,141,007</td>
<td>884,017 ▼680,443</td>
</tr>
<tr>
<td># of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services</td>
<td>125,000</td>
<td>359,012 ▲16,939</td>
</tr>
<tr>
<td>Child Protection</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children and caregivers accessing mental health and psychosocial support</td>
<td>160,000</td>
<td>99,398 N/A</td>
</tr>
<tr>
<td># of women, girls and boys accessing gender-based violence risk mitigation, prevention or responses interventions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children accessing formal or non-formal education including early learning</td>
<td>811,002</td>
<td>1,568,462 ▲14,584</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of pregnant and breastfeeding women, children and adolescents living with HIV who continue to receive prevention of mother-to-child transmission and treatment services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Protection</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of vulnerable households receiving cash transfers to support access to basic services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C4D</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached with messages on access to services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Compilation of cluster response figures for Nutrition, WASH, Child Protection and Education under finalization. PLWD – People living with disabilities.
# Annex B

## Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements for 2021</th>
<th>Received Current Year</th>
<th>Carry Over</th>
<th>Total Available</th>
<th>$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>6,692,031</td>
<td>306,757</td>
<td>1,283,331</td>
<td>1,590,087</td>
<td>5,101,944</td>
<td>76%</td>
</tr>
<tr>
<td>Health</td>
<td>10,200,000</td>
<td>3,677,582</td>
<td>982,190</td>
<td>4,659,772</td>
<td>5,540,228</td>
<td>54%</td>
</tr>
<tr>
<td>WASH</td>
<td>14,848,252</td>
<td>5,682,835</td>
<td>1,320,278</td>
<td>7,003,113</td>
<td>7,845,139</td>
<td>53%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>3,270,960</td>
<td>1,068,398</td>
<td>1,193,543</td>
<td>2,261,940</td>
<td>1,009,020</td>
<td>31%</td>
</tr>
<tr>
<td>Education</td>
<td>9,650,108</td>
<td>287,327</td>
<td>310,521</td>
<td>597,848</td>
<td>9,052,260</td>
<td>94%</td>
</tr>
<tr>
<td>HIV &amp; AIDS</td>
<td>600,000</td>
<td>253,781</td>
<td>184,769</td>
<td>438,550</td>
<td>161,450</td>
<td>27%</td>
</tr>
<tr>
<td>C4D</td>
<td>1,600,000</td>
<td>708,649</td>
<td>363,691</td>
<td>1,072,340</td>
<td>527,660</td>
<td>33%</td>
</tr>
<tr>
<td>Social Protection</td>
<td>18,917,977</td>
<td>132,271</td>
<td>248,327</td>
<td>380,598</td>
<td>18,537,379</td>
<td>98%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>65,779,328</strong></td>
<td><strong>12,117,599</strong></td>
<td><strong>5,886,650</strong></td>
<td><strong>18,004,250</strong></td>
<td><strong>47,775,078</strong></td>
<td><strong>73%</strong></td>
</tr>
</tbody>
</table>