Zimbabwe: Health Priorities - Snapshots (as of 15 August 2012)

**GOVT PRIORITIES & PROGRAMS (MoHCW)**

- HIV/AIDS, TB Program
- Health promotion program includes the school health program.
- Nutrition, Environmental health program.
- Maternal, Family Planning, Child health program.
- Malaria Control program. Epidemic preparedness & Response control.

**KEY ISSUES**

- 8 million people with limited access to health services.
- High fatality rate for Cholera. 98% cholera cases are reported in the rural area.
- Lack of health workers. Health facilities infrastructure degradation and lack of basic and essential equipment.
- User fees as a major barrier to access basic health services e.g. access to essential & emergency maternal health care.
- Malaria, typhoid and urban centered diarrhea outbreaks are the major outbreaks.

**KEY INDICATORS**

**Malnutrition**
- Chronic (Stunting): 32% (ZNS 2010-2011)
- GAM: 2.4% (NNS 2010)
- Adult Malnutrition: 13%

**Health Facilities**
- Primary Level: 1231
- Secondary Level: 179
- Quaternary Level: 15
- Private Facilities: 1920

**Health Workers**
- Doctors: 0.07
- Nurses: 1.35

**Health Services Utility**
- Antenatal Card (from skilled): 90%
- Contraceptive (any method): 59%
- Births att by skilled HW: 66%

**Tuberculosis**
- Per Capita Spending (in Health) Actual (2009): US$ 22.4
- Required: US$ 34

**2012 OUTBREAKS**

- Meningococcal Meningitis - 4 cumulative cases.
- Typhoid - 4,922 cumulative cases reported since beginning of the outbreak in Oct 2011.
- Malaria - 245,006 cases reported since beginning of 2011.
- Anthrax - 25 cumulative cases reported.

**2011 CAP FUNDING (FOR HEALTH)**

- 33% Unmet
- 67% Funded
- $19.08m

**2012 CAP FUNDING STATUS (FOR HEALTH)**

- 61% (As of 15 Aug 2012, FTS)
- 100%
- Requested 5.53% ($13.19m) of Total Revised CAP (for 8.07 million targetted beneficiaries)
- 144.2 million US$

**FUNDING REQUEST FOR HEALTH (under ZUNDAF 2012)**

- $5.18m

**CHOLERA OUTBREAK HISTORY**

- 2008: 31819 (4.99%)
- 2009: 66773 (4.04%)
- 2010: 1022 (2.15%)
- *19 cases (CFR)

**PRIORITIES (Under CAP 2012)**

- Maintain capacity to respond quickly to new disease outbreaks.
- Prevent new outbreaks of cholera and other water-borne diseases.
- Emergency Reproductive Health.

**RESPONSE (As of CAP 2012 MYR)**

- All public health alerts were assessed and responded to within 72 hours.
- Improved Access to quality basic and comprehensive EmONC, including for adults. 70% (of 95% targetted) achieved

**UNMET FUNDING**

- $19.08m
- $9.26m
- $5.18m

**KEY ISSUES** (under CAP 2012)

- 8 million people with limited access to health services.
- 5% HIV prevalence (2011).
- High fatality rate for Cholera. 98% cholera cases are reported in the rural area.
- Lack of health workers. Health facilities infrastructure degradation and lack of basic and essential equipment.
- User fees as a major barrier to access basic health services e.g. access to essential & emergency maternal health care.
- Malaria, typhoid and urban centered diarrhea outbreaks.