Humanitarian Dashboard – Zimbabwe (as of 10 Nov 2011)

**SITUATION OVERVIEW**

- **Main characteristics of emergency**: Stable but fragile due to failure by different actors to adequately address the root causes.
- **Outlook**: Food insecurity expected to peak between January to March 2012. Politically motivated violence leading to displacements towards election period.
- **Most affected groups**: Food Insecure rural households, Migrants who have been forcefully returned from neighbouring countries, asylum seekers and refugees from horn of Africa and Great lakes regions, the displacement affected populations, children suffering from chronic and acute malnutrition, rural populations without access to basic WASH and health services, HIV/AIDS and unemployment affected.
- **Most affected areas**: Matebeleland Provinces, parts of Masvingo province and Parts of Matabeleland Province.
- **Main drivers of the crisis**: Slow implementation of the Global Political Agreement, inadequate recovery/development assistance, poor weather patterns.

**PEOPLE IN NEED**

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nr. of people affected</td>
<td>N/A</td>
</tr>
<tr>
<td>Nr. of people in need</td>
<td>8.07 million</td>
</tr>
<tr>
<td>Displaced population</td>
<td>Unknown</td>
</tr>
<tr>
<td>Refugees</td>
<td>4,435 In-country</td>
</tr>
<tr>
<td></td>
<td>24,089 (Abroad)</td>
</tr>
<tr>
<td>Women &amp; children</td>
<td>3 million (women)</td>
</tr>
<tr>
<td></td>
<td>1 million (under 5 age children)</td>
</tr>
</tbody>
</table>

**KEY FIGURES**

- 1.446 million vulnerable people at risk of food insecurity (ZIMVAC assessment May 2011)
- 8 million with limited access to WASH & health services
- 13.7% HIV prevalence rate
- 3.488 million children vulnerable (including orphans)
- 100,000 IDPs (planning) and other vulnerable beneficiaries
- Cholera affected districts decreased by 50% and Case Fatality rate increased from 2.1 to 3.9 in 2011.

**PRIORITY NEEDS**

1. **Food Security**: Poor weather patterns, large number of labour constrained individuals and decreased purchasing power has significantly contributed to the number of individuals who require seasonal targeted food assistance. A large percentage of vulnerable rural farmers still depend on NGO and government subsidised agricultural inputs.

2. **Protection and Migration related**: The need to render humanitarian assistance to vulnerable Zimbabweans being forcibly returned from abroad, mainly South Africa and Botswana continues. A considerable number of those who are either displaced or recovering from displacement needs humanitarian support. The chronic crisis in the great lakes and Horn of Africa pushes many asylum seekers and refugees into Zimbabwe.

3. **Health and WASH**: High mortality rates, widespread outbreak of preventable diseases like Cholera and typhoid underscore the need for continued emergency intervention in these areas. That 33% of all rural Zimbabweans drink from unprotected water sources and 98% of Cholera cases were in rural areas implies more interventions.

**ESTIMATED HUMANITARIAN NEEDS AND TARGETS BY CLUSTER**

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Requested Funding</th>
<th>2012 ZUNDAF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multi-Sector: Refugees</td>
<td>4,862,544</td>
<td>-</td>
</tr>
<tr>
<td>Multi-Sector: Cross-border</td>
<td>12,200,000</td>
<td>-</td>
</tr>
<tr>
<td>LICI</td>
<td>10,300,000</td>
<td>3,940,000</td>
</tr>
<tr>
<td>Agriculture</td>
<td>32,325,397</td>
<td>4,740,000</td>
</tr>
<tr>
<td>Food</td>
<td>127,710,380</td>
<td>12,580,000</td>
</tr>
<tr>
<td>Protection</td>
<td>21,500,000</td>
<td>3,115,000</td>
</tr>
<tr>
<td>Nutrition</td>
<td>5,600,000</td>
<td>12,000,000</td>
</tr>
<tr>
<td>WASH</td>
<td>23,600,000</td>
<td>15,900,000</td>
</tr>
<tr>
<td>Education</td>
<td>9,429,200</td>
<td>57,200,000</td>
</tr>
<tr>
<td>Health</td>
<td>16,688,608</td>
<td>144,200,000</td>
</tr>
<tr>
<td>Coordination &amp; Support Se</td>
<td>7,659,930</td>
<td>-</td>
</tr>
</tbody>
</table>

**2011 RESPONSE OVERVIEW**

- A total of 1,552,640 smallholder households benefited from combined input schemes. The presidential Well-wishers Agricultural Inputs Scheme supported 560,000 households, Government Crop Input Scheme supported 443,640 households, and Donor-funded input scheme implemented by humanitarian organization supporting 550,000 households.
- Infrastructure rehabilitation and skills training program implemented with 12% achievement.
- Returned migrants and over 90,000 of displacement affected individuals were assisted with inputs to start livelihood activities.
- 1.6 out of 1.7 million food insecure people assisted through near to medium term recovery interventions to vulnerable groups, incorporating DRR frameworks.
- 1.75 out of 3.27 million students and 49,890 out of 101,402 teachers supported through the delivery of quality essential basic services activities.
- 2 million out of 7.5 million people reached with safe water and benefited from hygiene and sanitation promotion program.
- 7,035 out of 115,000 IDPs provided with emergency assistance and over 90,000 of displaced affected individuals benefited from ER interventions.
**TREND ANALYSIS**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pre-Crisis or Previous data</th>
<th>Latest</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>11.7m (UNFPA SWP 2000)</td>
<td>12.3 m (CSO 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>Human Development Index</td>
<td>0.372 (UNDP HDR 2000)</td>
<td>0.376 (UNDP HDR 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>Life Expectancy</td>
<td>43.5 (UNDP HDR 2000)</td>
<td>51.4 (UNDP HDR 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>Adult Literacy rate (15+ age)</td>
<td>87.2% (UNDP HDR 2000)</td>
<td>91.9% (UNDP HDR 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>Refugee (In-country)</td>
<td>4,958 (UNHCR)</td>
<td>4,435 (UNHCR 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>Refugee (Abroad)</td>
<td>12,782 (UNHCR)</td>
<td>24,089 (UNHCR 2011)</td>
<td>↓</td>
</tr>
<tr>
<td>GNI per capita (PPP $)</td>
<td>$189 (UNDP HDR 2005)</td>
<td>$376 (UNDP HDR 2011)</td>
<td>↑</td>
</tr>
<tr>
<td>% population living on &lt;$1/day</td>
<td>36% (UNDP HDR 2000)</td>
<td>56.1% (UNDP HDR 2008)</td>
<td>↓</td>
</tr>
<tr>
<td>Crude Death Rate</td>
<td>20/1,000 (DHS 2006)</td>
<td>15/1,000 (UNICEF 2009)</td>
<td>↑</td>
</tr>
<tr>
<td>Maternal Mortality (per 100,000)</td>
<td>725 (ZMIPS 2007)</td>
<td>790 (UNICEF 2008)</td>
<td>↑</td>
</tr>
<tr>
<td>Under 5 Mortality (per 1,000 live births)</td>
<td>82 (DHS 2003)</td>
<td>94 (MIMS 2009)</td>
<td>↓</td>
</tr>
<tr>
<td>No.of cholera cases &amp; fatality rate</td>
<td>68,153 / 3.9% (MoHCW 2009)</td>
<td>789 / 2.5% (MoHCW 2010)</td>
<td>↑</td>
</tr>
<tr>
<td>Chronic malnutrition (stunting)</td>
<td>26% (DHS 2000)</td>
<td>34% (FNC 2010)</td>
<td>↓</td>
</tr>
<tr>
<td>Global Acute malnutrition (GAM)</td>
<td>2.4% (MIMS 2009)</td>
<td>2.4% (NNS 2010)</td>
<td>↔</td>
</tr>
</tbody>
</table>

**OPERATIONAL CONSTRAINTS**

- Long unexpected dry spell leading to drought at the middle of the agricultural season. Lack of market linkages and delay in agriculture input distribution.
- Lack of WASH sector strategic/intervention plans. High HIV prevalence and high case fatality rate for cholera. Lack of health workers and funding gaps.
- Reporting multi-year non-emergency pooled funding into CAP/FTS and difficulties in mainstreaming gender issues in education. Delay in conducting comprehensive assessment to find out exact nature, numbers, and location of IDPs.

**INFORMATION GAPS AND ASSESSMENT PLANNING**

<table>
<thead>
<tr>
<th>Information Gap</th>
<th>Assessment Planned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of IDP profiling lead to no IDP figures</td>
<td>IDP Profiling, HC</td>
</tr>
<tr>
<td>Causes of high mortality, fees/barriers to access primary health care, and adult nutritional status.</td>
<td>National Micronutrient Survey, MoHCW/FNC ITCF formative research, MoHCW</td>
</tr>
<tr>
<td>Lack of information on teacher turnover rate, pupil enrolment, attendance, and drop-outs.</td>
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