



UNFPA, the United Nations Population Fund is the lead UN agency in expanding the possibilities for women and young people to lead healthy sexual and reproductive lives. We are on the ground in more than 140 countries working with governments, civil society, development partners and the private sector to promote the right of every woman, man and child to enjoy a life of health and equal opportunity.

In Zimbabwe, UNFPA began operations in 1981 through the provision of support to the 1982 Population Census. UNFPA's goal is to **improve the quality of life of the people of Zimbabwe especially women and young people through promoting universal access to sexual and reproductive health and rights.** In particular, to reduce maternal mortality, the unmet need for family planning, new HIV infections and gender based violence, informed by a better understanding of population dynamics and using an integrated, rights based and gender sensitive approach.

UNFPA implements its programmes at the national level in partnership with government ministries and departments, local and international non-governmental organizations, the entire UN system, civil society, community based organizations and communities (men, women and young people, informed by national development priorities).

## Key highlights from flagship programmes:

**The Integrated Support Programme on Sexual and Reproductive Health and Prevention of HIV and Gender Based Violence (ISP)** funded by the Governments of Britain, Ireland and Sweden seeks to contribute towards the improvement of women and girls' sexual and reproductive health through reducing incidences of maternal morbidity (injury) and mortality (death), provision of family planning services, cervical cancer screening and treatment, HIV prevention and GBV prevention and response. To date:

- 52 cervical cancer screening sites have been set up; 178 health workers trained in screening and treatment using VIA; and 128,000 women screened
- 154, 461 additional clients have accessed family planning; 79, 241 new young people and adolescents have accessed family planning through youth friendly services
- Over 4 million male condoms distributed through sex worker clinics 6 static and 30 mobile "hotspot" sites
- Over 23,500 GBV survivors have accessed essential services including health care, psychosocial support and legal aid

**Revitalising Maternity Waiting Homes Project** funded by the European Union aims to improve maternal health with a focus on promoting institutional deliveries by increasing the number of functional Maternity Waiting Homes (MWHs) in the country as well as training of health providers in Emergency Obstetric and Neonatal Care (EmONC). To date:

- 102 Maternity Waiting Homes have been renovated and refurbished ; 100 000 pregnant women have benefitted from accessing the Maternity Waiting Homes
- 62 ambulances suited for rough terrain to strengthen referral services at district level
- 591 services providers trained in EmONC to strengthen their capacity to manage obstetric complications

**H4+** led by UNFPA in Zimbabwe and funded by Swedish and Canadian development agencies, is a joint effort of WHO, UNFPA, UNICEF, UNAIDS, UN Women and the World Bank to improve the health of women and children by reducing child and improving maternal health in six of the most hard-to-reach districts in the Zimbabwe (Chipinge, Gokwe North, Hurungwe, Mbire, Chiredzi and Binga in Matebeleland North). To date H4+ has managed to;

- Strengthen 48 health facilities in the 6 districts for offering EmONC services by building capacity of health providers, providing commodities and carrying out need based refurbishment
- Strengthened National Maternal death Review and Surveillance systems
- Established 121 community groups or rural committees to help improve knowledge on maternal health, infant and child feeding and HIV issues

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# UNFPA

**Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential fulfilled**





## UNFPA Zimbabwe

### Advancing sustainable development through evidence based decision making

UNFPA works to enhance the country's capacity to collect, analyse and utilize population data at national and sub-national levels and to integrate population issues in national and sub-national development planning. Within the 6th Country Programme, UNFPA provided support for the conducting of the 2012 National Population Census and the 2015 Zimbabwe Demographic and Health Survey (ZDHS) as well as subsequent in-depth analyses of the 2010/11 ZDHS and the 2012 census data. Focus was also on strengthening the capacity of the Zimbabwe National Statistics Agency in sampling, census and household survey data processing and analysis and advanced geographical information systems.

### No woman should die while giving birth

Complications during pregnancy and childbirth are leading causes of death and disability among women of reproductive age (15 to 49 years) in Zimbabwe. UNFPA provides technical and financial support to the government through the Ministry of Health and Child Care (MOHCC) towards the reduction of maternal and neonatal mortality. Maternal mortality in Zimbabwe currently stands at 614 deaths per 100 000 live births, one of the highest maternal mortality rates worldwide.

UNFPA's efforts towards reducing maternal mortality are at national, provincial and district level and include supporting the government in the:

- Development of policies, guidelines and strategies on reproductive health;
- Provision of extensive health provider training on life saving emergency obstetric and neonatal care;
- Provision of cervical cancer screening and treatment;
- Provision of essential reproductive health commodities;
- Scaling up of the use of long acting family planning methods;
- Refurbishing of public health facilities including maternity waiting homes
- Repair for obstetric fistula.



### Helping young people fulfill their potential

Zimbabwe is an extremely young country, with 62% of the population below the age of 25 years. UNFPA advocates for the rights of the young men and women of Zimbabwe, including the right to accurate information and services related to their sexuality and reproductive health. Empowered with knowledge and skills to protect themselves and make informed decisions, young people can realize their full potential and contribute to economic and social transformation. Challenges adolescents in Zimbabwe face include teenage pregnancy, sexually transmitted diseases including HIV, unsafe abortions, child marriage and lack of access to sexual and reproductive health information and services.

UNFPA supports the provision of comprehensive sexuality education for in and out of school youth to help them make healthy reproductive choices; and the provision of to promote young people's access to information and utilization of services through peer education and strengthening capacity of health centers to cater for special needs of young people.

UNFPA is also committed to capitalising on the unique opportunity presented by harnessing the demographic dividend. UNFPA is committed to advocating and supporting the government in further investment in health, education and employment for young people.

### Promoting access and utilization of HIV prevention services

UNFPA works to intensify and scale up HIV prevention efforts in Zimbabwe, which retains the fifth highest HIV prevalence rate in the world. Although HIV prevalence has declined from 26.5 per cent in 1997 to 14.3 per cent to date, it is still high and HIV related illness remains the largest cause of death among adults of reproductive age and children.

UNFPA's efforts are focused on promoting access and utilization of integrated sexual and reproductive health and HIV services. Key programmes are the integrated community based demand generation programme through trained Behaviour Change Facilitators using the home visit approach aimed at reaching families, couples and individuals with information on HIV, GBV and SRH services available to them; the national sex work programme which provides both clinical and non-clinical SRH, counselling and legal services; condom programming; voluntary medical male circumcision; support to SRH/HIV Linkages aimed at service integration; and STI prevention and control.

### Gender based violence prevention and response

Women play a critical role in sustainable development. When they are educated and healthy, their families, communities and countries benefit. Yet Gender based violence undermines opportunities for women and denies them the ability to fully utilize their basic human rights. In Zimbabwe about 1 in 3 women aged 15 to 49 have experienced physical violence, and about 1 in 4 women have experienced sexual violence, since the age of 15. (2010/11 ZDHS)

In an effort to reduce GBV, UNFPA works with the Ministry of Women Affairs, Gender and Community Development, sister UN agencies and civil society towards increasing availability and utilization of GBV services by survivors as well as reducing tolerance for GBV in communities. The main thrust of the programme is increasing awareness of gender responsive laws and services; the provision of health care, psychosocial support and legal aid to survivors of GBV; mobilizing men and young people to support gender equality; GBV prevention through community mobilization; and supporting GBV referral and coordination mechanisms at district and community level.

**Because everyone counts**