

## Format for the Country Programme Performance Summary

This format, which is much simplified from the earlier one, is for use for those country programmes aligned to the revised Strategic plan outcomes and is for use for Programmes going to the Board in 2013 once the alignment is complete in 2012. The summary is prepared based on the CP evaluation which is also posted for access by the Board. For those CPDs to the June 2012 Board, please use the old format with the SP 2008-2011 13 outcomes. Please indicate contributions to only those SP outcomes that were linked to your CP.

<b>A. Country Information</b>		
<b>Country name: Zimbabwe</b>		
<b>Category per decision 2007/42:Red</b>	<b>Current programme period: 2012-2015</b>	<b>Cycle of assistance: 6<sup>th</sup></b>

<b>B. Country Programme Outputs Achievement</b> <i>(please complete for all your CP outputs)</i>			
<b>Output 1: Strengthened capacity of government and civil society partners to coordinate and deliver reproductive health services</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of district and provincial hospitals supported to offer comprehensive EmONC services	0	148	100
Number of Hospitals supported to offer cervical cancer screening	5	71	51
Number of supported district hospitals with functional maternity waiting homes, in line with the minimum requirement as specified in the MWH operational guidelines	20	125	118
<b>Key Achievements</b>			
UNFPA is providing technical and financial assistance in the implementation of a harmonized supply chain system. This system is expected to aid in reducing stock-out rates for key maternal health drugs. Currently a pilot of the harmonised system is on-going in Manicaland Province. The pilot will be reviewed in 2015.			
<b>Output 2: Increased availability of reproductive health services and commodities</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of supported facilities in the public health sector with at least one health care worker trained in FP provision including implant insertion	0	300	309
Number of service providers trained in FP service provision	0	850	705
Number of implant insertions for women aged 16 years and above at supported sites	0	49,650	36,646
Number of women screened for cervical cancer using VIAC	0	117,500	93,736
Number of service delivery points supported to offer youth-friendly SRHR services.	37	74	73
Number of supported district hospitals with functional maternity waiting homes, in line with the minimum requirements as specified in the MWH operational guidelines.	20	125	118

**Key Achievements**

UNFPA supported ZNFPC and MOHCC to develop a Zimbabwe National Family Planning Strategy. A policy brief to advocate for parliamentarians to increase the national budget for commodity security has been developed in partnership with the Futures Group. This was based on an in-depth analysis of the estimates of FP needs and resources required to achieve the GoZ FP2020 commitments with funding from the Integrated Support Programme on Sexual and Reproductive Health and Prevention on HIV and GBV (ISP).

Through advocacy done by UNFPA and WHO a National Coordination Committee for Cervical Cancer Prevention and Control (NCCCP) has been set up by the Secretary for Health.

In collaboration with UNICEF, UNFPA supported MoHCC to develop the revised PMTCT Strategy with strengthened prongs 1 & 2 components. The final draft strategy and the domesticated package on programming for prongs 1 & 2 are in place and awaiting final endorsement by the MoHCC.

The Ministry of Primary and Secondary Education (MoPSE) has officially launched the curriculum review process which will enable revision of the life skills curriculum to incorporate CSE principles and content.

**Output 3: Increased demand for SRH services at the community level**

Indicators	Baseline	Target (Dec 2015)	End-line data (Dec 2014)
Number of person exposures among young people (10-24 years) reached through peer education on behaviour change in SRH and HIV prevention	300,000	600,000	400,737
Number of person exposures to sista2sista club sessions	0	195,000	162,593

**Key Achievements**

UNFPA generated key data on young people, conducted advocacy campaigns and supported networking and coordination. 7% of the health facilities were supported to offer youth friendly services. UNFPA supported the Ministry of Education Ministry of Primary and Secondary Education (MoPSE) curriculum review process which to incorporate CSE principles and content. Sista2sista clubs have been established to reach vulnerable and girls who are at risk through mentors and 11,323 girls have been recruited into the clubs to date. To promote youth leadership and participation, the Young People's Network on SRH and HIV (affiliated to the regional African Youth and Adolescent Network, AfriYAN) was supported. UNFPA supported young people to participate in the national ASRH Coordination Forum quarterly meetings; stakeholder meetings on development of the National ASRH M&E framework; and sensitisation meetings on the MoPSE Life skills, sexuality and HIV and AIDS education strategy. The youth voice has added to strategic discussion advocating for the operationalization of the MoPSE life skills, sexuality and HIV education strategy that resulted in the decision to conduct the curriculum review.

**Output 4: Increased coverage of the social and behaviour change communication programme**

Indicators	Baseline	Target (Dec 2015)	End-line data (Dec 2014)
Number of person exposures to home visit sessions	0	1,709,880	1,080,826
Number of new households reached through home visits	0	569,960	397,160
Number of person-exposures among sex workers to SRH and HIV prevention messages delivered by peer educator	0	82,000	47,869
Number of service providers trained to deliver integrated SRH and HIV services	0	3,940	1,854

<b>Key Achievements</b>			
<p>UNFPA in partnership with Elizabeth Glaser Paediatric AIDS Foundation (EGPAF), the National AIDS Council (NAC) and MoHCC convened an advocacy workshop for 45 parliamentarians who are members of the Parliamentary Portfolio Committees on health and HIV/AIDS. UNFPA's support focused on the importance of integrating SRH and HIV programmes and services as a strategy to attain universal access to SRH services. The portfolio committees agreed to organise a follow up meeting with the Gender Parliamentary Portfolio Committee in 2015 to come up with strategies and build a critical mass on lobbying for support for integrated SRHR, HIV and GBV interventions. Sex Work programme expanded from 13 to 36 sites nationally. Advocacy with Judiciary and Police initiated in 2014 with learning visit to India and an association will be formed in 2015.</p>			
<b>Output 5: Increased availability of HIV prevention services</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Availability of national Combination HIV prevention strategy	<i>No strategy</i>	<i>Strategy developed</i>	<i>Strategy developed in 2012</i>
Availability of Service Guidelines and tools on provision of integrated SRH and HIV services	<i>No tools</i>	<i>Guidelines and tools developed</i>	<i>HIV service guidelines and tools developed</i>
Number of MC service delivery points strengthened with UNFPA support	<i>0</i>	<i>10</i>	<i>6<sup>1</sup></i>
Availability of evidence on the safety and effectiveness of alternative adult male circumcision device(s)	<i>No evidence</i>	<i>Evidence Available</i>	<i>Study conducted in 2013 and showed Prepex safe and effective. Prepex pre-qualified by WHO.</i>
Number of sex workers who accessed programme supported sites for the first time	<i>0</i>	<i>14,000</i>	<i>13,271</i>
<b>Key Achievements</b>			
<p>Training of trainers for the SRH &amp; HIV service integration modules was finalized in 2014.</p> <p>Supported the MoHCC to coordinate health sector HIV and STI prevention activities which includes convening National HIV Prevention Partnership Forum and an MC Steering Committee meeting; quarterly CCP and STI Technical Working Group meetings; one day Condom TSG and STI Advisory meetings; and convening of a broader HIV Prevention Partnership Forum meeting.</p> <p>CeSHHAR research indicated that during the UNFPA supported Sex work programme antiretroviral treatment uptake had increased from an estimated 25-35% viral load suppressed to 54% (i.e successfully on ARVs), with 61% of HIV positive FSW knowing their HIV status.<sup>2</sup></p>			
<b>Output 6: Strengthened capacity of relevant government departments responsible for planning to integrate population issues into development plans and monitor sectoral policies and plans</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of publications on key population issues (research reports, ICPD at 20,) produced with UNFPA support	<i>0</i>	<i>5</i>	<i>2</i>

<sup>1</sup> The service delivery component of the UNFPA supported VMMC programme was discontinued mid-2014 based on the DFID annual review recommendations. As a consequence, the corresponding VMMC indicators are no longer included in the results reporting.

<sup>2</sup> The SAPPH-Ire Trial – ART for HIV prevention among female sex workers in Zimbabwe, Cowan FM et al, CeSHHAR

Number of progress reports on selected population programmes and projects articulated in the MTP	<i>0</i>	<i>8</i>	<i>4</i>
Availability of population monitoring and evaluation database	<i>No database in place</i>	<i>Functional database by 2013</i>	<i>The Zimbabwe Statistics Database (ZIMDAT) was updated to include all data on nationally-agreed population-related indicators for tracking implementation of MTP and the National Population Policy. Relevant staff were trained on the use of the database.</i>

**Key Achievements**

The Office supported the production of the ICPD at 20 country report through a nationally-led and owned review process. The report was shared at the Southern African Development Community (SADC) and African Union regional levels. The Office also supported the preparation of progress reports on the implementation of population-related projects in the Medium Term Plan during the period when the policy was still valid<sup>3</sup>.

**Output 7: Strengthened capacity of the Zimbabwe National Statistics Agency and line ministries to produce, analyse, disseminate and promote the utilization of population data**

<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of staff trained in latest data processing techniques (including web-based database systems)	<i>0</i>	<i>30</i>	<i>35</i>
Proportion of national census and ZDHS budgets mobilised / leveraged by UNFPA	<i>0 %</i>	<i>20%</i>	<i>27%</i>
Number of census and ZDHS thematic/in-depth reports produced with UNFPA support	<i>0</i>	<i>10</i>	<i>10</i>

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<sup>3</sup> It is important to note that support to the Ministry of Economic Planning, which was the implementing partner for these activities, was very minimal during this country programme. There was only one annual work plan with this IP in 2013 whose focus and scope was limited to the ICPD review process. This was partly due to the unprecedented support and attention that the Office had to give to the 2012 population census. It is also important to note the policy inconsistencies that obtained during this period, with the five-year Medium Term Plan (MTP) which had only been launched in July 2011, being replaced in 2013. Furthermore, the IP was merged with another ministry in 2013. All these institutional and policy changes posed serious implementation challenges.

**Key Achievements**

UNFPA mobilized 30% of both the Census and ZDHS resources during a very difficult economic environment, surpassing the target of 20%. Without these resources, the 2012 population census would not have been successfully carried out. UNFPA timely identified and mitigated against problems. In addition, UNFPA successfully advocated for a post enumeration survey (PES), which was carried out for the first time in the country to evaluate the coverage of the 2012 census. The lessons learnt from the PES will be very useful for future censuses. UNFPA also successfully advocated and supported the in-depth analysis of the census data which saw the production and publication of more than 10 thematic reports of policy relevance. Significant capacity building of ZIMSTAT was made in the areas of GIS, cartography, sampling and census data processing.

**Output 8: Strengthened capacity of the ZIMSTAT to coordinate the national statistical system**

Indicators	Baseline	Target (Dec 2015)	End-line data (Dec 2014)
Number of sectoral statistical committees supported by UNFPA.	0	15	2 <sup>4</sup>
Number of publications on standardized concepts, definitions and methods used across the national statistical system produced and distributed.	1	1	1
Number of statistical inquiries, consultative meetings and user-producer symposiums on statistics supported by UNFPA	0	5	3

**Key Achievements**

UNFPA supported ZIMSTAT to operationalize the National Statistical System (NSS), which will assist in availing statistics on platforms that are accessible to users and ensuring regular and timely provision of basic statistics. Support to the Zimbabwe National Statistics Database (ZIMDAT) continued with the database being updated annually with data from surveys, censuses and routine information systems. This has facilitated the availability of sex- and age-disaggregated population and development data at national and sub-national levels for public use. In addition, UNFPA successfully led the ZUNDAF Data for Development Working Group which coordinates, mobilises and advocates for support towards the development of statistics in the country. Through this work, all statistical series from household-based surveys and censuses are now up to date.

**Output 9: Increased capacity of leaders to address negative social norms and practices that perpetuate gender inequalities**

Indicators	Baseline	Target (Dec 2015)	End-line data (Dec 2014)
Number of people (community leaders, health personnel, police officers, court officers and counselors) trained on GBV management, standards and referral pathways	0	8,208	5,856

**Key Achievements**

UNFPA supported partners to disseminate accurate information on policies, laws and mechanisms for ending GBV through community leaders and gate keepers, traditional and religious leaders, and community mobilisation and dialogues in 26 supported districts.

<sup>4</sup> Due to the overwhelming requirements of the population census, financial support was only limited to the Census and ZDHS technical statistical committees. However, through the Data for Development Working Group, the other statistical committees were adequately supported by UNDP.

<b>Output 10: Increased availability of services to address gender-based violence</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of centres supported by UNFPA for quality Gender Based Violence service provision	7	20	21
Number of GBV survivors who received services at one stop centres	0	5,880	5,109
Number of GBV survivors provided with legal aid services	0	9,652	7,571
<b>Key Achievements</b> UNFPA supported the Anti-Domestic Violence Council, mainly the human resources and activities of the Council. UNFPA funded the National Machinery for Women's Advancement to support pre-service training for the judiciary; police and health service providers as well as convening commemorative events such as the International Women's Day and the 16 Days of Activism to end Violence against Women. Localized referral pathways were developed and implemented in 13 districts and these ensure provision of health services, psychosocial support and justice/legal aid.			
<b>Output 11: Increased community awareness of gender-responsive laws, mechanisms and services</b>			
<b>Indicators</b>	<b>Baseline</b>	<b>Target (Dec 2015)</b>	<b>End-line data (Dec 2014)</b>
Number of person exposures to messages on masculinity, gender responsive laws, gender norms, women's rights and services through community level dialogues	0	328,285	288,311
Number of person exposures to mass media messages on masculinity, gender responsive laws, gender norms, women's rights and services	0	222,900,000	209,337,715
<b>Key Achievements</b> UNFPA supported the training of 2,007 (70% of 2015 cumulative target) community based cadres in counselling and paralegal service provision.			

<b>C. National Progress on Strategic Plan Outcomes</b>	<b>Start value</b>	<b>Year</b>	<b>End value</b>	<b>Year</b>	<b>Comments</b>
<b>Outcome 1 Population dynamics and its interlinkages with the needs of young people (including adolescents), sexual and reproductive health (including family planning), gender equality and poverty reduction addressed in national and sectoral development plans and strategies</b>					
National development plans (NDPs) and poverty reduction strategies (PRSs) that address population dynamics and its interlinkages with the multisectoral needs of young people (including adolescents), sexual and reproductive health (including family planning), gender equality and sustainable development and poverty reduction	MTP 2011-2015	2011	ZIMASSET	2013	MTP was replaced by the ZIMASSET in Oct 2013 after the harmonized elections
National health policies and plans that have integrated sexual and reproductive health (SRH) services (including family planning)	RH Policy (2000)	2011	Draft SRH Policy Zimbabwe FP Strategy	2014	FP

**Summary of National Progress**

**UNFPA's Contributions** *Please provide contributions to those outcomes only to which the CP contributed. Not all outcome areas are expected to be covered under UNFPA contributions.*

**Outcome 2 Increased access to and utilization of quality maternal and newborn health services**

Maternal mortality ratio	960	2010/11 DHS	-	-	Update data to be provided by DHS 2015/16
Births attended by skilled health personnel	66%	2010/11 DHS	-	-	
Caesarean sections as a proportion of all live births	3.7%	HMIS 2011	7.4%	HMIS 2014	

**Summary of National Progress**

**UNFPA's Contributions**

**Outcome 3 Increased access to and utilization of quality family planning services for individuals and couples according to reproductive intentions**

Contraceptive prevalence rate (modern methods)	58.5	2010/11 DHS	-	-	Update data to be provided by DHS 2015/16
Unmet need for family planning	13%	2010/11 DHS	-	-	Update data to be provided by DHS 2015/16
Percentage of service delivery points (SDPs) offering at least three modern methods of contraception	95%	2011/12 NIHFA	95%	2014 VHMAS	

**Summary of National Progress**

**UNFPA's Contributions**

**Outcome 4 Increased access to and utilization of quality HIV- and STI-prevention services especially for young people (including adolescents) and other key populations at risk**

HIV prevalence in youth (15-24 years)	7.3% (females) 3.6% (males)	2010/11 DHS	6.4% (females) 4.1% (males)	2013 HIV Estimates	Update data to be provided by DHS 2015/16
Percentage of women and men aged 15-49 who had more than one partner in the last 12 months who used a condom during their last sexual intercourse	44% (women) 33% (men)	2010/11 DHS	-	-	Update data to be provided by DHS 2015/16

**Summary of National Progress**

**UNFPA's Contributions**

**Outcome 5 Gender equality and reproductive rights advanced particularly through advocacy and implementation of laws and policy**

Percentage of women aged 20-24 who were married or in union before age 18	30.5%	2010/11 DHS	-		Update data to be provided by DHS 2015/16
Number of mechanisms in place to implement laws and policies advancing gender equality and reproductive rights	Gender Coordination Forum	2011	Gender Coordination Forum supported	2014	UNFPA supports the National Machinery in order to enhance gender equality, coordination and leadership
<b><u>Summary of National Progress</u></b>					
<b><u>UNFPA's Contributions</u></b>					
<b><i>Outcome 6 Improved access to SRH services and sexuality education for young people (including adolescents)</i></b>					
Adolescent birth rate	115	2010/11 DHS	-	-	Update data to be provided by DHS 2015/16
Percentage of young people aged 15-24 who both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	51.9%	2010/11 DHS	-	-	This indicator from DHS used: Percentage with comprehensive knowledge about HIV/AIDS <sup>5</sup> . An update will be provided by DHS 2015/16
Implementation status of comprehensive age-appropriate sexuality education in and out of school at national scale			Lifeskills, sexuality education strategy developed	2013	Ongoing advocacy to incorporate into curricula. Curricula revision ongoing.

<sup>5</sup>Comprehensive knowledge means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chances of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about transmission or prevention of HIV.

<b>Summary of National Progress</b>					
<b>UNFPA's Contributions</b>					
<b>Outcome 7 Improved data availability and analysis around population dynamics, SRH (including family planning) and gender equality</b>					
2010 round of population and housing census completion status			Census completed	2012 Census Report	Census conducted in 2012
Number of national household surveys conducted (in the last five years) that allow for the estimation of all MDG 5B indicators		ZDHS	2010/11	MICS	ZDHS 2015/16 will be conducted in 2015
<b>Summary of National Progress</b>					
<b>UNFPA's Contributions</b>					

SP Outcome (for 2013, 2014 and 2015(Planned only) ) Choose only those relevant to your CP	Regular Resource (for 2013, 2014 and 2015)		Others (for 2013, 2014 and 2015)		Total (for 2013, 2014 and 2015)	
	Planned	Final Expenditure <sup>6</sup>	Planned	Final Expenditure <sup>4</sup>	Planned	Final Expenditure <sup>4</sup>
	<b>10,270,026.83</b>		<b>53,111,465.71</b>		<b>63,381,492.54</b>	
ZIM6U202	1,187,490	961,040	21,162,778	12,719,053	22,350,268	13,680,094
ZWE6U203	335,772.00	35,771.93	636,360.00	200,690.01	972,132.00	236,461.94
ZIM6U405	501,588.12	437,033.81	15,670,591.80	11,163,430.36	16,172,179.92	11,600,464.17
ZIM6U510	639,548.75	431,062.82	6,480,577.64	5,070,642.63	7,120,126.39	5,501,705.45
ZIM6U706	29,722.00	29,668.00	-	-	29,722.00	29,668.00
ZIM6U707	223,730.00	101,276.80	6,597,890.00	5,122,452.99	6,821,620.00	5,223,729.79
ZIM6A100	1,421,433.00	629,266.65	-	-	1,421,433.00	629,266.65
ZIM6A200	5,930,742.55	4,533,499.26	2,563,267.93	1,489,751.55	8,494,010.48	6,023,250.81
<b>Total</b>	<b>10,270,026.83</b>	<b>7,158,619.80</b>	<b>53,111,465.71</b>	<b>35,766,021.36</b>	<b>63,381,492.54</b>	<b>42,924,641.16</b>

<sup>6</sup> The final expenditure is for 2013 and 2014 only, while the planned amount is for 2013, 2014 and 2015.