

CARE International in
Zimbabwe

care

FY2022 ANNUAL REPORT



30 YEARS, DEDICATED TO SAVING LIVES AND ENDING POVERTY IN ZIMBABWE

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A MESSAGE FROM THE COUNTRY DIRECTOR

2022 was a tremendous milestone year for CARE International in Zimbabwe (CIZ) as we celebrated 30 years of living up to our mission of defeating poverty and achieving social justice. In the last three decades we have, passionately complemented government development efforts focusing on food, water and nutrition security, climate justice, economic empowerment, gender equality, education, health and humanitarian action, working side-by-side with communities to understand the root causes of poverty and find innovative, locally-led solutions.

The year also started on a promising note as business began returning to normalcy with the reduction in Covid-19 cases and infections globally and in Zimbabwe. However, the effects of the 2021 climate and economic shocks persisted into 2022, leaving over 3.8 million people estimated to be in need of humanitarian food aid.

By updating our exciting Country Office Strategy covering the period 2022 - 2025 we positioned ourselves intentionally,

committing to actively scale up homegrown solutions and meet the challenges in our context which is also rapidly changing and becoming increasingly complex.

We narrowed our thematic priorities (impact areas) for the next three years to focus on Food, water and nutrition systems, Climate justice and adaptation and Gender Equality (including education) designed to promote efficiency, effectiveness and greater diversity to our programme portfolio.

To help drive these, grow our influence and deliver impact at much greater scale, we also embarked on a partnerships and engagement drive to harness strategic relationships with the government (especially at national level), donors, academic institutions, International Non-Governmental Organizations, local organizations and private sector actors.

We believe we cannot bring lasting change alone, so, partnerships remain key to our work. We know that when we collaborate, we find it easier to innovate, learn, mobilize resources, and strengthen our thought leadership.

It has been an honor to begin seeing these strategic developments bearing fruit including the first partnership with Ecobank as we strengthen our Private Sector Engagement. We will continue promoting meaningful alliances to progress towards the promotion of human dignity and alleviation of poverty in Zimbabwe in alignment with CARE's global Vision 2030 and the Zimbabwean government's National Development Strategy (NDS).

I am delighted to note that in FY2022 we reached 1,262,534 individuals directly. These remarkable achievements were made possible by leveraging on our talented staff that advanced development work, research and innovation, backed by a strong regional office, providing guidance and building capacities. We also continued to adapt and shift to new ways of working expanding our geographical coverage to Matabeleland South.



Going forward, working through partners as we drive our localization agenda, we believe the task ahead is for all stakeholders — including government, civil society, and the private sector— to arrive at a collective understanding of diverse needs of the communities and to develop sustainable approaches to development.

Our desire is to grow our program, nurture our strategic partnerships, improve our operations, keep our best talent and raise the resources to do so for greater impact. The amazing work done by our CARE Zimbabwe family is truly inspirational and my gratitude goes to all the staff for contributing to the success that 2022 was.

I would also like to thank all our donors and partners who have provided invaluable support enabling us to keep our commitments and deliver our mission. CARE's work in Zimbabwe continues to inspire many, including myself and I hope that you, too, will be inspired by the stories and successes in this report as we seek a new trajectory of development and success in Zimbabwe.



CARE Zimbabwe Country Director

Patrick Sikana

OUR VISION

We seek a world of hope, inclusion and social justice, where poverty has been overcome and all people live in dignity and security.

OUR MISSION

CARE works around the globe to save lives, defeat poverty and achieve social justice.





ABOUT CARE

CARE International is a global confederation of 14 members, 6 candidates and 1 affiliate organization working together to end poverty.

In Fiscal Year 2022, CARE and partners worked in 111 countries, implementing 1,631 poverty-fighting development and humanitarian aid projects and initiatives, that reached:

- 174,063,162 direct participants, 61% of which were women and girls.
- 204,809,367 indirect participants.
- 724,452,388 people via 1-way communication for behavioral change or campaigns for a social cause through different media channels.

ABOUT CARE INTERNATIONAL IN ZIMBABWE

CARE began working in Zimbabwe in 1992 in response to a severe regional drought and later expanded its programming to address longer-term development issues with a focus on economic development. Today, through strategic local partnerships, CARE is implementing programming that empowers Zimbabwe's vulnerable households to meet their basic needs through sustainable livelihoods. All of CARE's work is delivered through the lens & standards on gender equality & social inclusion, with a focus on gender-transformative approaches.

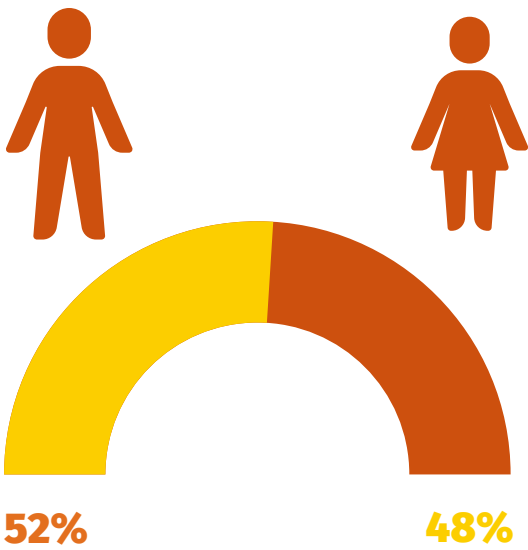
CARE is currently working in five provinces, implementing programs focused on Gender Equality and Education, Right to Food, Water and Nutrition and Climate Change and Adaptation. CARE also focuses on Health, Women's Economic Empowerment (WEE) and Humanitarian Action.

together with an integrated humanitarian and development program predominantly including: sexual and gender-based violence (SGBV), (integrated) water, sanitation and hygiene (WASH), through community engagement and village savings and loans association (VSLA) groups. CARE has set up over 5,000 VSLAs in which more than 100,000 women are actively participating.

CIZ has systems and structures in place for disaster preparedness and early response. If any disasters occur, we have the ability to deploy within 24 hours.

In 2021 in Zimbabwe, CARE projects reached an estimated 3,4 million beneficiaries. CARE's Covid-19 response in the same year reached over 2,5 million people in Zimbabwe.

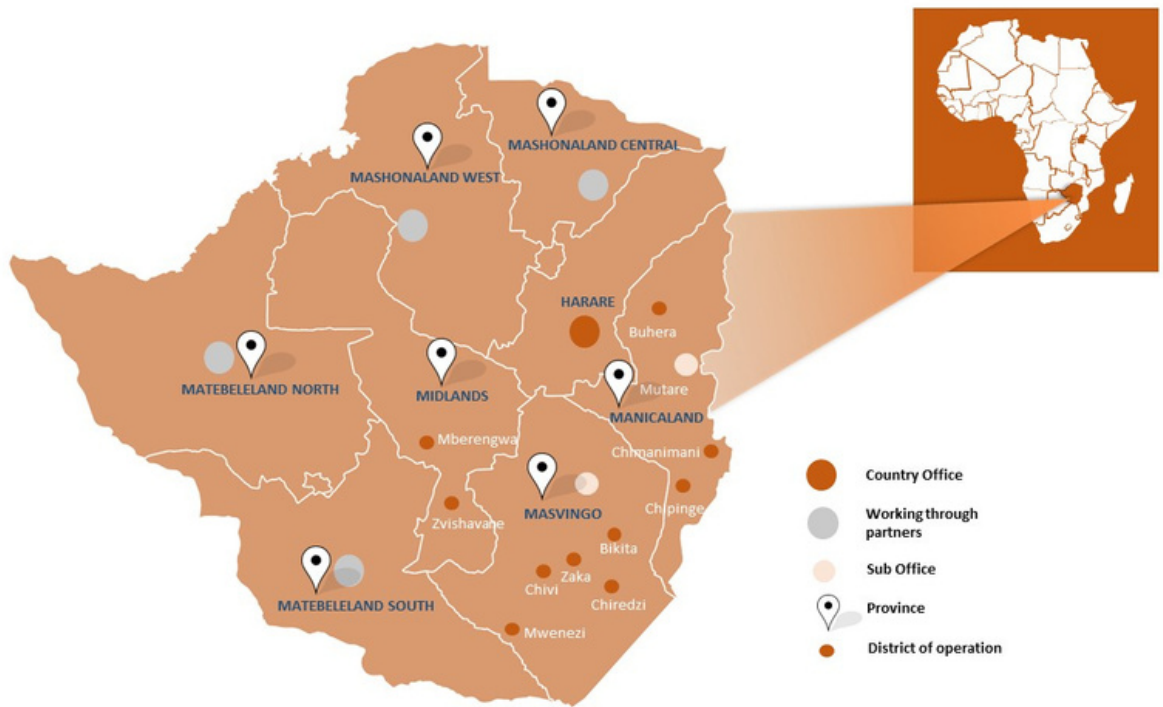
OUR STAFF



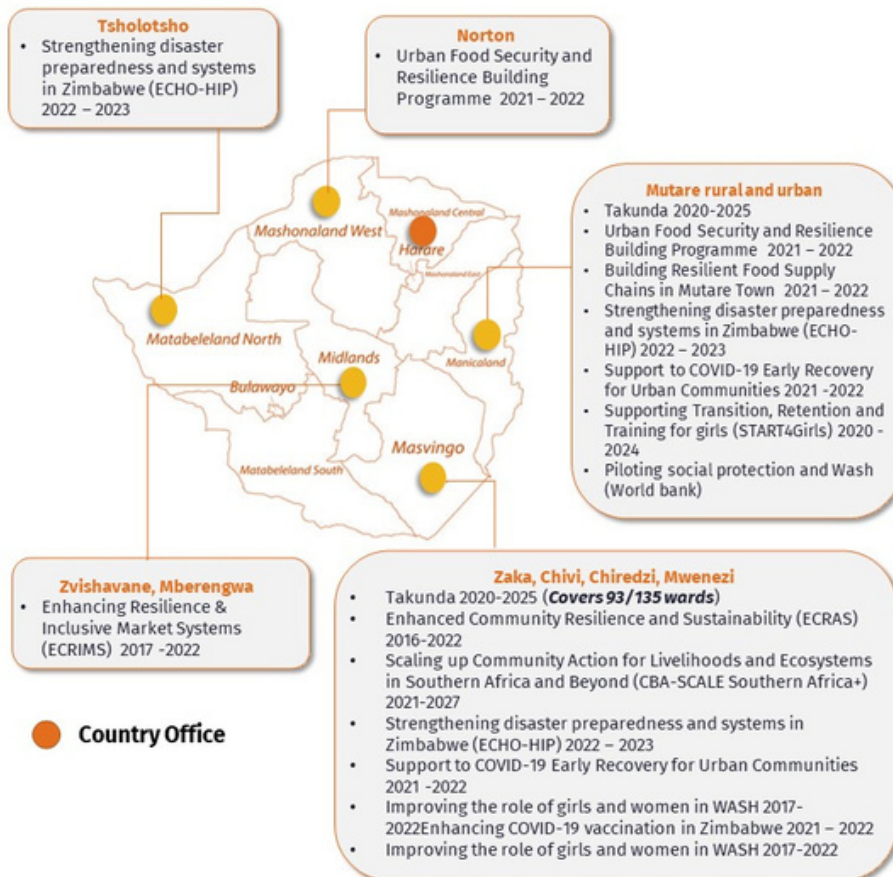
CIZ currently employs 213 staff, manages an average annual (and growing) portfolio of around \$15 million, and works with local communities to build long-term solutions improving resilience to shocks such as (continued) drought and economic volatility.

We aim to scale-up efforts in Zimbabwe and bring substantial global expertise of our dedicated teams of staff and wide network of partners to provide world-class expertise in gender equitable poverty reduction gained from 75 years of experience of working side by-side with communities to understand the root causes of poverty, and work together to find and scale innovative, locally-led solutions. Examples of our proven models include CARE's Village Savings and Loans Associations (VSLA), Community Score Cards, Rapid Gender Analysis, Women Lead in Crises, and Social Analysis and Action.

WHERE WE WORK



FY22 PROJECTS



CONTEXT OVERVIEW

Zimbabwe is a land-locked and lower-middle income country. Over the last decade, it has experienced several economic and environmental shocks that have contributed to high food insecurity and malnutrition.

According to the World Food Programme at least 49 percent of the population lives in extreme poverty—many impacted by the effects of climate change, protracted economic instability and global stressors.

As of 30 August 2022, Zimbabwe recorded 256,726 COVID-19 cases and 5,596 deaths.

Drought remains the biggest threat, but economic conditions are also causing many families to struggle to survive. Inflation, for example, has risen rapidly.¹

Its frequent occurrence has had significant consequences on livelihoods and food security. The COVID-19 pandemic has contributed to reduced sources of income and food, leaving the population without access to essential needs.

High-quality seeds or fertilizers have risen sharply in price or are almost impossible to obtain. Livestock farming suffers from extended periods of drought.²

About 70 percent of the population is dependent on rain-fed farming, while most farmers are smallholders with low productivity.

The 2022 Zimbabwe Vulnerability Assessment Committee's rural and livelihood assessment estimates that about 30 percent of the rural population is estimated to be food insecure at the start of the lean season (October to December 2022), while 38 percent (3.8 million) are projected to be food insecure during the peak (January to March 2023).³

The findings show a deteriorating food security situation in the country from a peak of 27 percent in early 2022.⁴



The health system was also strained by a high number of infections such as measles outbreak which had recorded 7,394 cases and 744 deaths as of October 2022.⁵

CARE in partnership with the government and other humanitarian actors worked to meet the needs of the people in various communities as well as combat the challenges which people faced in 2022.

1. WFP Country Brief August 2022

2. <https://www.wfp.org/countries/zimbabwe>

3. <https://docs.wfp.org/api/documents/WFP-0000142768/download/>

4. <https://reliefweb.int/report/zimbabwe/unicf-zimbabwe-humanitaria>

5. n-situation-report-no-5-31-october-2022



OUR REACH IN FY22

1,262,534 people reached

Overall, from July 1, 2021 through June 30, 2022, CARE Zimbabwe reached a total of **1,262,534 participants**, of which **57% were females**. The graph below shows direct reach by impact area. The Right to Food, Water and Nutrition had the highest number of beneficiaries, followed by Humanitarian Action.



1,186,696 individuals were reached through **food, water and nutrition** initiatives



75,199 individuals were reached through CIZ's **health related** interventions.



56,608 individuals were reached through **Climate adaptation and Change** initiatives



31,082 individuals were reached through the initiatives on **gender** equality



1,116,712 individuals were reached with **humanitarian** assistance



12,112 individuals were reached through the initiatives on **women** economic justice



1,044,335 individuals reached through **life-saving communication**



13,798 individuals reached through **education related gender** equality programs

Right to food, water and nutrition

We supported 1,186,696, at least 55% of whom are women, to produce more healthy food, have better access to water and sanitation, and improve their nutrition. This included women small-scale food producers, women and girls living in water stressed areas.

Water Smart Agriculture (WaSA), strengthening water systems, and water conservation models. CIZ also built and maintained wells, boreholes, and latrines in rural and urban communities reducing water scarcity, health risks of water-related diseases as well as shortening the time women and girls need to fetch water from distant sources. With their saved time, they can earn an income or go to school.

The establishment of income generating projects, community gardens and irrigation schemes has also been helping to generate sustainable livelihoods to improve food security and nutrition.

87,333 were reached through food programmes, 57,992 through water and 20,271 through nutrition.

Through our programs we addressed malnutrition by providing food and nutritional support to vulnerable families particularly to lactating mothers as well as supplementary feeding.

Through our various interventions we empowered women to make their children healthier by starting businesses and giving them support to participate in decisions about their children's education, as well as to confront early marriage, violence against women.

We supported households address the underlying causes of poverty, including the lack of access to livelihoods and to clean water and sanitation, and the lack of control over land and natural resources. In schools we provided safe water, promoted hygiene, and sanitation facilities to help keep girls in school. We also trained families on adequate hygiene practice to reduce the risk of illnesses.

1,186,696
people reached

CARE's work reached 56,608 people strengthening their resilience. CIZ implemented climate resilience building projects in Midlands, Masvingo and Manicaland aimed at increasing the capacities of communities to sustain development gains and achieve improved well-being outcomes in the face of various shocks and stresses.

Through various programs and our layering and sequencing approach CIZ responded to climate change by building and strengthening communities' in the face of climate change induced adversities through various integrated projects targeted at increasing household productivity to achieve food and income security.

Through the Zimbabwe Resilience Building Fund (ZRBF), the Enhancing Community Resilience and Sustainability ZRBF (ECRAS) project CIZ has been targeting 49 000 households in Mwenezi and Chiredzi districts of Masvingo so that they are food and income secure and are able to withstand shocks and stresses.

As part of 2021/22 season preparedness and scaling up the production of traditional grains, the project supported a total of 2137 (844 male, 1293) farmers in Chiredzi and Mwenezi with 5kg seed of Macia (Sorghum) and Okashana (Pearl millet) for improved varieties respectively.

To alleviate cattle poverty deaths through fodder production and preservation, 47.8 tonnes of feed were produced, enough feed to sustain 240 cattle over a period of 3 months under 50 percent supplementary feeding during the dry period.

244 farmers also ventured into fish production and on average each household harvested 45kg of fish after every three months.

Through the ZRBF Enhancing Resilience and Inclusive Market Systems (ECRIMS) project 138 biogas digesters were established (103 Mberengwa and (35) Zvishavane reducing the use of firewood by 66% as household are cooking 2 meals with biogas and one meal with firewood.

Climate change and adaptation

56,608
people reached



Gender Equality including Education



Gender equality is CARE International's central organizing principle and all of CIZ's projects in 2022 had the gender equality component. We believe we cannot achieve women's economic empowerment, climate adaptation, health equity, the right to food, water, and nutrition, or equal access to humanitarian assistance without addressing gender inequality.

Women and adolescent girls were CIZ's primary impact population. Our programs focused on improving the rights of women, adolescent girls, and marginalized groups by eliminating gender-based violence, increasing women's and girls' voice and leadership and providing equal access to quality education.

Education and gender equality related programs reached 13,798 people while our programmes on gender-based violence reached 11,214. We reached 5,226 people advocating for equal voice and leadership of women and girls in all areas of public and private life.

CARE's work in increasing equal access to education helped to combat child marriage and early pregnancy enhancing girls' social, political and economic agency and ability to seize their rights and unlock their own potential.

This was possible through projects such as the Supporting Transition, Retention and Training for Girls (START4Girls), in Buhera and Mutare districts which is targeting 59,040 project participants in 59 wards to reduce the prevalence of harmful gender norms and socio-economic barriers to adolescent girls and young women's continued education and training including those with disabilities in crisis affected fragile communities.

The project has been using various approaches such as Social Analysis and Action dialogues; training of child protection committees; and households in income generating activities; and Village Savings and Lending Associations (VSALs); supporting the implementation of the Guidance and Counselling learning in schools; and linking youths to Technical Vocational Education and Training among other activities.

Our interventions have supported the communities, schools, governments, and other partners to create sustainable, innovative solutions to ensure that marginalized children, especially girls, stay in school, including those who fall pregnant; succeed academically, complete a relevant education, and obtain dignified work.

Public awareness campaigns and dialogues have helped to highlight girls' needs and rights for continuing education while also promoting ASRHR.

The project also trained 206 households in income generating activities, and 1646 households in village savings and lending associations (1,455 women and 191 men).



Health



Through various interventions CIZ strengthened local health systems by working with Ministry of Health and Child Care and other partners to support marginalized population groups including increasing access to quality health services, including sexual and reproductive health and rights services, particularly for adolescents.

CIZ also worked with the government to prepare for and respond to public health emergencies including the Covid-19 pandemic. 75,199 participants were reached through CIZ's health related interventions.

WASH interventions reached a total of 1,084,493 participants. Among these 14,391 households were reached through the Crisis Modifier Covid Response in Mwenezi (8,100) and Chiredzi (6,291) constructed hand washing tippy taps at their homesteads as way of increasing hygiene and reducing Covid-19 transmission.

CIZ worked with various partners to prepare for and respond rapidly, at scale, to sudden onset natural disasters including public health emergencies such as the Covid-19 pandemic and its secondary impacts reaching 1,116,712 participants.


CIZ provided 77,859 and 40,399 people with shelter and food respectively. 78,345 people in hard-to-reach areas were reached with emergency Covid-19 vaccination.

1,044,335 people were reached through Risk Communication and Community Engagement (RCCE). Radio messaging reached 598,641 people.

Humanitarian Action



Women's Economic Empowerment



12,112 women were directly empowered through various programs by supporting equitable access to, and control over, economic resources, including having the time and opportunity to engage in economic activities.

CARE'S VILLAGE LENDING AND SAVINGS ASSOCIATION MODEL

Village Savings and Lending Associations remain a critical model in how CARE's work is delivered through the lens and standards of gender equality and social inclusion, with a focus on gender-transformative approaches. Forty-nine new Village Savings and Lending Associations (VSLA) were formed 19 Chiredzi and 30 Mwenezi during the year. 282 VSLA groups had cumulative savings for the year of R1,448,870.00 in the two districts.

The graph below is indicative of how the use and uptake of this model has trended upwards since FY18. It is encouraging to note that the majority are women, which speaks to CARE's intentionality in empowering Women and Girls, and driving the Gender Equality agenda. Below is the break down showing new VSLAs formed, as well as numbers of women and youth.







Coordination & Collaboration

CIZ leveraged on its strong presence at district level, and its close and long-standing relationships with key district, regional and national authorities to ensure sustainable programming and efficient coverage, avoid duplication of interventions with other partners, and facilitate project information-sharing.

Development; Ministry of Health and Child Care; Department of Youth, Sports, Arts and Recreation; Ministry of Public Service, Labor and Development; Ministry of Local Government, Public Works, and National Housing; Ministry of Primary and Secondary Education and the Ministry of Lands, Agriculture, Fisheries, Water, Climate and Rural Development, among others.

We collaborated and coordinated with various government ministries and departments including the Ministry of Women Affairs, Community, Small and Medium Enterprises

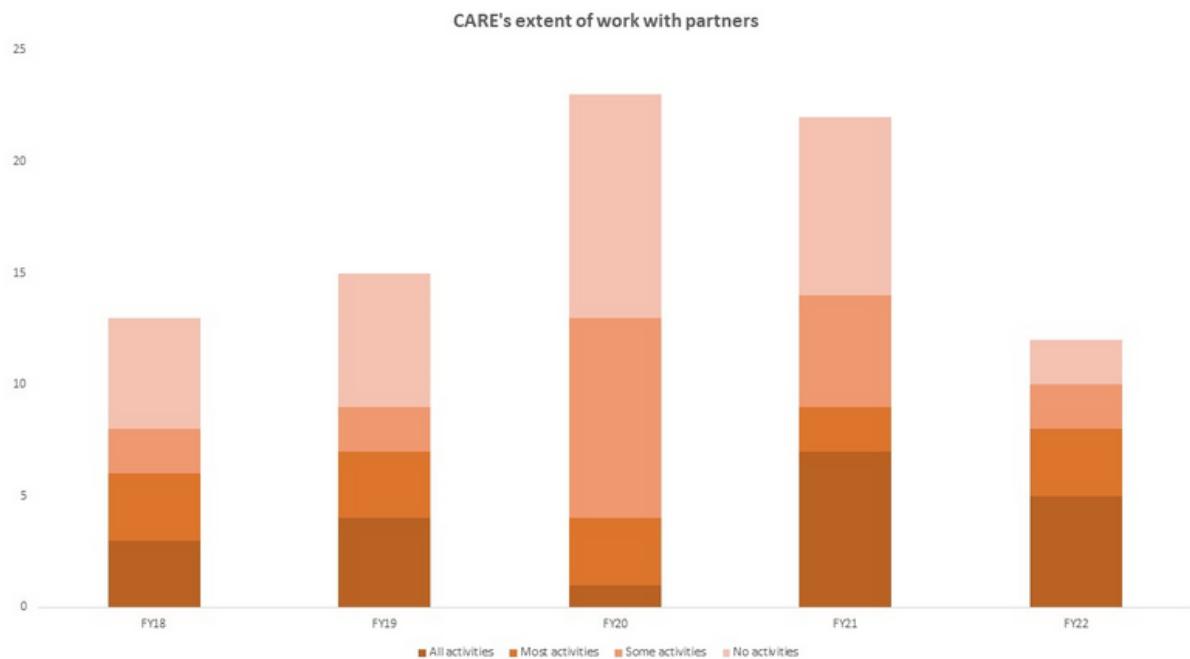


Localisation and Partnerships

CIZ's localisation agenda involves shifting from direct implementation to working through local and national organizations, that is promoting locally-led solutions. Our aim is to facilitate a digital nexus platform that includes a variety of stakeholders, including the private sector. CIZ believes that the private sector can play a critical role in accelerating progress toward ending poverty and achieving gender equality. By pooling resources and expertise, our collective action is greater and more impactful than what we can deliver alone.

In FY2022 CIZ promoted working with local institutions in development and increased partnering in emergencies. Partnering with local actors led to greater reach and sustainability as well as better access to local populations, intimate knowledge of the local context, and long-term presence.

Most of our projects in the financial year were implemented with and through partners. We leveraged strong relationships with the government, local organizations, corporate sector and women rights organizations and groups at all levels providing technical assistance and capacity development.



Where we are going

CARE International focuses on six impact areas that drive progress towards our overall goal to end poverty; food, water and nutrition systems, climate justice and adaption, gender Equality (including education), women's economic empowerment, right to health and humanitarian action. In Zimbabwe our 3 top thematic priorities (impact areas) for the next 3 years are:

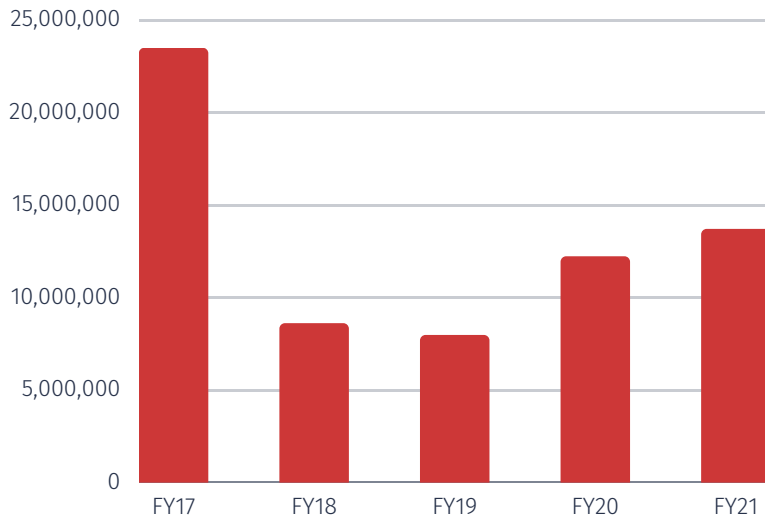
- Food, water and nutrition systems
- Climate justice and adaption
- Gender Equality (including education)

These shift depending on the changing context, hence, our 2 middle tier thematic priorities are humanitarian action and women's economic justice, followed lastly by health, in that order of priority. These are the impact areas that will drive our growth and resource mobilisation (RM) strategies. We will invest significant human and financial resources to enhance our competitive edge in these areas.

Also, given that we have been implementing in the current provinces (Masvingo, Midlands, Mashonaland West and Manicaland) for a long time, we will be increasing our geographical coverage to Matebeleland South from 2023.

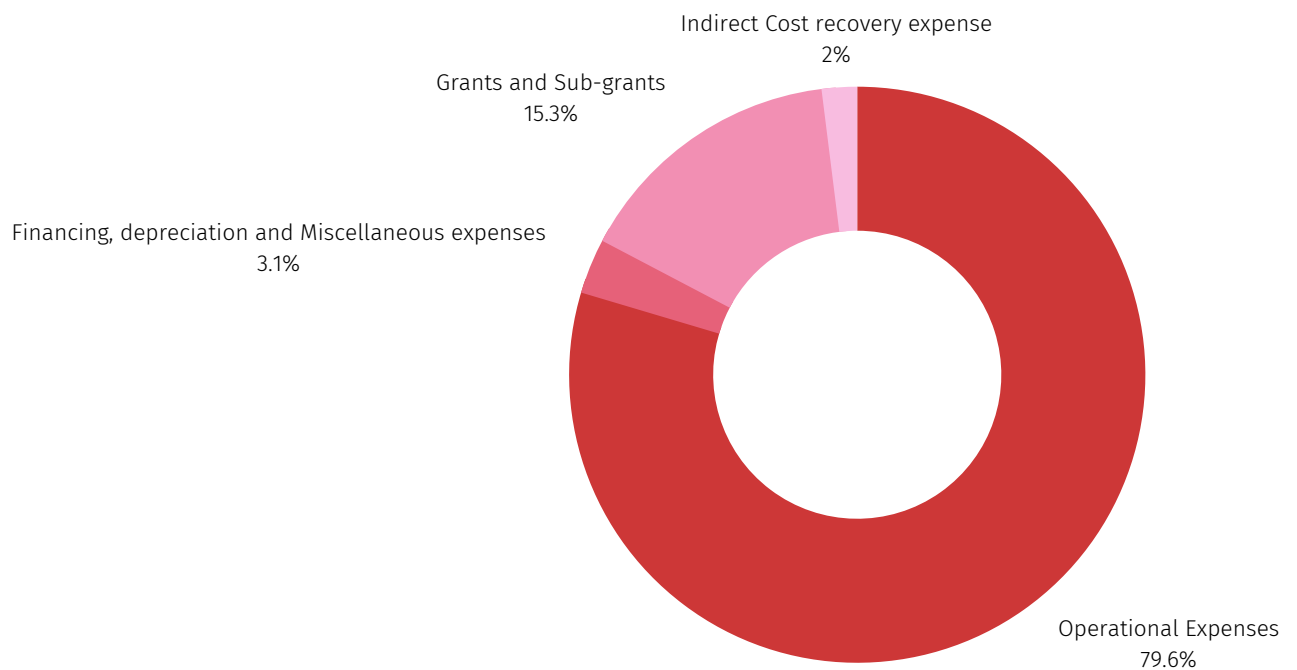
FINANCIAL STATEMENT

Total income past 5 years



Funding levels increased in FY2021 by 8.9% from FY2020 despite generally limited funding opportunities in the context of COVID-19.

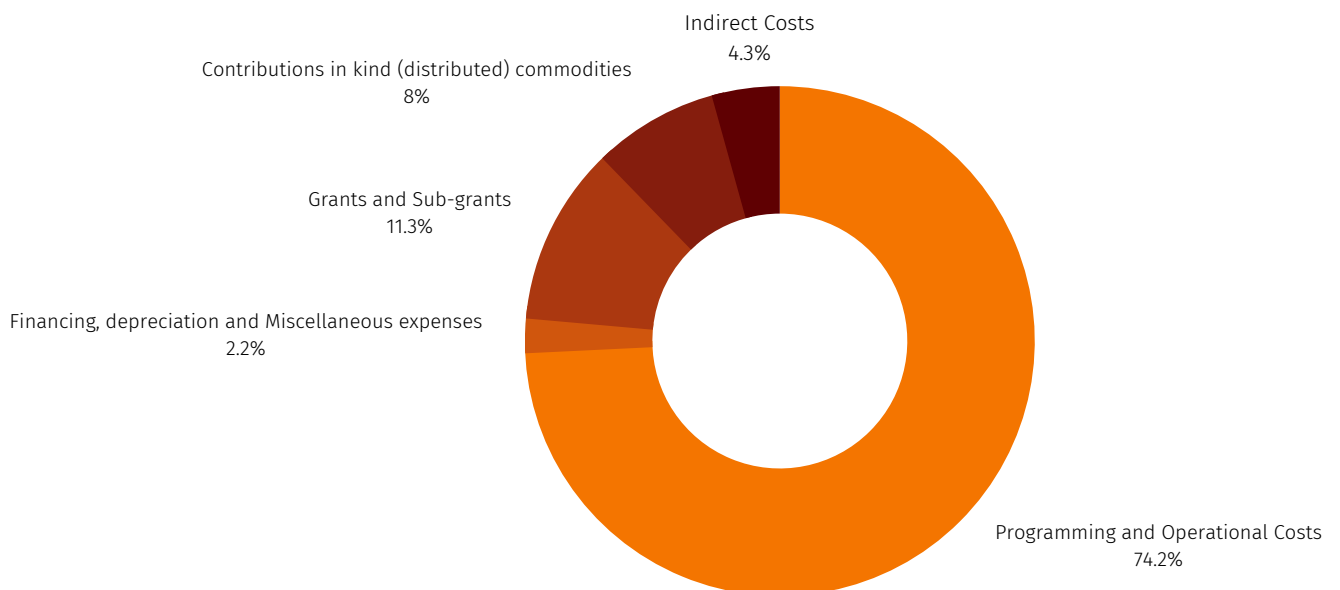
FY21 Operational costs breakdown



FY22 INCOME AND EXPENDITURE SUMMARY

INCOME	\$19,173,085
EXPENDITURE	COST
Programming and Operational costs	14,222,667.1
Financing, depreciation and miscellaneous expenses	472,451
Grants and sub grants	2,168,763.1
Contributions in kind (distributed) commodities	1,524,832.2
Indirect Cost Recovery Expense (ICR)	825,470.1
Total Expenditure	19,214,185

FY22 Operational costs breakdown



30 YEARS,
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Our Stories



Girls no longer miss school during their menstrual periods : Jennifer's story

Persistent absence from school is the major cause of lower achievement and poor progress in secondary education for most girls in Buhera District, Zimbabwe. Statistics show that boys have a higher full-attendance rate than girls.

Some girls in Buhera often miss school regularly particularly during their menstruation cycle.

According to estimates of the United Nations Children's Fund (UNICEF), about one in every ten school-age African girl didn't attend school during menstruation or dropped out at puberty due to lack of cleanliness and separate toilet facilities for female students at schools.

In Buhera, girls face difficulty to manage their menstrual periods at school due to lack of sanitary wear and knowledge about hygiene management.

Jennifer, 17, from Mabvuragudo High School says girls experienced different feelings including fear, shame, and guilt because of lack hygiene kits and prior information about menstruation hygiene.

"Girls from our school used to struggle during menstruation. Most girls did not have sanitary wear, so it was common for some to miss school for even over a week. Most girls had no proper panties and sanitary wear, so we used cloths, and it was very uncomfortable. At one time, a girl from school was left embarrassed after the cloth fell in class and so most girls preferred to stay at home during their period than face the shame," she said.

Use of cloths often left the girls vulnerable to period shaming from boys, as most of them could not afford sanitary wear. Others had never used sanitary wear before.

This was compounded by lack of awareness by parents and guardians on the importance of sending the girl child to school due to many cultural norms and religious beliefs that promoted early marriages. Most of them were pushed by poverty. Jennifer says that due to poverty and lack of other essential learning materials, she also had to endure school breaks without food. Some girls went home and never came back to school.

With funding from and in partnership with the World Bank, CARE piloted the Social Protection and WASH Interventions to Keep Adolescent Girls in Schools in Zimbabwe project. The project was directly complementing the Government of Zimbabwe's Basic Education Assistance Module (BEAM) fee waiver program, which pays school fees for vulnerable students in both primary and secondary schools. Under this project, WASH and social protection interventions were used to support adolescent girls grappling with the adverse effects of COVID-19 to return to and stay in school after several waves of school closure in Zimbabwe occurred due to the impact of the virus in the country.



“While I received assistance from the government’s BEAM programme, my family struggled to make ends meet for us to have enough food, uniforms and other school requirements. It was hard to concentrate in school,” said Jennifer.

“Now things have changed through CARE’s support with sanitary wear and cash assistance. I received 9 pants, 26 packets of pads, 10 bars of soap and I even shared these with my sister. I now have a proper uniform, and books to use and my family can now afford food for us to eat. It has boosted my confidence and I am not embarrassed to be among other students. Even other girls now attend school consistently because our parents can now also support us,” Jennifer further said.

Statistics also show that food insecurity is one of the major drivers of early marriages and absenteeism among adolescent girls. As such, through this WB-funded project CARE disbursed US\$35 monthly cash vouchers, through mobile cash transfers, to beneficiary learners’ households for them to buy basic household needs especially food and education-related materials such as uniforms and stationery.

Non-food items (NFIs) in the form of sanitary wear, bath soaps, undergarments and towels were also distributed to counter menstrual hygiene management constraints that had caused absenteeism amongst adolescent girl learners.

The distributions were complemented with trainings of household heads around gender budgeting, positive parenting, and girl education-oriented household expenditure for enhanced project effectiveness.

Letwin from Mabvuragudo High School Guiding and Counselling (GNC) teacher, who also received trainings in guiding and counselling says that the change has been very significant: “There was high absenteeism and poor performance by students, mostly girls. Parents were not aware of the importance of education, and this was worsened by poverty. Children had so many squabbles in school and education was taken very lightly

due to beliefs in the communities which did not value, particularly girls’ education, such as *kuzvarira* (giving away of girl children at birth for marriage or ritual fulfilment purposes).

“After the teaching and trainings on education, children now have a sense of togetherness. The provision of sanitary wear and financial assistance to their parents has also boosted their confidence and improved their socialization. Children no longer have to miss school or even go home during their period because the project has also enabled us to keep dignity kits including sanitary wear, blankets, pills, soap, towels among other essentials to assist the girls,” Letwin said.

Through weekly guidance and counselling sessions with students Letwin is also equipping students with knowledge on gender equality, sexual and reproductive health, child protection, menstrual hygiene management, among other topics. The project also introduced village savings and loans associations (VSLAs), which are enabling parents to start income generating activities to keep their children in school.

“For sustainability purposes the project has just disbursed Income Generating Activity (IGA) grants which are meant to see beneficiary households starting some income generating projects at household level so that the gains of the project are not lost once the project has lapsed,” said Ulilia Magombedze. CARE’s Humanitarian Lead and Project Manager.

Additionally, the project has initiated the process of establishing Community Pad Centers in operational communities so that even after the project has ended adolescent girls and women in general will continue to have access to readily available, re-usable and affordable pads. So far, 6 groups have been identified for 6 school communities in respect of this sustainability initiative.

“Through support groups, men and women are learning how to make reusable sanitary wear in order for the girls not to resort back to using cloths which were not very viable,” added Ulilia.

Rewriting the story: How Chikore village became open defecation free.

In Zimbabwe's Masvingo Province in Chikore village head Agnes, 63 is working to better the lives and health of her community. She has gone the extra mile to stop the spread of diseases, such as cholera, by making sure her village is open defecation free.

Ward 27 has 42 villages, out of these, 41 villages are led by men with Agnes Chikore being the only female village head. The fearless village head, and mother of seven, tackled open defecation which was very common due to a lack of toilets, washing facilities, and sanitation knowledge.

Building a latrine was never a priority among many and most could not afford the cement to build one.

"Due to this our food and water were contaminated. During the mango season, we'd have close to 20 diarrhoeal cases every week. Now we rarely have any. Our children were openly defecating near the houses and we would simply get a stick and scrape it away.

We would use fields, bushes, forests, and ditches as toilets and the river for bathing. It was always embarrassing when we have visitors because we could stumble into each other at awkward moments."

"Only four households had toilets and the other 26 households did not even have any latrines. As a leader who had learned about sanitation and hygiene practices, I had to do something. I used my bare hands to build latrines for about 10 vulnerable households out of the 30 in my village," said Agnes.

In 2019, 52 percent of rural communities in Zimbabwe practiced open defecation. In response, CARE International, with the support of the Australian NGO Cooperation Program (ANCP), commenced a WASH project to mitigate the spread of diarrhoeal diseases.

The project targeted over 32,000 people in 64 villages with training on hygiene practices to stop open defecation.

Agnes joined her village's Sanitation Action Group (SAG) after learning about the health risks of open defecation. She began doing door-to-door visits and meetings to educate members of her community on the risks. During these visits, she learned one of the reasons that held back her community

"Many complained that they did not have money to build toilets. As we didn't want this to draw us back, I decided to take action. I had never trained as a builder but the need in my community was great. My late husband was a builder and I used to watch him doing his job. I then decided to practice what I had seen him do," Agnes said.

Agnes mobilized the community members to look for available resources, such as bricks. She also asked them to source for used plastic bottles to make the vent pipe. Her efforts paid off as by the end of October 2021 the village was verified and certified to be an Open Defecation Free (ODF) village

For sustainability, Agnes set punitive actions. "We all agreed that anyone found openly defecating will be fined one goat. This is helping to maintain good health in the community."

Agnes has set the pace for her fellow village heads; especially those living in Wards led by men. She has big aspirations for women in the province.

"I want to work with fellow village heads in training more female builders to build latrines. My wish is to see all the surrounding villages attaining ODF status," she said.



Agnes

We thank you for your continued support in our efforts to contribute to the SDGs.



Government of Zimbabwe Ministries CIZ worked with

Ministry of Local Government, Public Works and National Housing

Ministry of Public Service, Labour and Social Welfare

Ministry of Primary and Secondary Education

Ministry of Lands, Agriculture, Water, Climate and Rural Resettlement

Ministry of Youth, Sport, Arts and Recreation

Ministry of Health and Child Care

Ministry of Higher and Tertiary Education, Science, and Development

Development Ministry of Women Affairs, Community

Small and Medium Enterprise Development

Our Donors

Australian Aid NGO Cooperation Program (ANCP)

United Nations Development Program (UNDP)

Foreign, Commonwealth and Development Office

UK Department for International Development (DFID)

Latter Day Saints Charities (LDSC)

United States Agency for International

Development (USAID)

United Nations Children's Fund (UNICEF)

World Food Programme (WFP)

International Climate Initiative (IKI- Germany)

Global Affairs Canada (GAC)

CARE Canada Emergency Response Fund (CCERF)

European Civil Protection and Humanitarian Aid

Operations (ECHO)

DFID-UNILEVER

Bureau for Humanitarian Assistance (BHA)

Foreign, Commonwealth & Development Office

(FCDO)

Zimbabwe Resilience Building Fund

Swedish Embassy

Our Partners

World Vision

UDACIZA

Lutheran Development Services (LDS)

Local Initiatives for Development (LID)

Coady Institute

Dan Church Aid

PLAN International in Zimbabwe

Econet

City of Mutare

VIAMO

Netone

Diamond FM

Hevoi FM

ICRISAT

Ecobank

International Rescue Committee

Bulawayo Projects Centre

Environment Africa

International Youth Foundation

FHI360

KUVA

SNV

Emthonjeni Women's Forum

Open University

World Bicycle Relief

Education Coalition of Zimbabwe

Environment Africa

Nutrition Action Zimbabwe

Caritas



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