



WEEKLY REVIEW

26 October 2022

Weekly Dashboard



Forex Auction Weighted Rate

Week	11.10.2022	18.10.2022
Per USD1	ZWL 628.1975	ZWL 628. 5204



Consumer Price Index

Month	August	September
	12 286.26	12.713.12



Inflation

Month	August	September
M.O.M.	12.4%	3.5%
Y.O.Y.	285.0%	280.4%



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1. Government Raids Disabled People`s Fund

The systematic exclusion and alienation of Persons with Disability (PWD) both at subnational and national level has reached alarming levels with the government, Ministry of Public Service, Labour and Social Welfare being accused of raiding the Disabled People`s Fund (DPF) without Treasury`s knowledge.¹ The actions by the Ministry are not only shocking but worrisome as they exposed government`s insincerity in addressing the plight and agony of PWD. The DPF was established to promote the welfare of disabled persons by providing financial resources for rehabilitation, training and engaging in income-generating and employment creation projects. Nevertheless, there is a huge discrepancy in the utilisation of the DPF as the funds are not being used according to the national budget prescription and this constitute abuse of public funds. It is also against the principles of good public finance management and good governance which detects that, permission has to be sought from the parliament before public funds are diverted. The actions by the government also exposes the hypocrisy around “leaving no one behind” which is the foundation of vision 2030.

2. Tenderpreneurship: A Hallmark of The Second Republic

Public procurement remains a thorn in fiscal management in Zimbabwe with the public sector becoming a haven of tender scandals. An issue that has raised several questions around the efficiency of the Procurement Regulatory Authority of Zimbabwe (PRAZ). This is because, tenderpreneurship has become the order of the day in government department. A testament to the urgent need of structural reforms. Grindale Engineering Services, a company that won a lucrative US\$87 million tender for the construction of Vungu Dam in the Silobela, Midlands province, falsified information and circumvented set procurement and tendering processes². A reflection of weak tender screening on the part of ZINWA and PRAZ. On another note, Bikita Rural District Council (BRDC) is alleged to have engaged a private company owned by its Chief Executive Officer Peter Chibi and the head of finance department to run two commercial entities and enforce traffic by-laws at Nyika Growth Point on behalf of the local authority.³ A situation that exposes how conflict of interest undermines effective public procurement. All these issues orbit around the need for robust and effective institutional reforms at PRAZ as its compromise is now costly to the nation. The compromise of PRAZ has grave effects on public finance management as it functions as a conduit pipe of resource leakages. Therefore, if the government is sincere about attaining an upper income middle economy status by 2030 it must initiate robust institutional and structural reforms in the public sector coupled with optimum political will.

3. Delayed Devolution Disbursement Impedes Development At The City Of Harare

While local governments play a critical role in promoting sustainable economic growth and development through maintaining water & sanitation infrastructure, housing, waste disposal, road rehabilitations and public lighting. On average, the central government has not significantly invested in local authorities for effective delivery of their mandate. Between 1990 and 2019, resources for financing local authority programs through the national budget have rarely exceeded 1% of the total budget. As a result, the state of infrastructure & service delivery in local authorities continues to deteriorate evidenced by perennial water woes, poor street lighting, local roads with potholes and mushrooming of garbage dumpsites in residential areas, poor sewerage treatment, blockages and spillages in areas such as Harare, Bulawayo and Gweru thereby accentuating health hazards. This regression in service delivery is attributed to underfunding of local authorities, poor resource mobilisation and debt management strategies in local authorities, resource leakages and poor governance of local authorities, among other issues.

As the year 2022 draws to a close, not much is there to show in terms of development emanating from the allocated devolution funds. Apart from the fact that Harare City Council (HCC) has been operating in a volatile economy, the Devolution and ZINARA grants have both registered underperformances due to late disbursement of funds.

2. US\$87m tender scam unearthed - NewsHawks (thenewshawks.com)

3. Bikita RDC in another corruption storm - NewsHawks (thenewshawks.com)

As citizens prepared to set their priorities and highlight their key concerns for 2023 National Budget Consultative meetings held in the first week of October, Harare residents were concerned on what the 2022 devolution funds did for the people as a community and how best the 2023 funds can alleviate the situation. However, a look at the figures received by Harare City Council show that not much, could have been practically done with so little in the past 9 months. The table below shows what was received by the HCC:

GRANT	AMOUNT ALLOCATED (ZWL\$)	AMOUNT RECEIVED (ZWL\$)	PERCENTAGE (%) RECEIVED
DEVLOLUTION	ZWL\$2,300,000,000	ZWL\$165,000,000	7%
ZINARA	ZWL\$825,000,000	ZWL\$248,700,000	30%

Source: City of Harare Financials, September 2022

Of the ZWL\$2,3 billion allocated in the 2022 budget for HCC's Inter-Governmental Fiscal Transfers (IGFT), only a total of ZWL\$165 million of the has been received by the council as at September 2022. The funds were predominantly used for the Water, Sanitation and Health (WASH) and Roads programmes. The implication is that other projects that were supposed to be funded using the IGFT cannot be completed as targeted. For the roads rehabilitation programme, of the ZWL\$825 million from the ZINARA Grant, only ZWL\$248,7 million had been received by end of September 2022; which is slightly above a quarter of the budgeted funds.

Both the central government and ZINARA need to realize and acknowledge that delayed disbursement equals delayed or no development. With only three months left to close off the ledgers for the year 2022, a whopping ninety-three percent (93%) of the devolution funds is still being expected from the Government. It is imperative to note that in this instance, 93% only carries a numerical value as the actual monetary value has since been eroded by inflation and has lost its real value. The ZWL\$2,3 billion allocated to Harare City Council is therefore ZWL\$2,3 billion on paper and not ZWL\$2,3 billion in terms of possible developmental realizations.

Over the years, Harare City Council has been notorious for financing the same projects year after year, in chasing development. It is worrisome to note that the project turnover for the refurbishment/upgrading of the Morton Jeffrey Laboratory, for instance, is quite low as there is a yearly budget going towards the "completion" of the water treatment plant. Such delays in disbursement aid this situation and halts development.

At this rate, vision 2030 remains a pie in the sky as city councils will still be working on such unfulfilled developmental agendas and yet year after year there is a chunk in the national budgets allocated for such devolution-driven development.

In view of the foregoing, ZIMCODD recommends that:

- The Ministry of Finance and Economic Development ensures a that Zimbabwe adopts a people-led and people-centred Budgets. These are budgets that prioritizes the realisation of constitutionally enshrined rights over the achievement of private led and economic growth targets.
- The government should increase intergovernmental fiscal transfers (devolution funds) to boost the local authorities' revenue base. The government must also resuscitate the Public Sector Investment Programme (PSIP) to finance local authority capital expenditure.
- The Ministry of Local Government and Ministry of Finance and Economic Development should come up with a timely devolution disbursement framework to allow local authorities to fully utilize their allocations and revamp service delivery.
- The Treasury should ensure that devolution funds are disbursed on time. This is crucial given the current context of the massive depreciation of ZWL and the subsequent high inflation environment.

4. Are House demolitions over in Harare: What the Future Holds for Women.

Demolition of houses in Zimbabwe's capital city, Harare and surrounding dormitory towns has thrown many lives in chaos and dislocated livelihoods. The worst affected by these processes are women. While municipal/government- led destruction of "illegal" houses and structures is not a new phenomenon globally and, in most cases, justified based on the need to create order, the frequency and predictability with which it occurs in Harare is unapparelled and worth underscoring and probing. Since the infamous Operation Murambatsvina conducted in 2005, so called illegal houses and structures continue to sprout and so are demolitions. The question that one may need to grapple with is why this is so and what are the implications to mostly women and children who are the most vulnerable and affected groups by these demolitions. This note puts on record the serious nature of the ongoing humanitarian catastrophe in Harare in the form of house demolitions, why this phenomenon continues and how it affects mostly women.

House Demolitions In Zimbabwe: Background

Demolitions of houses and structures deemed illegal in Harare started soon after the country attained political independence in the 1980s and this has worsened in recent years with no signs that this humanitarian crisis can stop. In 1983, the Zimbabwe African National Union Patriotic Front (ZANU-PF) initiated “Operation Clean-up” that caused the destruction of several units of urban housing in Harare (Patel, 1988), displacing hundreds of people and rendering them homeless. Ten years later, government destroyed housing units for settlers in Mbare and Epworth and moved the settlers to Porta Farm in 1992. Desperate for cheaper housing, more people flocked to Porta and Churu Farms. The government responded to the surge in new house seekers in Porta by evicting them and resettling them in Hartcliffe Extension where they were again evicted in 2005 during Operation Murambatsvina.

The rate at which houses were demolished accelerated at the turn of the century. The infamous Operation Murambatsvina in 2005 became emblematic to this. 700 000 citizens were rendered homeless, and 2.4 million people were affected indirectly. The UN described it as a humanitarian catastrophe. From then until presently, destruction of houses has never stopped. A spate of house demolitions raged from 2015 in Warren Park D, Mabvuku and Tafara. In 2017, 200 houses were demolished along High Glen-Kambuzuma road. The structures were argued to have been built on State land meant for other infrastructure or on wetlands. In that same year, 27 families were left homeless after demolitions in Glen Norah and Budiro. Between 2020 and 2021 at the height of COVID-19 in the country, citizens had to endure yet one of the most ruthless demolitions of “illegal houses” in Harare’s suburbs of Mbare, Zimre Park, Budiro, Belvedere and Warren Park. In late 2020, Budiro suburb became and epicenter of the demolition of these houses, with 190 houses being destroyed. The most recent occasion was on 17 August 2022 where 10 houses were demolished in Budiro suburb leaving families de-homed, stranded and without shelter.

Uncertainty, Demolitions, And Impact On Women

Why is there no end to demolition of houses despite the long history of destruction of illegal houses since the 1980s? A number of related reasons account for this. With a worsening economy that fails to provide attractive opportunities for the young generations in the rural areas, there is a surge in rural to urban migration of people looking for opportunities in urban areas particularly, Harare. The resultant increase in population in Harare puts pressure on demand for housing. The desperation to secure low-cost housing in and around Harare has made house seekers more vulnerable to predatory and bogus housing cooperatives who “sell” undesignated state land to unsuspecting victims, thereby fleecing millions of dollars from the public. Illegal sale of residential stands on undesignated sites is mostly facilitated by politically-connected but unruly land barons who act with impunity.

A case in point is feud between competing but political linked housing cooperatives which eventually resulted in many residents having their houses destroyed in Budirio. Many residents whose houses were destroyed bought their stands from Tembwe Housing Cooperative and in total, the 134 members of the Tembwe Cooperative contributed \$3600 each to the cooperative. In an economy characterized by high levels of unemployment and informality, this is a lifetime saving for members who earned an average of \$50 a month. Residents later found, however, that land belonged not to Tembwe but to Events Housing Cooperative. Thus, in spite of a legal battle to save their houses, they unfortunately lost. Further, the political feud between the ruling ZANU PF and opposition over the control of urban councils has caused upheavals for common residents. Thus, demolition of houses will continue to persist so long as the land is politicized, and as long as the Jambanja approach to securing land and 'the pervasive structural informality of the ruling ZANU PF party endures.'

With persisting demolition of houses, many lives are shuttered, properties destroyed, savings are lost, and livelihoods thrown out of balance. While house demolitions affect men, women and children alike, women are the most vulnerable group and suffer the biggest brunt of the madness surrounding demolition of houses. This is because they are directly responsible for the home, family, and welfare — cooking and washing clothes. The uncertainties surrounding demolitions paint an overwhelmingly bleak picture of women and children's current and future status. For this, women also suffer more trauma and depression than any other group. In an economy characterised by high levels of unemployment and informality, many women have by default become the breadwinners, assuming duties of feeding and providing for their families – husbands and children – from incomes generated from informal backyard businesses like vending. This is even more obvious for single mothers and widows. Given that most women-controlled informal business revolve around the house – erecting stalls at the front entrance and some other business at the back yard – demolition of houses, therefore, seriously affects the basis of the livelihoods of the affected communities.

Furthermore, house demolitions worsen an already fragile status of women in society characterised by gender discrimination against women with respect to property ownership. Women struggle to inherit their spouses' estates owing to repressive customary laws and lack of access to competent legal services. Attempts to access low-cost housing ends them in the hands of unscrupulous land barons who end up stealing their only attempt at saving for a house. With their houses demolished and having lost properties to the bulldozer and money to connected land barons, women are insecure and unsafe as they tend to live in makeshift shacks. Their livelihoods are eroded and results in an upsurge in school dropouts, hunger and starvation among other forms of humanitarian crises. The psychological impacts of this process on dispossession is huge encompassing trauma, stress and depression among other things.

In sum, there is no promising outlook for any stop to demolition of houses in Harare. Increasing population in most urban areas particularly Harare has increased demand for low-cost housing. This is worsened by the increase in rural-urban migration owing to increasing levels of poverty in rural areas. The quest to secure affordable housing has led groups of people either to settle on undesignated land and/or to fall victim of fake housing cooperatives. This is worsened by the continued feud between the opposition-controlled municipalities and the ruling party ZANU PF concerning who controls urban land. Although regularization of informal settlements has been suggested as the best way forward to stop demolitions, the process is very low casting a dark veil of uncertainty among settlers, who for that reason become pawns in the broader scheme of politics in the country. As women suffer the greatest brunt in house demolitions, with the obtaining state of things in the country, what the future holds for them is uncertain!

5. Maternal Health Crisis: The Plight of Zimbabwean Women

The significance of quality maternal healthcare in Zimbabwe cannot be overemphasised. In spite of renewed concern over maternal healthcare in Zimbabwe, evidence indicate that the sector remains inundated with challenges. According to the Multiple Indicator Cluster Survey, Zimbabwe has a maternal mortality ration of 462 deaths per 100,000 live births, and a neonatal mortality rate of 32 deaths per 1000 live births. These statistics are worrying and indicate that Zimbabwe is unlikely to meet the Sustainable Development Goals target of reducing maternal mortality. While maternal healthcare challenges are attributed to a number of challenges, chronic underfunding remains the leading factor (Amnesty International, 2021). The national budget is the main instrument through which the government makes touchable commitment towards advancing gender equality and the realisation of women's rights that it had made at international, regional and domestic levels for example the Beijing Platform for Action, SADC Protocol on Gender and Development and the Gender National Policy respectively. However, over the last few years, national budgets towards maternal healthcare in Zimbabwe have remained tightly limited notwithstanding the sustained challenges within the sector which has been exacerbated by the advent of the COVID 19 pandemic.

A trend analysis of the national budget towards the healthcare over the years indicates that government has constantly failed to allocate at least 15% of the total budget to healthcare sector as per the Abuja declaration minimum threshold. Government inadequate spending towards the sector means that the costs of healthcare is disproportionately borne by women who constitute the majority of the poor. Pregnant women and girls are at risk of life changing child birth related injuries including obstetric fistula as many shun away from public hospitals in favour of home-based deliveries due to inadequate infrastructure as evidenced by the emergency of midwives in high density suburbs. A lot of people shun delivering in hospitals due to high hospital related costs. The few local authority clinics in operation have continued to charge fees, citing chronic funding shortfalls from the national budgets.

Zimbabwe has one of the highest maternal mortality rates in the world and pregnant women have to gamble with their lives by opting for home births due to incapacitated public institutions. Evidence from a Briefing Paper on Gender Responsive Public Service Delivery in Zimbabwe indicates that gender responsive health care is still a pipeline dream as it was rated 43% in Gokwe, 40% in Chipinge, 37% in Goromonzi, 30% in Binga and 33% in Matobo. In a recent but sad development, a woman gave birth to her baby in a toilet after she was neglected by healthcare workers at Glenview poly clinic. The woman was dismissed from the maternity ward by a nurse because she was giving birth for the 5th time. Against such a crisis, there is need for government to ensure that the 2023 National Budget addresses challenges that expecting women are facing through adequate funding.

6. Social and Economic Inclusion in Health Financing

Progress towards universal health coverage in Zimbabwe has been hampered by a number of factors. Universal Health Coverage refers to healthcare whereby all people receive the health services they need without suffering financial hardship when paying for them.⁴ Over and above the economic crisis, rising demand for health spending at a time of falling household and national income due to supply disruptions and economic losses resulting from lockdown responses led to health care financing constraints. Although the health sector has been undoubtedly crippled by the pandemic. Other existing challenges include those arising from economic performance, socio-economic inequality and the burden of non-communicable diseases, infectious diseases, and health emergencies due to climate change.

Data indicates that government spending on primary health care as an indication of domestic pro-poor spending on local level health systems and pro-poor population health interventions is very low in Zimbabwe.⁵ Thousands of households have faced difficulties with rising food prices and falling incomes during and after the pandemic and this has led to them falling out of health services. Zimbabwe has had many policies formulated in an effort to move towards Universal Health Coverage and ensuring that all citizens have access to quality health services that they need without suffering financial hardship. This, however, has not been the case. The full spectrum of essential, quality health services should be covered including health promotion, prevention and treatment, rehabilitation and palliative care.

There has been a continued decline in healthcare services, even before the COVID-19 pandemic, this has had dire social and economic implications. Zimbabwe's health system has been consistently financed by a mixture of funding sources. The major domestic funding sources include those from central government through budget allocation, sub-national government (local authorities), households, non-governmental organisations (NGOs), and private companies.

4. <https://documents1.worldbank.org/curated/en/840661563174110288/pdf/Zimbabwe-National-Health-Financing-Policy-Resourcing-Pathway-to-Universal-Health-Coverage-2016-Equity-and-Quality-in-Health-Leaving-No-One-Behind.pdf>

5. <https://equinetafrica.org/sites/default/files/uploads/documents/EQ%20Diss124%20Health%20fin%20%20and%20COVID%20%20Jan2022.pdf>

Presently, the public health sector is heavily reliant on funding from NGOs as government struggles to ensure that medication is available at various public health facilities. Studies have shown that women have higher medical care service utilization and higher associated charges than men.⁶ Women in low and middle-income countries such as Zimbabwe, do not have equal access to resources, such as education, employment, or healthcare compared to men. In making budget allocations, government must ensure that the budget is gender responsive and addresses the needs of women and the greater burden of care work that is placed on women in society. The nature and level of healthcare financing is a critical element of health systems development including in how resources are mobilised, pooled and spent, and services purchased.

While there are many measures and features of health financing, ZIMCODD has identified the following as key issues for equity in health financing:

- The extent to which government prioritizes health in its domestic budget spending must be in accordance with Zimbabwe's commitment to the Abuja Declaration which committed them to allocating 15% of domestic government spending to health.
- The level of financial protection provided must ensure that health costs do not present as catastrophic or impoverishing expenditures especially towards women.
- Policies targeted at the health sector must employ gender mainstreaming strategies to respond more effectively to the needs of men, women, boys and girls.
- Budget allocations towards the healthcare sector must be gender responsive.
- The extent of government spending on primary healthcare must encompass pro-poor local level health systems and more pro-poor population health interventions in delivering services used by most lower income households.

6. <https://pubmed.ncbi.nlm.nih.gov/10718692/>