

# Zimbabwe

**Amidst a decade of economic decline in Zimbabwe, International Medical Corps has delivered quality health and nutrition services to vulnerable populations, and contributed to reducing the spread of waterborne diseases by increasing access to clean water and improving hygiene practices.**

International Medical Corps began working in Zimbabwe during the 2008–09 cholera epidemic, implementing a comprehensive package of health, water and sanitation interventions for affected populations. In 2013, in response to food and nutrition insecurity in the country's southern region, we expanded our health and nutrition activities as part of a U.S. Agency for International Development Food Assistance Program, serving more than 66,000 community households.

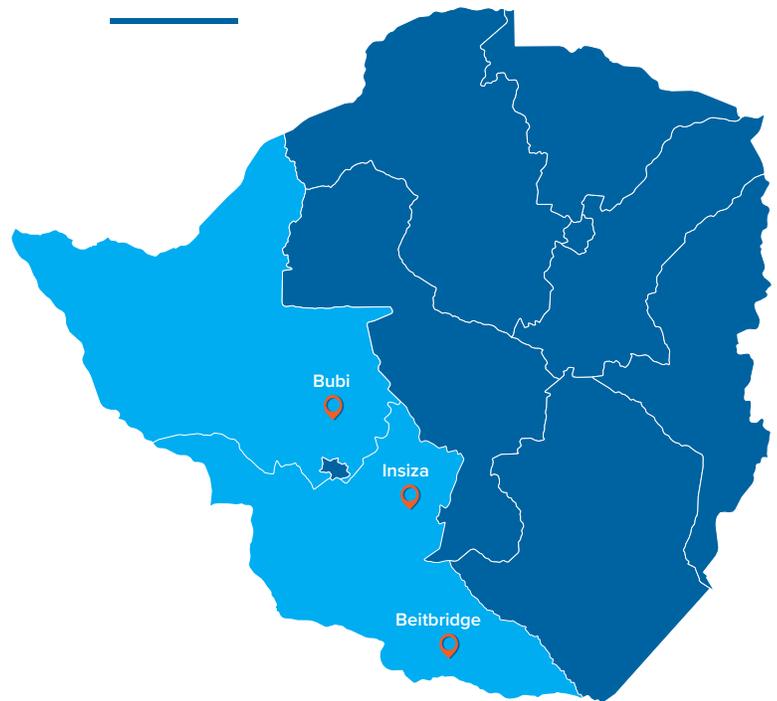
Largely due to deteriorating public water and sanitation facilities and a decaying healthcare system, a large-scale cholera epidemic crippled Zimbabwe in August 2008, killing more than 4,200 people and infecting more than 97,000.

International Medical Corps responded to the cholera outbreak by providing much-needed medical supplies to local partners and by working with the Ministry of Health and Child Welfare to conduct health sector assessments. We also launched long-term interventions, including promotion of water, sanitation and hygiene (WASH) services, and training programs for community-based health workers in cholera prevention and case management.

An El Niño-induced drought in late 2016 and early 2017 significantly affected livelihoods in Zimbabwe, where food insecurity remains a pervasive problem. Poor water and sanitation facilities in both urban and rural areas continue to exacerbate the risk of diseases such as cholera and typhoid. In response, International Medical Corps has implemented emergency nutrition and WASH programs funded by the U.S. Agency for International Development's Office of Foreign Disaster Assistance, targeting beneficiaries in the Insiza, Bubi and Beitbridge districts of Matabeleland South and Matabeleland North provinces.

International Medical Corps supports health workers across 25 health facilities in seven districts, including three district hospitals. In an effort to reduce chronic malnutrition, our work focuses on vulnerable populations, including pregnant

## WHERE WE WORK



and lactating women and children under two years of age. We have strengthened the capacity of local health clinics to establish nutrition surveillance systems and community-based growth monitoring for the prevention and treatment of acute malnutrition; implemented risk-informed WASH activities; rehabilitated water boreholes; and promoted proper hygiene practices. To further strengthen local capacity and foster self-reliance, we consistently train Ministry of Health and Child Welfare staff as well as village health workers.



## OUR IMPACT

We have reached almost



**60,400 PREGNANT AND LACTATING WOMEN**

and



**78,000 CHILDREN IN ZIMBABWE TO DATE.**

## TRAINING HEALTHCARE WORKERS

International Medical Corps provides intensive training to national-level health staff and Village Health Workers on the management of acute malnutrition, prevention of chronic malnutrition, nutrition surveillance, promotion of hygiene and risk-informed WASH. To create a more comprehensive emergency response network, International Medical Corps also trains district health staff on nutrition surveillance, appropriate referral systems and effective coordination among various health structures within a district.

## COMMUNITY OUTREACH

International Medical Corps works through 2,615 community-level volunteers to promote complementary feeding practices, community-based management of rehabilitated WASH infrastructure and optimal hygiene. To date, we have reached almost 61,900 people with messages on promoting optimal nutrition, as well as 6,105 people on communicable disease prevention and how to access health services.



## WATER AND SANITATION

Working with local Ministry of Health and Child Care structures, International Medical Corps supports seven districts in Matabeleland North and South, in southern Zimbabwe, to address the challenge of inadequate access to clean water and latrines, poor hygiene practices and a lack of environmental health education. In some villages in Matabeleland South, a single borehole serviced over 250 people; in others, less than one-third of the community had access to a functional latrine before we intervened. Thanks to our rehabilitation efforts, more than 12,690 community members have gained access to clean, safe water in 2018 alone.

Since January 2011, International Medical Corps has used the Community-Led Total Sanitation (CLTS) approach to catalyze positive behavior change and strengthen hygiene promotion capacity in five districts of Mashonaland Central Province. Additional WASH activities since 2014 have focused on hygiene promotion across seven districts in Matabeleland North and South, including Bulilima, Beitbridge, Bubi, Gwanda, Insiza, Mangwe and Tsholotsho. Our Community Health Clubs promote community hygiene as well as hygiene improvements at the household level, such as the construction of pot racks, handwashing facilities and self-supply latrines. The program encourages the participation of men and adolescents through innovative strategies, such as the use of sports.

## HEALTHY HARVEST TRAININGS

Through a program known as Healthy Harvest, International Medical Corps trains community health workers on the causes of malnutrition and the importance of producing and consuming nutritious, locally available foods. These community health workers pass on the Healthy Harvest approach and skills to community-based Lead Mothers and Lead Farmers, who reach out to community garden groups, mothers and caregivers. To date, more than 2,100 people have benefited from our Healthy Harvest trainings.

## MALE CHAMPION ACTIVITIES

As part of the Amalima program, our teams conduct innovative interventions with male champions and peers in four districts to facilitate effective male engagement. Male champions are community-selected role models who lead and support groups of men in an effort to increase male involvement in infant and young child feeding and promote other positive behavior change to help reduce the workload of women, who are primary caregivers in the communities. To date, the program has engaged 400 male champions and 3,190 peers.



[www.InternationalMedicalCorps.org](http://www.InternationalMedicalCorps.org)

Since its inception 35 years ago, International Medical Corps' mission has been consistent: ease the suffering of those affected by war, natural disaster and disease by delivering vital healthcare services and focusing on training that provides the skills and tools required to foster self-reliance. This approach of helping people to help themselves is critical to returning devastated populations to self-reliance.

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