

**GOVERNMENT OF ZIMBABWE**

Ministry of Public Service Labour and Social Welfare

NATIONAL SOCIAL PROTECTION POLICY FRAMEWORK FOR ZIMBABWE

**2016**

# FOREWORD

Zimbabwe has a rich social protection tradition and a range of social protection instruments are being implemented in under each of the social protection pillars. These include cash and in-kind transfers, public works programs, health and education assistance, child protection services, Social insurance programs, and resilience and livelihoods rebuilding programmes. Despite these initiatives, Poverty and vulnerability continues to be major challenges confronting Zimbabwe. In 2011, about 72.3 percent of the population was poor and living below the Total Consumption Poverty Line (TCPL) while 22.5 percent were extremely poor, living below the Food Poverty Line (FPL).

The National Social Protection Policy Framework will mitigate the weaknesses inherent in the country’s social protection system including fragmentation and duplication, and enhance predictability, consistence, transparency and accountability of the social protection system. Overall, the Policy framework aims at reducing extreme poverty through empowering and building resilience in poor, vulnerable and disadvantaged households.

This policy framework is designed within the framework of the Zimbabwe Agenda for Sustainable Socio-Economic Transformation (ZIMASSET) and recognizes Zimbabwe’s commitment towards poverty eradication as enshrined in the Constitution of Zimbabwe, the sustainable Development Goals and other international declarations which identify social protection as a basic human right.

The implementation of this Policy framework will require our collective effort especially in resource mobilization as the programmes requires significant financial outlays. Zimbabwe will continue to prioritize social protection financing in its annual budgets and I call upon all stakeholders to partner Government in the design and implementation of related programmes as enshrined in this policy framework.

Let me express my profound gratitude to all who have participated in drafting this policy framework.

Hon. Prisca Mupfumira (MP.)

**MINISTER OF PUBLIC SERVICE, LABOUR AND SOCIAL WELFARE**

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**LIST OF ABBREVIATIONS**

|  |  |
| --- | --- |
| AIDS | Acquired Immune Deficiency Syndrome |
| AMTO | Assisted Medical Treatment Orders |
| BEAM | Basic Education Assistance Module |
| CEDC | Children in Especially Difficult Circumstances |
| CPC | Child Protection Committee |
| CSFP | Child Supplementary Feeding Programme |
| DA | District Administrator |
| DSS | Department of Social Services |
| DFID | Department of International Development |
| FAO | Food & Agriculture Organisation |
| FDI | Foreign Direct Investment |
| FPL | Food Poverty Line |
| GDP | Gross Domestic Product |
| HSCT | Harmonised Social Cash Transfer Programme  |
| HIV | Human Immune Virus |
| IES | Institute of Environmental Studies |
| ILO | International Labour Organisation/Office |
| ICSP | Inter-ministerial Committee on Social Protection |
| LAPF | Local Authorities Pension Fund |
| MDGs | Millennium Development Goals |
| MoHCC | Ministry of Health & Child Care |
| MoAMID | Ministry of Agriculture Mechanisation & Irrigation Development |
| MoFED | Ministry of Finance and Economic Development |
| MoLGPWNH | Ministry of Local Government Public Works and National Housing |
| MoRDPPNCH | Ministry of Rural Development, Promotion and Preservation of National Culture and Heritage  |
| MoPSE | Ministry of Primary and Secondary Education |
| MoPSLSW | Ministry of Public Service, Labour and Social Welfare |
| MoSMECD | Ministry of Small and Medium Enterprises and Cooperative Development |
| MoWAGCD | Ministry of Women Affairs Gender and Community Development |
| MoWVCPDR | Ministry of Welfare Services for War Veterans, War Collaborators, Political Detainees and Restrictees |
| MoYIEE | Ministry of Youth, Indigenization and Economic Empowerment  |
| MoSLPAEVT | Ministry of State for Liaising on Psychomotor Activities in Education and Vocational Training |
| NAP for OVC | National Action Plan for Orphans and Vulnerable Children |
| NER | Net Enrolment Rate |
| NANGO | National Association for Non-Governmental Organisations |
| NASCOH | National Association of Societies for the Care of the Handicapped |
| NGO | Non-Governmental Organisation |
| NPF | National Pension Fund |
| NSCST | National Steering Committee on Social Transfers |
| NSPSC | National Social Protection Steering Committee |
| NSSA | National Social Security Authority |
| OECD | Organisation for Economic Cooperation and Development |
| OVC | Orphans and Vulnerable Children |
| PASS | Poverty Assessment Study Survey |
| PCWPF | Productive Community Works Policy Framework |
| PFMS | Public Financial Management System |
| PLHA | People Living with HIV and AIDS |
| PMT | Proxy Means Test |
| PSPF | Public Service Pension Fund |
| PWD | People with Disabilities |
| PWP | Public Works Programme |
| SEDCO | Small Enterprises Development Company |
| ST | Social Transfers |
| STMIS | Social Transfers Management Information System |
| STPF | Social Transfer Policy Framework |
| TCPL | Total Consumption Poverty Line |
| UNAIDS | Joint United Nations Programme on HIV/AIDS |
| UNGASS | United Nations General Assembly Special Session |
| UNICEF | United Nations Children’s Fund |
| USAID | United States Agency for International Development |
| WFP | World Food Programme |
| WHO | World Health Organisation |
| ZDHS | Zimbabwe Demographic Health Survey |
| ZIMSTAT | Zimbabwe Statistics Agency |

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**EXECUTIVE SUMMARY**

**Introduction**

Effective social protection structures, policies, systems and programmes can play a major role in reducing poverty and vulnerability, redressing inequality, promoting inclusive growth and development of human capital (ILO, 2014).This National Social Protection Policy Framework for Zimbabwe(NSPPF) is designed to give effect to the values, principles, policies and priorities articulated in the country’s economic blueprint Zim-Asset.

**Synopsis**

This Policy Framework is divided into six major sections. Chapter one provides brief descriptions of (i) the socio-economic situation in Zimbabwe, (ii) approaches to social protection, (iii) the four key pillars of social protection and (iv) the methodology that was used to develop the policy. Chapter 2 focuses on “policy direction”. In this chapter, the purpose and justification for the development of this policy is articulated, after which the vision, mission, guiding principles and key elements of the policy are outlined. In Chapter 3, the proposed policy measures are presented under each of the four pillars of social protection, namely; social assistance, social insurance, labour market interventions and programmes aimed at supporting livelihoods and building resilience. The policy options provided in this chapter are the ones that were considered to be critical at the time of developing this policy framework. As is usually the case, from time to time, there will be a need to revise them to suit the socio-economic conditions prevailing in Zimbabwe at any given point in time as determined by those involved. The institutional arrangements for effective implementation of the policy measures are suggested in Chapter 4. The modalities for financing the various programmes which will be implemented as part of this National Social Protection Framework for Zimbabwe are described in Chapter 5. The proposed monitoring and evaluation processes are described in Chapter 6.

**Key Policy Measures**

**Social Assistance**

It is proposed that all the 500 000 households which are deemed to be below the Food Poverty Line be considered as eligible for all forms of social assistance, at least in the short to medium term. In the long term, all the 900,000 households should be targeted as the country moves towards universalization of social assistance to all deserving households.

The overall goal of social assistance will be **to reduce poverty, vulnerability and inequality and enhance access to basic social services**. The key policy measures with respect to social assistance are presented in table S1 below.

Table S1: Key Policy Measures with Respect to Social Assistance

|  |
| --- |
|  |
| Education |   |
| *Objective* | To enable children and students from poor and vulnerable households to access education.  |
| *Target*  | Children from poor and vulnerable households, many of whom have orphans and other vulnerable children therein. |
| *Policy Options* | * Extend exemptions and fee waivers to **all** primary and secondary school children identified as coming from poor households.
* Provide grants and/or loans to **all** students in tertiary institutions who come from poor households.
* Strengthen measures that serve to prevent child labour.
 |
| *Expected Outcome/s* | * Improved enrolment and completion rates.
* Targeted children break out of the cycle of poverty and are able to participate meaningfully in economic activities to support themselves and their families.
 |
| Health |   |
| *Objective* |  To ensure access to quality health care services by **all** members of poor and vulnerable households. |
| *Target Group or Groups* |  Elderly persons, persons with disabilities, children as well as other adult members of poor and vulnerable households. |
| *Policy Options* | * Provide free access to health services (consultation and medication) for all poor and vulnerable citizens including elderly persons, people with disabilities, children and adults from poor and vulnerable households.
* Scale-up efforts to prevent HIV and AIDS and enhance access to ARVs.
* Provide adequate funding to health facilities that provide health care to the poor and vulnerable groups.
* Provide and ensure access to feeding programmes for all children from poor households in schools and pre-schools.
 |
| *Expected Outcomes* | * The poor and vulnerable groups will have improved access to health care services.
* Improved nutritional status of children.
 |
| Poverty Alleviation |   |
| *Objective* | To reduce poverty and enable poor households to meet their basic needs. |
| *Target Group or Groups* | * Households below the poverty line, elderly persons, persons with disabilities, OVCs and the poor.
 |
| *Policy Options* | * Introduce social pensions for elderly persons, and persons with disabilities.
* Provide Cash Transfers to poor and vulnerable households, especially those which are labour constrained and those in which there are children and people with disabilities.
* Scale-up the public works programme in order to create opportunities for earning income.
* Establish a holistic response mechanism for households and communities in case of emergencies (e.g. floods, epidemics, .droughts).
 |
| *Expected Outcomes* | Reduction in the levels of poverty and vulnerability in Zimbabwe. |
| Food Security and Nutrition |  |
| *Objective* | * To ensure food security and improve nutrition for all vulnerable people in Zimbabwe.
 |
| *Target Groups or Groups* | * Children, pregnant women and lactating mothers, and other vulnerable groups (e.g. the elderly).
 |
| *Policy Options* | * Strengthen school feeding programmes.
* Ensure households have adequate food.
* Provide public education on nutrition and promote dietary diversity.
* Support the implementation of the National Food and Nutrition Security Policy.
 |
| *Expected Outcomes* | * Improved household food security and nutrition.
 |

**Social Insurance**

Zimbabwe does not, at present, have a comprehensive social insurance scheme. Also, the vast majority of Zimbabweans are working in the informal economy. This component of the policy framework seeks to put in place the necessary measures to ensure that those who are employed in the informal economy can benefit from social security. Workers working in the informal economy are largely not covered by social insurance. Other issues, which the country continues to grapple with include the limited range of social insurance benefits provided, and the lack of portability of social security benefits.

There is thus a need to introduce a comprehensive system of social insurance that progressively covers all the nine classical risks as stipulated by ILO Convention 102 and also extending coverage to workers operating in the informal economy. The proposed policy measures with respect to social insurance are summarized in table S2 below.

Table s2: Key Policy Measures with Respect To Social Insurance

|  |  |
| --- | --- |
|  |   |
| *Objective* |  To protect workers and their dependents against loss of income as a result of exposure to risks. |
| *Target Group or Groups* |  Workers in formal and informal employment. |
| *Policy Options* | * Extend coverage of social insurance schemes to all workers in formal or informal employment and their dependents, whilst being alert to the need for equal treatment between females and males.
* Expand the range of social insurance benefits, prioritizing medical care, and maternity and paternity benefits.
* Promote occupational pensions and private insurance as a voluntary pillar of social security in order to enhance the level of social protection.
* Develop mechanisms for preservation and portability of social security benefits.
* Strengthen mechanisms for the rehabilitation and re-integration of workers who lose their jobs or are injured at work.
* Support periodic actuarial evaluation of social security schemes in order to ensure the adequacy and sustainability of social security benefits.
* Strengthen the mechanisms for enforcement of compliance, and regulation and supervision of social security schemes.
* Strengthen informal social security schemes and where possible, promote linkages with formal social security schemes.
* Ensure that non-citizens with work permits participate in social insurance schemes.
* Participate in bilateral and multi-lateral agreements to facilitate portability of social security benefits.
* Ensure that **occupational pensions are**  portable and transferable in order to enhance income security.
* Promote ratification of key international social security instruments.
 |
| *Expected Outcomes* | * Zimbabwe will have a comprehensive social insurance system.
* Improved income security for workers and their dependents.
* Improved access to medical care.
* Improved access to pre-natal and post-natal care.
 |

**Labour Market Interventions**

Unemployment and underemployment are major problems undermining income security in Zimbabwe. Addressing these problems will help to enhance social protection. The following table (S3) shows policy measures with respect to labour market interventions.

Table S3: Key Policy Measures with Respect To Labour Market Interventions

|  |
| --- |
| Overall goal: To reduce unemployment and enhance job and income security |
|  |   |
| *Objective* | To create employment opportunities and enhance employability. |
| *Target Group or Groups* | * Unemployed and underemployed persons;
* School leavers.
 |
| *Policy Options* | * Ensure that employers pay living wages to enable workers to meet their basic needs.
* Support women’s entry into the labour market and create a supportive workplace culture that promotes inclusivity.
* Expand coverage of the Productive Community Works Programme and promote synergies with other programmes that promote employment creation and skills training.
* Strengthen skills training and entrepreneurial development programmes to enhance job creation and ensure that training is aligned to the needs of the labour market.
* Create partnerships between the state and non-state actors to strengthen job placement service programmes.
* Scale-up the use of micro-finance to promote small businesses and create synergies between different programmes providing micro-finance with a view to enhancing the impact of the programmes.
* Improve the scope of rehabilitation programmes in order to facilitate re-integration in society.
* Expedite labour law reforms to ensure that laws are responsive to labour market realities.
* Promote the transition of the informal economy to formality.
 |
| *Expected Outcome/s* | * Increased employment opportunities.
* Enhanced job and income security.
 |

**Livelihoods Support Strategies**

Zimbabwe’s socio-economic blueprint, Zim-Asset, has provision for supporting the poor to develop capabilities and build assets to manage risks. Thus, the country’s social protection system, will seek to build the capacity of poor and vulnerable households so as to be able to manage stress and shocks, create sustainable livelihoods and build resilience. This will be achieved through interventions such as providing micro-finance, micro-credit, productive public works programmes and skills training that will enhance the income earning opportunities for the poor and vulnerable households, help them build their assets and enable them to access resources and develop capabilities that will enable them to attain sustainable livelihoods and build resilience. Table S4 below shows the proposed policy measures with respect to livelihoods support and building resilience.

Table S4: Key Policy Measures with Respect to Livelihoods Support

|  |
| --- |
| Overall goal: To reduce poverty and vulnerability and build the capabilities of the poor to manage risks |
|  |   |
| *Objective* |  To create adequate and sustainable livelihoods. |
| *Target Group or Groups* | * Poor and vulnerable groups.
 |
| *Policy Options* | * Enhance income–earning opportunities for the poor and vulnerable groups.
* Build the capacity of the poor and vulnerable groups to become self –reliant and resilient,
* Provide services that support asset development or re-building of assets.
* Scale-up the provision of micro-finance and other sources of credit to poor and vulnerable households to enhance their productive capacity.
* Strengthen mechanisms for enhancing national food security.
* Provide holistic support to communities in case of emergencies to enable them to meet their basic needs.
* Conduct regular national vulnerability assessments in order to facilitate proactive interventions.
* Strengthen disaster reduction, management and recovery.
* Support efforts to reduce environmental degradation.
 |
| *Expected Outcomes* | * Creation of adequate and sustainable livelihoods.
* Resilient households and communities.
 |

**Social Support and Care**

Zimbabwe has a long history of providing social welfare services designed to address social ills in society. Traditionally, the extended family system was responsible for providing social support and care to its members. However, the processes of urbanization, industrialization and globalization have gradually weakened the cohesiveness of the extended family system, thereby undermining its capacity to provide social support and care to its members. This void is increasingly being filled by the state and non-state actors but they are constrained by lack of adequate resources to provide meaningful social support and care. The current economic challenges the country is facing are seriously undermining the provision of social support and care as evidenced by declining budgetary support for social welfare services. The economic challenges have also been responsible for the exodus of experienced social workers to other countries and this has compromised service delivery. The reach of social welfare services remains low and the services provided are rudimentary and not easily accessible to the rural population. Table S5 below shows the policy measures with respect to social support and care.

TABLE S5: KEY POLICY MEASURES WITH RESPECT TO SOCIAL SUPPORT AND CARE

|  |
| --- |
| Overall goal: To promote adequate social functioning of individuals, families and communities. |
|  |   |
| *Objective* | To provide protective and developmental social welfare services. |
| *Target Group or Groups* | Persons with disabilities, elderly persons, orphans and vulnerable children. |
| *Policy Options* | * Provide social support and care to members of society unable to help themselves, particularly orphans and vulnerable children, persons with disabilities and elderly persons;
* Provide social support to persons infected and affected by HIV and AIDS;
* Strengthen the capacity of the family to provide social support and care to its members;
* Protect the rights of vulnerable groups;
* Promote the utilization of traditional support systems;
* Strengthen the capacity of social workers, and other social service professionals to provide social support and care;
* Support institutions or organizations that provide social support and care;
* Promote community-based care for children, elderly persons and persons with disabilities;
* Provide interventions that enhance problem-solving, rehabilitation, social integration, social justice and human well-being.
 |
| *Expected Outcomes* | * Improved human well-being.
 |

**Key Partners**

This policy framework is underpinned by a recognition that successful implementation of the proposed policy measures requires that a number of government ministries and their respective departments work together with development partners, NGOs and community-based organizations. The proposed institutional arrangements for making this a reality are described in detail in chapter 4 of this document. A brief outline of the institutional framework and structures is presented in the next section of this executive summary.

**Institutional Framework and Structures**

This NSPPF is anchored on a social protection system whose interventions are harmonized, coherent and well- coordinated. The policy framework utilizes a systems approach in which synergies are formed and appropriate structures are created and strengthened. Government’s aim is to constitute appropriate structures for effective coordination and harmonization under the Social Services and Poverty Eradication Cluster. The structures of the Social Services and Poverty Eradication Cluster instituted under the Zim-Asset will be adopted. The Social Services and Poverty Eradication Cluster (SSPEC) will have overall responsibility for the management, development and implementation of the NSPPF with the MPSLSW being the lead Ministry and the secretariat of the cluster. There shall be a National Social Protection Steering Committee (NSPSC) to monitor the implementation of the National Social Protection Policy and develop mechanisms for the integration of social protection programmes at national level. It will also be responsible for developing coordination and implementation guidelines. The NSPSC will report to the SSPRC through the Cluster Secretariat. It will have four Technical Working Groups (TWGs) at national level representing each of the pillars of the social protection system.

**Monitoring & Evaluation**

Monitoring & evaluation (M&E) is useful for strengthening the quality of the programmes and interventions which leads to improved outcomes for the beneficiaries. It also provides evidence needed to review both the design and implementation of policies and programmes. Thus, the successful implementation of this policy will be largely dependent on there being a robust M&E framework. The M & E process will be linked to the already existing, national Results Based Management Monitoring and Evaluation System administered from the Office of the President (OPC). NSPSC will encourage the use of participatory methods in the evaluation of interventions.

**Financing Social Protection in Zimbabwe**

Section 30 of the Constitution of Zimbabwe states that “…the state must take all practical measures within the limits of the resources available to it, to provide social security and social care to those who are in need”. Thus, funding of social protection shall be a responsibility of the state. However, because of limited resources, the government shall mobilize additional resources from other sources (e.g. development partners, private sector, civil society organizations, NGOs etc) in order to ensure that the funding is adequate, consistent, predictable and sustainable.

**CHAPTER 1: INTRODUCTION**

**1.1 Background**

This National Social Protection Policy Framework for Zimbabwe was developed at a time when a “*Strategic Framework for Building Resiliencein Zimbabwe*” was being finalized. The two “frameworks” are complementary. Both are designed to give effect to the values, principles, policies and priorities articulated in the country’s economic blueprint called: the “**Zimbabwe Agenda for Sustainable Socio-Economic Transformation”(Zim-Asset)2013-2018**.

As part of developing the **Strategic Framework for Building Resilience** in Zimbabwe, wide consultations which brought together government departments and ministries, UN agencies, NGOs/CSOs, academics and donors led to the adoption of the following working definition of resilience:

*“The ability of at risk individuals, households, communities and systems to anticipate, cushion, adapt, bounce back better and move on from the effects of shocks and hazards in a manner that protects livelihoods and recovery gains, and supports sustainable transformation.”*

The “ability” referred to in the definition above can only be created if all stakeholders and beneficiaries work collaboratively within the context of a clearly defined National Social Protection Policy Framework. Such a framework ought to contain shared definitions of constructs, theories of change, approaches, methodologies, assumptions, and indeed similar (or at least comparable) monitoring and evaluation systems, processes and procedures. Thus, in this National Social Protection Policy Framework, building resilience is a cross-cutting theme that is seen as vital to social development across a number of focus areas.

The operational definition of “social protection” adopted for this Social Protection Policy Framework is based on the *Zimbabwe Economic Development Strategy* (ZEDS, 2007)[[1]](#footnote-1) in which “***social protection*** “is defined as **“…*a set of interventions whose objective is to reduce social and economic risk and vulnerability and alleviate poverty and deprivation”.*** The latter definition goes beyond poverty alleviation and encompasses issues related to social and economic growth that are addressed through interventions that are protective, preventive, promotive and transformative. This includes programmes that provide social insurance, social assistance, labour market interventions as well as livelihood support and resilience building interventions. Strong social protection policies and effective social protection systems are key to reducing poverty and vulnerability, development of human capital, redressing inequality and promoting inclusive growth (ILO, 2014). Social protection is critical for the social and economic development of a country. A lack of social protection is often associated with high levels of poverty and economic insecurity, especially for vulnerable members of society. However, for social protection to be effective, the interventions should conform to the key attributes of predictability, consistency and transparency in content, quality and durability (Gandure, 2009).

Zimbabwe is a signatory to a number of international and regional conventions, covenants and declarations which refer to various aspects of social protection, although it is still to ratify some of the conventions. None the less Zimbabwe’s social policies and social legislation are informed by these instruments. Internationally, these include the *Universal Declaration of Human Rights of 1948*, the *International Covenant on Economic, Social and Cultural Rights of 1966*, , the *UN Convention on the Rights of the Child* (1990), the *UN Convention on the Elimination of all Forms of Discrimination against Women* (1979), and the *UN Convention on the Rights of Persons with Disabilities* (2006). The *World Summit for Social Development* held in Copenhagen in 1995 also committed governments to ensure that all people receive social and economic protection through the development and implementation of effective policies in the areas of employment, health, maternity, child rearing, disability, old age and widowhood. The *Millennium Development Goals of 2000* also had enshrined in them provisions for social protection. Regionally, the *Charter of the Fundamental Social Rights in SADC (2003)* seeks to promote in member states the right to social protection. Similarly, Zimbabwe is also bound by provisions of the *African Charter on Human and People’s Rights (1981)* and the *African Charter on the Rights and Welfare of the Child (1990)*.

Zimbabwe recognizes and upholds the need to provide social protection to its citizens as evidenced in  **Section30** of its constitution which states that**”… *the state must take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need”* [p.23**]*.* The Constitution of Zimbabwe (2013) also includes an inclusive *Bill of Rights* that underscores the provision of social protection (Sections 80 to 84). The Constitution further puts emphasis on equality of opportunities and non-discrimination as well as empowerment and employment creation with special focus on children (including orphans and vulnerable children), the elderly, people with disabilities, women and the youth.

In addition, there are specific Acts that form the basis for the provision of social protection in Zimbabwe. These include:

* Social Welfare Assistance Act (Chapter 17:06)
* Disabled Persons Act (Chapter 17:01)
* Private Voluntary Organizations Act (Chapter 17:05)
* Refugees Act (Chapter 4:03)
* National Heroes Dependents Act (Chapter 10:06)
* Older Persons Act (17:11), and
* The NSSA Act 17: 04 of 1989

Acts that specifically focus on the protection of children include:

* Children’s Act
* Guardianship of Minors Act (Chapter 5:08)
* Child Abduction Act
* Social Welfare Assistance Act (Chapter 17:06)
* Maintenance Act (Chapter 5:09)
* Education Act
* Criminal Law Codification and Reform Act (Chapter 9:23)
* The Birth and Death Registration Act (Chapter 5:02);
* The Child Abduction Act (Chapter 5:05)
* The Customary Marriages Act (Chapter 5:07);
* The Marriage Act (Chapter 5:11);
* The Matrimonial Causes Act (Chapter 5:13);
* The Domestic Violence Act (Chapter 5: 16);
* The Deceased Estates Succession Act (Chapter 6:02);
* The Customary Law and Local Courts Act (Chapter 7:05);
* The Magistrates Court Act (Chapter 7:10);

In addition to the above statutes, in 2013, Zimbabwe produced its economic recovery blue-print, the Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim-Asset). In the **Zim-Asset** document**, social protection** is highlighted as one of the key components. Indeed, out of the four strategic clusters in Zim-Asset, two focus on (i) Food Security and Nutrition and (ii) Social Services and Poverty Eradication.

Thus, there is no doubt that the Government of Zimbabwe has explicitly expressed its commitment to “…*achieve sustainable development and social equity anchored on indigenization, empowerment and employment creation which will be largely propelled by the judicious exploitation of the country’s abundant human and natural resources*”, as stated in the Foreword by His Excellency, President Robert Gabriel Mugabe. This commitment at the highest level of government, is indicative of an unwavering political will to uplift the lives of Zimbabweans, despite the economic challenges which are acknowledged in the country’s economic blueprint for the period 2013-2018.

Appendix A shows a summary of who is currently doing what with respect to social protection in Zimbabwe, based on a review of available literature.

**1.2 Structure of the National Social Protection Policy Framework**

This Policy Framework has been divided into six major sections or chapters. The rest of this chapter is devoted to a brief discussion of the socio-economic context of Zimbabwe, approaches to social protection and the four key pillars of social protection. The chapter ends with a description of the methodology that was used to obtain, analyze and synthesize the information gathered during the consultative process which led to the development of the Policy Framework itself. Chapter 2 focuses on “policy direction”. It is in this chapter that the purpose and justification for the development of a National Social Protection Policy Framework for Zimbabwe is articulated, after which the vision, mission, guiding principles and key elements of the policy are presented. It must be pointed out that this component of the policy framework was written based on extensive deliberations by multi-stakeholder participants who attended the National Consultative Workshop in Gweru from the 3rd to the 7th November 2014. In Chapter 3, the proposed policy measures are presented under each of the four pillars of social protection, namely, social assistance and social care, social insurance, labour market interventions and programmes aimed at supporting livelihoods and resilience. The policy options provided in this chapter are the ones that were considered to be critical at the time of developing this policy framework. As is usually the case, from time to time, there will be a need to revise them to suit the socio-economic conditions prevailing in Zimbabwe at any given point in time as determined by those involved. The institutional framework developed and included in chapter 4 as well as the monitoring and evaluation processes proposed in chapter 6 will provide the necessary information for any such reviews. Chapter 5 focuses on modalities for financing various programmes which will be implemented as part of this National Social Protection Policy Framework for Zimbabwe.

It must be pointed out that because this is not a Strategic Plan nor is it a Programme document, there is no implementation plan included as part of this document. There was consensus among workshop delegates that a Policy Framework of this nature should be a guiding document for a very long time in the development of programmes and interventions designed to address broad goals and objectives and, as such, could not be limited to a specific timeframe. Nevertheless, where appropriate, policy options for adoption in the short to medium term as well as those to be adopted in the long term are highlighted at relevant points in chapters 3, 4, 5 and 6.

**1.3 Socio-Economic context of Zimbabwe**

The provision of social protection services in Zimbabwe has been impacted negatively by the weak performance of the economy that has been persistent for more than a decade. This has resulted in social protection covering a small percentage of the population (ILO, 2012). In 2008 formal employment accounted for 38.2 percent of total employment with 69.1percent being in vulnerable employment (UNDP Human Development Report, 2010). Chikova (2013) points out that almost 5.5 million of the employed population is aged 15 years and above with 84 percent of them being employed in the informal economy and that social security schemes covered less than 20 percent of the population. This implies that the majority of employed workers and disadvantaged groups are typically excluded from formal social protection systems. Also, Zimbabwe has experienced a number of unprecedented economic, environmental and political shocks and stresses. A sharp drop in Gross Domestic Product (GDP), hyper-inflation, de-industrialization, closure of industries, large scale lay-off of employees, and disruption of public service delivery, coupled with recurrent drought, floods and poor harvests, have contributed to chronic food shortages. Poverty, food insecurity, malnutrition, and environmental degradation are serious challenges in Zimbabwe, particularly in rural areas. Climate change has exacerbated the situation for families and heightened overall community vulnerability, and is predicted to have continuing and primarily negative effects throughout Zimbabwe.[[2]](#footnote-2) Over the last 10 years, food insecurity in Zimbabwe has ranged from 12percent to 60 percent, with tremendous year-to-year variation.

Social protection systems are generally underfinanced (BMZ, 2010). In Zimbabwe, financing of social protection programmes has been affected by the poor performance of the economy. The expenditure for social assistance measures in Zimbabwe accounted for 1.3 percent of GDP in 2012 with 1.1 percent spent on safety net programmes and 0.2 percent spent on labour market programmes. Contributory pensions accounted for an estimated 5.4 percent of GDP during the same period. Donors contributed 82 percent towards safety net measures (World Bank Social Protection Policy Note, 2014).

Poverty has been one of the major challenges confronting the government of Zimbabwe. In 2011, about 72.3 percent of the population is poor and living below the Total Consumption Poverty Line (TCPL) while 22.5 percent were extremely poor, living below the Food Poverty Line (FPL) (Zimbabwe Millennium Development Goals Progress Report, 2012; World Bank Social Protection Policy Note, 2014). In addition, 63 percent of households were poor and were living below the TCPL. Four hundred thousand of these households were labour constrained. Another 16 percent of the households were living below the FPL with 200 000 of these also being labour constrained (Zimbabwe Millennium Development Goals Progress Report, 2012). The labour constrained households living below the TCPL and FPL have a high dependency ratio and generally find it difficult to meet their basic needs.

Poverty is deemed to be more prevalent and more severe in rural areas than in urban areas with an individual poverty prevalence rate of 84.3 percent and 46.5 percent respectively. Very few people (5.6 percent) in urban areas are extremely poor compared to 30.3 percent in the rural areas (World Bank Social Protection Policy Note, 2014; ZIMSTAT, 2013). Slightly over 76 percent of rural households are poor, compared to 38.2 percent in the urban areas. However, while the aggregate figures show that poverty is more prevalent and more severe in rural areas, evidence shows that the number of poor households in the urban areas is on the rise particularly in high density suburban areas (Institute of Environmental Studies (IES) and UNICEF, 2013).

The contributory factors to rural poverty are believed to be, among others, lack of or few employment opportunities, climate change, unpredictable agricultural seasons, lack of or low levels of education (ZIMSTAT, 2013; Zimbabwe Millennium Development Goals Progress Report, 2012) while the contributory factors to urban poverty are ‘large family sizes, low educational level of household head, lack of income from permanent employment, short length of residence in the suburb, and social fragmentation’ (IES, 2013). Also, other contributory factors may include vulnerability, high emigration and the continued rise in the number of elderly and child-headed families. The prevalence of poverty did not differ significantly between male and female headed households with 62.9 percent and 62 percent of the male and female headed households respectively found to be poor. However, there was a marked difference between widowed female headed households and widowed male headed households with prevalence rates of 69 percent and 55 percent respectively (Zimbabwe Millennium Development Goals Progress Report, 2012). In addition, households with older people as heads tend to be poorer (ZIMSTAT, 2013).

Unemployment and poor remuneration also contribute to poverty and vulnerability in Zimbabwe. Unemployment has been on the rise due to the macro-economic situation that has been unstable for more than a decade. In 2011, urban unemployment was at 10.7 percent (6.6 percent for males and 14.5 percent for females) compared to 3.5 percent (2 percent for males and 4.7 percent for females) in rural areas. This is based on “the broad definition of unemployment that includes all persons who are out of work, whether or not they are actively looking for work” (World Bank Social Protection Policy Note, 2014). Urban unemployment can have ripple effects on rural households. It can affect the remittances to rural households making them vulnerable. These unemployment rates show that in both urban and rural areas, there are gender imbalances in unemployment with women in urban areas being affected the most. This renders women more vulnerable to poverty. In the absence of any form of social protection, this can result in women resorting to harmful means of survival (e.g. engaging in risky sexual behaviours) which can make them more vulnerable to HIV and AIDS.

The employment to population ratio stood at 78 percent in 2011. However, poor remuneration contributed to rendering individuals and households poor and vulnerable. In 2011 the income of 94 percent of the paid employees was equivalent to or below the TCPL. Of these, 58 percent received an income equivalent to or below the FPL and were, therefore, classified as very poor although they were employed (Labour Force Survey, 2011). This could be largely due to the fact that there is a general decrease in the number of people formally employed. Slightly over 73 percent of the employed persons were self-employed which is deemed as vulnerable employment because it has no social protection and has limited opportunities to make savings (Zimbabwe Millennium Development Goals Progress Report, 2012).

Food security challenges due to economic hardships and poor agriculture production attributed to climate change and erratic rainfall have contributed to increased poverty and vulnerability. The number of food insecure people in rural areas was estimated to be over 2 million in 2013[[3]](#footnote-3). This constitutes more than 16 percent of the country’s population and has negative implications for human capital development. Food insecurity can also result in malnutrition in children. This can lead to stunted growth. The prevalence of children with stunted growth increased from 28.9 percent in 2007 to 32 percent in 2011 (National Nutrition Surveillance Assessment, 2007; ZIMSTAT, 2011). Stunted growth can affect the participation of children in education which in turn will make them fail to realise their full potential, thus undermining human capital development.

HIV and AIDS also have serious implications for human capital development and renders households poor and vulnerable. For example, Senefeld and Polsky[[4]](#footnote-4) noted that in Zimbabwe, households that have a member living with HIV and/or AIDS have their livelihood security negatively affected when compared to non-affected households. Eight percent of households in Zimbabwe are recorded as having a chronically ill member, mainly due to HIV and AIDS (World Bank Social Protection Policy Note, 2014). A household member who is chronically ill can reduce the household income levels by as much as 30 to 35 percent, causing the households to be vulnerable (Barnett &Whiteside, in Gandure, 2009).

The traditional push and pull factors leading to emigration from Zimbabwe are complex and involve historical, social, economic, political and cultural factors. Yet, the declining economic and social conditions in Zimbabwe led to the increasing use of migration as a livelihood strategy for many families (Crush and Tevera, 2010). The effect of this substantial movement of individuals and their potential return has considerable relevance to social and economic development policy. The exodus has transformed traditional family structures and previous perceptions about who fulfills income-earning roles within households. The departure of thousands of Zimbabweans from all age groups and skill levels has also had a debilitating effect on the country’s economy, particularly in the private and public skilled sectors (Crush & Tevera, 2010).

Older persons are going through difficult and traumatic times due to the current economic recession the country is going through. The Older Persons Act provides for the care and support of elderly persons. However, the government is struggling to fulfill its obligations under the Older Persons Act because of resource constraints. The economic condition has also seen more people opting for greener pastures in the Diaspora especially in United Kingdom, South Africa, Botswana, Australia and many other countries. The young middle aged groups embarking in this search for greener pastures leave their children under the care of grandparents. As a result of the HIV and AIDS epidemic, many elderly persons have become the primary care givers of their grandchildren. Elderly people remain the poorest members of society with little or no income to meet their needs and the needs of children under their care. In their old age, when they may require support and expect to be looked after, they have to take on the role of caring for others, in most cases without even the basic necessary resources.

**1.4 The Impact of Macro Economic Trends in the Zimbabwean Context**

The provision of social protection services in Zimbabwe has been impacted negatively by the weak performance of the economy that has been persistent for more than a decade. This has resulted in social protection covering only a small percentage of the population (ILO, 2012). As an illustration, as of 2014 the Harmonized Social Cash Transfer Programme covers 55,059 poor and labour constrained households, only a third of those in need. Furthermore, social insurance coverage is linked to formal employment, yet 84 percent of the employed population was in informal employment in 2011, a percentage that has increased to 94 percent in 2014 (Zimstat, Labour Force Surveys 2011 and 2014). This implies that the majority of employed workers and their families, and disadvantaged groups are typically excluded from formal social protection systems.

Chronic food shortages caused by a sharp drop in Gross Domestic Product (GDP), hyper - inflation, de-industrialization, closure of industries, large – scale layoffs of employees, disruption of public service delivery have contributed to individuals and their families becoming poor and vulnerable. Poverty and vulnerability can also be attributed to climate change, drought, floods and poor harvests.

Social protection systems are generally underfinanced (BMZ, 2010). In Zimbabwe the poor performance of the economy has resulted in irregular and under financing of social protection programmes. This is mainly due to a slowing down in the GDP growth rate in 2013 and 2014. The GDP growth rate in 2011 and 2012 was above 10 percent but this dropped to 3.3 percent and 3.1 percent in 2013 and 2014 respectively. This has negative implications for the funding of social protection programmes. With forecasts estimating that the economic growth is not likely to be robust in the medium term and annual GDP growth is not likely to reach 5 percent between 2015 and 2019 (IMF, 2014) implications are that social protection can continue to be underfinanced.

Poverty has resulted in many households in Zimbabwe becoming vulnerable. The majority of the population (72.3 percent) are living below the TCPL with some living below the FPL (22.5 percent) and therefore deemed extremely poor. Most of these households are labour constrained (see figure 1) and find it difficult to meet their basic needs. They, therefore have a high dependency ratio with the vast majority being in the rural areas. However, although overall statistics suggest that poverty is more prevalent in the rural areas its negative impact is on the rise in urban areas particularly the high density suburban areas (see section 1.3).

The contributory factors to rural poverty are believed to be, among others, lack of or few employment opportunities, climate change, unpredictable agricultural seasons, lack of or low levels of education (ZIMSTAT, 2013; Zimbabwe Millennium Development Goals Progress Report, 2012) while the contributory factors to urban poverty are ‘large family sizes, low educational level of household head, lack of income from permanent employment, short length of residence in the suburb, and social fragmentation’ (IES, 2013). Also, other contributory factors may include vulnerability, high emigration and the continued rise in the number of elderly and child-headed families. The prevalence of poverty did not differ significantly between male and female headed households with 62.9 percent and 62 percent of the male and female headed households respectively found to be poor. However, there was a marked difference between widowed female headed households and widowed male headed households with prevalence rates of 69 percent and 55 percent respectively (Zimbabwe Millennium Development Goals Progress Report, 2012). In addition, households with older people as heads tend to be poorer (ZIMSTAT, 2013).

The macro – economic situation in Zimbabwe, which has been unstable for the past 10 years has resulted in poor remuneration for many paid employees and has led to households becoming poor and vulnerable. Ninety-four percent of the paid employees earn salaries equivalent to or below TCPL Fifty eight percent of these paid employees earn a salary equivalent o or below the FPL thus making them extremely poor despite earning a salary. The majority of these employed persons are in the informal economy with 73 percent being self – employed. This is considered as being vulnerable employment that has limited opportunities to make savings and no social protection (Zimbabwe Millennium Development Goals Report, 2012).

Increased poverty and vulnerability of households can also be attributed to food insecurity. Food insecurity emanates from economic challenges, climate change and erratic rainfall. More than 16 percent of the country’s population were estimated to be food insecure in 2013 (ZimVAC, in World Bank Social Protection Policy Note, 2014). Food insecurity can lead to malnutrition and stunted growth resulting in poor performance in school. This has negative implications for human capital development. The poor performance of the economy coupled with the effects of HIV and AIDS have given rise to an increasing number of older persons and children heading households. Invariably, most of these households are labour constrained and are amongst the poorest and most vulnerable in Zimbabwe.

**1.5 Ap**p**roaches to Social Protection**

Approaches to social protection should be designed to promote human well-being and to impact positively on people’s livelihoods. In order to meet this objective this policy will use different approaches. These include the following:

***1.5.1. Social Protection as a Human Right***

This approach to social protection is based on international conventions which state that people have rights and entitlements to social protection and the State has an obligation to provide minimum essential services that can ensure an adequate standard of living, through basic livelihoods support, access to health, shelter and housing and education services. The design of the policies, programmes, implementation strategies and monitoring and evaluation strategies will be founded on principles of non-discrimination, transparency, accountability and participation. This policy framework has in-built mechanisms to ensure that beneficiaries are aware of their rights and entitlements. This also implies that the funding for the policy must be sustainable, reliable and consistent to cater for core obligations and minimum standards expected as well as the specific requirements of vulnerable groups.

***1.5.2. Systems Approach to Social Protection***

The systems approach to social protection recognizes that poor and vulnerable individuals, households and communities are heterogeneous and therefore have diverse and multiple social and economic vulnerabilities which require different types of support. The policies and programmes are designed to tackle the multiple vulnerabilities. The programmes are harmonized and coherent with integrated linkages. The structures of the social protection system are instituted on clear institutional arrangements with clear roles and responsibilities which facilitate the building of synergies supported by robust accountability processes, a comprehensive and unified management information system, a unified registry of beneficiaries, common targeting processes and a robust monitoring and evaluation system. Thus, the systems approach facilitates a focus on vulnerabilities that are short term and long term ranging from temporary shocks to more structural vulnerabilities such as gender inequalities. The approach is, therefore developmental combining short term and longer term interventions that are complementary, promote equality and enable people to graduate from poverty and become self-reliant. The systems approach facilitates the harmonization and coordination of policies and programmes thereby doing away with the challenge of fragmentation and improving effectiveness and efficiency of social protection policies and programmes. It enables the poor to develop resilience, improves equity, increases coverage and promotes opportunity through development of skills, productivity as well as development and protection of human capital.

***1.5.3. Multi-Sectoral Approach to Social Protection***

The Multi-Sectoral approach involves a holistic approach to social protection. It identifies and exploits linkages between sectors. Thus, it denotes the inclusion of different sectors to provide social protection using a life cycle approach. For example, in Zim-Asset the Social Services and Poverty Eradication Cluster comprises different Ministries that provide social protection to the different groups of poor and vulnerable people with one Ministry taking a leading role. The approach occurs at the different levels which include national, provincial, district and ward levels. The service delivery is guided by clear guidelines and interrelated through the use of agreements signed by the sectors.

The Multi-Sectoral approach improves coordination and harmonization. It is cost effective, for example, through pooling together resources from different sectors within one administrative unit. The use of one registry office can reduce costs and create synergies that will improve the effectiveness and efficiency of policies and programmes. The multi-sectoral approach makes it possible to achieve comprehensiveness in provision of services and reduces the problem of double-dipping. It also enables the sectors to conduct joint monitoring and evaluation activities which can be cost effective.

**1.6 Pillars of Social Protection**

Globally, it is recognized that there are five main pillars of social protection. These are: (i) *social assistance*, (ii) *social insurance* and (iii) *labour market reforms*, (iv)various programmes aimed at *supporting livelihoods and resilience* at various levels (i.e. individual, family, community and society as a whole)and, (v)social support and care.

**Social assistance** is a non-contributory form of social security which is financed from government revenue and in some cases with support from non-state actors such as development partners, civil society organizations and the private sector. Because of limited resources, it is means-tested in order to ensure that the most deserving beneficiaries receive cash or in-kind benefits. The objective of social assistance is to reduce poverty, inequality and vulnerability. Thus, social assistance enables the poor and vulnerable members of society to meet their basic needs, including accessing basic social services such as health, education and welfare services and thereby enabling them to develop their capabilities and increase their social and economic participation. Social assistance is also an instrument for creating redistributive justice in society. Access to social assistance is a basic human right enshrined in international human rights instruments.

**Social insurance** is a contributory form of social security. Generally, the contributions come from both employees and their employers. Consequently, social insurance is oriented towards protecting workers in formal employment. Social insurance provides protection against involuntary loss of income due to exposure to risks. A comprehensive social insurance system provides a range of benefits, namely medical care, sickness benefit, invalidity benefit, unemployment benefit, old age benefit, employment injury benefit, family benefit, maternity benefit and survivors benefit. The objective of social insurance is to replace income in the event of involuntary loss of income. There is entitlement to benefits because of the contributory nature of social insurance. Social insurance prevents members and their dependents from sliding into poverty in the event of exposure to risks.

**Labour market interventions** are designed to address the problem of unemployment. The development of appropriate labour market policies and programmes helps to enhance income security. Labour market interventions encompass job creation, skills training and job placement services. Employment subsidies constitute an important part of labour market interventions and serve to encourage employers to employ unemployed persons so that they can gain work experience and enhance their skills.

**Livelihoods support strategies** underscore the developmental function of social protection. This developmental function suggests that social protection should go beyond poverty reduction by incorporating minimization of vulnerability and creating conditions that would enable the poor to become self-reliant and resilient. Livelihood support strategies, therefore are meant to enhance income-earning opportunities for the poor with the ultimate aim of reducing their dependence on the state. Livelihood support strategies enable the poor and vulnerable households to manage risks and in particular to develop capacity to withstand stress and shocks.

**Social support and care** focuses on the provision of social welfare services designed to enhance human social functioning. This is targeted at persons who lack the capacity to care for themselves or who are unable to solve their social problems without external social support. Major interventions include counselling, rehabilitation, foster care, residential care. Social support and care enables individuals and families to function adequately in society and to realise their potential.

**1.7 Development of the National Social Protection Policy Framework**

The development of this national social protection framework was informed by data collected through extensive review of existing documents on social protection (e.g. process and impact evaluation studies conducted across various sectors), interviews conducted with key informants and experts in the field, workshops[[5]](#footnote-5) with stakeholders, and reflections based on international best practices on social protection policies in Africa and the rest of the world. The entire process was underpinned by the need to develop a relevant social protection policy framework that is consistent with the prevailing conditions in Zimbabwe and its economic blueprint (Zim-Asset) while also incorporating “best practices” and lessons learnt in other countries in Southern Africa, the African continent and the rest of the world.

**CHAPTER 2: POLICY DIRECTION**

**2.1 Purpose of and Justification**

While Zimbabwe has had various social protection programmes since independence in 1980, it does not currently have a comprehensive national social protection policy framework. Because of this, there are serious challenges being experienced in the provision of social protection services in Zimbabwe and these have been documented in existing literature (e.g. Chikova, 2013; Gandure, 2009) and reiterated in the World Bank Social Protection Policy Note (2014). The absence of a guiding framework for the provision of social protection has largely been responsible for the weaknesses inherent in the country’s social protection system. There are a number of weaknesses that have been identified.

These include the following:

* Fragmented application of the instruments without a proper guiding structure;
* Inadequacy and exclusionary nature of available services;
* Lack of predictability, consistency, transparency and durability in most of the schemes;
* Lack of proper centralized coordination leading to incoherent and sectoralisation of social protection under various ministries such as Ministry of Public Service Labour and Social Welfare, Ministry of Primary and Secondary Education, Ministry of Health and Child Care which often creates bureaucratic, complex situations;
* Lack of mutually supportive and clear policy objectives leading to disjointed approaches;
* Lack of awareness by people of what services they can access, their rights and entitlements;
* Weak monitoring and evaluation systems;
* Poor or no MIS;
* Existence of various pieces of Zimbabwean laws and policy statements that may not be mutually supportive of each other.

In view of the weaknesses highlighted above, there is need for an overarching social protection policy that can provide a guiding framework for social protection in the country. The need for a coherent social policy framework has become more pronounced in recent years given the high poverty levels in the country which are being fueled by rising unemployment and underemployment, and growing informalization of the economy. It is envisaged that this social protection policy will mitigate the problems of fragmentation and duplication. Moreover, this social protection policy is designed to enhance predictability, consistence, transparency and accountability.

**2.2 Vision**

“A Zimbabwe where everyone enjoys an improved quality of life”.

**2.3 Mission**

To reduce extreme poverty through empowering and building resilience in poor, vulnerable and disadvantaged households.

**2.4 Goals of the National Social Protection Policy Framework**

* To support the poor in developing skills that would enable them to become employable and self-reliant.
* To enhance equitable access to basic social services.
* To improve the provision of social welfare assistance to the poor and vulnerable.
* To enhance the protection of workers and their dependents against risks that threaten income insecurity.
* To create conditions that promote equity, opportunity and build resilience, self-esteem and empowerment.

**2.5 Guiding Principles of the National Social Protection Policy Framework**

***2.5.1. Good Governance***

Social protection will be built on the principles of good governance that include inclusivity, effective participation, respect for human rights, transparency, accountability, efficient and effective management systems and processes, responsiveness, equity and equality of opportunity. Related aspects of the National Corporate Governance Framework provided for in Zim-Asset will be used to inform aspects of good governance in the social protection system, policies and programmes.

***2.5.2. Leadership***

This policy framework seeks to ensure that government plays a central role in the provision of social protection through, among other things, the delivery of basic social protection services as well as administration and regulation of the programmes and relevant institutions. The responsibility for producing appropriate fiscal and budgetary policies to generate adequate domestic funds for social protection will also lie with the government.

***2.5.3. Commitment***

The Zim-Asset economic blueprint alludes to a ‘People Centered Government’ that seeks to promote equitable development and prosperity for all. Thus, the government is committed to the provision of social protection in order to achieve economic growth and improve the well-being of all its citizens.

***2.5.4. Equity and Social Justice***

The government recognizes that people in different situations and circumstances require appropriate forms of support and resources to meet their needs and realize their rights. Thus, social protection will address the underlying disparities and challenges within households and communities and promote equality of opportunity. Special attention will be paid to vulnerable groups that include women, children affected by HIV and AIDS, people with disabilities, the elderly, people living with chronic illness (including those afflicted by HIV and AIDS), andinformal economy workers to protect them against income insecurity and social exclusion. Thus, the social protection programmes will be based on the principles of non-discrimination and inclusivity.

***2.5.5. Transparency***

The social protection system, policies and practices and decision making processes will be implemented in a transparent manner such that people will know the services that they can access as well as their legal rights and entitlements. Essential information will be accessible to all people including the poor and marginalized.

***2.5.6. Opportunity***

The social protection system, policies and programmes will focus on improving access to social services that promote better health, nutrition, education, development of skills and access to productive work in order to create opportunity for people to be meaningfully productive, develop human capital and address all forms of inequalities.

***2.5.7. Predictability, Consistency and Sustainability***

The social protection programmes will be predictable, consistent and sustainable. The creation of a Sovereign Wealth Fund by the government as provided for in Zim-Asset as well as collaboration with development partners and public-private partnerships will enhance predictability, consistency and sustainability to social protection systems, programmes and funding. Several social protection programmes have been successfully implemented in environments characterized by resource constraints, thus the Zimbabwean social protection system will be organized around the fact that resources are limited.

***2.5.8. Evidence Based Policies and Programmes***

Social protection policies and programmes will be based on evidence gathered from research and consultations to ensure that the policies and programmes address the needs identified and target people who meet the eligibility criteria. To this end, the government will collaborate with academia, public and private research institutes and consultancy companies to gather the evidence.

***2.5.9. Sensitivity to Special Groups***

The social protection policy will be sensitive to the needs, rights and entitlements of women including pregnant women, children, particularly OVC, children in difficult circumstances, people with disabilities, elderly persons, people living with chronic illness including HIV and AIDS, and youths.

***2.5.10. Responsiveness to Shocks, Risk Mitigation and Resilience-Building***

The government will strengthen the “national preparedness programme” for disaster management. Institutional structures, systems, policies and programmes will also be put in place through a legal framework to enable government to respond rapidly to the effects of floods, droughts, sporadic outbreaks of epidemics such as typhoid, cholera and other natural and man-made disasters.

**2.6 Key Elements of the National Social Protection Policy Framework**

***2.6.1. Access to Basic Services***

The NSPPF includes programmes that will enhance access to services by individuals, households and communities. These programmes will create opportunities for poor and vulnerable groups to realize their full potential. The NSPPF will emphasize on the development and strengthening of an integrated social protection system, which integrates all the social protection programmes in the country to form a Social Protection System. To do this, the systems and multi sector approaches which have been described in detail in section 1.3 will be used to come up with the system which is a highly effective approach in addressing the multiple and compounding vulnerabilities faced by children and their families.

***2.6.2. Social Transfers***

Social transfers will be a key component of the policy measures for the NSPPF. The social transfers will include cash or in-kind transfers and fee waivers. Cash transfers will either be conditional or unconditional, depending on a number of considerations at the time of implementation. To be effective, the social transfer programmes will need to be predictable, consistent and sustainable. In order to reduce long-term dependence on social transfers, graduation and exit strategies will be introduced.

Currently Zimbabwe’s Social Transfers are coordinated through the Social Transfer Policy Framework (STPF) whose overall goal is to reduce poverty and enhance the productive capacity of the poor and vulnerable groups. As such the STPF will feed into the broader NSPPF, and to do this, representatives of the National Steering Committee on Social Transfers (NSCST) will also sit in the National Social Protection Steering Committee, and at sub national levels coordination will be through the existing structures that include Provincial Development Committees (PDCs), District Development Committees (DDCs) and community committees.

***2.6.3. Social Support and Care Services***

The NSPPF seeks to strengthen social support and care services. The services will include rehabilitation services for persons with disabilities, probation and child welfare services and family support services.

***2.6.4. Harmonization and Coordination***

Emphasis will be on harmonization, integration and establishment of synergies amongst the strategies, systems, and programmes in order to improve the effectiveness and efficiency of service delivery. The Policy Framework is designed to be sensitive to the specific vulnerabilities and risks of special groups such as women, child-headed families, and vulnerable children including children affected by HIV and AIDS, children in difficult circumstances, the elderly, people with disabilities, people living with chronic illnesses such as HIV and AIDS and youths

***2.6.5. Capacity Development***

The government and its partners will engage in robust capacity development initiatives in order to ensure that policy objectives are achieved. Institutional capacity development will strengthen the management of social protection programmes and enhance service delivery.

**CHAPTER 3: POLICY MEASURES**

The proposed policy measures seek to ensure a strong social protection system that is protective, preventive, promotive and transformative. This approach to social protection is holistic and developmental in nature and includes measures that serve to reduce poverty and vulnerability, create employment, strengthen livelihoods and promote equity and social justice.

The policy measures are grouped into five broad categories, based on the five pillars of social protection described in section 1.4 of this policy framework, namely:

* Social Assistance
* Social Insurance
* Labour Market Interventions
* Livelihoods and Resilience Interventions.
* Social Support and Care

**3.1 Social Assistance**

***3.1.1 Analysis***

Zimbabwe’s social assistance system is not comprehensive and only offers rudimentary social protection. Its scope and coverage is limited. Furthermore, it does not provide adequate benefits to beneficiaries and it is neither predictable nor reliable. These challenges are largely due to the limited capacity of the government to provide adequate budgetary support for social assistance.

Social assistance in Zimbabwe is also characterized by errors of exclusion and inclusion. As a result, some of the intended beneficiaries do not benefit while there are also leakages to the non-poor.

The introduction of universal benefits for vulnerable groups in the medium to long term would contribute towards universalization of social protection. There is thus a need to expand the scope and coverage of social assistance and to ensure that the benefits are adequate. Within the social assistance pillar, this policy acknowledges that resources will always be limited. Therefore, it is not possible to universalize social assistance immediately.

However, universalization of the social assistance to all those in need is the ultimate goal. Given the current resource constraints the move towards universalization will be gradual, informed by the economic situation in Zimbabwe from time to time.

It is recognized that the Poverty, Income, Consumption and Expenditure (PICES) data in 2013 showed that there are four main categories of households with different social protection needs as depicted in the figure below.



**Figure 1**: 2013 Poverty, Income, Consumption and Expenditure data (PICES, 2013)

The data presented in the figure 1 is informative in terms of guiding decisions regarding the needs of different target groups with respect to social protection in Zimbabwe. For example, providing productive safety nets to households in the D category is unlikely to result in effective outcomes as these households are labour-constrained. However, productive safety nets may be more likely to assist households in the categories C and A. Children and vulnerable groups from both categories C and D are clearly in need of immediate social assistance.

Thus, when examining the policy measures presented in table 1 below, it is imperative that the target groups be differentiated in a fair and consistent manner from time to time and that, periodically (based on national surveys and other data sources), beneficiary household lists are updated so as to ensure that households which have ***significantly moved beyond the food poverty line*** or which are no longer labour constrained are replaced by those that have fallen *way below the food poverty line*.

Nevertheless, the policy measures proposed below are inclusive for all “poor households”, with prioritization across the four categories being the responsibility of implementing agencies from time to time, based on the availability of resources at any given time.

It is proposed that all the 500 000 households which are deemed to be below the Food Poverty Line be considered as eligible for all forms of social assistance presented in table 1 below, at least in the medium to short term. In the long term, all the 900,000 households should be targeted as the country moves towards universalization of social assistance to all deserving households.

The proposed approach seeks to ensure that clear and definable targets can be set within programmes such as the Harmonized Social Cash Transfer (HSCT), and the BEAM module, all of which should be harmonized to guarantee social assistance to the most vulnerable members of our society by developing a single register of beneficiary households who once identified through an objective process, qualify for all the different forms of social assistance without any need for further targeting.

***3.1.2 Policy Measures***

**Overall goal:** To reduce poverty, vulnerability and inequality and enhance access to basic social services.

The key policy measures with respect to social assistance are presented in table 2 below.

Table 5: Key Policy Measures with Respect to Social Assistance

|  |
| --- |
|  |
| Education |   |
| *Objective* | To enable children and students from poor and vulnerable households to access education.  |
| *Target*  | Children from poor and vulnerable households, many of whom have orphans and other vulnerable children. |
| *Policy Options* | * Extend exemptions and fee waivers to **all** primary and secondary school children identified as coming from poor households.
* Provide grants and/or loans to **all** students in tertiary institutions who come from poor households.
* Strengthen measures that serve to prevent child labour.
 |
| *Expected Outcome/s* | * Improved enrolment and completion rates
* Targeted children break out of the cycle of poverty and are able to participate meaningfully in economic activities to support themselves and their families
 |
| *Key Partners* | * Ministry of Public Service, Labour and Social Welfare,
* Ministry of Primary and Secondary Education,
* Ministry of State for Liaising on Psychomotor Activities in Education and Vocational Training
* All government schools and training institutions.
* Religious Organizations (which run schools and other tertiary institutions)
* Donors
* Vocational Training Institutions
* Development Partners
 |
| Health |   |
| *Objective* |  To ensure access to quality health care services by **all** members of poor and vulnerable households. |
| *Target Group or Groups* |  Elderly persons, persons with disabilities, and children as well as other adult members of poor and vulnerable households |
| *Policy Options* | * Provide free access to health services (consultation and medication) for all poor and vulnerable citizens including elderly persons, people with disabilities and children and adults from poor and vulnerable households.
* Scale-up efforts to prevent HIV and AIDS and enhance access to ARVs
* Provide adequate funding to health facilities that provide health care to the poor and vulnerable groups.
* Provide and ensure access to feeding programmes for all children from poor households in schools and pre-schools
 |
| *Expected Outcomes* | * The poor and vulnerable groups will have improved access to health care services.
* Improved nutritional status of children.
 |
| *Key Partners* | * Ministry of Health and Child Care,
* Ministry of Labour and Social Welfare
* Government Health Care Facilities
* Civil Society Organizations (INGOs and NGOs)
* Religious Organizations (which run Health Care Facilities)
* Donors
 |
| Poverty Alleviation |   |
| *Objective* | To reduce poverty and enable poor households to meet their basic needs |
| *Target Group or Groups* | Households below the poverty line, elderly persons, persons with disabilities, OVCs and the poor |
| *Policy Options* | * Introduce social pensions for elderly persons, persons with disabilities
* Provide Cash Transfers to poor and vulnerable households, especially those which are labour constrained and those in which there are children and people with disabilities
* Scale-up the public works programme in order to create opportunities for earning income.
* Establish a holistic response mechanism for households and communities in case of emergencies (e.g. floods, epidemics, etc.)
 |
| *Expected Outcomes* | Reduction in the levels of poverty and vulnerability in Zimbabwe |
| *Key Partners* | * Ministry of Public Service, Labour and Social Welfare,
* Ministry of Health and Child Care
* Ministry of Local Government and National Housing,
* Ministry of Agriculture, Mechanization and Irrigation Development
* Ministry of Environment and Natural Resources.
* Ministry of Women’s Affairs, Gender and Community and Community Development
* Ministry of Youth, Indigenization and Economic Empowerment
* International Non-governmental Organizations (INGOs)
* National NGOs
* Donors
 |
| Food Security and Nutrition |  |
| *Objective* | * To ensure food security and adequate nutrition for all individuals in Zimbabwe, especially vulnerable groups
 |
| *Target Groups or Groups* | * Children, pregnant women and lactating mothers, and other vulnerable groups
 |
| *Policy Options* | * Strengthen school feeding programmes.
* Ensure households have adequate food
* Provide public education on nutrition and promote dietary diversity
* Support the implementation of the National Food and Nutrition Security Policy.
 |
| *Expected Outcomes* | * Improved household food security and nutrition
 |
| *Key Partners* | * Ministry of Health and Child Care
* Ministry of Agriculture, Mechanization and Irrigation Development
* Ministry of Primary and Secondary Education
* Ministry of Public Service, Labour and Social Welfare
* Civil society organizations (INGOs and NGOs)
* Primary schools
 |

**3.2 Social Insurance**

***3.2.1 Analysis***

Zimbabwe is facing socio-economic challenges and does not at present have a comprehensive social insurance scheme. Given the prevailing socio-economic environment, approximately 20 percent% of the labour force in Zimbabwe is formally employed. Also considering that the vast majority of the population is informally employed, the main question that this policy document seeks to address is how to extend social insurance to those who are employed in the informal economy

It must be noted however that coverage in terms of both persons and risks covered is very low. In terms of risks, the Pensions and Other Benefits Scheme at present only covers retirement/old age, invalidity and death. The low coverage of persons is attributed to the fact that social insurance is oriented towards protecting persons in formal employment. Because of the high unemployment rate in Zimbabwe, the majority of the people are not covered by social insurance. Workers operating in the informal economy are largely not covered by social insurance.

Another issue, which the country continues to grapple is the lack of portability of social security benefits. It is further noted that the introduction of a national health insurance scheme in Zimbabwe has been pending for a long time. There is, thus, a need to introduce a comprehensive system of social insurance that progressively covers all the nine classical risks as stipulated by ILO Convention 102 and also extending coverage to workers operating in the informal economy.

***3.2.2 Policy Measures***

Overall goal: To prevent income insecurity of members and their dependents in the event of exposure to risks. .

Table 6: Key Policy Measures with Respect to Social Insurance

|  |  |
| --- | --- |
|  |   |
| *Objective* |  To protect workers and their dependents against loss of income as a result of exposure to risks |
| *Target Group or Groups* |  Workers in formal and informal employment |
| *Policy Options* | * Extend coverage of social insurance schemes to all workers in formal or informal employment and their dependents, whilst being alert to the need for equal treatment between females and males.
* Expand the range of social insurance benefits, prioritizing medical care, and maternity and paternity benefits.
* Promote occupational pensions and private insurance as a voluntary pillar of social security in order to enhance the level of social protection.
* Develop mechanisms for preservation and portability of social security benefits.
* Strengthen mechanisms for the rehabilitation and re-integration of workers who lose their jobs or are injured at work.
* Support periodic actuarial evaluation of social security schemes in order to ensure the adequacy and sustainability of social security benefits.
* Strengthen the mechanisms for enforcement of compliance, and regulation and supervision of social security schemes.
* Strengthen informal social security schemes and where possible, promote linkages with formal social security schemes.
* Ensure that non-citizens with work permits participate in social insurance schemes.
* Participate in bilateral and multi-lateral agreements to facilitate portability of social security benefits.
* Ensure that **occupational pensions are** portable and transferable in order to enhance income security.
* Promote ratification of key international social security instruments.
 |
| *Expected Outcomes* | * Zimbabwe will have a comprehensive social insurance system.
* Improved income security for workers and their dependents.
* Improved access to medical care.
* Improved access to pre-natal and post-natal care.
 |
| *Key Partners* | * National Social Security Authority,
* Ministry of Public Service, Labour and Social Welfare,
* Ministry of Welfare Services for War Veterans, War Collaborators, Political Detainees and Restrictees
* Ministry of Health and Child Care,
* Registered Trade Unions.
 |

**3.3 Labour Market Interventions**

***3.3.1 Analysis***

Unemployment and underemployment are major problems undermining income security in Zimbabwe. Addressing these problems will help to enhance social protection. The following policy issues will be considered: skilling and re-skilling to enhance employability, entrepreneurial development job placement, productive public works programmes as a job creation strategy, formalization of the informal economy, and use of micro- finance for job creation.

***3.3.2 Policy Measures***

Overall goal: To reduce unemployment and enhance job and income security.

The following table shows policy measures with respect to labour market interventions.

Table 7: Key Policy Measures with Respect to Labour Market Interventions

|  |
| --- |
|  |
|  |   |
| *Objective* | To create employment opportunities and enhance employability. |
| *Target Group or Groups* | * Unemployed and underemployed persons;
* Youth.
 |
| *Policy Options* | * Ensure that employers pay living wages to enable workers to meet their basic needs,;
* Support women’s entry into the labour market and create a supportive workplace culture that promotes inclusivity.
* Expand coverage of the Productive Community Works Programme and promote synergies with other programmes that promote employment creation and skills training.
* Strengthen skills training and entrepreneurial development programmes to enhance job creation and ensure that training is aligned to the needs of the labour market.
* Create partnerships between the state and non-state actors to strengthen job placement service programmes.
* Scale-up the use of micro-finance to promote small businesses and create synergies between different programmes providing micro-finance with a view to enhancing the impact of the programmes.
* Improve the scope of rehabilitation programmes in order to facilitate re-integration in society..
* Expedite labour law reforms to ensure that laws are responsive to labour market realities.
* Promote the transition of the informal economy to formality.
 |
| *Expected Outcome/s* | * Increased employment opportunities;
* Enhanced job and income security.
 |
| *Key Partners* | * Ministry of Labour and Social Welfare;
* Ministry of Small and Medium Enterprises and Cooperative Development;
* Ministry of Youth, Indigenization and Economic Empowerment , Empowerment and Indigenization;
* Ministry of Women Affairs, Gender and Community Development.
* Ministry of Welfare Services for War Veterans, War Collaborators, Political Detainees and Restrictees
* Private sector;
* International Labour Organization.
 |

**3.4 Livelihoods Support Strategies**

***3.4.1 Analysis***

Zimbabwe’s socio-economic blueprint, Zim-Asset, has provision for supporting the poor to develop capabilities and build assets to manage risks. Thus, the country’s social protection system, will seek to build the capacity of poor and vulnerable households to manage stress and shocks, create sustainable livelihoods and build resilience. This will be achieved through interventions such as micro-finance, micro-credit, productive public works programmes and skills training that will enhance the income earning opportunities for the poor and vulnerable households, ensure effective utilization of assets created and enable them to access resources and develop capabilities that will enable them to attain adequate livelihoods and build resilience.

***3.4.2 Policy Measures***

Overall goal: To reduce poverty and vulnerability and build the capabilities of the poor to manage risks.

Table 8 below shows the policy measures with respect to livelihoods support

Table 8: Key Policy Measures with Respect to Livelihoods Support

|  |
| --- |
|  |
|  |   |
| *Objective* |  To create adequate and sustainable livelihoods. |
| *Target Group or Groups* | * Poor and vulnerable groups;
 |
| *Policy Options* | * Enhance income–earning opportunities for the poor and vulnerable groups;
* Build the capacity of the poor and vulnerable groups to become self –reliant and resilient;
* Provide services that support asset development or re-building of assets;
* Scale-up the provision of micro-finance and other sources of credit to poor and vulnerable households to enhance their productive capacity;
* Strengthen mechanisms for enhancing national food security;
* Provide holistic support to communities in case of emergencies to enable them meet their basic needs;
* Conduct regular national vulnerability assessments in order to facilitate proactive interventions;
* Strengthen disaster reduction, management and recovery
* Support efforts to reduce environmental degradation;
 |
| *Expected Outcomes* | * Creation of adequate and sustainable livelihoods.
* Resilient households and communities.
 |
| *Key Partners* | * Ministry of Small and Medium Scale Enterprises and Cooperative Development;
* Ministry of Public Service, Labour and Social Welfare,
* Ministry of Local Government, Public Works and National Housing;
* Ministry of Youth, Indigenization and Economic Empowerment, Empowerment and Indigenization;
* Ministry of Women’s Affairs, Gender and Community Development;
* Ministry of War Veterans
* Ministry of Agriculture, Mechanization and Irrigation Development
* NGOs
* Zimbabwe Chamber of Informal Economy Trade
 |

**3.5 Social Support and Care**

***3.5.1 Analysis***

Zimbabwe has a long history of providing social welfare services designed to address social ills in society. Traditionally, the extended family system was responsible for providing social support and care to its members. However, the processes of urbanization, industrialization and globalization have gradually weakened the cohesiveness of the extended family system, thereby undermining its capacity to provide social support and care to its members. This void is increasingly being filled by the state and non-state actors but they are constrained by lack of adequate resources to provide meaningful social support and care. The current economic challenges the country is facing are seriously undermining the provision of social support and care as evidenced by declining budgetary support for social welfare services. The economic challenges have also been responsible for the exodus of experienced social workers to other countries and this has compromised service delivery. The reach of social welfare services remains low and the services provided are rudimentary and not easily accessible to the rural population.

***3.5.2 Policy Measures***

**Overall goal:** To promote adequate social functioning of individuals, families and communities.

Table 9 below shows the policy measures with respect to social support and care.

Table 7: Key Policy Measures with Respect to Social Support and Care

|  |
| --- |
|  |
|  |   |
| *Objective* |  To provide protective and developmental social welfare services. |
| *Target Group or Groups* | Persons with disabilities, elderly persons, orphans and vulnerable children. |
| *Policy Options* | * Provide social support and care to members of society unable to help themselves, particularly orphans and vulnerable children, persons with disabilities and elderly persons.
* Provide social support to persons infected and affected by HIV and AIDS.
* Strengthen the capacity of the family to provide social support and care to its members.
* Protect the rights of vulnerable groups.
* Promote the utilization of traditional support systems.
* Strengthen the capacity of social workers, and other social service professionals to provide social support and care.
* Support institutions or organizations that provide social support and care.
* Promote community-based care for children, elderly persons and persons with disabilities.
* Provide interventions that enhance problem-solving, rehabilitation, social integration, social justice and human well-being.
 |
| *Expected Outcomes* | * Improved human well-being.
 |
| *Key Partners* | * Ministry of Public Service, Labour and Social Welfare:
* Ministry of Health and Child Care:
* Ministry of Local Government, National Housing and Public Works:
* Non-governmental organizations
 |

**CHAPTER 4: INSTITUTIONAL FRAMEWORK**

**4.1 Harmonization and Coordination**

In order to address the diverse and multiple vulnerabilities and build resilience of poor and vulnerable individuals and households, this NSPPF is anchored on a social protection system whose interventions are harmonized, coherent and well- coordinated. There are various social protection programmes being carried out in Zimbabwe by the state as well as non - state actors. However, one of the major challenges is that these programmes are not coordinated. This leads to incoherence, fragmentation, and duplication in the implementation of social protection interventions. Thus, there is need for coordination and harmonization of social protection efforts that will result in cohesive and streamlined systems, programmes and interventions with built-in systems for monitoring and evaluation.

The policy framework seeks to ensure that it is Multi-Sectoral and utilizes a systems approach in which synergies are formed and appropriate structures are created and strengthened. The structures will be synchronized at national, provincial, district, ward and community levels with clear responsibilities for the personnel as well as clear lines of communication. Government’s aim is to constitute appropriate levels and structures of coordination and harmonization to integrate the different forms of social protection under the Social Services and Poverty Eradication Cluster as enshrined in Zim-Asset. The realization of the Constitutional provision on social protection ( Section 30 and Sections 80-84 of the Bill of Rights) require that all stakeholders at national, provincial, district and ward levels work together towards the realization of social protection for all members of society.

The structures of the Social Services and Poverty Eradication Cluster instituted under the Zim-Asset will be adopted. Coordination mechanisms with private and non-governmental organizations will also be strengthened. In order to enhance the effectiveness of the Cluster, the systems approach will be used supported by mechanisms such as the creation of a single register of beneficiaries which would result in streamlined disbursement of benefits and minimization of wastage of resources through duplication of interventions, a comprehensive and integrated MIS, formal and innovative payment systems, robust monitoring and evaluation systems and strong accountability and good governance. Furthermore, improved coordination and harmonization will have positive results in terms of creating a platform for coordinated resource mobilization and sustained funding of social protection programmes.

In order to implement the economic blueprint Zim-Asset, government has grouped line ministries into four main clusters meant to increase the efficiency and effectiveness of the ministries and achieve the Zim-Asset goals through utilizing to the best advantage the relationships and links amongst the ministries. Of note is the Social Services and Poverty Eradication Cluster that encompasses the line ministries that are implementing social protection interventions. These include Ministry of Health and Child Care (MoHCC), Ministry of Youth, Indigenization and Economic Empowerment, (MoYIEE), Ministry of Primary and Secondary Education (MoPSE), Ministry of Agriculture, Mechanization and Irrigation Development (MoAMID), Ministry of Public Services, Labour and Social Welfare (MPSLSW), Ministry of Justice, Legal and Parliamentary Affairs (MoJLPA), Ministry of Women’s Affairs, Gender and Community Development (MoWAGCD) and Ministry of Local Government, Public Works and National Housing (MoLGPWNH). The main mandate of the Cluster is to improve the lives and livelihoods of citizens with special emphasis on vulnerable and special groups for social transformation. Thus, it is under this Cluster that social protection services will be housed.

**4.2 The Social Protection Institutional Framework**

The Social Services and Poverty Eradication Cluster (SSPEC) will have overall responsibility for the management, development and implementation of the NSPPF with the MPSLSW being the lead Ministry and the secretariat of the cluster. There shall be a National Social Protection Steering Committee (NSPSC) to monitor the implementation of the National Social Protection Policy and develop mechanisms for the integration of social protection programmes at national level. It will also be responsible for developing coordination and implementation guidelines. The NSPSC will report to the SSPEC through the Cluster Secretariat. It will have three Technical Working Groups (TWGs) at national level representing each of the pillars of the social protection system. The Social Protection Institutional Framework is detailed in the figure below.

Figure 2: Social Protection Institutional Framework

**Social Services and Poverty Eradication Cluster**

**Secretariat: MoPSLSW**

**National Social Protection SteeringCommittee**

**Social Insurance TWG**

**Social Assistance and Social Care TWG**

**Labour Markets and Livelihoods Support TWG**

**Existing Sub National Structures: provincial, District, Ward etc**

**4.3 The National Social Protection Steering Committee (NSPSC)**

**1. Overall Aim of the Committee**

The NSPSC will oversee the development and operationalization of the Social Protection Policy for Zimbabwe. The Ministry of Public Service, Labour and Social Welfare will serve as the secretariat of the NSPSC.

**2. Membership**

The NSPSC membership will be drawn from technical officers from government, development partners and the academia. One officer will be nominated from each agency and government departments and will be required to attend all committee meetings. To minimize none or under-representation of sectors in the deliberations of the Committee, each agency and government department will nominate a proxy who will attend in the absence of the primary member.

Officers will be drawn from the following government ministries and Parastatals:

* Ministry of Public Service, Labour and Social Welfare;
	+ Ministry of Primary and Secondary Education;
	+ Ministry of Health and Child Care;
	+ Ministry of Agriculture, Mechanization and Irrigation Development;
	+ Civil Service Commission – the Pension Department;
	+ Ministry of Youth, Indigenization and Economic Empowerment;
	+ Ministry of Women Affairs, Gender and Community Development;
	+ Ministry of Small and Medium Enterprises and Cooperative Development;
	+ Ministry of Local Government, Public Works and National Housing;
	+ Ministry of Finance and Economic Development;
	+ Ministry of Environment and Natural Resources;
	+ Office of the President and Cabinet (OPC);
	+ ZIMSTAT.

In addition, the following organizations will be represented on the committee:

* + UNICEF
	+ UNDP
	+ DFID
	+ USAID
	+ WFP
	+ ILO
	+ FAO
	+ World Bank
	+ African Development Bank
	+ National Social Security Agency
	+ NANGO
	+ Employers Federation of Zimbabwe
	+ Labour Unions (to be determined)
	+ National AIDS Council
	+ National Association of Societies for the Care of the Handicapped (NASCOH)
	+ Zimbabwe Farmers Union

**3. Chair of the Committee**

The committee will be chaired by the Ministry of Public Service, Labour and Social Welfare (MPSLSW). The MPSLSW will play the leading role in the development and operationalization of the NSPPF and provide secretariat services for all meetings and consultations.

**4. Consultations**

The NSPSC will, through the MPSLSW coordinate with other government stakeholders, development partners, NGOs, civil society and private sector stakeholders in the social protection system and that have a role in implementing or influencing social protection programmes.

**5. Specific Terms of Reference of the NSPSC**

As the custodians of the Social Protection Policy, functions of the NSPSC are inclusive of the following:

1. Give advice and direction to facilitate the development of sector policies and strategies aligned to the NSPPF by providing a regular forum for discussion and decision-making;
2. Oversee the development of a Social Protection Action Plan to operationalize the Policy Framework;
3. Establish appropriate technical working groups in each of social protection pillars and other sub-committees where necessary;
4. Determine areas where technical expertise is needed;
5. Manage the development, implementation and integration of social protection strategies;
6. Monitor progress in the development of the Social Protection Policy and Action Plan;
7. Review periodic status reports and work programs for carrying out this work;
8. Review the work of consultants and/or government staff contracted or delegated to assist with specific tasks related to the implementation and monitoring of the Social Protection Policy and Action Plan;
9. Establish a comprehensive and synchronized Management Information System for the Cluster;
10. Ensure Sectoral feedback to heads of sectors represented in the Committee.

**4.4 Technical Working Groups**

In order to implement decisions made by the NSPSC, technical working groups within the key pillars of the social protection system will be established. Each Technical Working Group will constitute of representatives of organizations working in or affiliated to each of the pillars.

The following technical working groups represent the pillars of the Zimbabwean social protection system:

1. *Social Assistance and Social Care Technical Working Group*
2. *Social Insurance Technical Working Group*
3. *Labour Market and Livelihoods Support Technical Working Group*

They report to the NSPSC and therefore receive guidance and direction in the implementation of their mandates. Their functions include:

1. Coordination of the work of organizations pursuing common social protection interests in specified thematic areas of social assistance, social insurance and labour market and livelihoods strategies.
2. Coordination of the work of agencies that have joint programmes at district, provincial and national levels and thus ensuring synergy to maximize the impacts of social protection;
3. Coordination of the work of organizations operating in the same geographical areas or focusing on the same target populations such as elderly persons, OVC, people with disability, women, youth, children, informal economy and agricultural sector workers amongst others;
4. Ensuring that the Sectoral Policies, systems and programmes are harmonized and coordinated to enhance efficiency and effectiveness;
5. Ensuring coherence and compliance to implementation guidelines;
6. Ensuring that research on the different aspects of social protection is undertaken.
7. Ensuring consistent assessment, monitoring and evaluation of the social protection legislation, policies and interventions.

In order to carry out their mandates, the technical working groups will be supported by sub–national structures at provincial, district and ward levels.

**4.5 Sub–national structures: Provincial, District, Ward and Community Levels**

To facilitate the functioning of the technical working groups, committees will be established at provincial, district, ward and community levels. Whilst their membership and functions will be defined in due course they will be responsible for the following:

1. Monitoring and management of social protection initiatives in their geographic locality,
2. Ensuring that programmes are harmonized within their jurisdiction,
3. Ensuring that policy and implementation guidelines are adhered to by organizations operating in various project sites,
4. Maintaining a register of programmes and beneficiaries.

**CHAPTER 5: FINANCING AND SUPPORT**

**5.1 Funding Social Protection**

Funding of social protection shall be a responsibility of the state. However, because of limited resources, the government shall mobilize additional resources from other sources. For the successful implementation of social protection programmes there is need for funding that is adequate, consistent, predictable and sustainable. A number of players will, therefore be involved as follows:

***5.1.1 Government Funding***

The government of Zimbabwe considers Social Protection critical for the achievement of human development. Section 30 of the constitution of Zimbabwe states that “…the state must take all practical measures within the limits of the resources available to it, to provide social security and social care to those who are in need…” Thus, the government commits itself to be the central funder of social protection and undertakes to mobilize new and additional resources to fund social protection. To this end, social protection will be funded mainly from government revenue augmented by funding from private sector, civil society organizations and development partners.

**Policy Measures:**

The government shall:

**In the Short to Medium Term:**

1. Dedicate funding of social protection in the government yearly budgets by ring fencing funding for social protection,
2. Carry out periodic costing of the social protection floor,
3. Mobilize resources from government revenues especially from natural resources and non-governmental social protection players and implement tax reforms so that resources for social protection are availed,
4. Improve revenue collection to ensure that adequate resources are apportioned towards social protection in a predictable and sustainable manner,
5. Make use of fiscal and central bank foreign exchange reserves in the financing of social protection, and
6. Consider corrective measures for employers who do not remit the statutory NSSA dues.

***5.1.2 Non - State Actors’ Funding***

Non-state actors who include the private sector, development partners, employers and workers, civil society and voluntary organizations can play a crucial but supportive role in funding social protection interventions as follows:

Table 8: Non State Actor Funding

|  |  |
| --- | --- |
| **Type of Non State Actor** | **Role** |
| Private Sector Funding | The private sector shall operate occupational pensions and private insurance schemes to complement public social protection arrangements and provide funding for the other pillars of social protection. Government shall create an enabling environment for the private sector. |
| Employers and Workers | Employers and workers shall be expected to remit their contributions to the relevant Statutory Authority. The government shall ensure efficient collection and management of contributions in order to ensure the payment of adequate benefits. |
| Development Partners | Development partners will be asked to contribute to the funding of social protection. This will ensure that social protection is funded in a consistent manner. |
| Civil Society  | Civil society institutions will mobilize resources which can be used to finance private social protection arrangements in order to improve the level of social protection. The government shall create space for the civil society. |

**5.2 Enhancing the Management and Efficiency of Social Protection Funds**

In order to improve the efficiency and maximize the impact of social protection it is vital that funds allocated to social protection be managed well and efficiently. Allocation and disbursement of resources aimed at social protection can be made more effective. In pursuance of this, the government shall:

1. Prioritize the funding of social protection interventions,
2. Develop innovative strategies for disbursing funds to beneficiaries in order to achieve efficiency and cost-effectiveness,
3. Review regularly the levels of funding of social protection programmes and,
4. Reduce administrative costs of social protection programmes with a view to improving the level of benefits.

**5.3 Sustainability of Funding**

As part of the strategy to ensure that government funding is sustainable, “ring fencing” of government income streams such as revenue from natural and mineral resources, social security contributions and specifically targeted taxes will ensure that social protection will be funded consistently. In addition development partners, private sector, civil society organizations can then support the government in its efforts towards the provision of social protection to needy and vulnerable groups. With government taking the leading role in funding social protection and other partners supporting this role, funding can thus be sustainable.

Furthermore, the government and its partners will develop strategies that aid recipients of social protection to mature and be weaned off social assistance schemes and programmes. With enhanced coordination of various social protection programmes it is envisioned that social protection beneficiaries may be incentivized to graduate and exit from programmes as they would have been socially and economically empowered.

**CHAPTER 6: MONITORING, EVALUATION AND MANAGEMENT INFORMATION SYSTEMS**

**6.1 Monitoring and Evaluation of Social Protection Programmes**

Monitoring & evaluation (M&E) is useful for strengthening the quality of the programmes and interventions which leads to improved outcomes for the beneficiaries. It also provides evidence needed to review both the design and implementation of policies and programmes. Thus, the successful implementation of this policy will be largely dependent on there being a robust M&E framework. The M & E process will be linked to the already existing, national Results Based Management (RBM) Monitoring and Evaluation System administered from the Office of the President (OPC). NSPSC will encourage the use of participatory methods in the evaluation of interventions.

***6.1.1 Monitoring***

The monitoring of social protection interventions will be carried out by the different ministries within the SSPEC responsible for implementing the social protection programmes. The NSPSC, through the different TWGs will also monitor the implementation of the social protection policy. Monitoring will ensure that interventions are being implemented timeously, according to plan and budget and will enable corrective measures to be taken where necessary.

***6.1.2 Research and Evaluation***

Evaluations will be undertaken internally by the evaluation sections in line ministries and by external evaluators to determine the extent to which the policy objectives are being achieved as measured against objectively measurable indicators. The NSPSC through the TWGs will oversee the development of objectively measurable indicators against which the systems and interventions can be measured. The NSPSC and implementing partners will carry out impact assessments that will provide evidence that will inform policy decisions. The assessments will seek to assess the effectiveness and efficiency of programmes, while also evaluating their impact on the beneficiaries.

***6.1.3 Policy Statements***

The government shall:

1. Establish an appropriate M&E framework which can input into the RBM system;
2. Introduce tracking systems for social protection programmes;
3. Support research on social protection to build evidence that will inform policy decisions.

***6.1.4 Mechanisms for Monitoring and Evaluation***

The NSPSC will put in place mechanisms for monitoring and evaluating the interventions aligned by the RBM M&E guidelines and whose objectives will be to:

1. Ensure that the correct milestones, as planned, are being achieved.
2. Act as an early warning system in cases where targets are unlikely to be achieved.
3. Provide regular information to all stakeholders on progress on the implementation of the Social Protection policy.
4. Identify best practices and provide evidence for policy decisions.
5. Ensure the continuous review of strategies.

The monitoring and evaluation of the social protection framework will be based on manageable processes, measurable and verifiable indicators; and conform to basic rules of simplicity, timeliness and cost effectiveness. The social protection policy will be monitored regularly at three levels: political and policy, operational and technical, and stakeholder levels.

**Political level**

The OPC and minister responsible for social welfare and social protection through the NSPSC will oversee the implementation of the policy and ensure that outcomes are consistent with the Vision and Mission of Zim-Asset and NSPPF and that targets are being achieved.

**Operational and Technical Level**

The NSPSC will be responsible for ensuring that progress on the RISDP is monitored on a regular basis. The NSPSC will monitor implementation of the policy at national level and provide status reports to the Minister on a continuous basis.

An integrated monitoring system for the policy will be developed by the NSPSC and OPC to provide an early warning mechanism and to provide feedback on the development and implementation of the policy.

**Technical Working Group Level**

The TWGs will supervise the implementation of social protection at provincial, district and ward levels. The TWGs will also be responsible for producing periodic reports as specified in M&E module of NSPSC. The reports will be forwarded to NSPSC and these will enable NSPSC to produce periodic and annual reports on the overall implementation of the social protection policy.

**6.3 Management Information Systems (MIS)**

The Government is committed to creating a management information system (MIS) for social protection. Thus, government will put in place a comprehensive MIS that will generate and keep track of all social protection interventions, reduce redundancy in structures, systems and processes, and document the performance of programmes, with a view to ensuring that the policies remain responsive to crises and prevailing needs. The MIS system will, therefore be a central repository of information for the harmonisation of fragmented programmes and for responding to needs and shocks.

***6.3.1 Policy Statements***

The government shall consolidate, expand and strengthen current MIS in line ministries under a single administrative structure in the SSPEC and administered at the different administrative levels. The functions of MIS will be to:

* 1. Generate a single register of beneficiaries, current and future linked to the census registry in order to harmonise and strengthen targeting of beneficiaries;
	2. Generate a data base of the social protection programmes and interventions and the related complementary activities to provide a basis for integration and harmonisation of programmes and activities within and amongst the ministries and scaling up programmes;
	3. Track case management of beneficiaries in order to inform progress on cases and inform the way forward;
	4. Generate templates with indicators to guide registration of beneficiaries, gathering of data and reporting at different administrative levels;
	5. Establish indicators for community registration systems through a participatory process and guided by the participatory poverty assessment processes;
	6. Ensure that periodical reports are generated and disseminated to relevant stakeholders;
	7. Document best practices, lessons learned, and experiences that will inform future programmes and interventions and can be used for advocacy.

The NSPSC shall oversee the harmonised restructuring of the MIS that is networked to art ICT facilities and equipment to enable the development of systems that are user friendly and enhance the planning and delivery of social protection.

**References**

ABREHA, A. (2013) *The Making of Social Protection in Ethiopia* [Online] Available from: <http://www.aigaforum.com/articles/the-making-of-socialprotection_ethiopia.pdf>. Accessed: 07 August 2014.

AFRICAN UNION.(2008) *African Union Social Policy Framework.*Retrieved from: <http://www.un.org/esa/socdev/egms/docs/2009/Ghana/au2.pdf>

ASIAN DEVELOPMENT BANK. (2007) *Social Protection.*Retrieved from: http://www.adb.org/Social Protection/default.asp.

BALDOCK, J., MITTON, L., MANNING, N. and VICKERSTAFF, S. (2012) *Social Policy (Fourth Edition).* Oxford: Oxford University Press.

[BMZ Education Strategy 2010](https://www.google.co.zw/url?sa=t&rct=j&q=&esrc=s&source=web&cd=9&cad=rja&uact=8&ved=0CEoQFjAI&url=http%3A%2F%2Fwww.bmz.de%2Fde%2Fzentrales_downloadarchiv%2FPresse%2FBMZ_Bildungsstrategie_Entwurf_engl_3.pdf&ei=LVP9VICVJKSS7AaqmoHIDQ&usg=AFQjCNFSJlbb6M_TYA8H-UtefSf6Zlbrgg)

BONEHILL, C. (2007*) Policy Development Framework.*Cafcass.

CHAMBERS, R. AND CONWAY, G. R. (1991) *Sustainable rural livelihoods: practical concepts for the 21 st century*. IDS Discussion Paper 296.S

CHIKOVA, H.N. (2009) *Social Policy, Social Protection and OVC Study in Gambia.* Gambia: UNICEF.

CHIKOVA, H.N. (2013) Social Protection in Zimbabwe*.*In *Social Protection for Those Working Informally.Social & Income (In) Security in the Informal Economy.*Johannesburg, 16 – 17 September 2013.

Child Abduction Act 1995

Children’s Act 2005

CHINSINGA, B. (2007) *Social Protection Policy in Malawi: Processes, Politics and Challenges.* Discussion Paper. Available from: <http://www.future-agricultures.org>. Accessed: 22 July 2014.

Criminal Law Codification and Reform Act (Chapter 9:23) 2004

Crush and Tevera, 2010

DEPARTMENT FOR INTERNATIONAL DEVELOPMENT.(2006) Social protection in poor countries.*Social Protection Briefing Note Series.*Number 1. January 2006.

DEVEREUX, S. AND SABATES-WHEELER, R. (2004*) Transformative Social Protection: Working Paper No.232.* Sussex: IDS.

Disabled Persons Act (Chapter 17:01) 2012

Education Act 2001

EUROPEAN UNIVERSITY INSTITUTE. (2010) *Social Protection for Inclusive Development.A new perspective.*In EU COOPERATION WITH AFRICA.European Report on Development.

GANDURE, S. (2009) Baseline Study of Social Protection in Zimbabwe*. Report prepared for the Social Protection Technical Review Group (SPTRG) of the Multi-Donor Trust Fund.*

GANDURE, S. (2009) *Inventory of Social Protection Mechanisms and Instruments in Zimbabwe.*

GOVERNMENT OF KENYA.MINISTRY OF GENDER, CHILDREN AND SOCIAL DEVELOPMENT.(2011) *Kenya National Social Protection Policy.* Nairobi: Ministry of Gender, Children and Social Development. June 2011.

GOVERNMENT OF ZIMBABWE.(2013) *Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim Asset) October 2013–December 2018.*Harare: Government Printers.

GOVERNMENT OF ZIMBABWE.INTERNATIONAL LABOUR ORGANISATION.(2011) *Decent Work Country Programme for Zimbabwe 2012-2015.*Harare: ILO.

GOVERNMENT OF ZIMBABWE.MINISTRY OF LABOUR AND SOCIAL SERVICES.(2012) *National Social Transfers Policy Framework Final Draft.* Harare: Ministry of Labour and Social Services.

GOVERNMENT OF ZIMBABWE.UNICEF. (2010) *Promising Quality: Making sure that we deliver excellent services for children Monitoring and evaluating quality in child protection.* Harare: UNICEF.

GOVERNMENT OF ZIMBABWE.UNITED NATIONS COUNTRY TEAM. (2010) *Country Analysis Report For Zimbabwe.* Harare: UNDP.

GOVERNMENT OF ZIMBABWE.UNITED NATIONS ZIMBABWE. (2011) *Zimbabwe United Nations Development Assistance Framework 2012-2015.* Harare:

GOVERNMENT OF ZIMBABWE.UNITED NATIONS ZIMBABWE.(2012) *Zimbabwe 2012 Millennium Development Goals Progress Report.* Harare.

GRANT, U. (2006) *Research into policy processes: Bringing global evidence on social protection into local policy contexts.* Background Paper for the Chronic Poverty Report 2008 – 2009. Chronic Poverty Research Centre.

Guardianship of Minors Act (Chapter 5:08) 2003

HALL, N.AND MIDGLEY, J. (2004) *Social Policy and Development.* London: SAGE

Harmonized Social Cash Transfer (HSCT) 2011

HOLMES, R. AND SLATER, R. (2008) *Social Protection for low capacity households in Zambia.*(Project Briefing) No. 11. May 2008. London: Overseas Development Institute (ODI).

INSTITUTE of ENVIRONMENTAL STUDIES and UNICEF. (2013). *Urban Poverty and Vulnerability in Zimbabwe: Looking beyond the urban/rural divide*

INTERNATIONAL LABOUR ORGANISATION (2012).*Social security for all: The ILO social security floors recommendation- Social security for all briefing note*. Retrieved from: http://www.ilo.org/dyn/normlex/f2p=NORMLEXPUB:12100.

INTERNATIONAL LABOUR ORGANISATION. (2000) *World Labour Report 2000.* Geneva: ILO.

INTERNATIONAL LABOUR ORGANISATION.(2014) *Access to and Effects of Social Protection on Workers living with HIV and their Households.* Geneva: International Labour Office. Available from: <http://www.ilo.org/global/publications/books/WCMs_248447/lang--en/index.htm>. Accessed: 21/08/14.

INTERNATIONAL LABOUR ORGANISATION. (2014) *World Social Protection Report: Building economic recovery, inclusive development and social justice 2014/15.* Geneva: International Labour Office.

KALUSOPA, T., DICKS, R. AND OSEL-BOATENG, C. (2010) *Social Protection Schemes in Africa.*

KASEKE, E. (1995) *Interpretations of society and social policy* in N.Hall and R. Mupedziswa (Eds) Social Policy and Administration in Zimbabwe. Harare: School of Social Work.

KUMITZ, D. (2013) *Scoping Social Protection Platform for Social Protection Zambia Policy Brief.* Lusaka: Friedrich Ebert Stiftung.

Maintenance Act (Chapter 5:09) 2005

*Making an Investment case for Social protection* June 2013

MHISHI, S.G (n.d.) Social Protection For Growth & Recovery. *Remarks by the Director of Social Services at the Social Protection Consultative Forum.*

*Millennium Development Goals of 2000*

MINISTRY OF LABOUR AND SOCIAL SERVICES.UNICEF. (2010) *Child Protection Fund: Strategic Concept and Design. In Support of the Government of Zimbabwe’s National Action Plan for Orphans and Vulnerable Children.*Harare: UNICEF.

MINISTRY OF LABOUR AND SOCIAL SERVICES.UNICEF. (2010) *Design of the Zimbabwe Harmonised Social cash Transfer Programme.* Harare: MLSS. UNICEF.

MINISTRY OF PUBLIC SERVICE LABOUR AND SOCIAL WELFARE.UNICEF. (2013) *The Harmonised Social Cash Transfer (HSCT) in Zimbabwe – reaching the poorest and most vulnerable.* Harare: MPSLSW. UNICEF.

MTETWA, E. AND MUCHACHA, M. (2013) Towards A National Social Protection Policy: Knowledge and lessons learned from a Comparative Analysis of the Design and Implementation of Public Assistance and Harmonised Social Cash Transfer Programmes in Zimbabwe. *IOSR Journal of Humanities and Social Science (IOSR-JHSS).*11 (3). JUNE 2013.

Mugabe, F., T. Thomas, S. Hachigonta and L. Sibanda. Zimbabwe. In *Southern African agriculture and climate change: a comprehensive analysis*, (eds.) Hachigonta, S. G. Nelson, T. Thomas and L. Sibanda. Washington, D.C.: IFPRI.

National Heroes Dependents Act (Chapter 10:06) 2010

National Nutrition Surveillance Assessment, 2007

NORTON, A., CONWAY, T. AND FOSTER, M. (2001) *Social Protection Concepts and Approaches: Implications for Policy and Practice in International Development.* London: Overseas Development Institute.

Elderly persons Act (17:11) 2012

PATEL, L. (2005). *Social welfare & social development in South Africa*. Cape Town: Oxford University Press.

Private Voluntary Organizations Act (Chapter 17:05) 2010

*Process and Impact Evaluation of The Basic Education Assistance Module* (Beam) In Zimbabwe 2012

Refugees Act (Chapter 4:03) 2001

SCHUBERT, B. (2011) *Lessons Learned from Ongoing Social Cash Transfer Programme in Zimbabwe.* Harare: Ministry of Labour and Social Services. UNICEF.

Social Welfare Assistance Act (Chapter 17:06) 1990

*Strategic Framework for Building Resiliencein Zimbabwe* 2015

TEMIN, M. (2008) *Expanding Social Protection for Vulnerable Children And Families: Learning From An Institutional Perspective.* Inter-Agency Task Team (IATT) on Children and HIV and AIDS. Working Group on Social Protection.

The *African Charter on Human and People’s Rights* (1981)

The *African Charter on the Rights and Welfare of the Child* (1990).

The Birth and Death Registration Act (Chapter 5:02); 1986

The Constitution of Zimbabwe (2013)

The Customary Law and Local Courts Act (Chapter 7:05); 1997

The Customary Marriages Act (Chapter 5:07); 2009

The Deceased Estates Succession Act (Chapter 6:02) 1997

The Domestic Violence Act (Chapter 5: 16) 2006

THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA*.*(2012) *National Social Protection Policy of Ethiopia.*Final Draft. Addis Ababa: Ministry of Labour and Social Affairs.

The *International Covenant on Economic, Social and Cultural Rights* (1976)

The Magistrates Court Act (Chapter 7:10) 2012

The Marriage Act (Chapter 5:11) 1963

The Matrimonial Cause Act (Chapter 5:13) 1990

The NSSA Act 17: 04 of 1989

The Provision of Social Protection (Articles 80 to 84)

The *UN Convention on the Elimination of all Forms of Discrimination against Women* (1979)

The *UN Convention on the Rights of Persons with Disabilities* (2006).

The *UN Convention on the Rights of the Child* (1990)

*The Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim-Asset)* 2013-2018

UN SYSTEM TASK TEAM ON THE POST-2015 UN DEVELOPMENT AGENDA (2012) *Social Protection: A development priority in the post- 2015 UN development agenda.*

*UNDP Human Development Report,* (2010).

UNICEF (2008).*Social protection in Eastern and Southern Africa: A framework and strategy for UNICEF*. Nairobi: UNICEF.

UNICEF.(2011) *Child and Social Protection.* Harare, UNICEF.

*Universal Declaration of Human Rights of 1948*

UNIVERSITY OF SUSSEX.INSTITUTE OF DEVELOPMENT STUDIES. (2006*) Understanding policy processes: A review if IDS research on the environment.* Brighton: University of Sussex.

WORLD BANK. (2012) *Managing Risk, Promoting Growth: Developing Systems For Social Protection In Africa.* (The World Bank’s Africa Social Protection Strategy 2012-2022). Washington D.C.: World Bank.

WORLD BANK. (2014) Zimbabwe: Crafting a Coherent Social Protection System. Policy Note.

*Zimbabwe Economic Development Strategy* (ZEDS, 2007)

*Zimbabwe Millennium Development Goals Progress Report*, 2012;

ZIMBABWE NATIONAL STATISTICS AGENCY. (2012) *Labour Force Survey: 2011.* Harare: ZIMSTAT.

ZIMBABWE NATIONAL STATISTICS AGENCY.(2013) *Poverty and Poverty Datum Line Analysis in Zimbabwe 2011/12.* Harare: ZIMSTAT.

*ZimVAC, in World Bank Draft Social Protection Policy Note,* (2014)

**Glossary of Terms**

**Basic Healthcare**

Routine treatment provided to patients in health facilities at the first level of the health pyramid. It includes preventative care and health promotion, simple curative treatment and nutritional rehabilitation

**Beneficiary**

Individual or household receiving benefits at a specific point in time/during a period of time. In most cases beneficiaries are individuals, yet in some cases, benefits are paid to households

**Cash benefits**

Benefit provided in cash such as income replacement and income support benefits, lump sum payments from provident funds, allowances and other cash payments which are not re-imbursements (in other words, which do not require beneficiaries to show evidence of expenditure)

**Cash Transfers**

Regular non – contributory payment of money provided by government or NGOs to individuals or Households with the objective of decreasing chronic or shock induced poverty addressing social risks and reducing economic vulnerability

**Commercial Insurance**

A system for the provision of coverage against the financial consequences of certain risks, formalized by means of a contract managed by a profit-oriented insurance company. The contract is concluded between an insurer and an insured party (individual or group). In exchange for the payment of premiums, the insurer guarantees the insured party that it will provide a specified level of coverage for expenses resulting from the occurrence of a given risk, for example, fire, flood, theft, accident, illness, loss of harvest etc.

**Community – based Social Protection Mechanism**

Community – based social protection mechanisms include:

* Institutions that directly administer a community – based social protection scheme. Examples include mutual benefit societies, micro - insurance schemes, trade union based scheme, cooperatives, associations, micro – finance institutions etc
* Institutions that facilitate the implementation of statutory or community based social protection mechanism. Examples, include civil society, trade organizations, such as agricultural or other cooperatives, farmers’ organizations, informal economy organized or sectoral associations of workers that play a role or intermediary between the social security scheme and their members.

**Contributory Benefit**

A conditional benefit paid in cash or in kind and is dependent on the beneficiary having contributed to the benefit scheme.

**Disaster Risk Reduction**

This refers to the practice and concept of minimizing the risk of disaster through harmonized systematic efforts aimed at managing the factors that are likely to cause disasters.

**Earmarked taxes**

Levies and specially designated taxes raised to finance specific social security benefits

**Eligibility conditions**

The set of legally defined conditions which stipulate if and when a person has the right to claim a benefit.

**Employed Person**

The “employed” comprises all persons above a specified age who, during a specified reference period, were in the following categories:

* Paid employment
* At work (persons who during the reference period performed some work for wage or salary, in cash or in kind)
* With a job but not at work (persons who, having already worked in their present job were temporarily not at work during the reference period but had a formal attachment to their job)

**Employee**

An individual who provides service on a regular basis to a company or business for cash or in kind but not as a part of another business or as a consultant

**Fiscal space**

The availability of budgetary room that allows a government to provide resources for a desired purpose without any prejudice to the sustainability of a governments’ financial position.

**Food Poverty Line**

The minimum value of food basket items required by an adult per month which satisfies dietary needs.

**Formal Sector**

Economic sector where inhabitants’ socio-economic activities are regulated and protected by formal societal institutions. In its functioning the form sector is often closely interlinked with the informal sector. The vast majority of the worlds’ population is excluded from the formal sector.

***Informal Sector***

Economic sector where inhabitants’ social – economic activities are not regulated and protected by formal societal institutions. In its functioning, the informal sector is often closely interlinked with the formal sector. The vast majority of the worlds’ population is part of the informal sector.

***Means – tested benefits***

Benefits that are granted only upon proof of need. Different types of income/assets such as capital earnings, benefits and other payments may be taken into account in the aggregate for the purpose of determining whether the applicants are eligible for benefit at all and the amount of benefit which will be granted.

**Non – contributory Benefits**

Entitlement to a benefit is not based on the previous payment of contributions but on other criteria. Non – contributory benefits are usually financed out of general taxation.

**Non – means tested benefit**

Benefit that is granted on the basis of contributory periods or other rights etc: eligibility is not dependent on an assessment of the beneficiary’s means (in other words. Income, Capital earnings)

**Poverty**

Poverty is a sustained or chronic deprivation of the basics of life necessary for individuals, households and communities to have an acceptable standard of living and enjoy their social rights. It has a lower threshold and an upper threshold. The lower threshold is measured using the Food Poverty Line (FPL) and the upper threshold is measured using the Total Consumption Poverty Line (TCPL).

**Total Consumption Poverty Line**

The value of the food basket items added to expenditure on non - food items on a monthly basis which is generally calculated on the basis of a household of five people.

**Unemployed person**

The “unemployed” comprise all people above a specified age who, during the reference period, were:

* “without work”, that is, were not in paid employment or self - employment
* “Currently available for work” that is, were available for paid employment or self - employment during the reference period.
* “seeking work” that is, had taken specific steps in a specified recent period to seek paid employment or self - employment

**Universal Benefits Transfers**

Tax financed benefits or transfers that are paid to all citizens or inhabitants falling into a specific category of the population

**Appendices**

**Appendix A: Landscape mapping of the Social Protection Sector in Zimbabwe**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Stakeholder** | **Programme** | **Programme Characteristics** | **Target Group** | **Service Provided**  | **No. of Beneficiaries** |
| **SOCIAL ASSISTANCE** |
| Ministry of Public Service Labour and Social Welfare (MPSLSW)/DSS/UNICEF | Harmonised Social Cash Transfer | - cash transfer scheme- non-contributory-Proxy-Means-testing-Provides direct cash transfers to ultra-poor and labour constrained households | OVC in ultra-poor households, labour constrained households | - Cash transfers of US$10 – US$25/mth | 2012 – 18 2462013 – 37 297 |
| MPSLSW/DSS | Transfers to Heroes Dependants | - cash transfer scheme- non-contributory- categorical targeting- provides cash transfers as income maintenance to surviving spouses and minor children | -surviving spouses and minor children of National Heroes | - Cash transfers ofUS$26/mth for widow and US$5/mth per child- School fees | 2011 – 5542012 – 6872013 – 582 |
| Support to children in difficult circumstances | - cash transfer scheme- non-contributory- provides cash and in-kind transfers.- support can include equipment such as wheelchairs | -orphans, physically and mentally disabled, homeless and delinquent children in institutions including cases of abuse and neglect. | - Cash and in-kind transfers. | 2011 – 4 3012012 – 4 3962013 – 2 701 |
| Public Assistance | - cash transfer scheme- Non-contributory- means tested | -elderly and disabled persons, poor and indigent families | - Cash transfers of US$20/mth | 2010 – 1 5912011 – 14 0112012 – 14 5012013 – 9 671 |
| Support for families in distress | -cash transfer scheme- non-contributory- categorical targeting- provides cash and support. | Vulnerable families: elderly, persons with disabilities, chronically ill, dependants of indigent persons | - Cash transfers, travel warrants |  |
| Food Mitigation  | -public works scheme- non-contributory- means-tested | -labour constrained and food vulnerable and insecure households. | Cash and in-kind in return for work | 2011 – 55 8012012 – 75 0002013 – 14 0500 |
| USAID, WFP, DFID, World Bank, NGOs | Various Public Works Programmes | -public works scheme- non-contributory | -poor labour-endowed households | Cash and in-kind in return for work | 2012 – 4 799 |
| MPSLSW/DSS | Drought Relief Public Works Programme | -public works scheme- non-contributory- self-targeting | -elderly, chronically ill and disabled persons-poor labour-endowed households | -Free cash assistance to the elderly, chronically ill and disabled persons- Cash and in-kind in return for work for poor labour endowed households. |  |
| MPSLSW/DSS/UNICEF/DFID | BEAM | -fee waiver scheme- non-contributory-community involvement in targeting- means-tested- focuses on reduction of number of children out of school through payment of fees  | - school-age children (ages 6-19) including children who have never been to school or have dropped out or are likely to drop out. | - Fee waivers for primary and secondary education;- Secondary education examination fees | 2011 – 408 4862012 – 339 8272013 – 345 567 |
| Private Sector e.g. Banks/MercyCorps | School Fees Bursaries | - Private sector scheme particularly banking community as part of social responsibility | Poor rural and urban communities | School fees bursaries. |  |
| USAID/DFID | Education Block Grants | -fee waiver scheme- implemented by NGOs- annual block payments to schools in exchange for fee waivers for orphans and vulnerable children- benefits schools as money is used to buy books, educational materials, furniture, improvement of infrastructure. | -orphans and vulnerable children | -Fee waivers for orphans and vulnerable children-support for improvement of quality of education |  |
| MPSLSW/DSS | AMTO | -fee waiver scheme- non-contributory- targeting is categorical and means-testing-pays health bills of those who qualify | -indigent persons over 60, disabled persons, long-term ill, dependants of destitutes, OVCs | Fee waivers for health services- intermediate and tertiary.  | 2010 – 9 8022013 – 25 000 |
| Ministry of Primary and Secondary Education (MoPSE)/WFP | School feeding programmes | -in-kind transfer scheme- non-contributory- provides food to school-age children-can include out-of-school children | -pupils in pre-school up to grade 3 in food insecure areas and in some districts during food insecure months of the year. | Cooked meals |  |
| Ministry of Health and Child Care (MHCC) | Child Supplementary feeding | -nutritional programme-therapeutic | - children in and out-of-school in districts with prevalence | - on site feeding or take home | 2006 – 427 8592007 – 500 0002008 – 500 000 |
| WFP | Seasonal targeted assistance | - targeted- aims to prevent loss of lives and livelihoods of most food insecure households | - Rural transitory food insecure households- targets households with little or no assets, food crop or income- special priority to children, chronically ill, elderly, disabled | Food rations | 2006 – 3 200 000 |
| Health and Nutrition Safety Net |  | Malnourished HIV and AIDS and TB patients, pregnant women, children 0-5 years old  | Food rations |  |
| MPSLSW/DSS | Public Assistance Paupers Burial | - payments made to organisations that provide burial services to paupers | Families of deceased paupers | Burial grant | 2011 – 1 5912012 – 4292013 – 489 |
| Maintenance of Disabled Persons | -categorical and targeted | Disabled persons | - Assistive devices such as wheelchairs, crutches, artificial limbs- Training- Project loans |  |
| Care for the Elderly | - means testing | Elderly people in institutions  |  | 2005 – 39 468,.2010 – 29 |
| Ministry of Agriculture | Agriculture Input support scheme | - enhance access to agricultural inputs - assists mainly smallholder farmers in the rural areas- aimed at improving productivity | Households in rural areas | Seed and fertilizer (coupons and in-kind) | 2010 – 66 000 |
| WFP/NGOs/CBOs/MHCC | Home Based Care | - targeted | HIV and AIDS affected patients | Food rations |  |
| NGOs | Small livestock programme | -in-kind transfers scheme- non-contributory- helps beneficiaries to build their assets and to cope with current and future risks | Most vulnerable households | Transfer livestock such as goats and chickens |  |
| MPSLSW/DSS | Homes for the elderly, disabled and children, children on the move, street children and children in foster care | -social care service- non-contributory-categorical targeting | Elderly, disabled, vulnerable children, street children | Institutional grants, psycho-social support, foster care |  |
| MPSLSW/DSS/UNICEF/NGOS | Psycho-social support for children | -social care service- non-contributory-categorical targeting | Vulnerable children | Psycho-social support |  |

**Appendix B: List of workshop participants**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|   | Surname | Initial | Sex | Designation | Organization |
| 1 | Badza | O | F | Principal Administrator | Civil Protection Unit |
| 2 | Banda | S | M | A/Director Policy | MoHCC |
| 3 | Bandara | A |   |   | UNDP |
| 4 | Besong | R | M |   | AfDB |
| 5 | Chakanya | N |   |   | LEDRIZ |
| 6 | Chengetai | N |   |   | Childline |
| 7 | Chidumwa | P | M | Principal Economist | MoFED |
| 8 | Chigango | M B |   |   | MPSLSW |
| 9 | Chikandi | S |  M |   | UNICEF |
| 10 | Chikoto | G | F | Policy Intern | MPSLSW |
| 11 | Chikova | H | M | Director | NSSA |
| 12 | Chimbwanda | S |   |   | WFP |
| 13 | Chinake | T | M | A/Director | MPSLSW |
| 14 | Chinhengo | L | M | A/D/Director | MPSLSW |
| 15 | Chinomwe | A |  M |   | ILO |
| 16 | Chinyadza | J | F |   | MoHCC |
| 17 | Chinyoka | I |   |   | UNICEF |
| 18 | Chipinduro | P | F |   | MSMECD |
| 19 | Chiroro | P | M | Project Leader - MD | Impact Research International |
| 20 | Chitekuteku  | S | F | Senior Consultant | Impact Research International |
| 21 | Chiware | C | F | Officer for Elderly | MPSLSW |
| 22 | Choto | J | M |   | MLGPWNH |
| 23 | Coope | S |  F |   | DFID |
| 24 | Dare | C | M | Officer | MYIEE |
| 25 | Hon. Muzenda | T | M | Deputy Minister | MPSLSW |
| 26 | Izumi | N | F | Chief – Child Protection | UNICEF |
| 27 | Jiri | J | F | Director | MPSLSW |
| 28 | Made | A |   |   | UNICEF |
| 29 | Mafuwa | M | F |   | UNICEF |
| 30 | Magweva | F | M | CEO | NASCOH |
| 31 | Makonese | L | F |   | FAO |
| 32 | Makuza | T | M |   | CSC |
| 33 | Mangosho | B | M | Director Research | MSMECD |
| 34 | Manyika | N | M | A/Chief of Policy | MPSLSW |
| 35 | Mapani | M | F | Senior Analyst | MPSLSW |
| 36 | Maramba | G | F | Director | MPSLSW |
| 37 | Marara | E |   |   | MHTESTD |
| 38 | Mareyanadzo | K |   |   | IOM |
| 39 | Mashavira | N | F | Assistant Educational Psychologist | MoPSE |
| 40 | Mashavira | N |   |   | MoPSE |
| 41 | Matambura | S | F | Assistant | FODPOZ |
| 42 | Mfote | D |   |   | FAO |
| 43 | Mhishi | S | M | A/P/Director | MPSLSW |
| 44 | Mkozho | R | M | Executive Director | NCDPZ |
| 45 | Mudzingwa | N | F | Projects | NASCOH |
| 46 | Muguwe | J | M | D/Director | MPOSE |
| 47 | Muita | J |   |   | UNICEF |
| 48 | Mukamuri | B | M |   | CASS |
| 49 | Mukaro | I | M | A/Director | MPSLSW |
| 50 | Mukondomi | M | F | Finance Director | MPSLSW |
| 51 | Munjoma | L | F | Research Officer | MYIEE |
| 52 | Munyaka | M |   |   | UNICEF |
| 53 | Munyaradzi | A | M | Minister’s Aide | MPSLSW |
| 54 | Mupunga | G | M | Senior Economist | OPC |
| 55 | Muradzikwa | S | M | Chief of Policy | UNICEF |
| 56 | Murima | B |   |   | UNICEF |
| 57 | Murimba | S | M |   | UNICEF |
| 58 | Murodza | T | F | Assistant | MYIEE |
| 59 | Muromo | T | M | Director | Impact Research International |
| 60 | Mushininga | C | F | President | ZPHCA |
| 61 | Mutongerwa | N | F | Project Cordinator | Impact Research International |
| 62 | Mutume | G | F  | Assistant | NASCOH |
| 63 | Muwoni | L | M | Child Protection Specialist | UNICEF |
| 64 | Muwoni  | P  | F |   | WEI |
| 65 | Muzenda | T M | M  |   | MPSLSW |
| 66 | Ngorima | L |   |   | MPSLSW |
| 67 | Nhengo | A | F |   | MWAGCD |
| 68 | Njarava | R | M | Chairperson | ZOPO |
| 69 | Nkomo | N | M | Director | MLGPWNH |
| 70 | Nyamanhindi | R | M |   | UNICEF |
| 71 | Nyanungo | K | F | Principal Director | MoPSE |
| 72 | Perez | N |   |   | UNRCO |
| 73 | Prof Kaseke | E | M | Consultant | Impact Research International |
| 74 | Ravenga | E | F |   | FODPOZ |
| 75 | Ruswa | C | M | Assistant | NASCOH |
| 76 | Sanyanga | S  | F | CEO | AFHOZ |
| 77 | Tsafack | C | F | Child Protection Specialist | UNICEF |
| 78 | Verida | N |   |   | FWC |
| 79 | Vusani | C | M | Director | MoPSE |
| 80 | Wutete | R | F | Social Protection Specialist | World Bank |
| 81 | Zava | O | F | EO Learner Welfare | MPOSE |
| 82 | Zenze | C | M | Principal Economist  | MOAMID |
| 83 | Zhakata | T |   |   | MPSLSW |
| 84 | Zhou | I | F |   | NASCOH |

1. Whilst the ZEDS document of 2007 was superseded by the Medium Term Plan of 2011, this definition was deemed appropriate and comprehensive. [↑](#footnote-ref-1)
2. Mugabe, F., T. Thomas, S. Hachigonta and L. Sibanda. Zimbabwe. In *Southern African agriculture and climate change: a comprehensive analysis*, (eds.) Hachigonta, S. G. Nelson, T. Thomas and L. Sibanda. Washington, D.C.: IFPRI. [↑](#footnote-ref-2)
3. ZimVAC, in World Bank Social Protection Policy Note, 2014 [↑](#footnote-ref-3)
4. *cited in*Gandure, 2009 [↑](#footnote-ref-4)
5. A list of participants who attended the National Consultative Workshop in Gweru in November 2014 is included in Appendix B [↑](#footnote-ref-5)