CARE is independent, non-political, and non-sectarian and uses its expertise to help poor people take steps to improve their own lives. We place special focus on working alongside poor women because, equipped with the proper resources, they have the power to help whole families and entire communities escape poverty. In 2018 in Zimbabwe, CARE projects reached an estimated 215,000 direct beneficiaries.

CARE began working in Zimbabwe in 1992 in response to a severe regional drought and soon expanded its programming to address longer-term development issues primarily in small economic activity development. Today, CARE International in Zimbabwe has a diverse program focused on food security, agriculture and natural resource management, economic development (including micro-finance, business development services, input and output markets, etc.), water, sanitation and hygiene improvements, and health and other social protection issues (including maternal and child health and youth focused programming).

Population: 15.25 million (est 2014)
Life expectancy at birth: 58.1 years
Adult literacy rate: 83.6%
Access to improved water source: 82%
GDP per capita (PPP):* 953.4US$
Infant mortality rate: 90 per 1,000 live births
Maternal mortality rate: 14.9%
HIV prevalence: 14.7%


More than 70% of CARE’s project participants in Zimbabwe are women. In all of our programs, CARE emphasizes the leading role that women play in moving households out of poverty and our programs work to establish enabling environments that support women in their quest to improve the quality of life of their families. Initiatives are targeted at improved household food security, income generation, improved decision-making, and increased access to education and health services. CARE works with communities (and specifically with men) to expand space for decision-making and to create leadership opportunities for women.

CARE integrates several cross-cutting themes into all our programming, including: HIV/AIDS; child participation; gender, to increase gender equity; and, partnerships, to enhance and develop meaningful collaboration with a range of local authorities, the private sector and civil society for maximum benefit of poor communities.
Emergency Response

El Nino and La Nina affected Zimbabwe between 2017 and 2018, and in 2019 it was not spared from Cyclone Idai which made its landfall in March. The cyclone affected 270 000 (140 000 women and 130 000 men) with 70 000 of this number reported as displaced. CARE was amongst the first organisations to respond.

We assist communities to respond, recover and prepare for potential disasters. CARE is responding to the humanitarian needs due to Cyclone Idai, as well as the drought with specific emphasis on the Southern Region. According to the Zimbabwe Vulnerability Assessment Committee (ZimVAC) Rural Livelihoods Assessment (2019), it is estimated that 5.5 million people in the rural areas are food insecure. The economic challenges have also affected people residing in urban areas to become food insecure.

Our current emergency response is as follows;

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Donor</th>
<th>Location</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restoring Protective, Inclusive and Quality Education for cyclone affected learners</td>
<td>UNICEF</td>
<td>Bikita, Zaka</td>
<td>Education and WASH</td>
</tr>
<tr>
<td>OFDA Assisting vulnerable food insecure household recovery from mid-season drought and erratic rainfall</td>
<td>OFDA</td>
<td>Chipinge, Chimanimani, Mutare</td>
<td>Shelter, WASH, Non Food Items</td>
</tr>
<tr>
<td>WINS WASH in Schools</td>
<td>UNICEF</td>
<td>Mwenezi, Chiredzi, Zaka</td>
<td>WASH</td>
</tr>
<tr>
<td>Cyclone Idai Response and Recovery in Manicaland Province</td>
<td>ECHO</td>
<td>Chipinge, Chimanimani, Mutare</td>
<td>CASH programming (Nutrition, protection)</td>
</tr>
<tr>
<td>IOM Cyclone Idai – Shelter &amp; NFIs</td>
<td>IOM</td>
<td>Chimanimani</td>
<td>Shelter, NFIs</td>
</tr>
<tr>
<td>Bill &amp; Melinda Gates Foundation</td>
<td>Bill &amp; Melinda Gates Foundation</td>
<td>Chirungu, Chipingi</td>
<td>SEED funds, WASH kits distribution</td>
</tr>
<tr>
<td>GAC &amp; HC – Cyclone IDAI Response</td>
<td>GAC</td>
<td>Mutare, Buhera</td>
<td>Education, SRHR</td>
</tr>
</tbody>
</table>

CARE seeks a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security.
PROGRAM 1:

**Poor, rural women, in female headed households, unable to fully exercise their rights, residing in areas dependent on agricultural livelihoods and at significant risk from the shocks of drought**

Poverty, is a multi-dimensional challenge which has been directly and indirectly affecting the ability of communities to respond and adapt to the effects of climate variability. Other related challenges include a declining natural resource base, recurring drought combined with an have had devastating effects on Zimbabwe’s rural agricultural-based economy. Large percentages of smallholder famers, predominately women, residing in natural regions IV and V, have been chronically food insecure for the better part of the last decade.

Successive droughts have compromised traditional seed retention systems, and input supply through government schemes is often late and inadequate. Quality small grain and legume seeds are insufficient; fertilizer is often unavailable or prohibitively priced for most rural farmers. Crop performance is compromised due to subsequent dry spells when the crop is at vegetative stages. Productive capacities for dams and other water sources, extension services and technical oversight and capacity to provide appropriate technical solutions and alternatives to traditional farming techniques in a changing environment have deteriorated, affecting livelihoods for the rural populace.

CARE helps to improve food security and the income of poor families through ecologically sound, community-based agriculture and natural resource management in ways that strengthen local problem solving capacity and social equity, especially for women. Programs also provide training and technical expertise supporting the construction of irrigation and fencing structures to establish community and homestead gardens, contributing to household and community food and nutrition security. CARE’s approach prioritizes practical, cost-effective and sustainable solutions. CARE believes that support to practice good conservation practices, combined with viable economic opportunities for poor households, help households move out of poverty.

Access to safe water and improved sanitation continue to be major challenges, particularly for rural Zimbabweans. There is a constant recurrence of cholera outbreak and efforts to improve access to safe water, sanitation and hygiene behaviours have been and continue to be of primary importance in ensuring the health of Zimbabweans.

Future efforts are focused on supporting long-term sustainable economic and social change, particularly for female-headed households, dependent on agric-livelihoods and living in drought prone areas. Approaches look at the social, economic, structural, climate change-oriented and environmental barriers to lasting solutions out of poverty.

**Projects under Program 1**

Enhancing Nutrition Stepping Up Resilience and Enterprise

*CARE Location(s): Bikita, Chivi, Masvingo, Mwenezi, Zaka Districts (Masvingo province); Donors: USAID Development Food Aid Program*

ENSURE's strategy is to re-establish food security of vulnerable households through an integrated and holistic package of interventions focused on:
increasing household food production; promoting entrepreneurship; improving access to markets; increasing household income, improving nutrition, and improving community resilience to natural disasters or economic shocks.

CARE maintains strong monitoring systems that allow for early response to poor harvests, increasing food prices in the markets and other shocks to household food, income and nutrition security. Likewise, our community-based, livelihoods centered disaster risk reduction programming helps communities identify and protect against hazards, among them drought.

Future efforts will continue to focus on long-term solutions to meeting the unique needs of female-headed households in drought-prone regions and on those of vulnerable households with limited labor capacity.

Putting Women and Girls at the Centre of Improving WASH and Health Outcomes for Chivi Residents

**CARE Location(s):** Chivi (Masvingo province);
**Donors:** Australian AID NGO Cooperation Program (ANCP)

During the life of the project, CARE will support DWSSC to provide safe water supply to 365,001 people and encourage 1,358 communities to achieve open defecation free status. This implies a target of approximately 67,900 households (339,500 people with access to improved sanitation) to construct their own upgradeable Blair VIP latrines. Emphasis will be placed on community based management, with strong engagement of women in leadership roles, and demand-creation for services while supporting the institutional strengthening of DWSSC to respond effectively to increased demand. CARE will leverage existing platforms, including its established agro-dealer/rural retailer network to engage private sector in providing solutions to supply chain challenges. CARE is also ensuring that learning and best practices are documented and shared through the provincial and national program platforms.

Improving Water, Sanitation and Hygiene in Rural areas of Zimbabwe

**CARE Location(s):** Gutu, Masvingo, Mberengwa and Zaka Districts
**Donors:** DFID and Swiss Aid (though UNICEF)

CARE has a long-standing commitment to development, specifically poverty reduction, in Midlands and Masvingo provinces, and has supported district and provincial WASH objectives in all four districts in the past. The proposal, based on inputs from authorities and communities, places considerable emphasis on zero subsidy sanitation and helping Government achieve open defecation free (ODF) status at scale, with priority given to locations at high risk for cholera and other water-borne diseases. Similarly strong emphasis is placed on increasing the voice of women and girls, and the vulnerable and excluded, in community based management and decision-making platforms, ensuring that services respond to the unique needs of women, men, girls and boys.
The overall goal of the program is to reduce mortality due to WASH related diseases, reduce the burden of water collection on women and girls, and to improve dignity, basic education outcomes, and gender equality.

PROGRAM 2:

Poor, vulnerable urban women and girls of reproductive age (aged 15-49)

According to the UN World Urbanization Trends 2014 globally, more people live in urban areas than in rural areas, with 54 per cent of the world’s population residing in urban areas in 2014. In 1950, 30 per cent of the world’s population was urban, and by 2050, 66 per cent of the world’s population is projected to be urban. Africa and Asia are urbanizing faster than the other regions and are projected to become 56 and 64 per cent urban, respectively, by 2050. The report concludes that as the world continues to urbanize, sustainable development challenges will be increasingly concentrated in cities, particularly in the lower-middle-income countries where the pace of urbanization is fastest. Integrated policies to improve the lives of both urban and rural dwellers are needed.

The global literature review for Program 2 identified five common issues of concern for urban women and girls across multiple countries and contexts. These were:

- **Safety and Security**: Violence, crime, and the fear of crime are the most common factors that shape the lives of urban women, resulting in restrictions in their ability to move freely and engage with city life.

- **Housing**: Urban housing is characterized by cramped living conditions and insecurity of tenure. Lack of access to credit and complicated legal processes exacerbate women’s inability to improve their housing. Cramped living conditions increases the risk of domestic violence and sexual abuse.

- **Health**: The most significant health risk in urban areas is lack of safe water and poor sanitary conditions combined with cramped living conditions. As well as the direct health risks women also bear the burden of finding water for the family and caring for the sick.

- **Livelihoods**: Women are primarily engaged in the informal sector, and are especially prominent in street vending and domestic work. In both instances working conditions and remuneration are often poor and make women vulnerable to abuse and exploitation. Commercial sex work has also become a livelihood strategy for a significant number of urban women.

- **Governance**: Due to the differences in living conditions, responsibilities and relations between women and men they experience urban life in different ways. Local democracy, inclusiveness, and sustainability can only be achieved when women have an equal say in the way that cities and municipalities are organized and managed. Women’s needs and priorities need to be reflected in urban planning and design, service provision, roads and transportation, shelter, water, sanitation, solid waste management, fiscal policies, economic development and recreation, as well as in politics and administration.²

Projects under Program 2

Empowering Adolescents for Lifelong Education

CARE Location(s): Epworth and Zaka

Donors: Patsy Collins Trust Fund Initiative

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CARE is supporting adolescents so that they are given access to relevant and accessible information for priority needs and have appropriate personal skills to act on that information and are exposed to a broader world view then they will be empowered to pursue informed life choices. CARE’s innovative model is premised on the Power Within (PW) concept as a foundation to give adolescents the personal capacities they require to make informed decisions. This project is piloting a “PW+” model which has sexual and reproductive health, financial intelligence and advocacy for action layered onto the foundational modules to ensure value from the school experience and preparation for the reality of post-school life. PW+ catalyses adolescent-led actions in which the life skills acquired will be translated into action, with the adolescents themselves engaged in school and national level advocacy initiatives and policy engagement, drawing on the collection and analysis of learning as well as the evidence generated in the pilot stage. Role models from within and outside of the adolescents’ immediate context are engaged to motivate adolescents through the use of ICT, community projects and career days.

PROGRAM 3:

Rural vulnerable girls aged 10-19 years, with limited choices, and at high risk of early of marriage, pregnancy, HIV, exploitation and abuse.

Education has long been a high priority for Zimbabweans and Zimbabwe has historically been a model Country for education in Africa. However, in recent years, enrolment and retention statistics have been declining, largely as a result of economic hardship and the significant decline in employment opportunities. When families are faced with difficult choices and limited resources, opportunities for girls to attend school often take lower priority than for boys. Similarly, the largest burden of household chores falls to women and girls often limiting the girls’ time to attend school, to complete homework and to participate fully in the classroom and community, as well as to have time with her peers.

Exploitation and abuse and early marriage are also key reasons why girls don’t attend or stay in school, as well as for lower performance when compared with boys, particularly at secondary level. CARE is currently working to help address the social-cultural and economic barriers that affect enrolment and retention in schools, and to improve girls’ performance in the classroom. CARE, and partners, are working with School Development Committees, traditional and religious leaders and mother’s groups to address the gender and social dynamics that limit girls’ enrolment and full participation in school.

Simultaneously we are working with the girls’ themselves, their male peers, teachers and leaders/mentors in the community to develop leadership capacities in the girls’ themselves.
Projects under Program 3

Improving Gender, Attitudes, Transition and Education Outcomes

CARE Location(s): Binga, Hwange, Lupane, Nkayi, Gokwe North, Gokwe South, Mberengwa, Gwanda, Mangwe, Beitbridge, Chivi
Donors: UKAID DFID

The project combines four main models which are the Whole School Development, Community based education, Girls Leadership clubs and Community Actions. These models are complementary in ensuring that girls acquire quality education and continue learning and able to complete school with their peers. The IGATE project values the importance of engagement with community leadership, men, boys and other influential members in advocating for girls education. Through the project activities in areas such as Gokwe North, Mberengwa and Lupane there has been an increased number of men and boys participating in activities that support girls’ education and they have become agents of change.

Building Resilience in Schools

CARE Location(s): Chivi
Donors: New Ventures Fund

The New Ventures Fund - Building Climate Resilient Schools in Zimbabwe (NVF-BCRS) pilot project aims to build the capacity of the school to ensure that every girl (and boy) continues to attend school and is motivated to learn during climate crises. While the project include activities which are designed to build resilience more broadly, the intervention is more biased towards addressing drought related challenges.

Putting Women and Girls at the Centre of Improving WASH and Health Outcomes for Chivi Residents

CARE Location(s): Chivi (Masvingo province);
Donors: Australian AID NGO Cooperation Program (ANCP)

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