Zimbabwe Livelihoods Assessment Committee (ZimLAC)

2024

Rural Livelihoods Assessment

Matabeleland South Provincial Report

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Foreword

The 2024 Zimbabwe Livelihoods Assessment Committee (ZimLAC) Rural Livelihoods Assessment (RLA) was undertaken against the background of the 2023/2024 El Niño induced drought. This RLA, the 24th since inception, was guided by the urgent need for the Government of Zimbabwe to determine the impact of the El Niño induced drought on households in the rural areas and provide evidence to inform decision making. The assessment will also ensure the timely development of holistic and robust response programmes.

Considering that this was a unique year, the ZimLAC engaged various data collection approaches to enhance ground-truthing of contextual issues affecting food and nutrition security in different geographic areas. In that regard, the household interviews and community Focus Group Discussions were complemented by interviews with selected Chiefs (together with the Headmen and other traditional leaders who fall under their jurisdiction) and district level Key Informant Interviews. This multi-pronged approach contributed towards collation of in-depth insights into pertinent rural households' livelihoods issues which include demographics, health, nutrition, WASH, social protection, food consumption patterns, income sources, income levels, expenditure patterns, coping strategies, shocks and food security.

We would like to extend our sincere gratitude to the Government of Zimbabwe and its Development Partners for the financial and technical support which enabled us to undertake the survey in a timely manner. We remain indebted to the food and nutrition security structures at both provincial and district levels for their support. We appreciate the rural communities of Zimbabwe, the local authorities as well as Traditional Leaders for cooperating and supporting this assessment. We submit this report to you for your use and reference in your invaluable work towards addressing priority issues keeping many of our rural households vulnerable to food and nutrition insecurity.

George D. Kembo (Dr.)

DIRECTOR GENERAL/ ZIMLAC CHAIRPERSON

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Acknowledgements

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- Office of the President and Cabinet
- Food and Nutrition Council
- Ministry of Finance, Economic Development and Investment Promotion
- Ministry of Lands, Agriculture, Fisheries, Water and Rural Development
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- Ministry of Health and Child Care
- Ministry of Local Government and Public Works
- Rural District Councils (RDCs)
- Ministry of Women Affairs, Community, Small and Medium Enterprise Development
- United States Agency for International Development (USAID)
- ZIMSTATS
- United Nations Children's Fund (UNICEF)
- START NETWORK
- United Nations World Food Programme (WFP)
- UNDP
- Catholic Relief Services
- Adventist Relief Agency (ADRA)
- World Vision
- Red Cross
- Bindura University of Science Education
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- Plan International
- CARITAS
- Lower Guruve Development Association
- Mwenezi Development Trust
- LID Agency
- Abundant Life For All (ALFA)
- Members of Parliament (Shamva, Murehwa South, Murehwa West and Murehwa North Constituencies)
- St Daniels Rehabilitation Centre
- JF Kapnek Trust Zimbabwe
- Takunda
- Family Aids Caring Trust (FACT)
- Valley of Hope
- Simukai
- AMALIMA Loko
- Midlands AIDS Service Organisation
- ZVANDIRI
- Aqua Culture Zimbabwe
- CARE International
- Nutrition Action Zimbabwe
- Mavambo Trust
- Mavambo Orphan Care
- Zimbabwe Prisons and Correctional Services
- CIMMYT
- Zimbabwe Council of Churches
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- Harare Rotary Club CBD
- Centre for Agro-Entrepreneurship & Sustainable Livelihoods Trust
- Africa Ahead

Acknowledgement of Financial Support

Acronyms

EA	Enumeration Area
FNC	Food and Nutrition Council
FNSP	Food and Nutrition Security Policy
HDDS	Household Dietary Diversity Score
NDS 1	National Development Strategy 1
RLA	Rural Livelihoods Assessment
SAM	Severe Acute Malnutrition
ZimLAC	Zimbabwe Livelihood Assessment Committee

Background and Introduction

Introduction

- ZimLAC plays a significant role in operationalising Commitment Six, of the Food and Nutrition Security Policy (GoZ, 2012), in which the "Government of Zimbabwe is committed to ensuring a national integrated food and nutrition security information system that provides timely and reliable information on the food and nutrition security situation and the effectiveness of programmes and informs decision-making".
- The information system is critical in informing decision making as it provides evidence for timely response by Government.
- ZimLAC livelihood assessments' results continue to be an important tool for informing and guiding policies and programmes that respond to the prevailing food and nutrition security situation with 11 urban and 24 rural livelihoods updates having been produced to date.

Zimbabwe Livelihoods Assessment Committee (ZimLAC)

ZimLAC is a consortium of Government, Development Partners, UN, NGOs, Technical Agencies and the Academia which was established in 2002 and is led and regulated by Government. It is chaired by FNC, a Department in the Office of the President and Cabinet whose mandate is to promote a multi-sectoral response to food insecurity and nutrition problems in a manner that ensures that every Zimbabwean is free from hunger and all forms of malnutrition.

ZimLAC supports Government, particularly FNC in:

- Convening and coordinating national food and nutrition security issues in Zimbabwe.
- Charting a practical way forward for fulfilling legal and existing policy commitments in food and nutrition security.
- Advising Government on the strategic direction in food and nutrition security.
- Undertaking a “watchdog role” and facilitating action to ensure sector commitments in food and nutrition are kept on track through a number of core functions such as:
    - Undertaking food and nutrition assessments, analysis and research;
    - Promoting multi-sectoral and innovative approaches for addressing food and nutrition insecurity, and;
    - Supporting and building national capacity for food and nutrition security including at sub-national levels;

Assessment Rationale

The assessment results will be used to guide the following:

- Evidence based planning and programming for targeted interventions.
- Development of interventions that address immediate to long term needs as well as building resilient livelihoods.
- Early warning for early action.
- Monitoring and reporting progress towards commitments within the guiding frameworks of existing national and international food and nutrition policies and strategies such as the National Development Strategy 1, the Food and Nutrition Security Policy, Sustainable Development Goals and the Zero Hunger strategy.

Purpose

The overall purpose of the assessment was to provide an annual update on livelihoods in Zimbabwe's rural areas to inform policy formulation and programming appropriate interventions.

Objectives

The specific objectives of the assessment were:

1. To estimate the rural population that is likely to be food insecure in the 2024/2025 consumption year, their geographic distribution and the severity of their food insecurity.
2. To assess the nutrition status of the rural population.
3. To describe the socio-economic profiles of rural households in terms of such characteristics as their demographics, access to basic services (education, health services, water, sanitation and hygiene services), assets, income sources, agriculture, incomes and expenditure patterns, food consumption patterns and consumption coping strategies.
4. To determine the coverage of humanitarian and developmental interventions.
5. To determine the effects of shocks experienced by communities on food and nutrition security.
6. To identify development priorities for communities.

Contextual Analysis - Background

- The 2023/2024 El Niño event caused widespread drought conditions across southern Africa, characterized by a late onset of rains, extended mid-season dry spells and extreme high temperatures. The El Nino phenomenon significantly and adversely impacted seasonal rainfall's spatial and temporal distribution.

- The extended dry conditions have had a widespread, severe impact on crops, as it occurred at a time when cereal crops were generally most susceptible to water deficits, resulting in widespread crop failure.

- Reduced precipitation exacerbates water scarcity, impacting agriculture, hydroelectric power generation, and water supply for communities (drinking and sanitation).

- Zimbabwe, like most Sub-Saharan countries was in the grip of the 2023/24 El Nino-induced drought which resulted in massive crop failure, depletion of water resources and pastures.

- According to the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development's 2024 2nd Round Crop, Livestock and Fisheries Assessment Report, both agricultural production and productivity for the 2023/ 2024 agricultural season were severely and negatively impacted by, arguably, the worst drought-induced El Nino in 40 years. Statistically, the season had the latest and driest start to a summer season in 40 years.

Contextual Analysis - Background

- The majority of rural households in Zimbabwe rely on rain-fed agriculture which is susceptible to climate change and variability. The dry conditions had an adverse effect on the commencement of planting nationwide, resulting in a substantial decrease in the area planted and crop yields. In addition, the dry conditions resulted in low livestock productivity and poor pastures which ultimately affects food security and livelihood options.

- The delayed onset of the rainfall season resulted in late planting as most farmers started planting in late December following some significant rainfall across the country which also resulted in a trail of destruction to infrastructure and livelihoods. More than 80% of the country received below normal rainfall average by end of February 2024. Prolonged dry weather conditions were again experienced in November and the first half of December 2023. The country further experienced the driest month of February 2024 on record.

- Crop failure was also exacerbated by the outbreak of fall armyworm (FAW) caterpillars with the highest infestation occurring in Mashonaland Central, Mashonaland East, Midlands, and Matabeleland South provinces. Outbreaks of African Armyworm, quelea birds and armoured crickets were also reported. Control measures were put in place and minimized the damage.

- Livestock was impacted by the El Niño induced dry conditions, which resulted in considerable shortages in pasture and reduced water availability for livestock. In Zimbabwe, over 9,000 drought-related cattle deaths were reported and over 1.4 million cattle were reported as being at high risk of drought conditions and death due to lack of pasture and water.

- The Zimbabwean economy being agro-based has been largely affected notwithstanding mitigatory measures vigorously pursued by Government and partners.

Economic Stabilisation Measures

- Government, through the Ministry responsible for Finance put in place a number of measures which resulted in the following:

- Government delivered the 2024 Monetary Policy Statement which was expected to ensure lasting stability, certainty, and predictability in the exchange rate and inflation.
- The Reserve Bank introduced a structured currency which was expected to result in the dissipation of inflationary pressures in the short to medium term.

- Against this background, the Monetary Policy Statement primarily focused on immediate measures necessary to boost the demand for local currency in the multicurrency economy, fostering a stable and sustainable exchange rate, rebuilding market confidence and policy credibility and supporting a stable and sustainable economy as enshrined in Vision 2030 and (National Development Strategy 1) NDS1.

- The foreign currency receipts for January and February 2024 amounted to US$2.2 billion compared to US$1.8 billion received during the same period in 2023, representing a 23% increase.

- Month-on-month inflation also declined from a peak of 12.10% in June 2023 to -1.3% in August 2023. Driven by the exchange rate volatility, the month-on-month inflation rebounded to 4.7% in December 2023 and 5.4% in February 2024.

- However, the EL-Nino-induced drought, which turned out to be more severe than initially anticipated was expected to impact negatively on the domestic economy’s growth trajectory.

Government Mitigatory Measures

- In terms of Section 27(1) of the Civil Protection Act [*Chapter 10:06],* His Excellency, the President of the Republic of Zimbabwe, Cde Dr E.D Mnangagwa declared a nationwide State of Disaster due to the El Nino induced drought on the 3rd of April 2024. In order to facilitate a coordinated response to the climate-induced drought and allow for resource mobilization and response planning in the short and medium term, Government developed the robust *2024 EL NINO INDUCED DROUGHT DISASTER: DOMESTIC AND INTERNATIONAL APPEAL FOR ASSISTANCE*. In the Appeal, Government focuses on search and rescue, mitigation and resilience building in the following critical areas:
    - Agriculture
    - Food and nutrition security
    - Protection
    - Health
    - Water, Sanitation and Hygiene (WASH)
    - Education
    - Environment and Natural Resources
    - Energy
    - Macro, Small and Medium Enterprises
- The impact of the current El Nino induced drought was expected to last until March 2025 for most communities hence it was critical that requisite resources be mobilized urgently to assure communities of sustenance. The Appeal seeks to raise a total of USD 3.9 Billion.

Contextual Analysis – Government Mitigatory Measures

Government remained committed to ensuring that every Zimbabwean is free from hunger and all forms of malnutrition and led the implementation of the following measures to ensure food security for all people:

- **Food Mitigation:** Government is targeting **7.7 million** people in both rural and urban areas who were projected to be food insecure. Of these, 6 million are in the rural areas. Government is embarking on a blitz three-month phased distribution plan prioritising the worst affected areas and the hard to reach. The blitz is targeting the most vulnerable groups who include the elderly, persons with disabilities, orphaned and child-headed households and chronically ill, among others. Each beneficiary will receive a three-month allocation of grain at once which has been pegged at **7.5kg per** person per month translating to **22.5kg per person** for three months and **138,171MT** countrywide. In urban areas, each beneficiary will be given cash equivalent to procure a **10kg bag** of mealie meal via mobile money transfers on a monthly basis.

- Government has also adopted the *Build-Back Better* Strategy to cushion communities and assist them to recover from the El Niño induced drought.

- **Presidential Borehole Drilling Scheme:** In order to alleviate the prevailing water scarcity challenges and climate change, Government is implementing the Presidential Borehole Drilling Scheme. The scheme aims to facilitate the provision of clean water to households and will help to avert the potential threats of waterborne diseases. The solar powered boreholes will also avail the much needed water for consumption and hygiene.

- **Strengthening of Multi-Sectoral Structures** in order to operationalise a cohesive response to the food and nutrition challenges.

Contextual Analysis – Government Mitigatory Measures

On the 12th of March 2024, Cabinet approved the following:

- The Food Security Outlook Report to March 2025 to facilitate winter cereals production planning.
- The consumption of 7,5kg per person per month be used immediately for social welfare and be adjusted after October to 8,5kg per person per month.
- The purchase of local grain at import parity price of USD390 per tonne to mop up excess local grain.
- Duty waiver on the importation of rice and potato seed.
- Importation of Genetically Modified stock feed, under strict supervised milling and distribution.
- Duty free importation of maize, rice and cooking oil by households with effect from July 2024.
- Re-activation of the Grain Mobilisation Committee to monitor private sector imports as well household imports.

Assessment Methodology

Methodology – Assessment Design

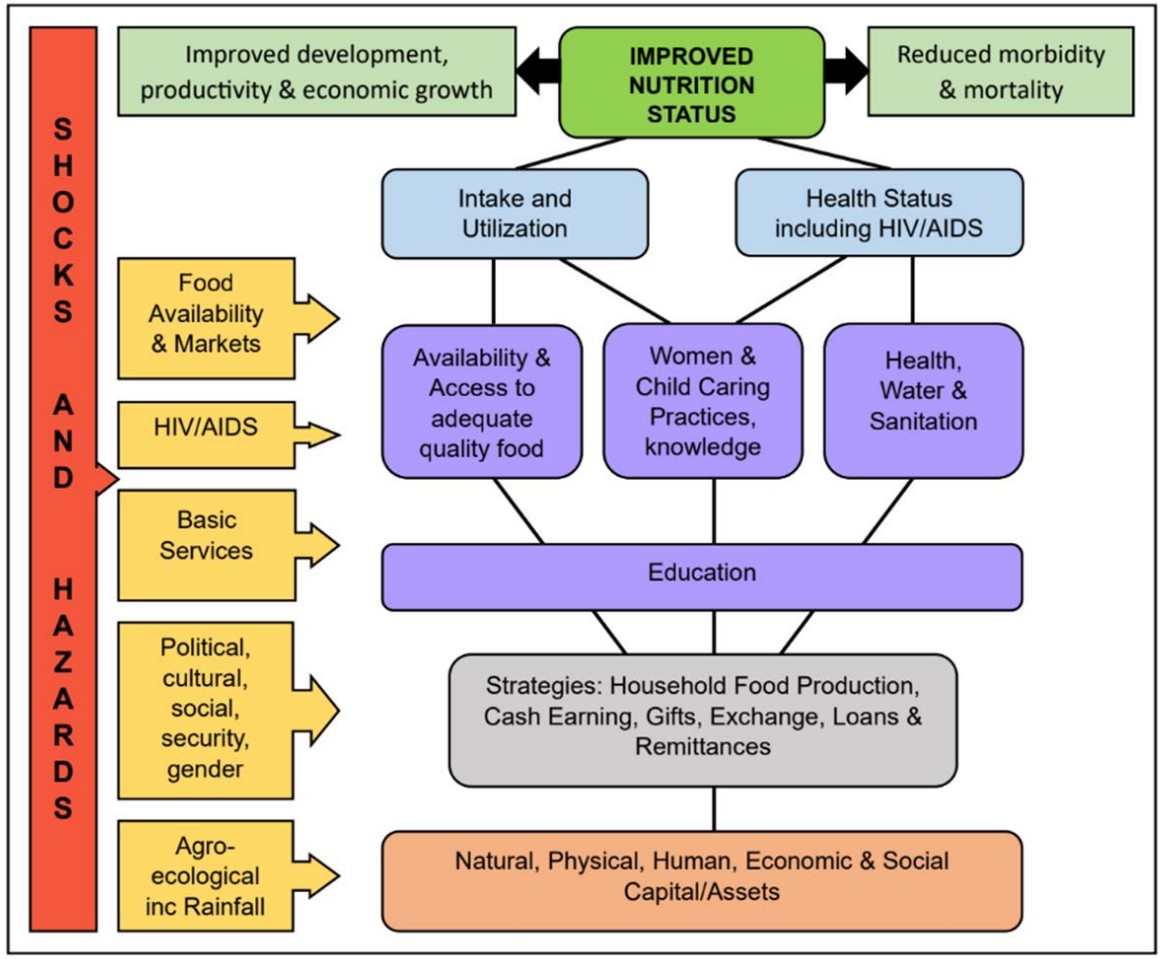


Figure 1: Food and Nutrition Conceptual Framework

- The assessment was a cross-sectional study whose design was guided and informed by the Food and Nutrition Security Conceptual Framework (Figure 1), which Zimbabwe adopted in the FNSP (GoZ, 2012), and the conceptual framework on food security dimensions propounded by Jones et al. (2013).
- The assessment was also guided and informed by the resilience framework (Figure 2) so as to influence the early recovery of households affected by various shocks.
- The assessment looked at food availability and access as pillars that have confounding effects on food security as defined in the FNSP (GoZ, 2012).
- Accordingly, the assessment measured the amount of energy available to a household from all its potential sources hence the **primary sampling unit** for the assessment was the household.

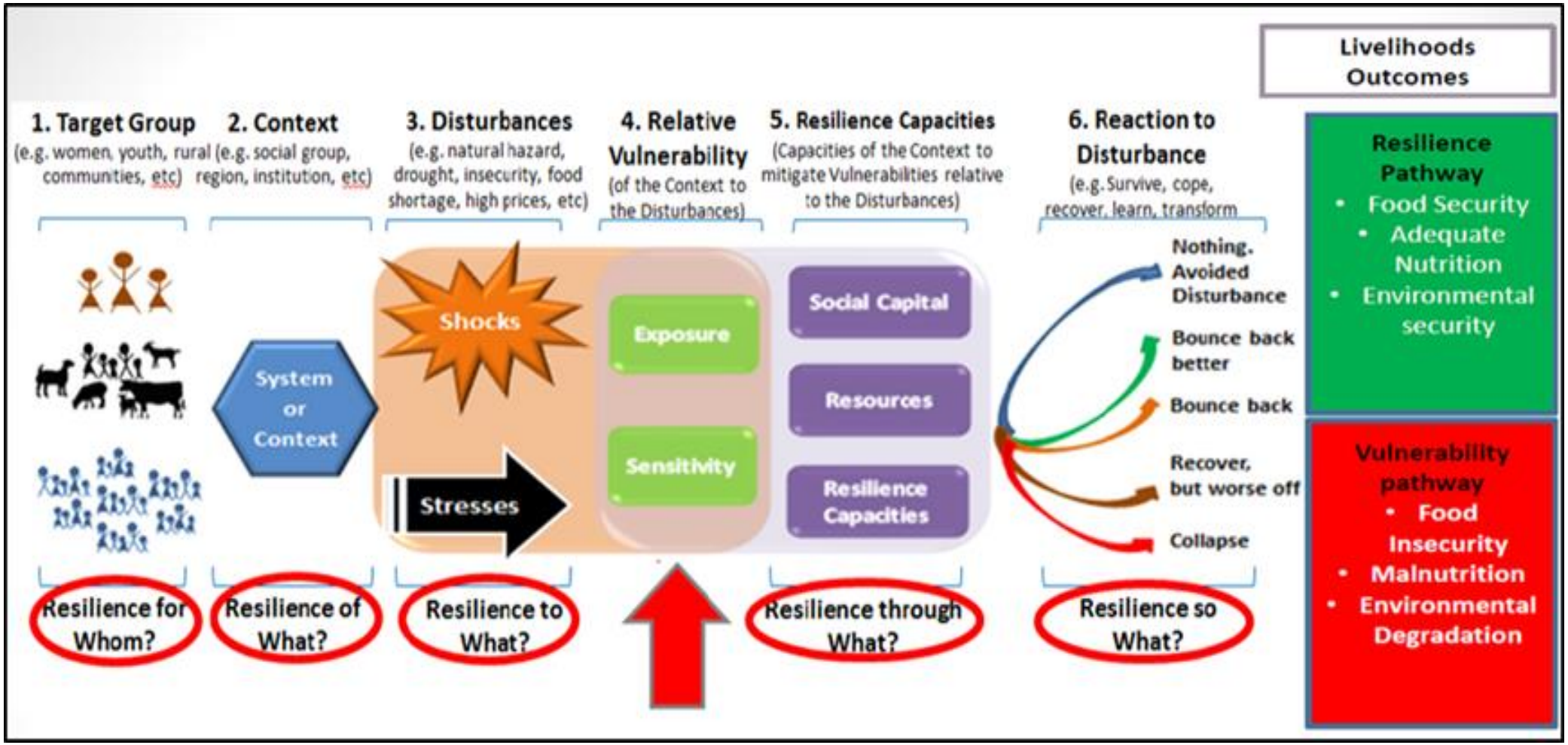


Figure 2: Zimbabwe Resilience Framework (UNDP Zimbabwe, 2015)

Methodology – Assessment Process

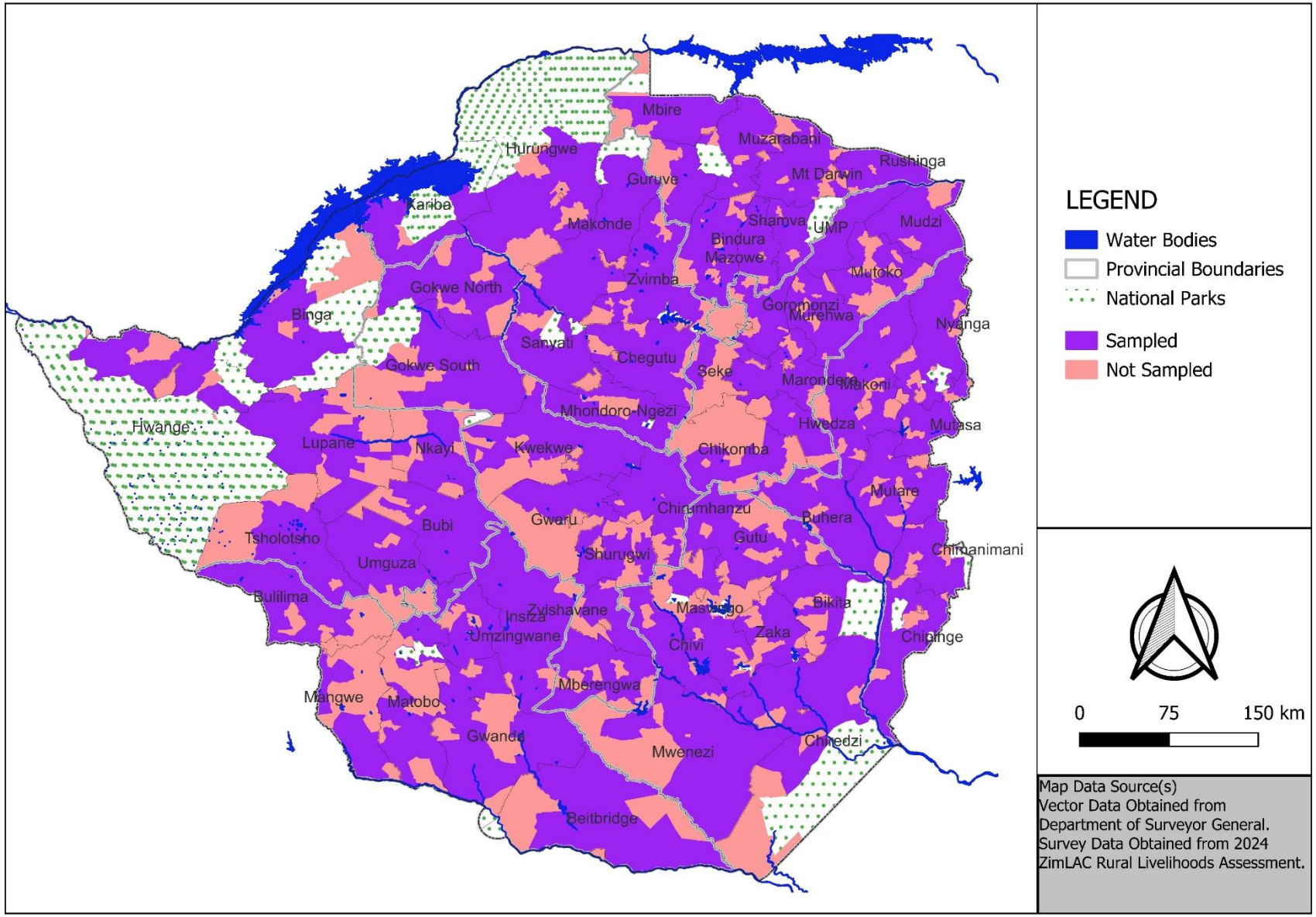
- ZimLAC, through multi-stakeholder consultations, developed an appropriate assessment design concept note and data collection tools informed by the assessment objectives.
- The primary data collection tools used in the assessment were the android–based structured household questionnaire, the community Focus Group Discussion (FGD) guide, Irrigation Key Informant Interview and the Chiefs' FGD guide.
- ZimLAC national supervisors (including Provincial Agritex Extension Officers and Provincial Nutritionists) and enumerators were recruited from Government, United Nations, Technical partners and Non-Governmental Organisations. These underwent training in all aspects of the assessment. Training for enumerators was done at district level.
- The Ministry of Local Government coordinated the recruitment of district level enumerators and mobilisation of provincial supervision and district enumeration vehicles. Three enumerators were selected from each district for data collection and one anthropometrist was responsible for taking anthropometric measurements.
- Primary data collection took place from 4 to 20 May 2024. Data analysis and report writing ran from 27 May to 7 June 2024. Various secondary data sources and field observations were used to contextualise the analysis and reporting.

Methodology - Sampling and Sample Size

- Household food insecurity prevalence was used as the key indicator to determine the sample to ensure 95% confidence level of statistical representativeness at district, provincial and national level.
- The survey collected data from 1 800 randomly selected Enumerated Areas (EAs).
- A two staged cluster sampling was used and comprised of:
  - Sampling of 30 clusters per each of the 60 rural districts, denoted as EAs in this assessment, from the Zimbabwe Statistics Agency (ZIMSTAT) 2022 master sampling frame using the PPS methodology.
  - The second stage involved the systematic random sampling of 10 households per EA (village).
- Atmost 300 households were sampled per district. A total of 2099 households were interviewed.
- 70 FGDs and 7 Chief's Focus Group Discussions were held across all the districts.

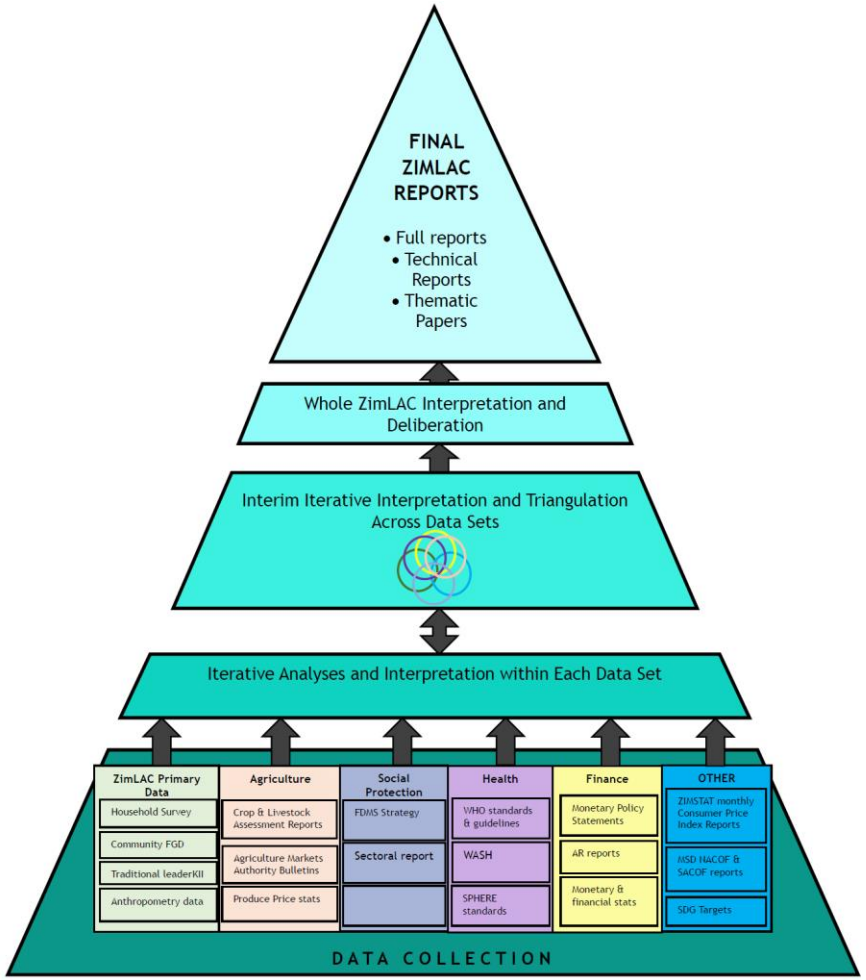
District	Number of Interviewed households
Beitbridge	299
Bulilima	300
Gwanda	300
Insiza	300
Matobo	301
Mangwe	299
Umzingwane	300
Mat South	2099

Methodology – Sampled Wards



Data Preparation and Analysis

- Primary data was transcribed using CSEntry on android gadgets and using CSPro. It was consolidated and converted into SPSS, STATA and DBF datasets for:
  - Household structured interviews
  - Community Focus Group Discussions
  - Chief's Focus Group Discussions
- Data cleaning and analysis were done using SPSS, STATA, ENA, Microsoft Excel and GIS packages.
- Analyses of the different thematic areas covered by the assessment were informed and guided by relevant local and international frameworks, where they exist.
- Gender, as a cross cutting issue, was recognised throughout the analysis.



Technical Scope

The 2024 RLA collected and analysed information on the following thematic areas:

- Health
- WASH
- Nutrition
- Agriculture and other rural livelihoods activities
- Food security
- Shocks and stressors
- Social protection
- Youth
- Linkages amongst the key sectoral and thematic areas
- Cross-cutting issues such as gender

Demographic Description of the Sample

Household Members Characteristics

	Average Household size	Males (%)	Females (%)	Elderly (%)	Child headed (%)
Beitbridge	4.6	43.5	56.5	22.4	0.3
Bulilima	4.6	48.0	52.0	33.3	1
Mangwe	3.4	39.6	60.4	32.8	0
Gwanda	4	46.5	53.5	38	0.7
Insiza	4.9	47.5	52.5	26.7	0.3
Matobo	4.2	44.6	55.4	37.2	0.3
Umzingwane	4.7	50.3	49.7	43.3	0.7
Mat South	**4.3**	**46.0**	**54.0**	**33.4**	**0.5**

- Of the sampled population 46% were males and 54% were females.
- The average household size for Matabeleland South was 4.3.
- The proportion of households who were Elderly headed was 33.4% while 0.5% were child headed.

Characteristics of Respondents : Age and Sex

	Respondent's Sex (%)		Respondent's Average Age years
	Male	Female	Average
Beitbridge	21.1	78.9	46.5
Bulilima	23.3	76.7	48.1
Mangwe	25.8	74.2	46.4
Gwanda	33.7	66.3	50.2
Insiza	27.3	72.7	45.4
Matobo	30.9	69.1	49.3
Umzingwane	27.3	72.7	53.5
Mat South	**27.1**	**72.9**	**48.5**

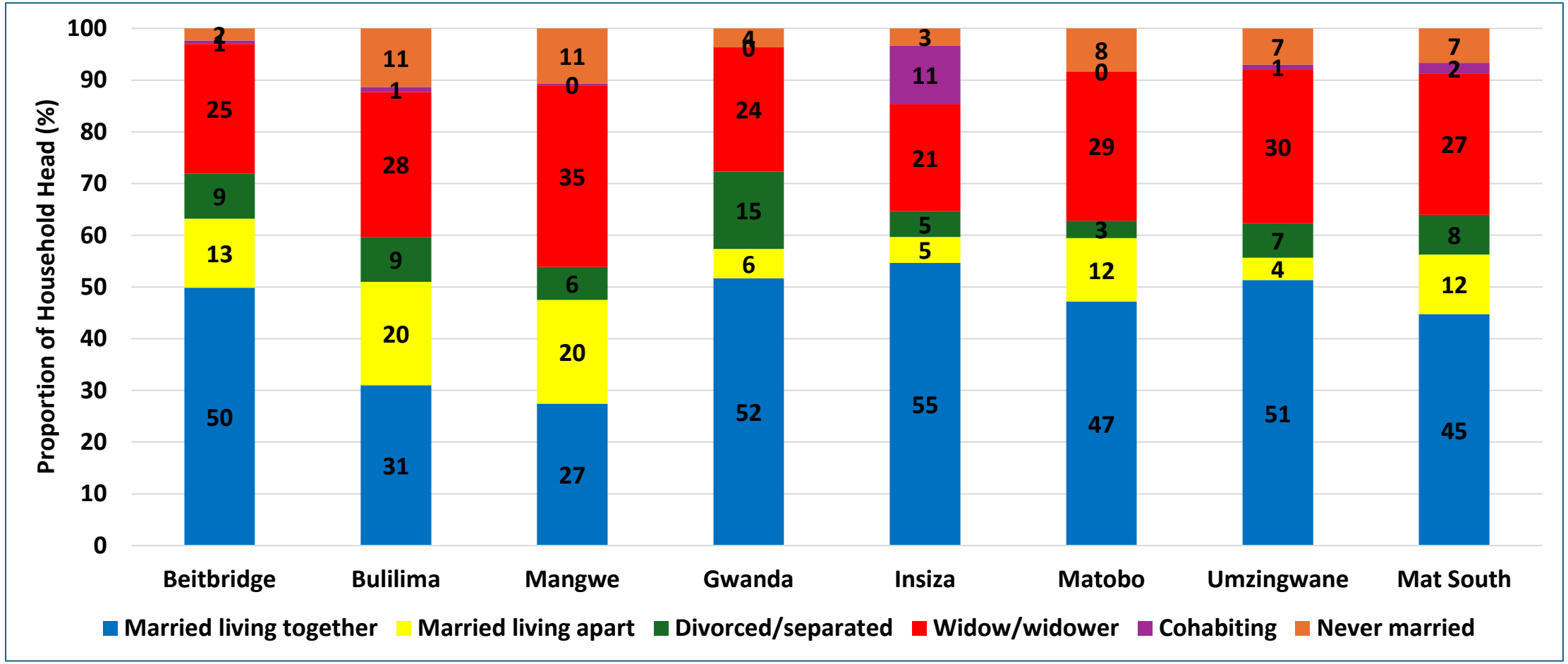
- The average age of respondents was 48.5. Thus interaction was with the reproductive group responsible for household and economic development.
- About 72.9% of the respondents were female.

Characteristics of Household Head : Age and Sex

	Household Head Sex (%)		Household Head Average Age (years)
	Male	Female	Average
Beitbridge	58.9	41.1	59.9
Bulilima	53.7	46.3	54.2
Mangwe	38.1	61.9	64.3
Gwanda	65.3	34.7	58.8
Insiza	68.7	31.3	52.3
Matobo	55.5	44.5	57.0
Umzingwane	60.0	40.0	76.7
Mat South	**57.2**	**42.8**	**60.4**

- About 57.2% households were headed by males while 42.8% by females.
- The average age of household head was 60.4 years.

Characteristics of Household Head : Marital Status



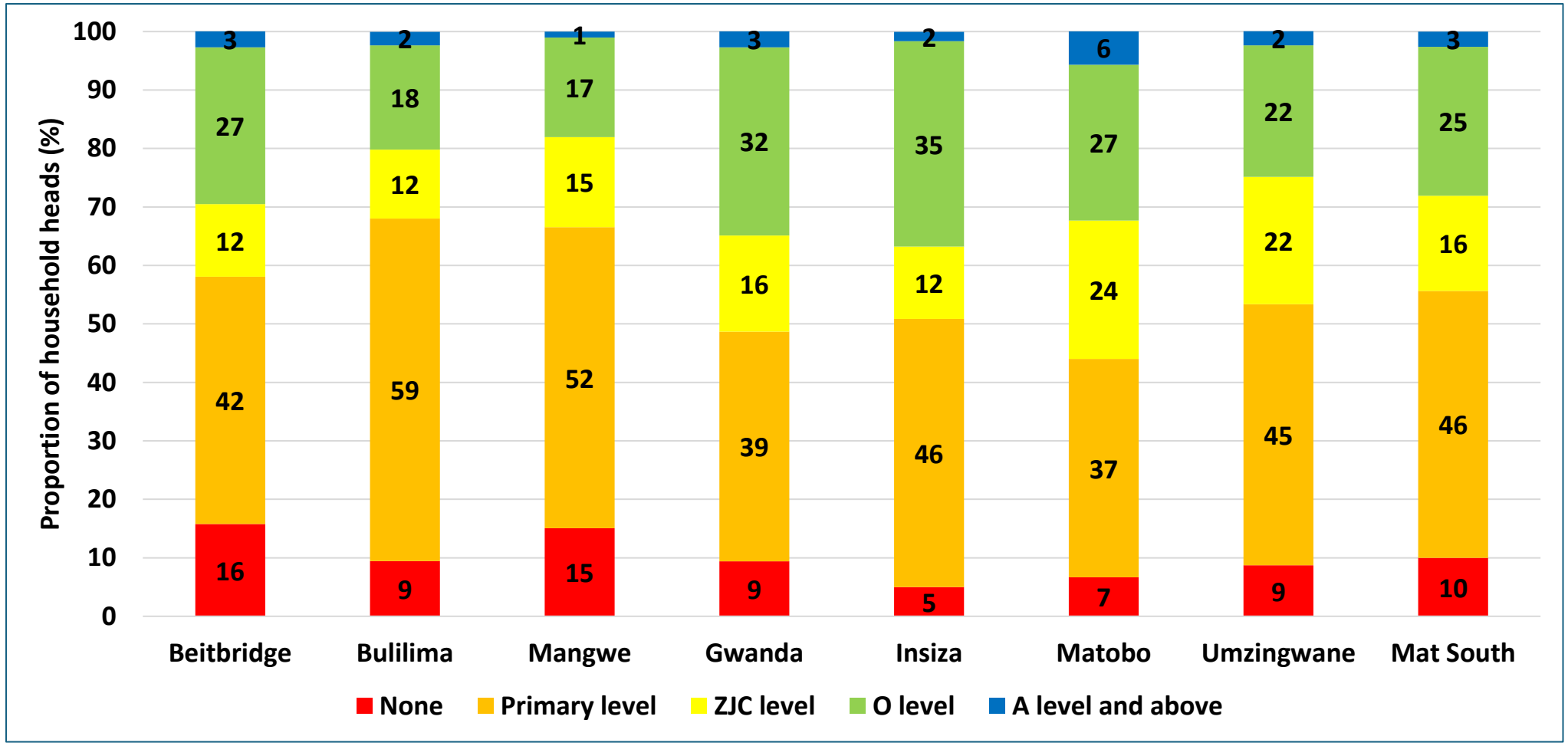
- A greater proportion of household heads (45%) were married living together while the least proportion of household heads were never married (7%).

Characteristics of Household Head : Religion

	Roman Catholic (%)	Protestant (%)	Pentecostal (%)	Apostolic Sect (%)	Zion (%)	Other Christian (%)	Islam (%)	Traditional (%)	Other religion (%)	No religion (%)	Don't know (%)
Beitbridge	3.0	0.3	13.0	22.4	15.4	5.4	0.0	3.3	0.7	33.4	3.0
Bulilima	5.7	2.3	3.7	23.3	34.3	2.3	0.0	0.7	4.3	23.0	0.3
Mangwe	15.1	0.0	7.4	17.7	33.8	5.7	0.0	6.0	2.3	11.7	0.3
Gwanda	2.7	10.0	10.3	25.3	23.7	6.7	0.3	5.7	6.7	7.0	1.7
Insiza	1.3	23.7	13.3	23.7	22.3	0.3	0.0	1.0	0.0	14.3	0.0
Matobo	7.3	14.3	8.0	12.3	27.2	9.6	0.0	1.7	2.0	16.3	1.3
Umzingwane	1.7	14.3	17.7	21.7	12.0	12.3	0.0	2.3	0.0	17.3	0.7
Mat South	5.2	9.3	10.5	20.9	24.1	6.1	0.0	3.0	2.3	17.6	1.0

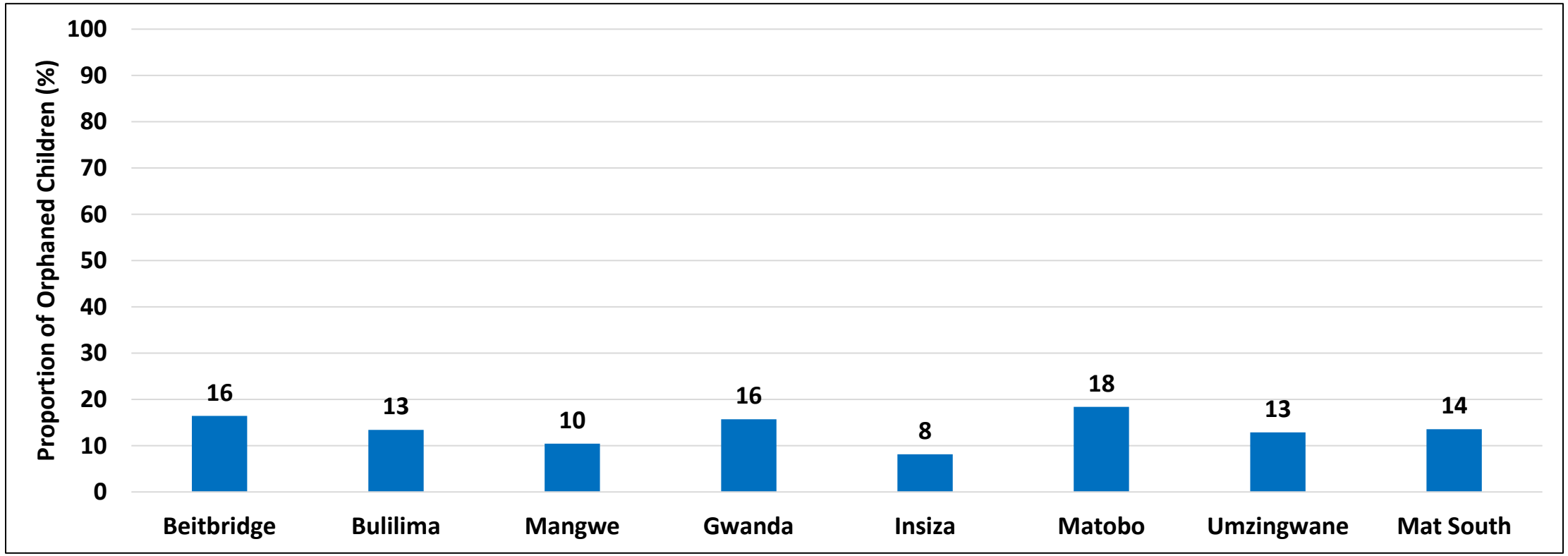
- The highest proportion of household heads were mainly from Zion (24.1%) and Apostolic Sect (20.9%).
- About 17.6% of household heads had no religion.

Characteristics of Household Head : Level of Education attained



- About 90 % of the household heads attained some form of education.

Orphaned Children



- Approximately 14% of the households in Matabeleland South had orphans.
- The highest proportion of households that had orphans was in Matobo (18%) while the lowest was in Insiza (8%).

Chronic Conditions

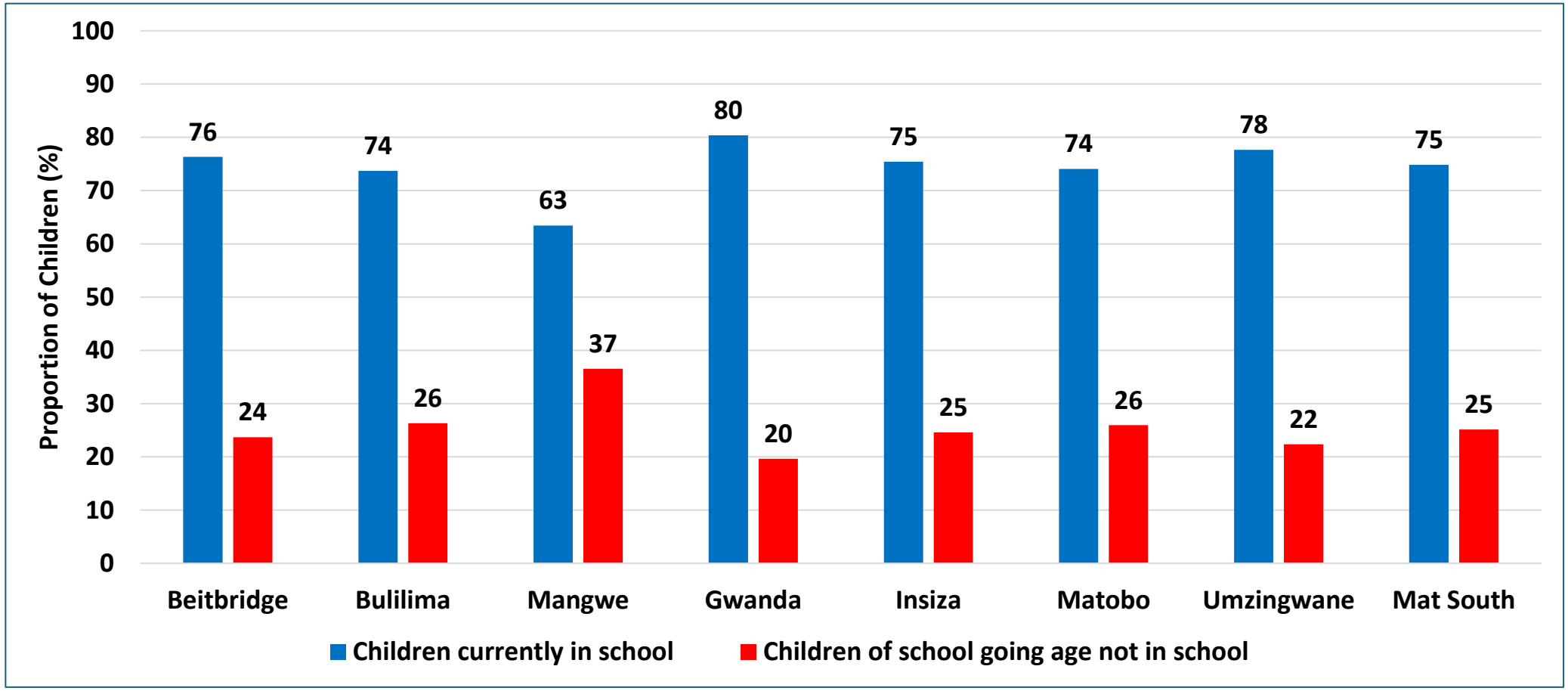
Chronic Conditions

	HIV infection /AIDS (%)	Heart disease (%)	Diabetes, high blood sugar (%)	Asthma (%)	Hypertension, High blood pressure (%)	Arthritis, chronic body pain (%)	Epilepsy, seizures, fits (%)	Stroke (%)	Cancer (%)	Tuberculosis (%)	Liver diseases (%)	Kidney diseases (%)	Ulcer, chronic stomach pain (%)	Cerebral palsy (%)	Mental illness (%)	Not willing to disclose (%)	Other (%)
Beitbridge	1.3	0.1	0.8	0.6	0.9	0.6	0.1	0.0	0.0	0.5	0.0	0.1	0.1	0.0	0.4	0.0	0.4
Bulilima	3.7	0.1	0.2	0.3	1.5	0.3	0.3	0.3	0.1	0.1	0.0	0.0	0.0	0.0	0.5	0.0	0.3
Mangwe	0.5	0.1	1.6	0.1	2.1	1.9	0.1	0.3	0.0	0.4	0.0	0.0	0.1	0.0	0.4	0.3	1.1
Gwanda	5.4	0.4	2.3	0.6	2.3	1.7	0.2	0.5	0.2	0.5	0.1	0.1	0.4	0.4	0.9	0.2	0.6
Insiza	4.8	0.5	1.1	0.4	2.3	0.6	0.4	0.1	0.1	0.0	0.0	0.0	0.3	0.0	0.2	0.3	0.6
Matobo	5.1	0.5	2.4	0.8	3.6	0.4	0.2	0.2	0.0	0.2	0.0	0.0	0.2	0.1	0.2	0.3	0.2
Umzingwane	7.1	0.1	2.1	0.8	6.4	1.8	0.2	0.3	0.3	0.2	0.0	0.0	0.1	0.0	0.8	0.0	0.7
Mat South	**4.1**	**0.3**	**1.4**	**0.5**	**2.8**	**1.0**	**0.2**	**0.2**	**0.1**	**0.3**	**0.0**	**0.0**	**0.2**	**0.1**	**0.5**	**0.1**	**0.5**

- HIV infections/AIDS was the most reported chronic condition (4.1%) followed by hypertension/high blood pressure (2.8%).

Education

School Attendance



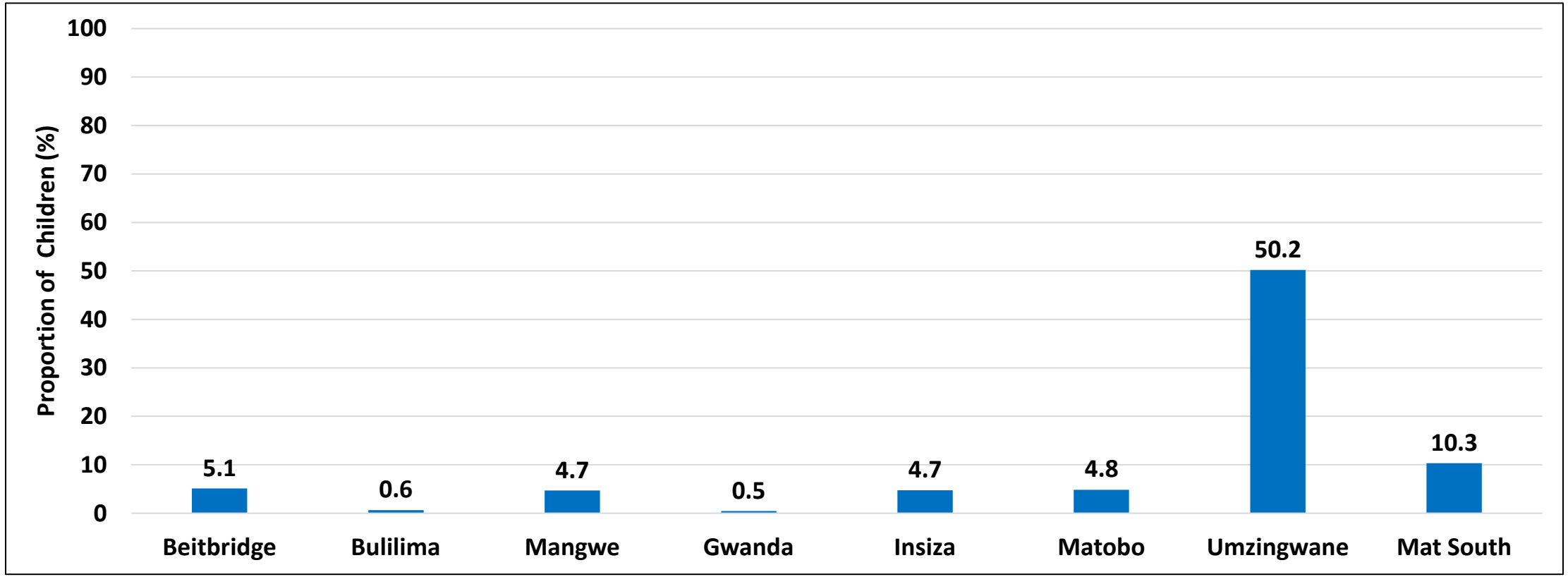
- At the time of the assessment, 25% of children of school going age were not going to school.
- Mangwe (37%) had the highest proportion of children not going to school.

Reasons for Being Out of School (25%)

	Financial challenges (%)	Child considered too young (%)	Pregnancy/marriage (%)	Completed O/A level (%)
Beitbridge	9.5	2.9	2.6	3.6
Bulilima	14.1	4.3	2	3.1
Mangwe	20.2	4.7	0.3	7.9
Gwanda	9.7	0.5	1.8	5
Insiza	12.6	0.7	2.2	4.4
Matobo	13.4	2	1.1	4.6
Umzingwane	10.2	1.5	0.8	4.5
Mat South	**12.5**	**2.4**	**1.6**	**4.5**

- Financial challenges (12.5%) were reported to be the main reason why children were out of school

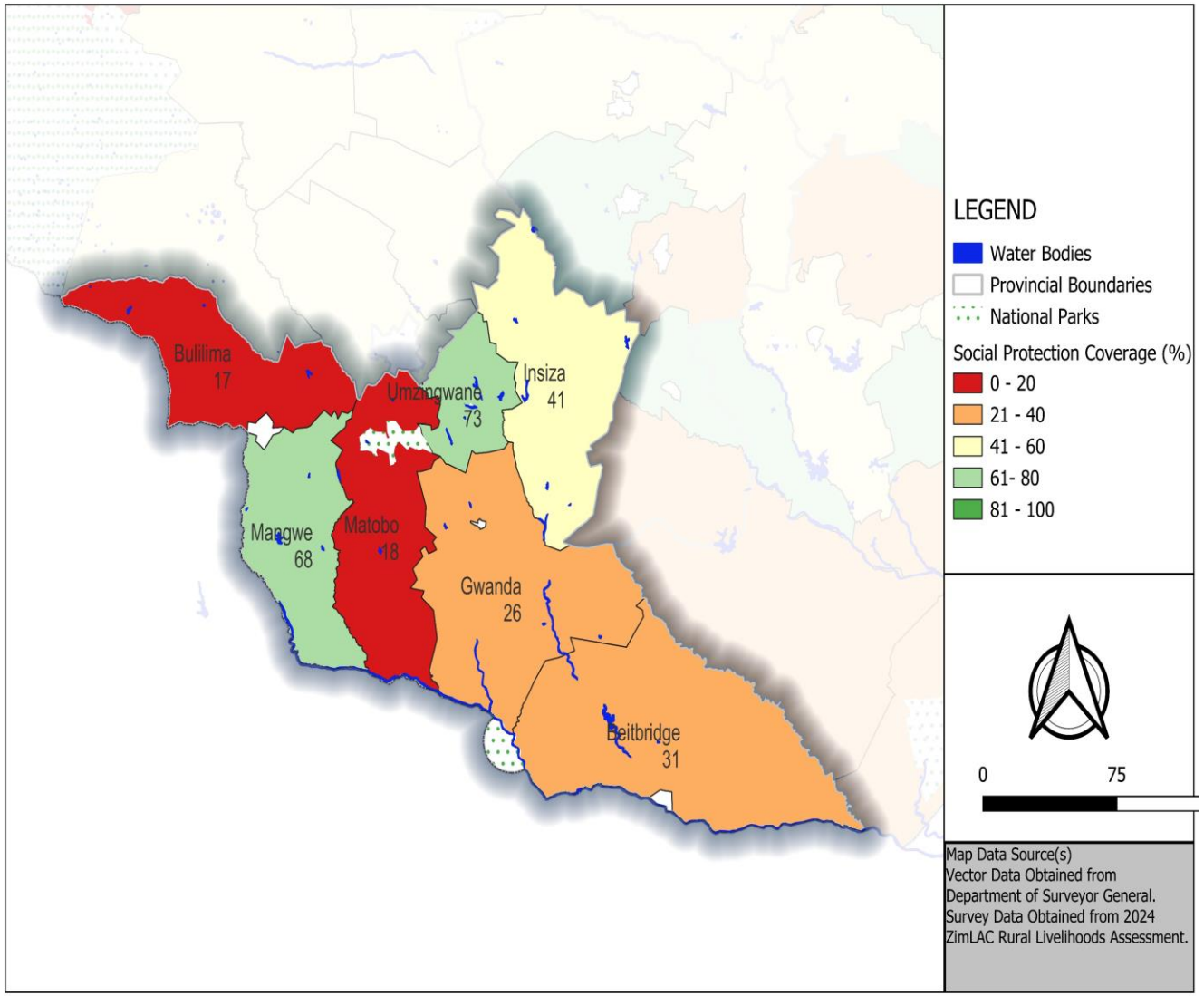
Children Receiving Hot Meals at School



- The proportion of children who received a hot meal at school was (10.3%) .
- The highest proportion of children who received a hot meal was reported in Umzingwane District (50.2%).

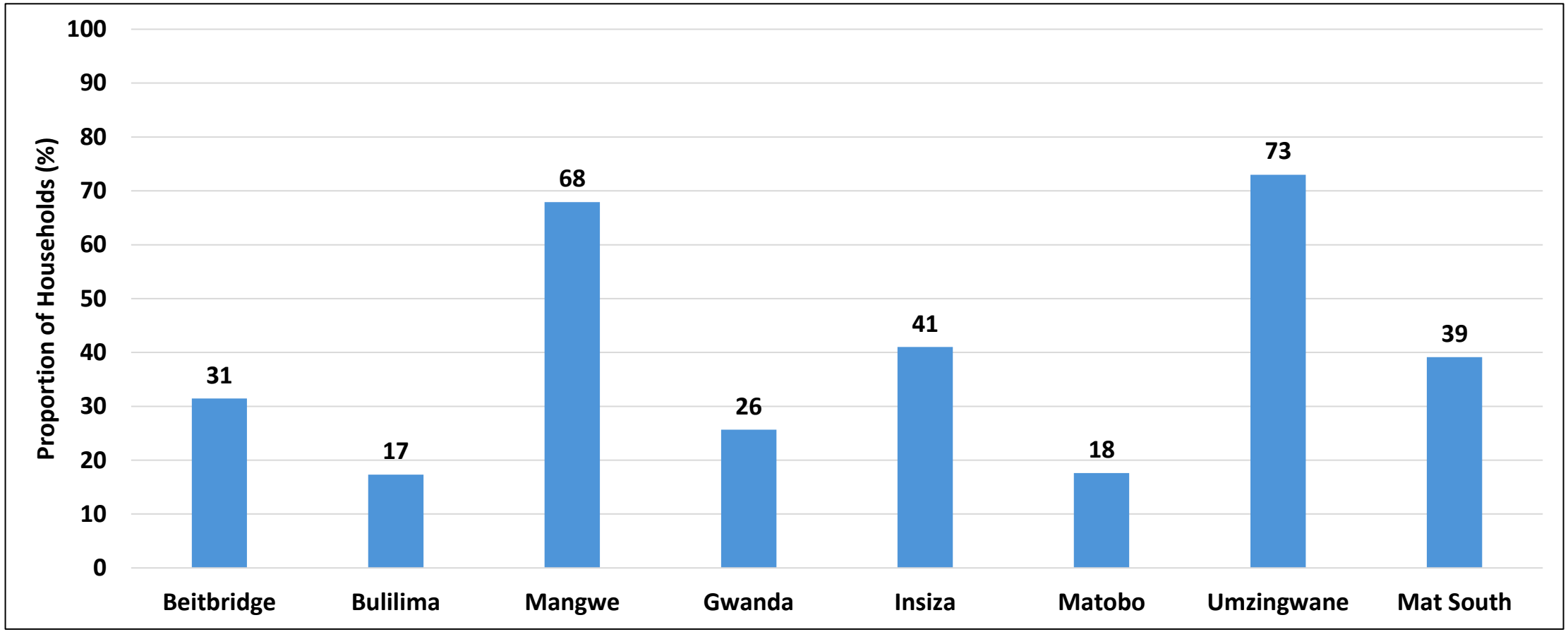
Social Protection

Social Protection Coverage



- Umzingwane district had the highest proportion of households (73%) which received support from any source.
- Bulilima (17%) had the lowest proportion of households which received support from any source.

Social Support from Any Source



- The proportion of households in Matabeleland South which received any form of support was 39%.

Forms of Support from Government

	Food (%)	Cash transfers (%)	Vouchers (%)	Crop inputs (%)	Livestock (cattle, goats, chicken, fish) (%)	Other livestock support (Tick grease, acaricides) (%)	WASH hardware (inputs) (%)	WASH software (trainings/ messaging (%)	Education assistance (%)	Health Assistance (%)	Other (%)
Beitbridge	10.0	0.7	0.7	17.4	0.0	0.3	0.0	0.3	0.7	0.0	0.0
Bulilima	8.7	0.0	0.0	9.3	0.0	0.7	0.0	0.0	1.0	0.0	0.0
Mangwe	12.0	5.7	0.3	14.0	0.0	0.0	0.0	0.0	0.0	0.3	0.0
Gwanda	6.7	0.0	0.0	16.3	0.0	0.0	0.0	0.0	1.0	1.0	0.3
Insiza	19.0	0.3	0.0	19.0	0.0	3.0	0.0	0.0	1.7	1.0	1.0
Matobo	11.6	0.3	0.0	4.0	0.0	0.0	0.3	0.0	0.3	0.0	0.0
Umzingwane	36.3	0.3	0.7	47.0	5.0	15.7	0.0	0.0	9.7	7.0	0.0
Mat South	**14.9**	**1.0**	**0.2**	**18.2**	**0.7**	**2.8**	**0.0**	**0.0**	**2.0**	**1.3**	**0.2**

- Crop inputs (18.2%) and food (14.9%) were the major forms of support received from the Government.
- Umzingwane had the highest proportion of households (47%) receiving support in the form of crop inputs.

Forms of UN/NGO support

	Food (%)	Cash transfers (%)	Vouchers (%)	Crop inputs (%)	Livestock (cattle, goats, chicken, fish) (%)	Other livestock support (Tick grease, acaricides) (%)	WASH hardware (inputs) (%)	WASH software (trainings/ messaging) (%)	Education assistance (%)	Health Assistance (%)	Other (%)
Beitbridge	2.7	0.0	0.0	1.7	2.0	2.0	0.0	0.3	1.3	0.0	0.3
Bulilima	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Mangwe	32.1	22.4	0.3	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gwanda	0.3	0.3	0.0	0.7	0.7	0.0	0.0	0.0	0.3	0.3	0.0
Insiza	1.7	0.0	0.0	1.0	1.3	0.0	0.0	0.0	1.0	0.7	0.3
Matobo	0.0	0.0	0.0	0.3	0.3	0.0	0.3	0.0	0.7	0.3	0.0
Umzingwane	0.0	0.0	0.0	0.7	0.7	0.0	0.0	0.3	5.3	0.0	0.0
Mat South	**5.2**	**3.2**	**0.0**	**0.7**	**0.7**	**0.3**	**0.0**	**0.1**	**1.2**	**0.2**	**0.1**

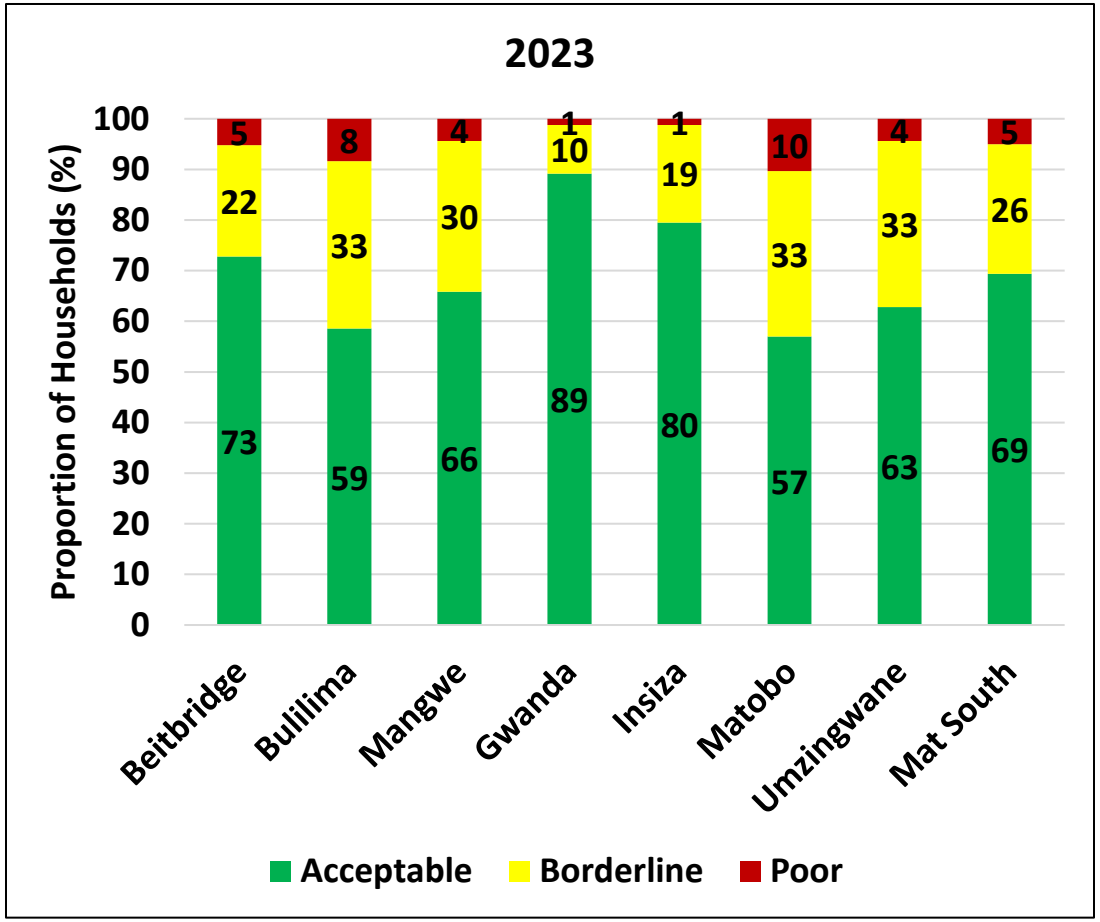
- The major form of support from UN/NGOs was Food at (5.2%).

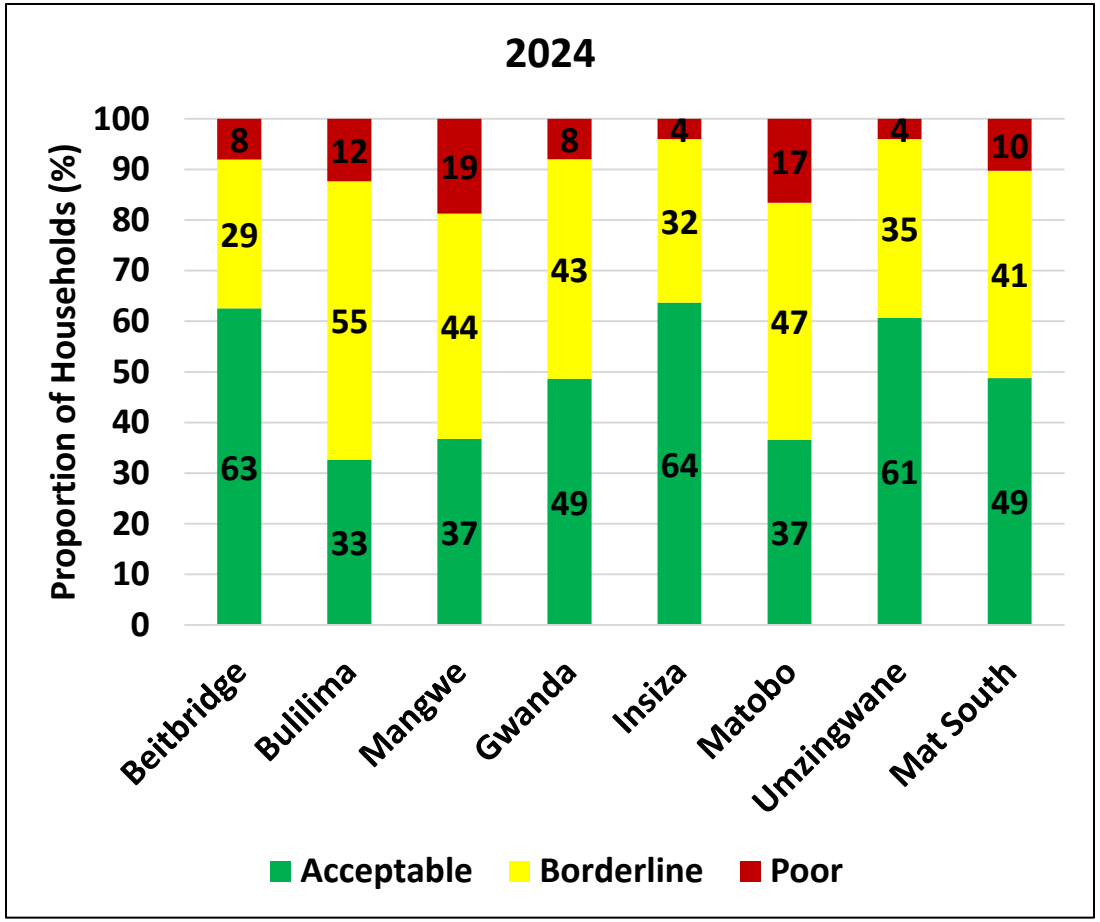
Food Consumption Patterns

Food Consumption Score

Food Consumption Score Groups	Score	Description
POOR	0-21	An expected consumption of staple 7 days, vegetables 5-6 days, sugar 3-4 days, oil/fat 1 day a week, while animal proteins are totally absent
BORDERLINE	21.1-35	An expected consumption of staple 7 days, vegetables 6-7 days, sugar 3-4 days, oil/fat 3 days, meat/fish/egg/pulses 1-2 days a week, while dairy products are totally absent
ACCEPTABLE	>35	As defined for the borderline group with more number of days a week eating meat, fish, egg, oil, and complemented by other foods such as pulses, fruits, milk

Food Consumption Patterns

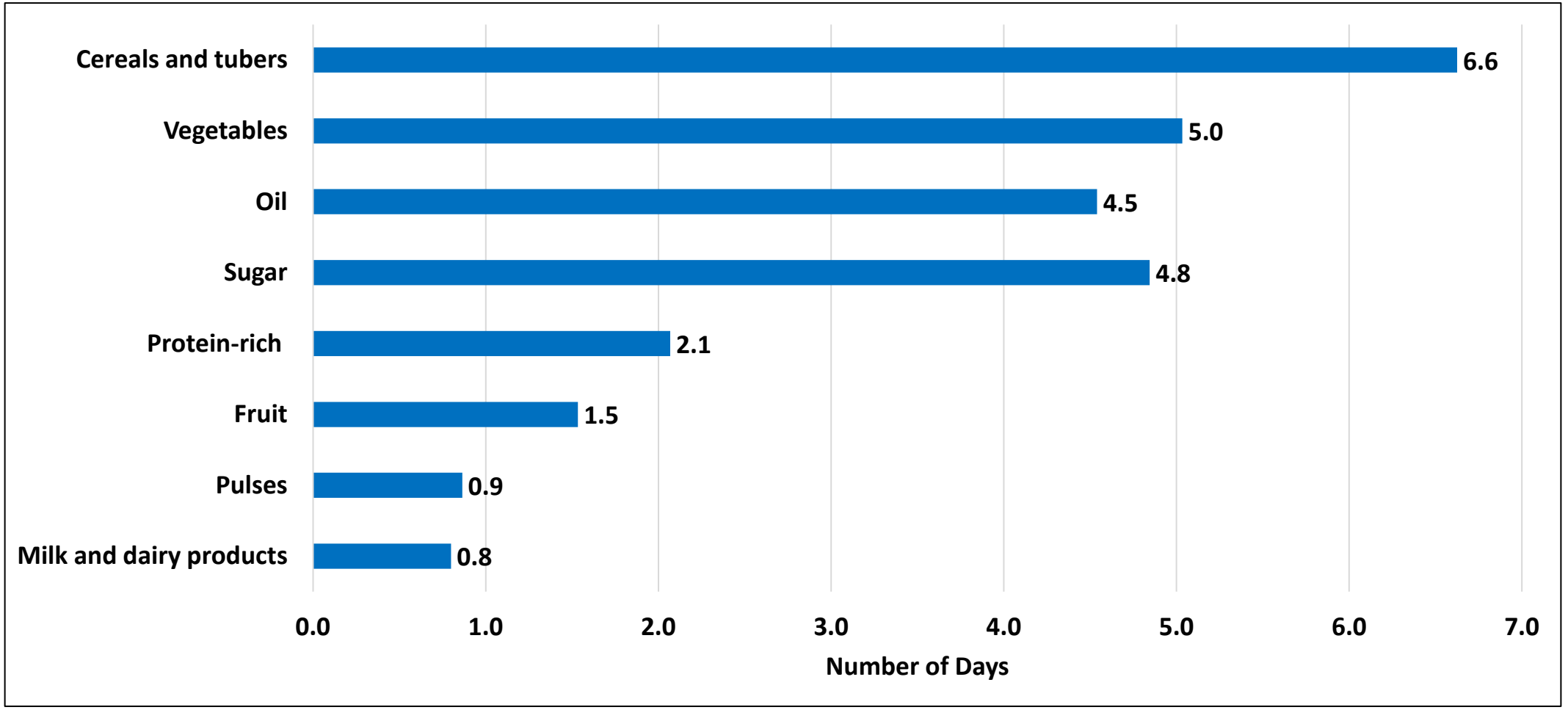




- The proportion of households with poor food consumption patterns increased from 5% in 2023 to 10% in 2024.
- Mangwe (19%) had the highest proportion of households with poor food consumption patterns.

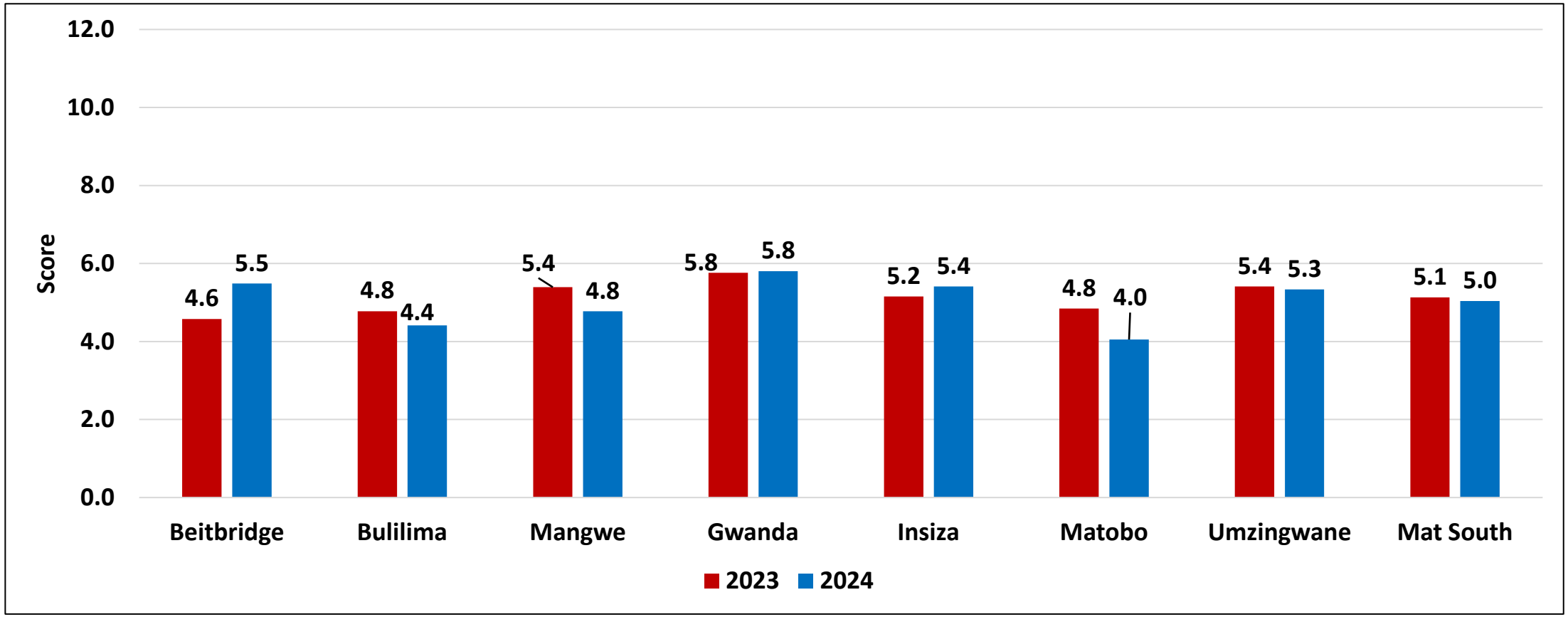
Household Dietary Diversity

Average Number of Days Households Consumed Food from the Various Food Groups



- The most frequently consumed foods were cereals (6.6 days), vegetables (5 days) and oil (4.5 days) whilst milk and dairy products (0.8 days) and pulses (0.9 days) were the least consumed food items.

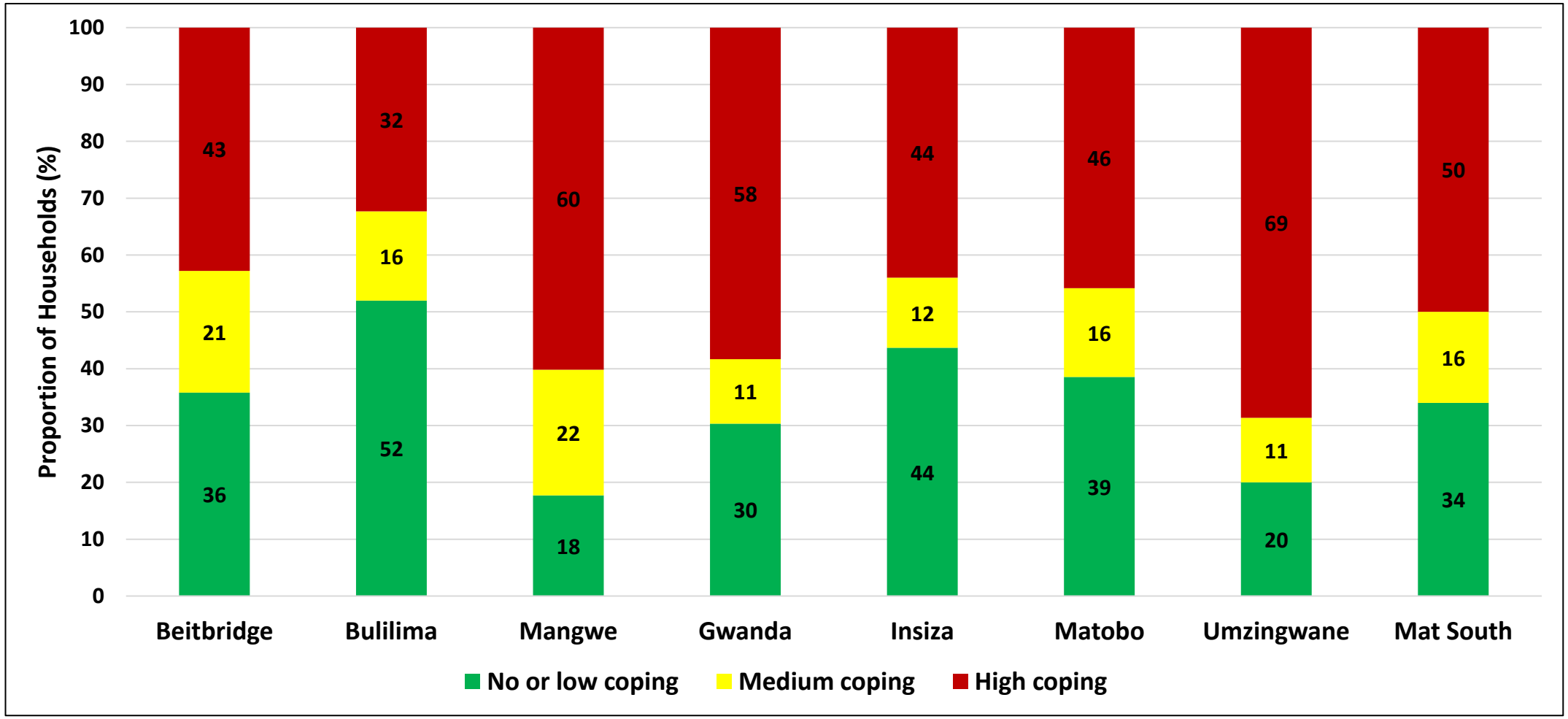
Average Household Dietary Diversity Score



- The average Household Dietary Diversity score was 5. There was no significant change between 2023 and 2024.

Reduced Consumption Coping Strategy Index (rCSI)

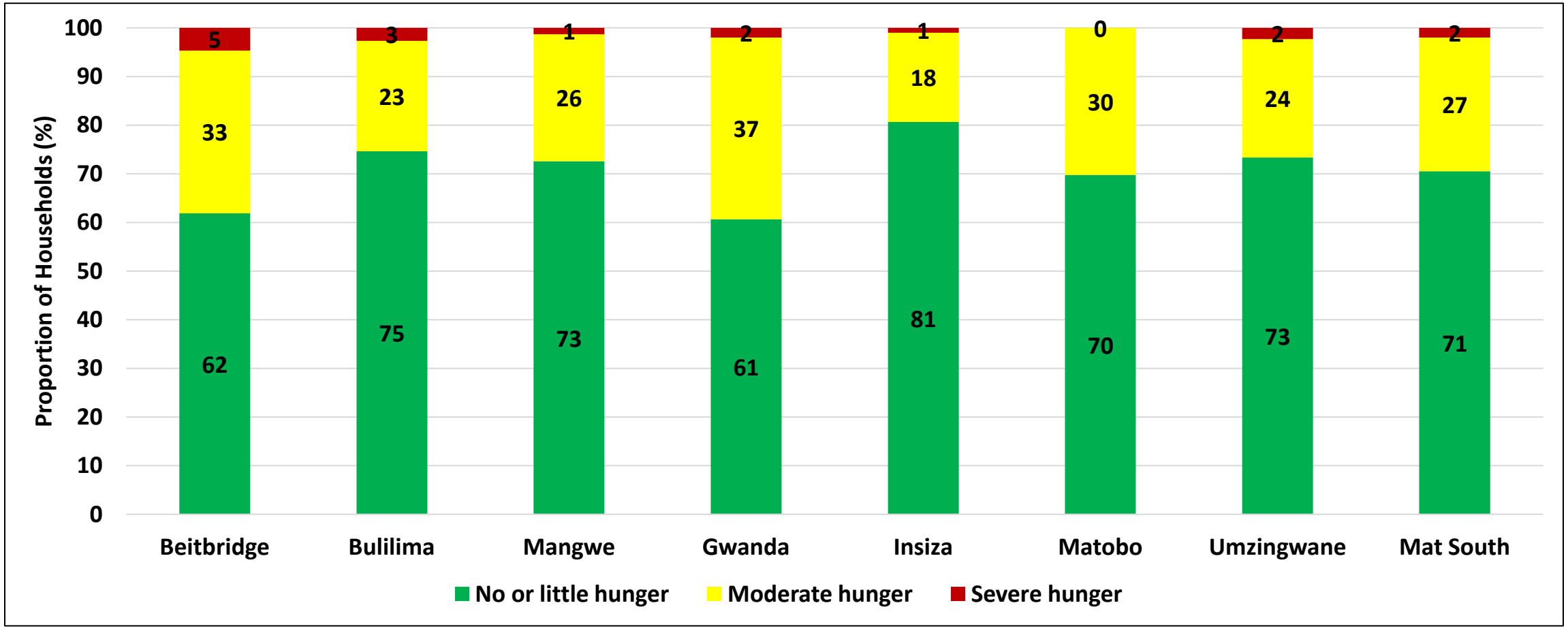
Reduced Consumption Coping Strategy Index



- The proportion of households with high coping was 50%.
- Umzingwane (69%) and Mangwe (60%) had the highest proportion of households with high coping.

Household Hunger Scale (HHS)

Household Hunger Scale



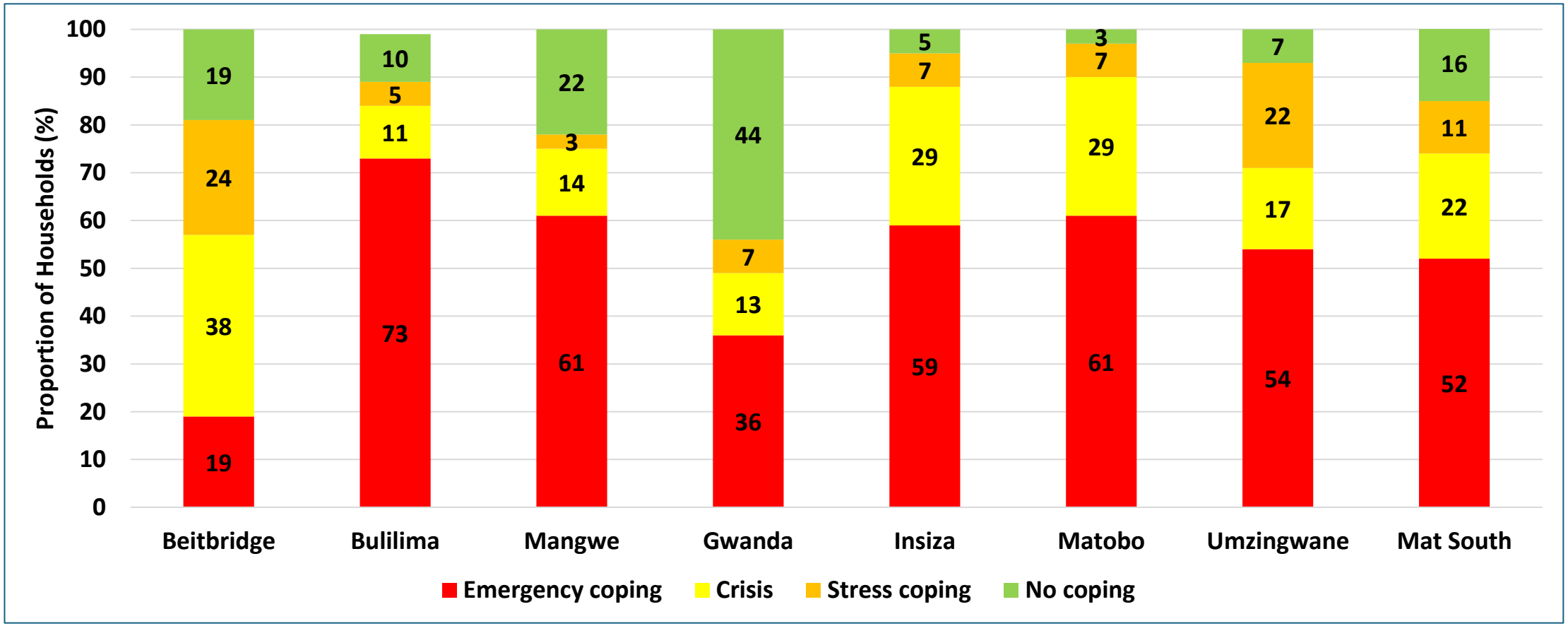
- The proportion of households which reported no to little hunger was 71%.
- Insiza (81%) had the highest proportion of households with no to little hunger whilst Beitbridge (5%) had the highest proportion of households with severe hunger.

Livelihoods Coping Strategies

- Livelihood Coping Strategies are behaviors employed by households when faced with a crisis.
- The livelihood scoping strategies have been classified into three categories namely stress, crisis and emergency as indicated in the table.

Category	Coping Strategy
Stress	• **Selling productive assets, directly reduces future productivity, including human capital formation.** • **Withdrawing children from school** • **Reducing non-food expenditure.**
Crisis	• **Selling productive assets, directly reduces future productivity, including human capital formation.** • **Withdrawing children from school** • **Reducing nonfood expenditure.**
Emergency	• **Selling one's land affects future productivity, strategies are more difficult to reverse or more dramatic in nature.** • **Begging for food.** • **Selling the last breeding stock to buy food**

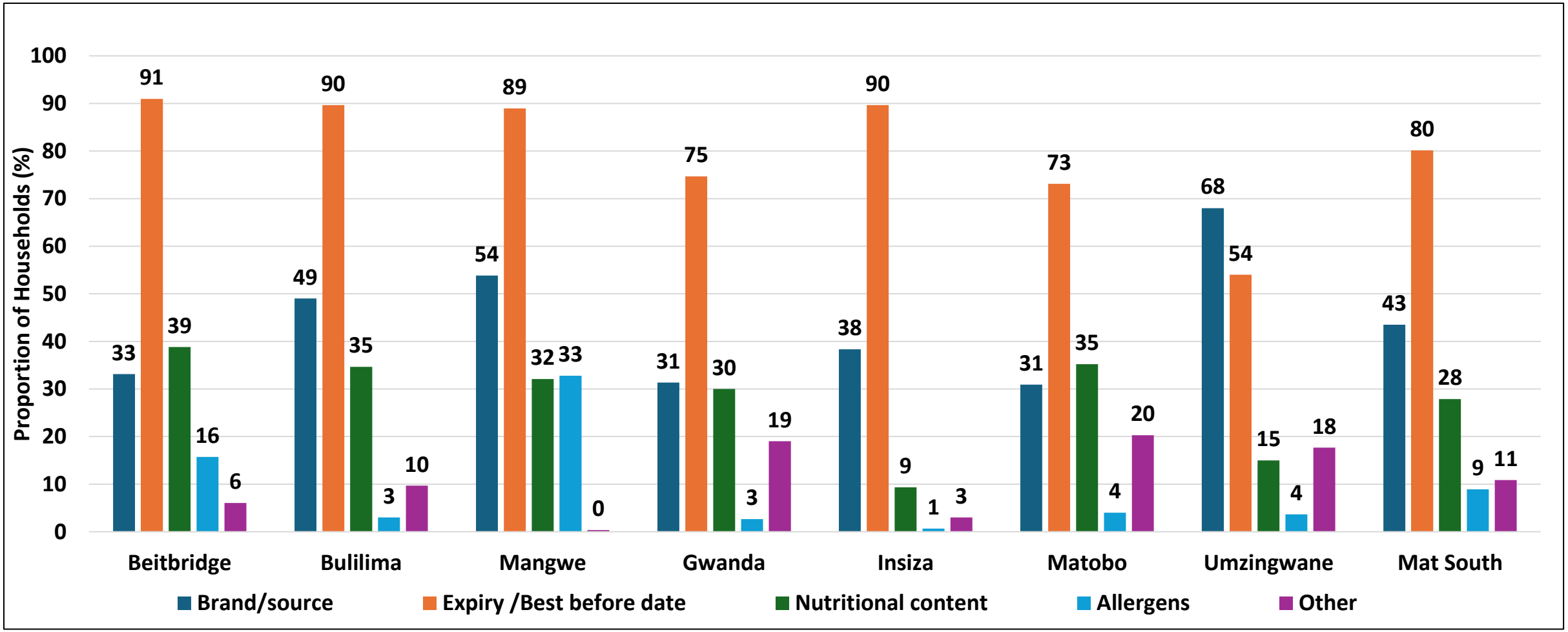
Households Maximum Livelihoods Coping Strategies



- The proportion of households engaging in emergency coping strategies was 52%.
- Bulilima (73%) had the highest proportion of households engaging in emergency coping.

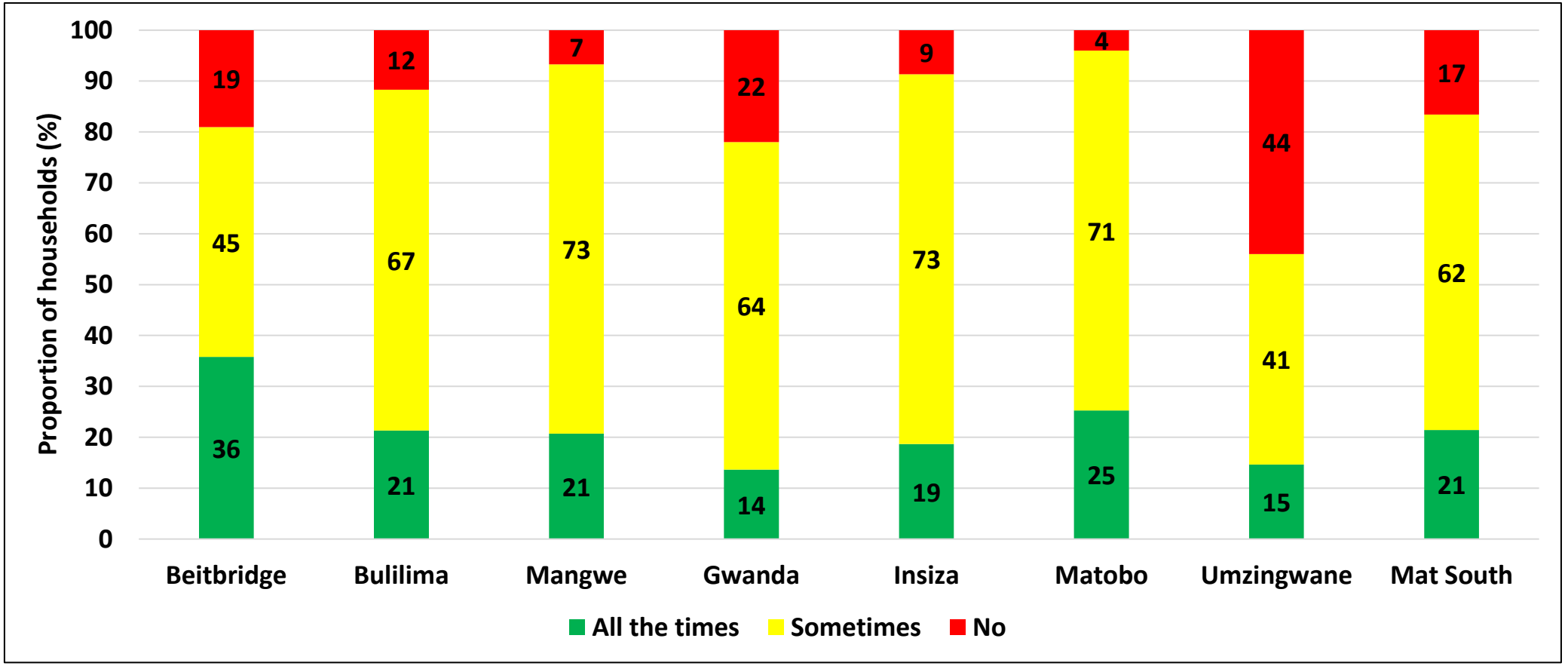
Food Safety

Factors Considered by Households When Purchasing Food



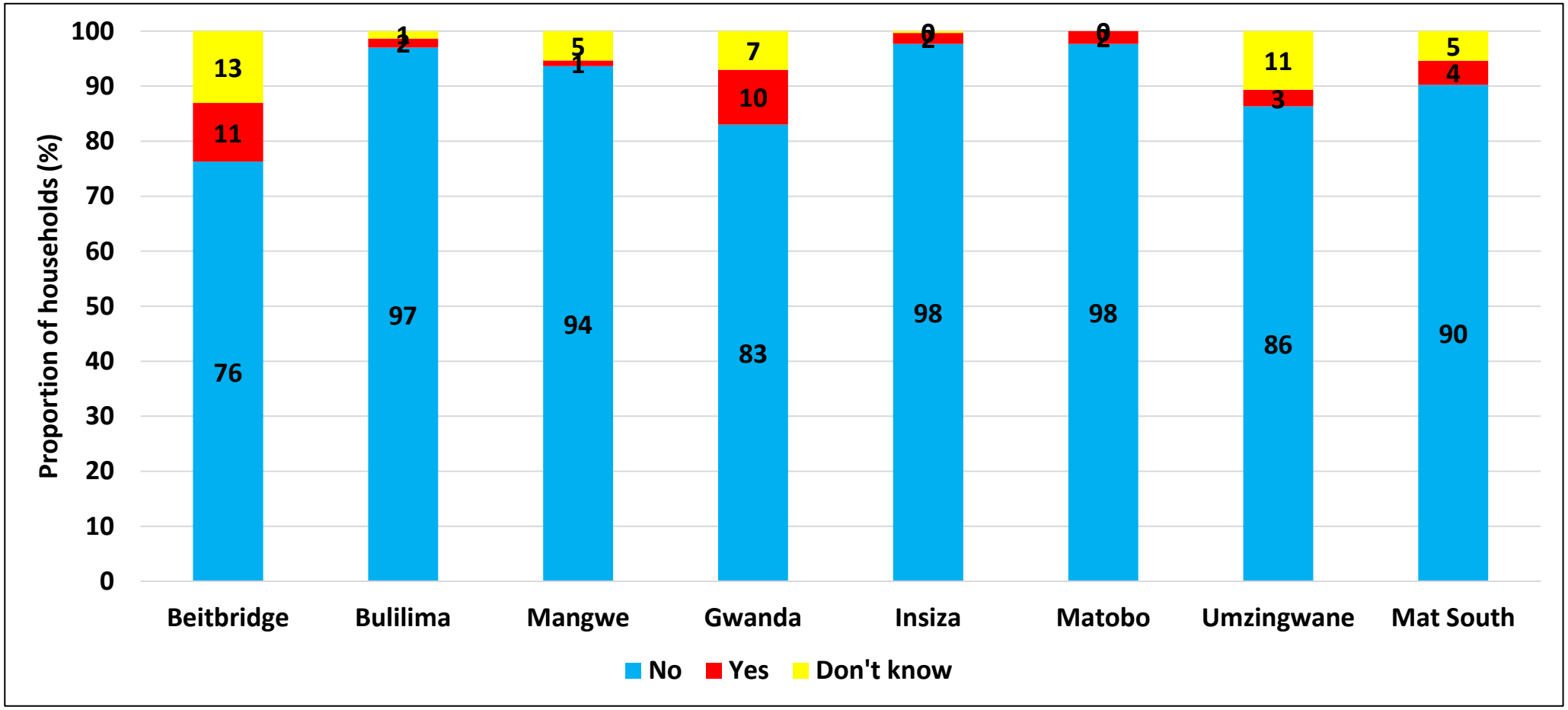
- Holding price constant, 80% of households reported that they considered expiry/best before date when purchasing food.

Households which Read Food Labels When Purchasing Food Items



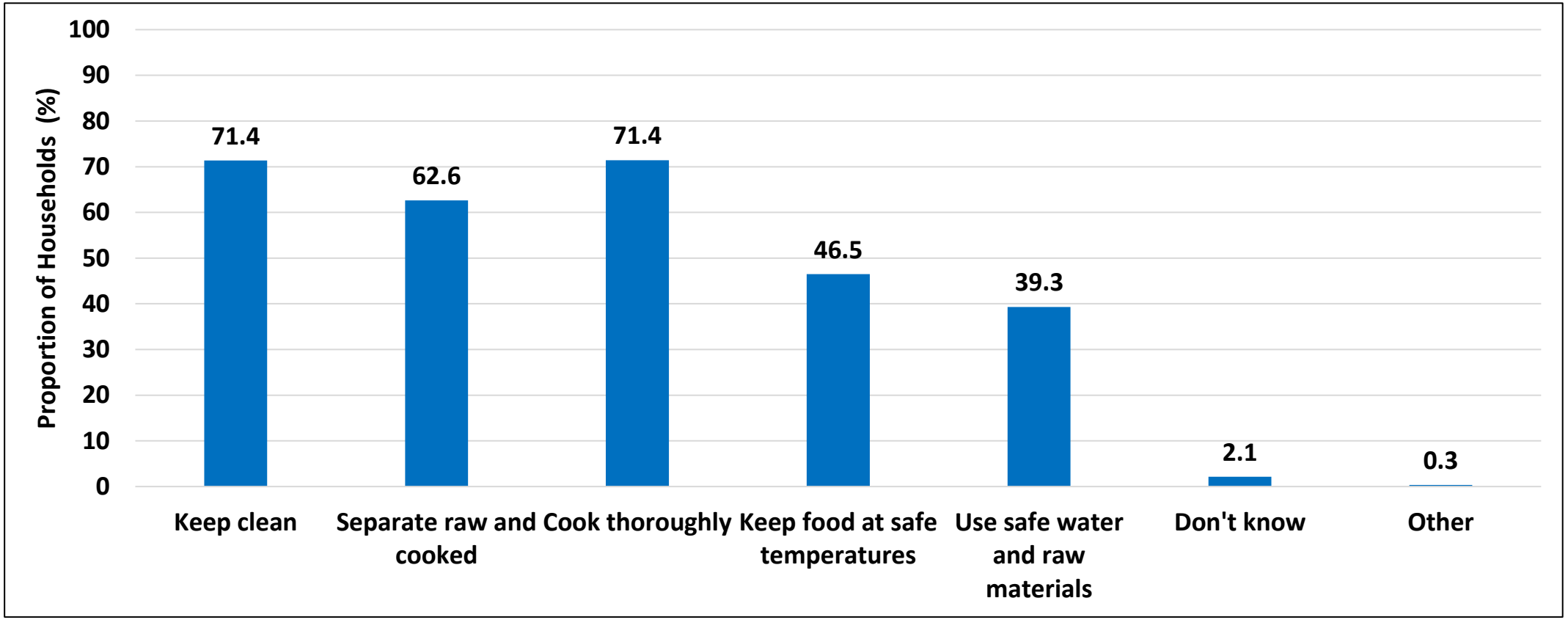
- About 17% of households reported that they did not read information on the food packages before purchasing.

Purchased Expired Food



- Most households (90%) reported that they had not purchased expired food in Matabeleland South.
- Beitbridge had the largest proportion (11%) of households that had purchased expired food.

Knowledge on Food Safety



- Keeping food clean, cook thoroughly 71.4% were the most reported food safety measures known by households.

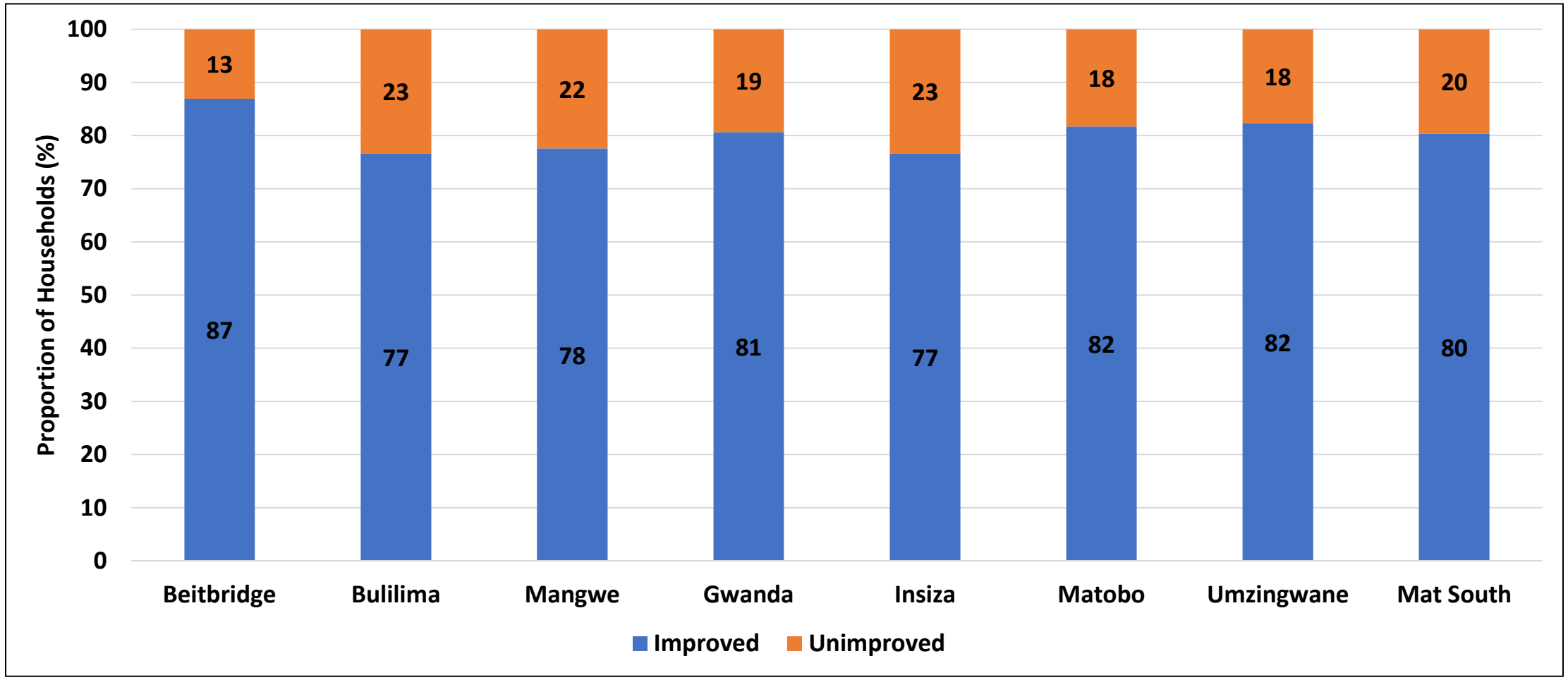
Water, Sanitation and Hygiene (WASH)

Ladder for Drinking Water Services

Service Level	Definition
Safely Managed	Drinking water from an improved water source that is located on premises, available when needed and free from faecal and priority chemical contamination.
Basic Drinking Water	Basic drinking water services are defined as drinking water from an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing.
Limited Drinking Water Services	Limited water services are defined as drinking water from an improved source, where collection time exceeds 30 minutes for a roundtrip including queuing.
Unimproved Water Sources	Drinking water from an unprotected dug well or unprotected spring.
Surface Water Sources	Drinking water directly from a river, dam, lake, pond, stream, canal or irrigation channel.

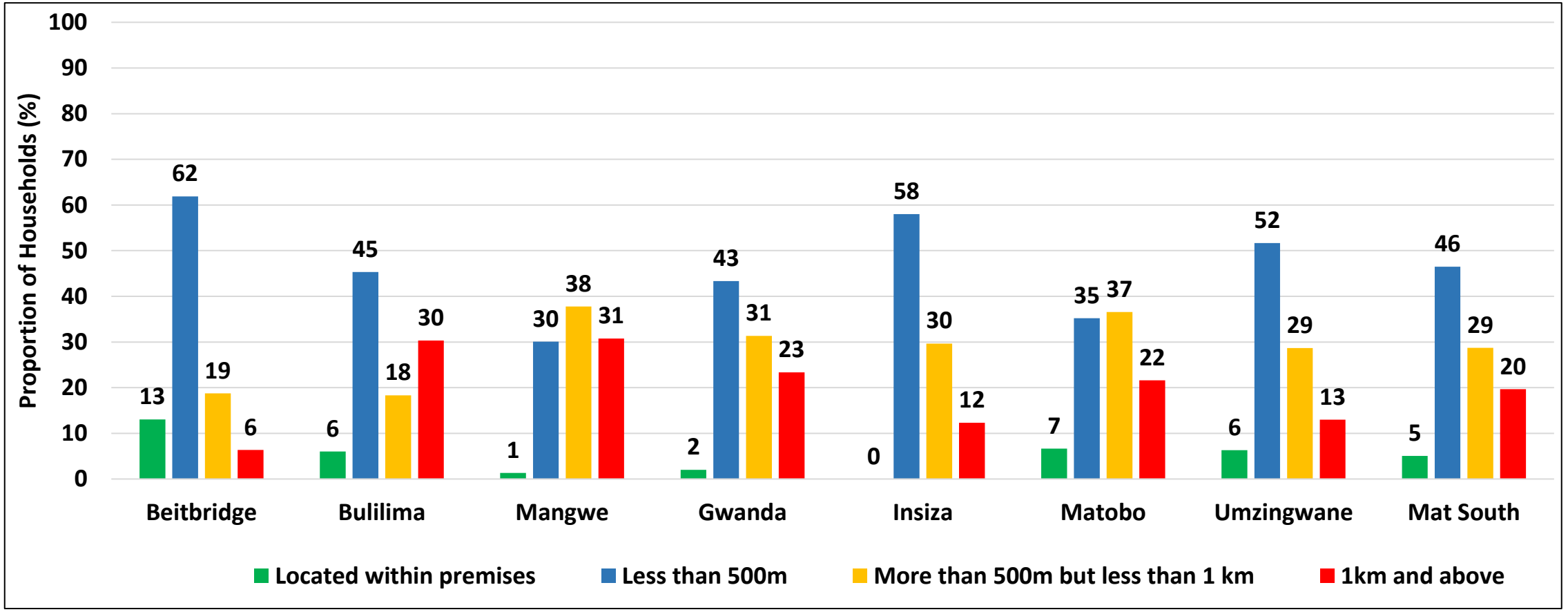
Note :
"Improved" drinking water sources are further defined by the quality of the water they produce, and are protected from faecal contamination by the nature of their construction or through an intervention to protect from outside contamination. Such sources include: piped water into dwelling, plot, or yard; public tap/standpipe; tube well/borehole; protected dug well; protected spring; or rainwater collection. This category now includes packaged and delivered water, considering that both can potentially deliver safe water.

Access to Improved Water Source



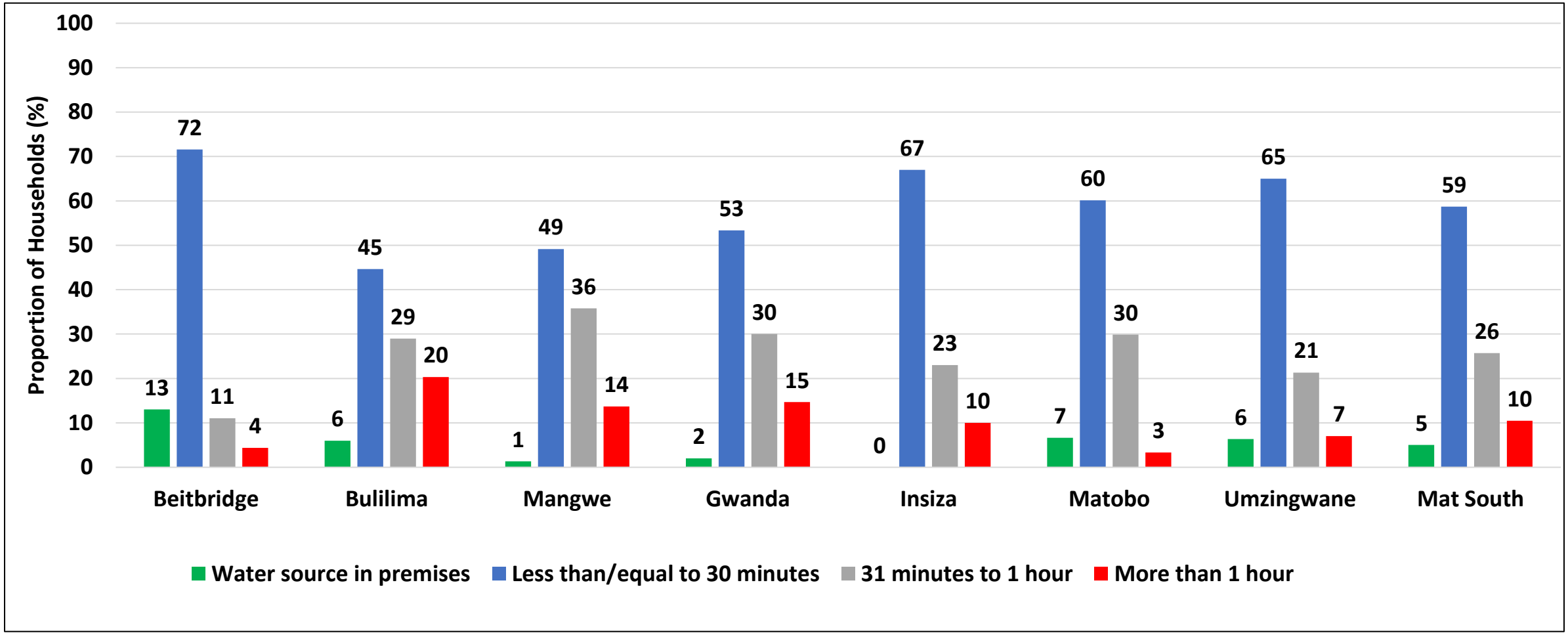
- The proportion of households with access to an improved water source was 80%.
- Beitbridge had the highest proportion (87%), Bulilima and Insiza had the least proportion (77%).

Distance Travelled to and from Main Drinking Water Source



- In Matabeleland South, approximately 46% of the households reported that they travelled a distance of less than 500m to get to a water source.
- Mangwe (31%) had the highest proportion of households which reported that they travelled 1km and above to get to a water source.

Time Taken to and from Main Drinking Water Source



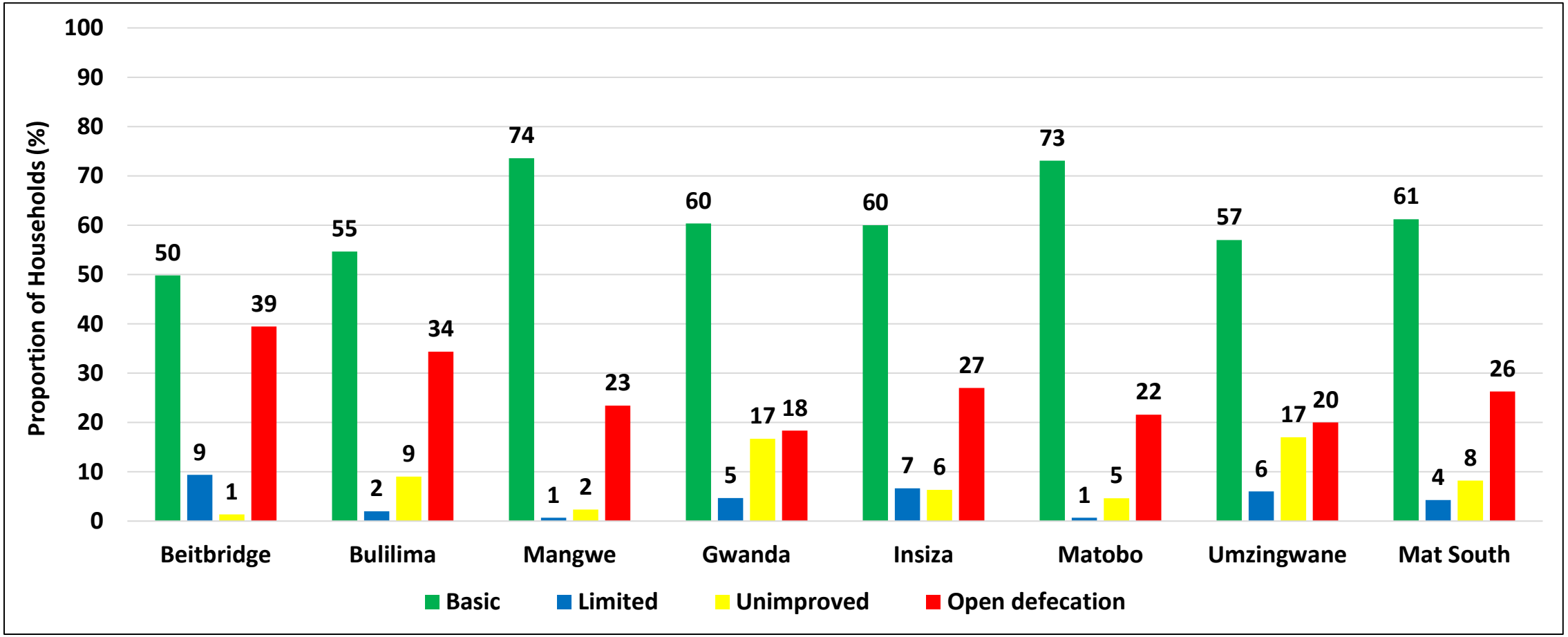
- Approximately (59%) of the households in Matabelaland South reported that they took less than/equal to 30 minutes to and from the main drinking water source.

Ladder for Sanitation

Service level	Definition
Safely Managed	Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or transported and treated offsite.
Basic Sanitation Facilities	Use of improved facilities which are not shared with other households.
Limited Sanitation Facilities	Use of improved facilities shared between two or more households.
Unimproved Sanitation Facilities	Facilities that do not ensure hygienic separation of human excreta from human contact. Unimproved facilities include pit latrines without a slab or platform, hanging latrines and bucket latrines.
Open Defecation	Disposal of human faeces in fields, forest, bushes, open bodies of water, beaches or other open spaces or with solid waste.

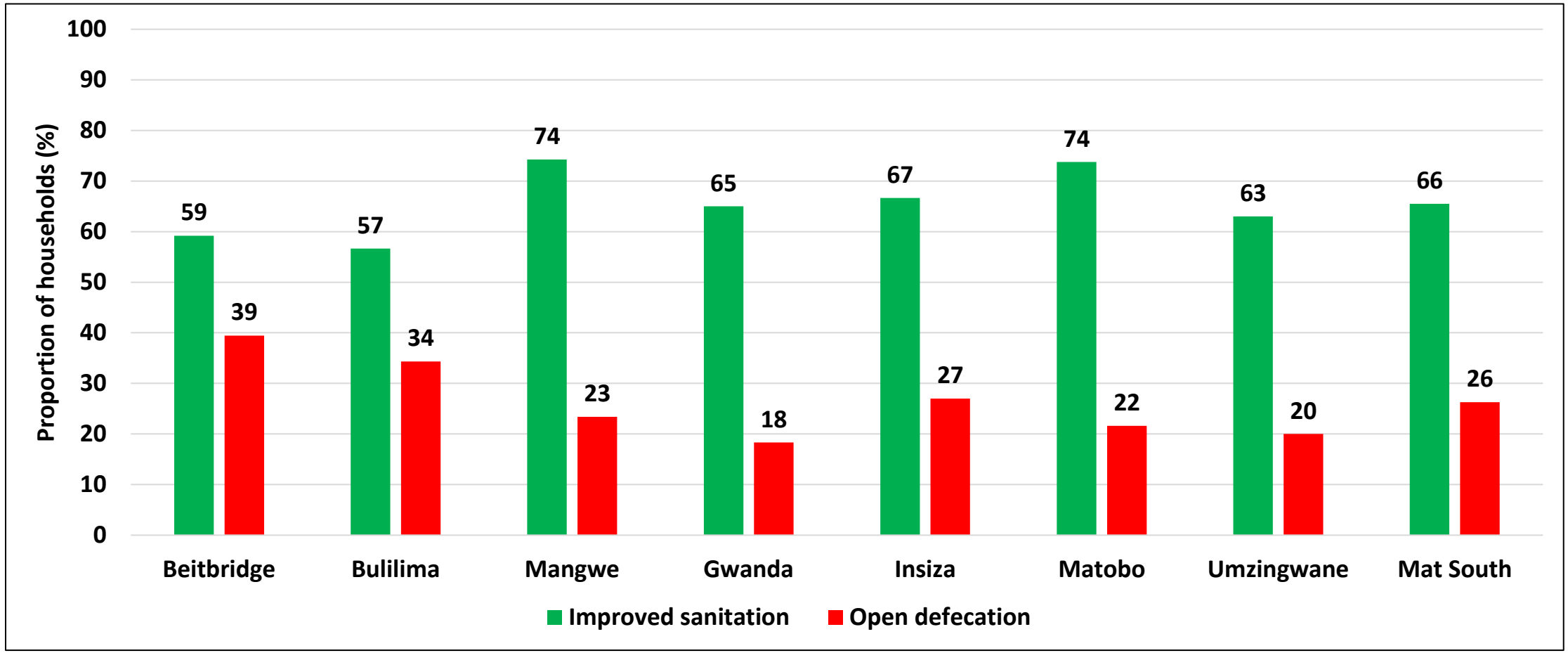
Note: Improved sanitation facilities: Facilities that ensure hygienic separation of human excreta from human contact. They include flush or pour flush toilet/latrine, Blair ventilated improved pit (BVIP), pit latrine with slab and upgradeable Blair latrine.

Household Sanitation Services



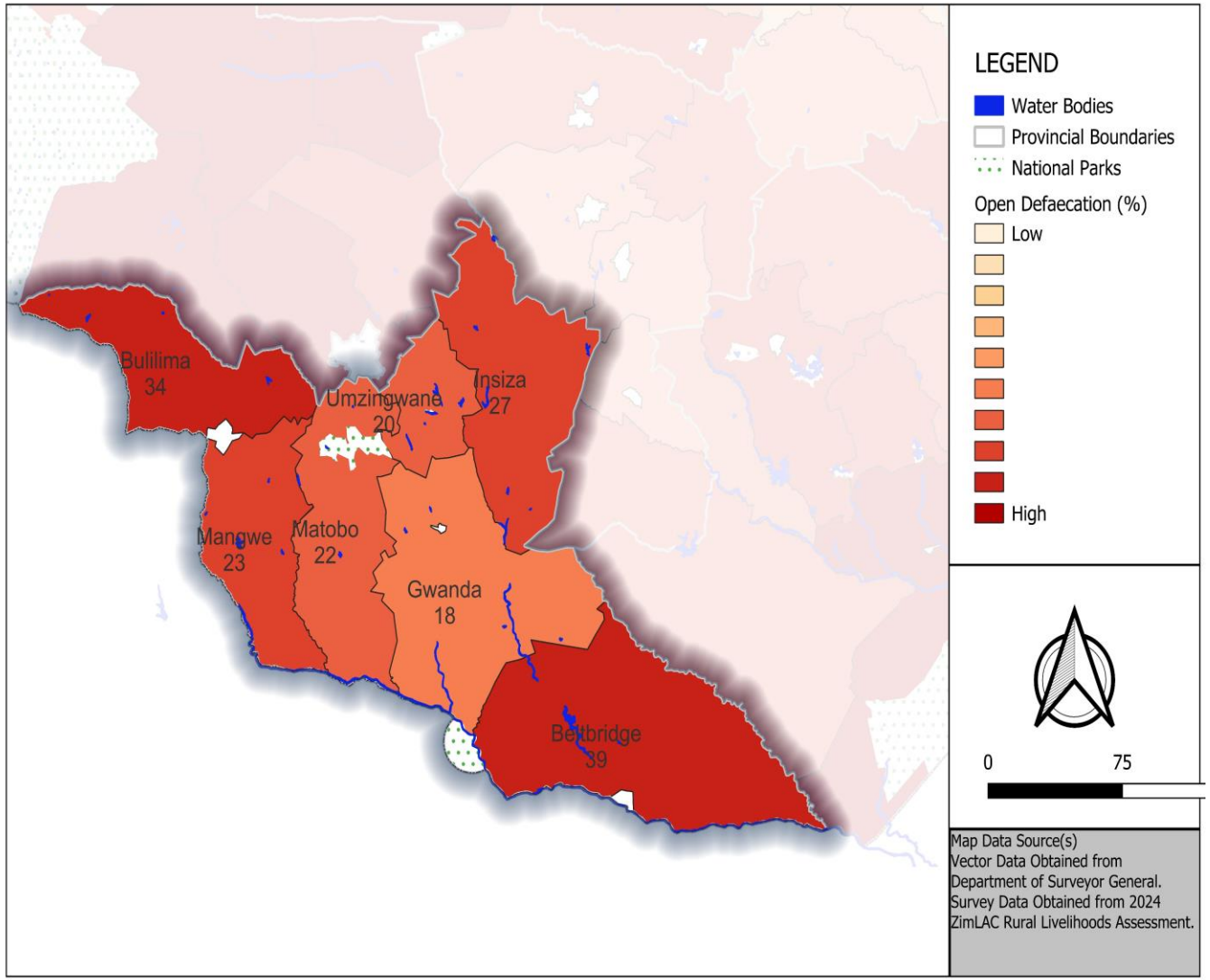
- The proportion of households using basic household sanitation services was 61%.
- Beitbridge (39%) had the highest proportion of households practising open defecation.

Access to Improved Sanitation and Open Defecation



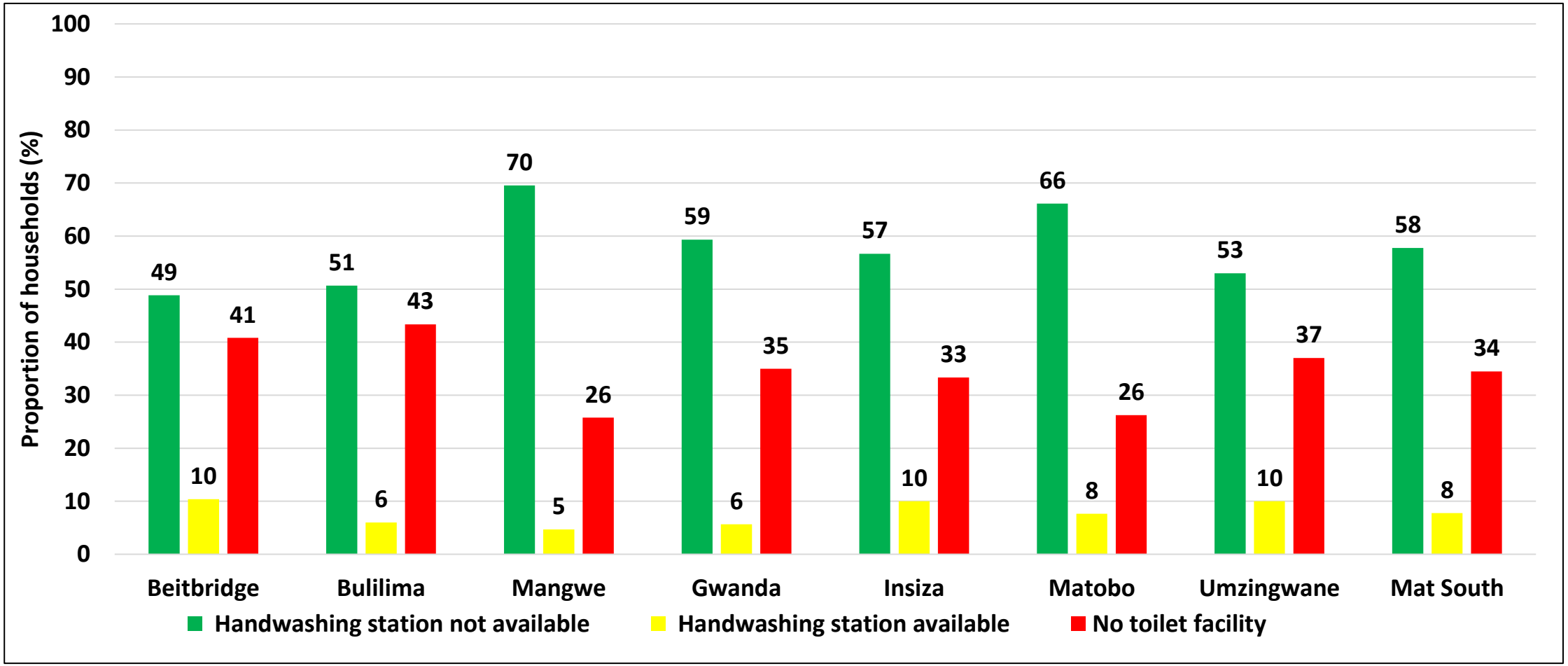
- About 66% of households had access to improved Sanitation.

Open Defecation



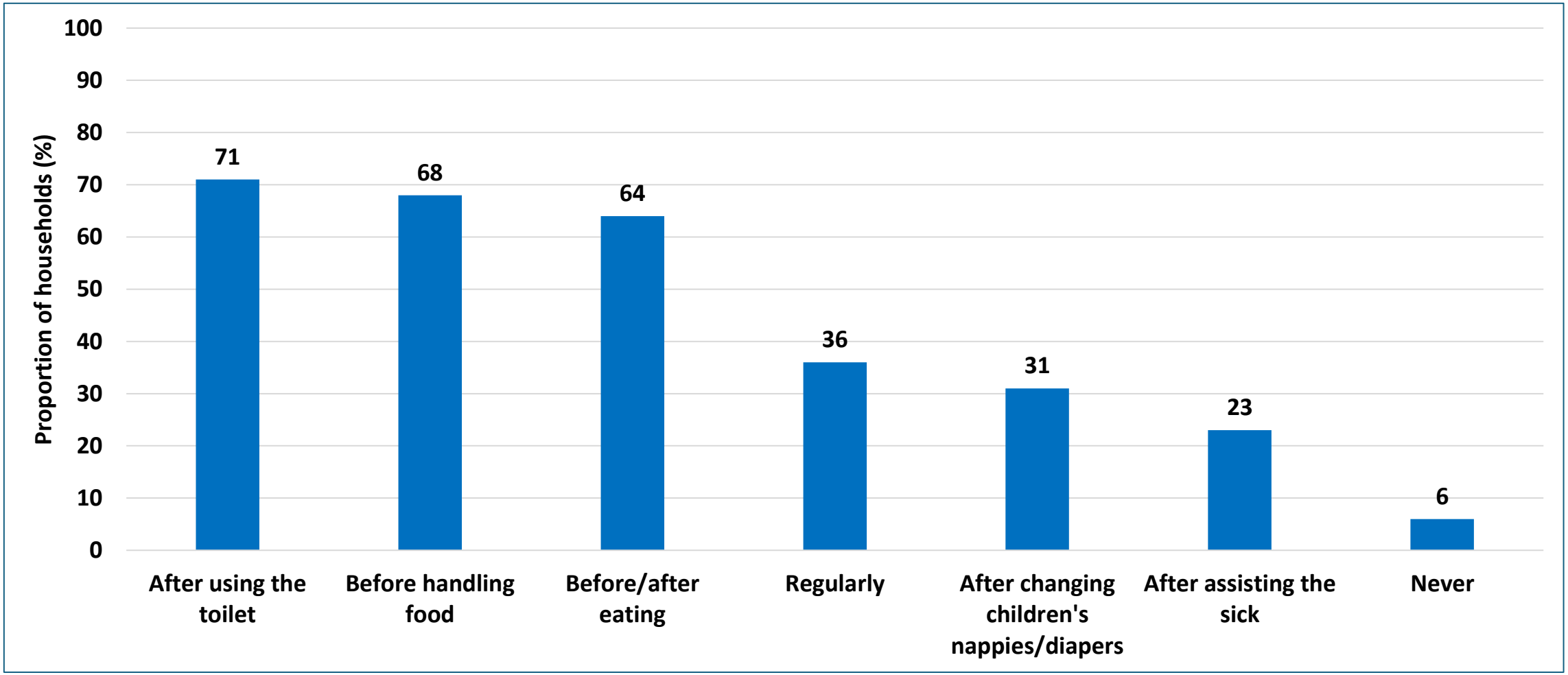
- Beitbridge had the highest proportion of households (39%) which were practising open defecation.
- Gwanda (18%) had the lowest.

Hand Washing



- Households which had no hand washing station at toilet facility were about 58%.

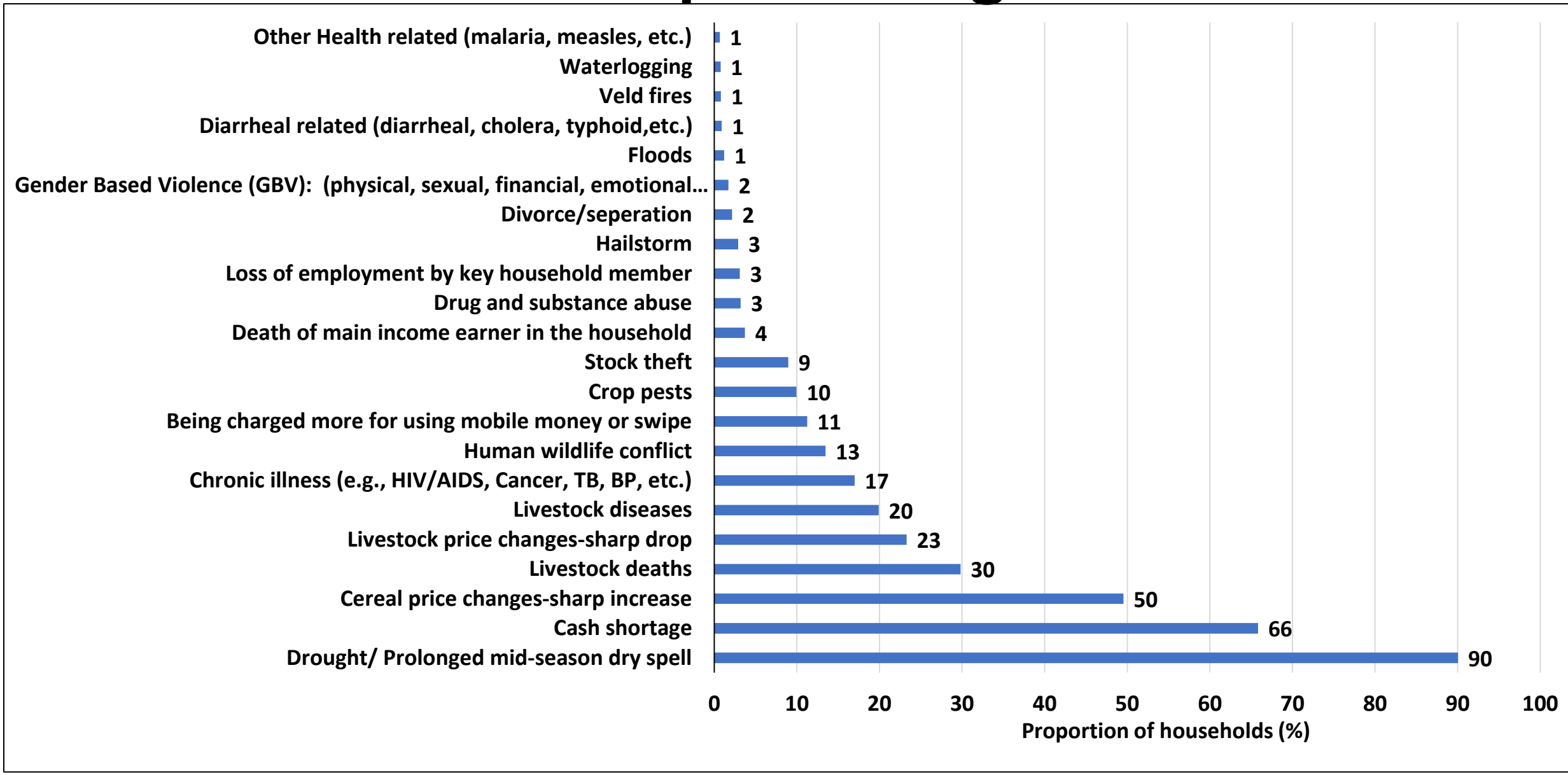
Hand washing at Critical Times



- Most households practised hand washing after using the toilet (71%) , before handling food (68%) and before/after eating (64%).

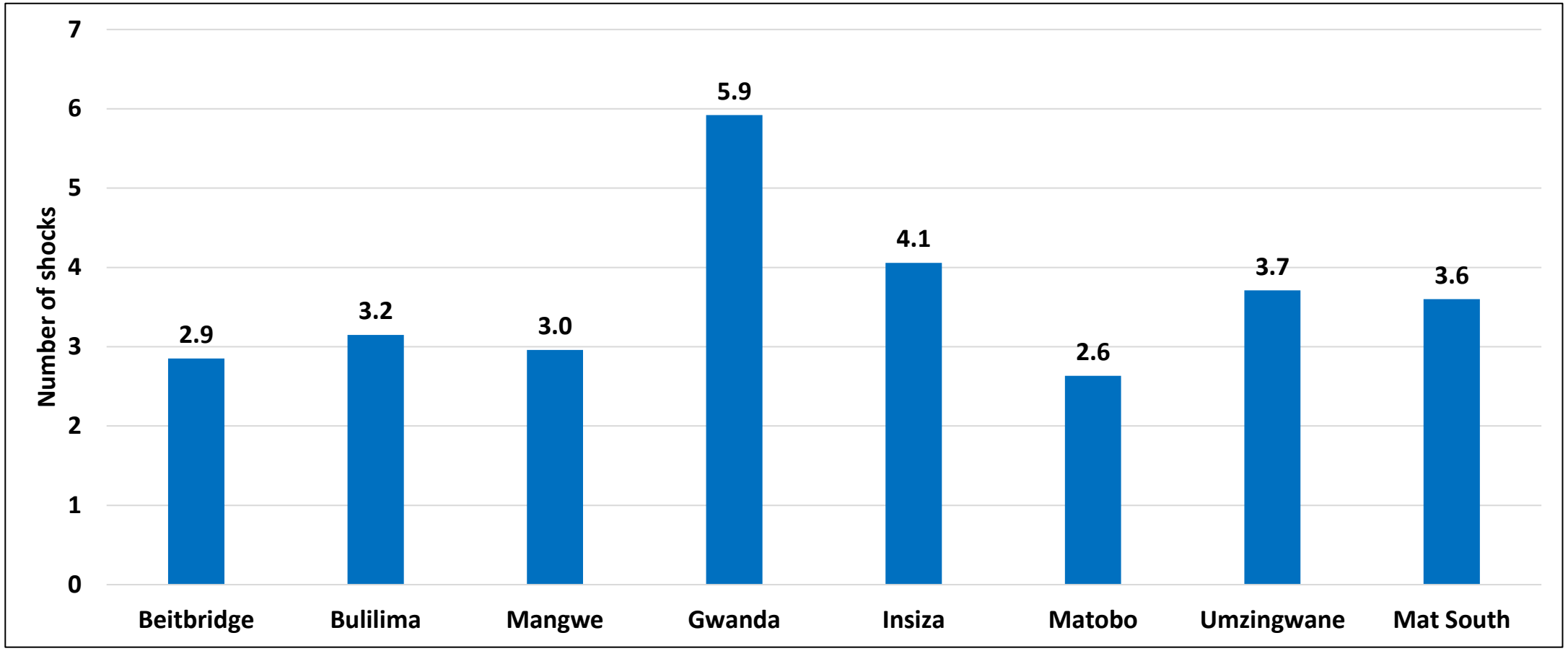
Shocks and Hazards

Households Experiencing Shocks



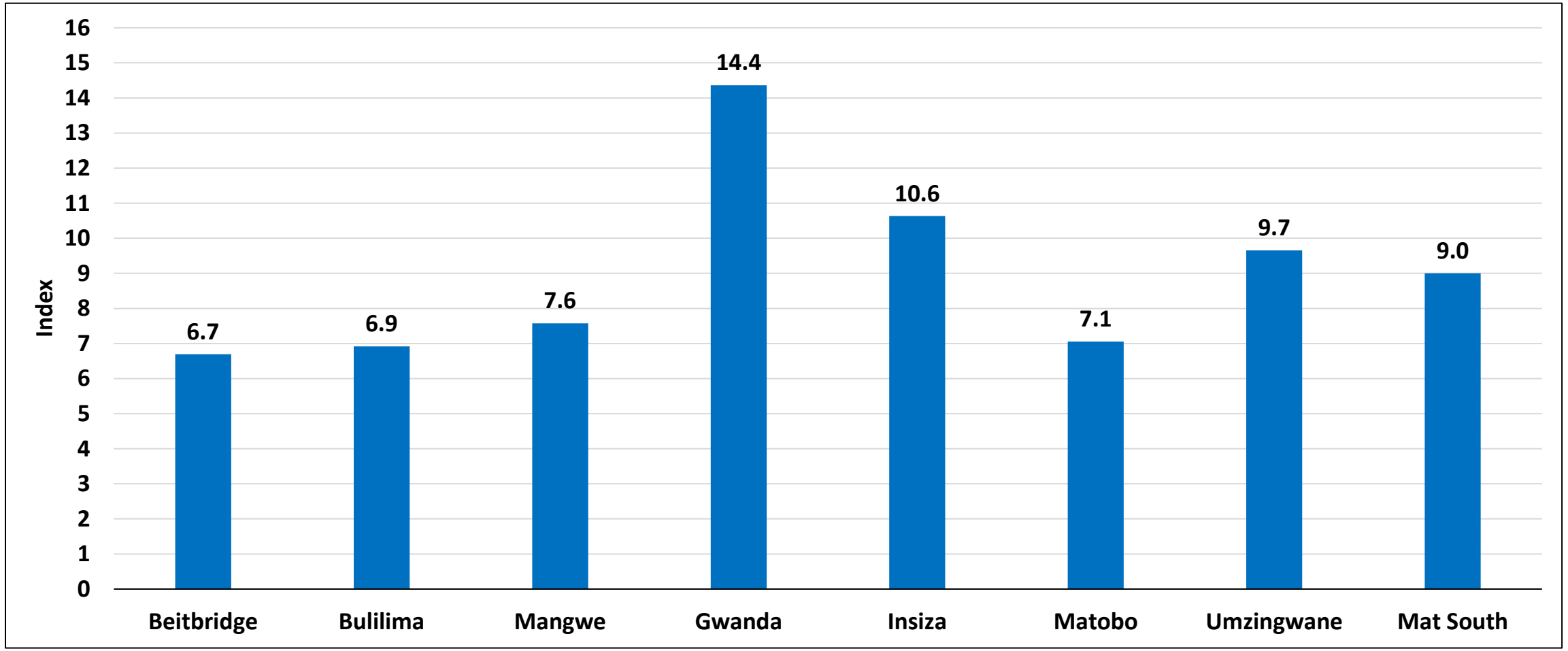
- Prolonged mid-season dry spells (90%) and cash shortage (66%) were the most prevalent shocks reported by households.

Number of Shocks Experienced by Households



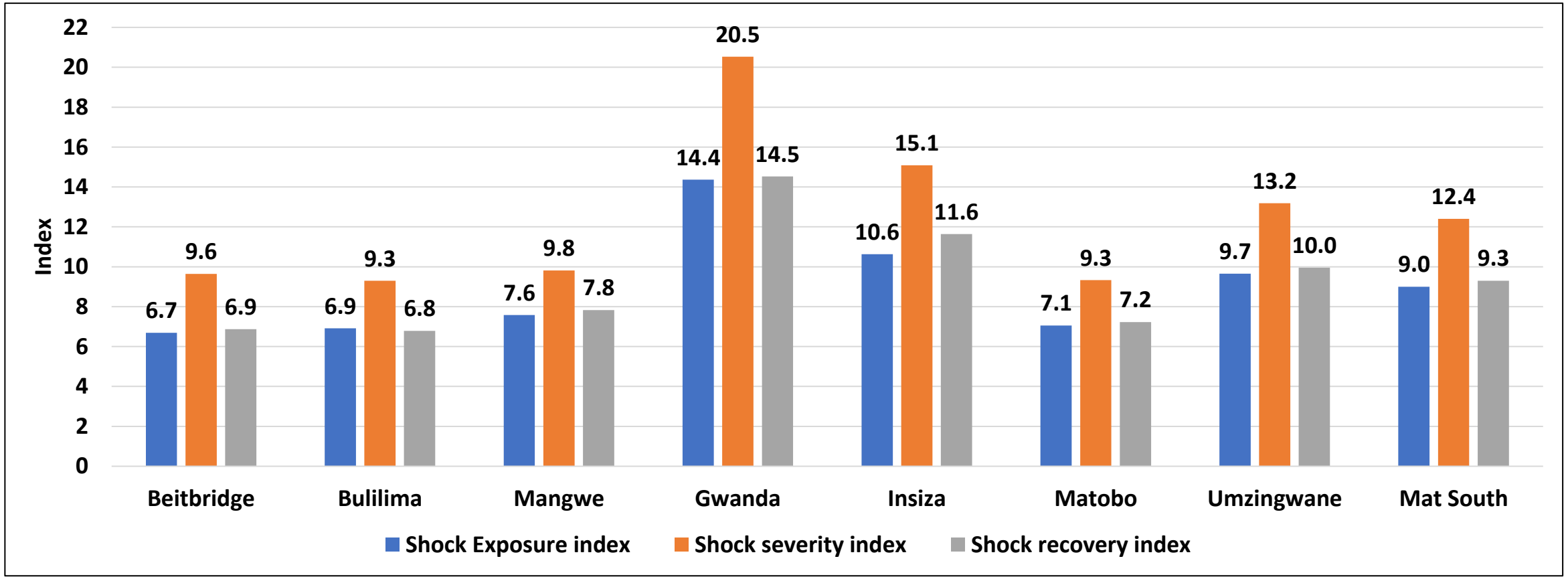
- The average number of shocks experienced by households in Matabeleland South was 3.6.
- Gwanda (5.6) had the highest average number of shocks.

Average Shock Exposure Index



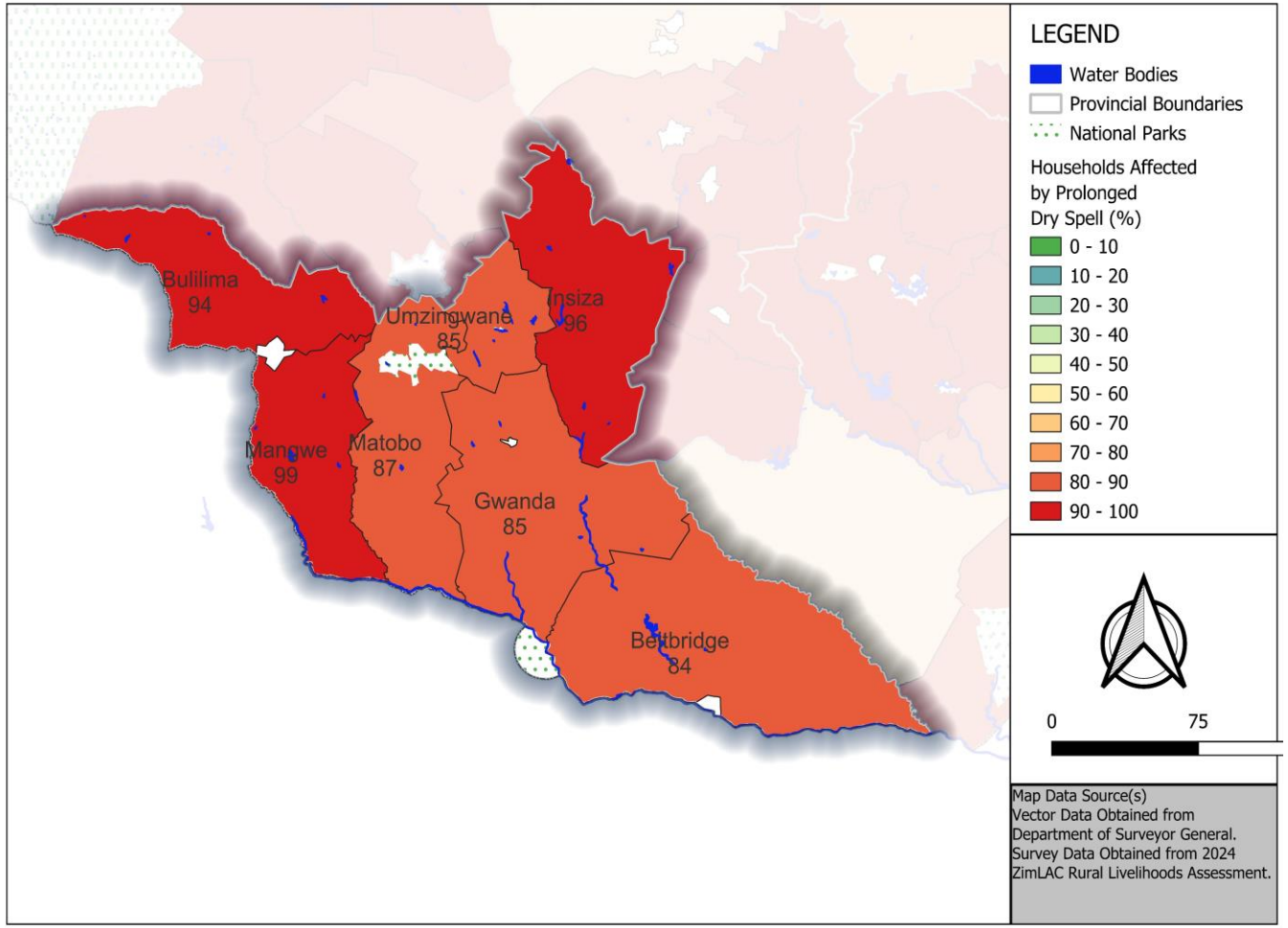
- Shock exposure index was calculated by multiplying the number of shocks experienced with impact severity of the shock to the household.
- Gwanda (14.4) had the highest shock exposure index in the province followed by Insiza (10.6).

Comparison Between Shock Exposure and Ability to Cope Indices



- Shock severity Index was 12.4 and shock Recovery Index was 9.3.

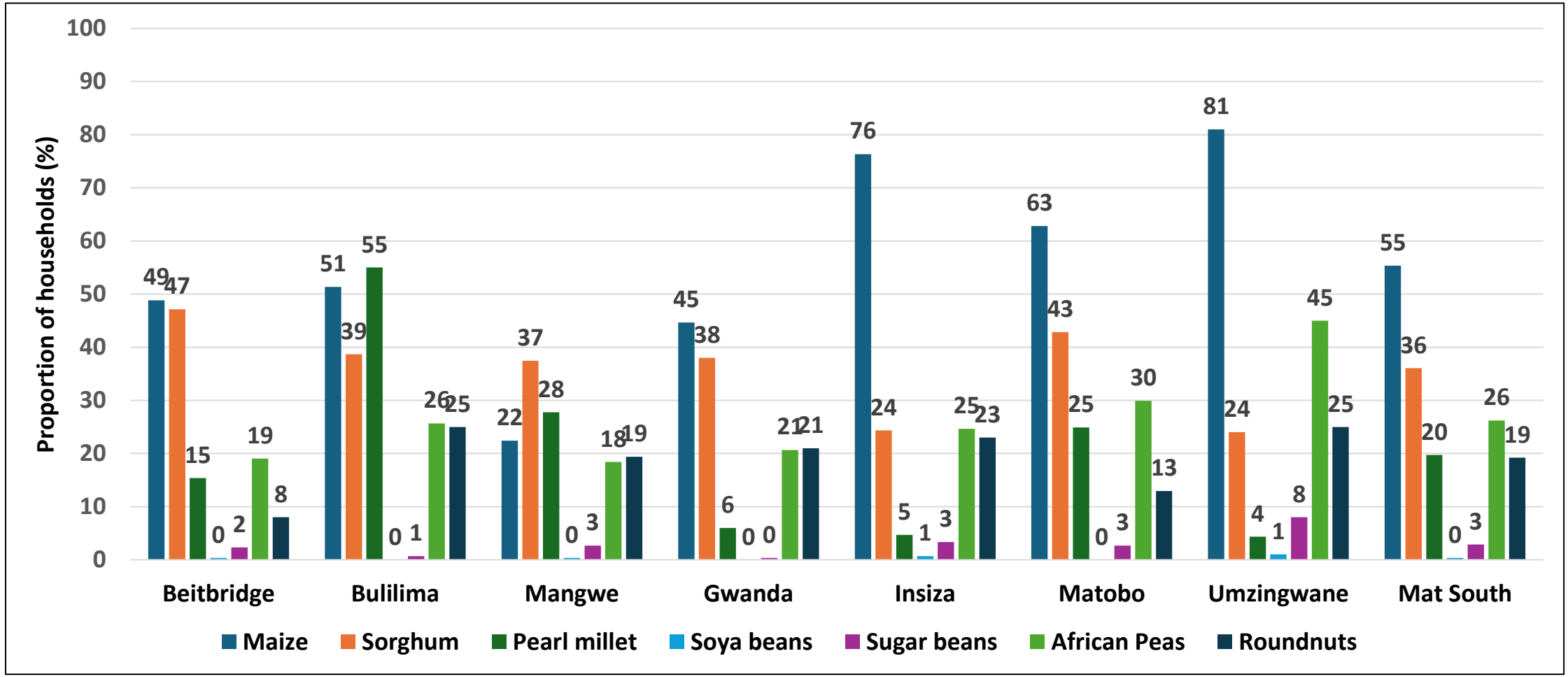
Households which Reported Prolonged Dry Spells



- About 84% of households in each district reported that they had experienced Prolonged mid-season dry spells .

Agriculture Production

Households Which Grew crops



- The proportion of households which grew maize was 55%, sorghum (36%) and pearl millet (20%).

Season Harvest

District	Maize		Sorghum		Finger Millet		Pearl Millet		Total Cereals	
	Expected (kgs)	Actual (kgs)	Expected (kgs)	Actual (kgs)	Expected (kgs)	Actual (kgs)	Expected (kgs)	Actual (kgs)	Expected (kgs)	Actual (kgs)
Beitbridge	245	37	193	62	4	1	50	17	491	117
Bulilima	89	0	55	0	1	0	99	4	244	4
Mangwe	97	68	84	53	4	3	52	26	237	150
Gwanda	312	14	250	13	7	0	32	0	601	26
Insiza	954	50	66	1	0	0	8	5	1028	56
Matobo	165	5	44	3	3	0	10	1	222	9
Umzingwane	895	8	70	3	0	0	6	0	971	11
Mat South	394	26	109	19	3	0	37	8	542	53

- On average, households were expecting to harvest 394 kgs of maize and 109 kgs of sorghum.
- The actual household harvest was 26 kgs for maize and 19 kgs for sorghum.

Cereals From Remittances and Casual labour

	Maize from casual labour (in kgs)	Maize from remittances (in kgs)
Beitbridge	2.8	1.4
Bulilima	0.0	0.0
Mangwe	11.6	9.3
Gwanda	0.0	0.0
Insiza	1.0	0.0
Matobo	1.5	0.0
Umzingwane	0.4	2.9
Mat South	**1.1**	**0.4**

- On average, households reported to have accessed 1.1kgs of maize from casual labour and 0.4kg from remittances.

Household Stocks as at 1 April 2023

	Maize (kgs)	Mealie meal (kgs)	Sorghum (kgs)	Finger millets (kgs)	Pearl millets (kgs)
Beitbridge	0.0	10.7	0.2	0.0	0.0
Bulilima	0.0	0.0	0.0	0.0	0.0
Mangwe	1.0	13.1	1.1	0.0	0.2
Gwanda	0.0	7.5	0.0	0.0	0.0
Insiza	4.4	10.6	0.0	0.0	0.0
Matobo	0.6	17.1	0.0	0.0	0.0
Umzingwane	6.3	12.4	0.0	0.0	0.0
Mat South	0.8	9.8	0.0	0.0	0.0

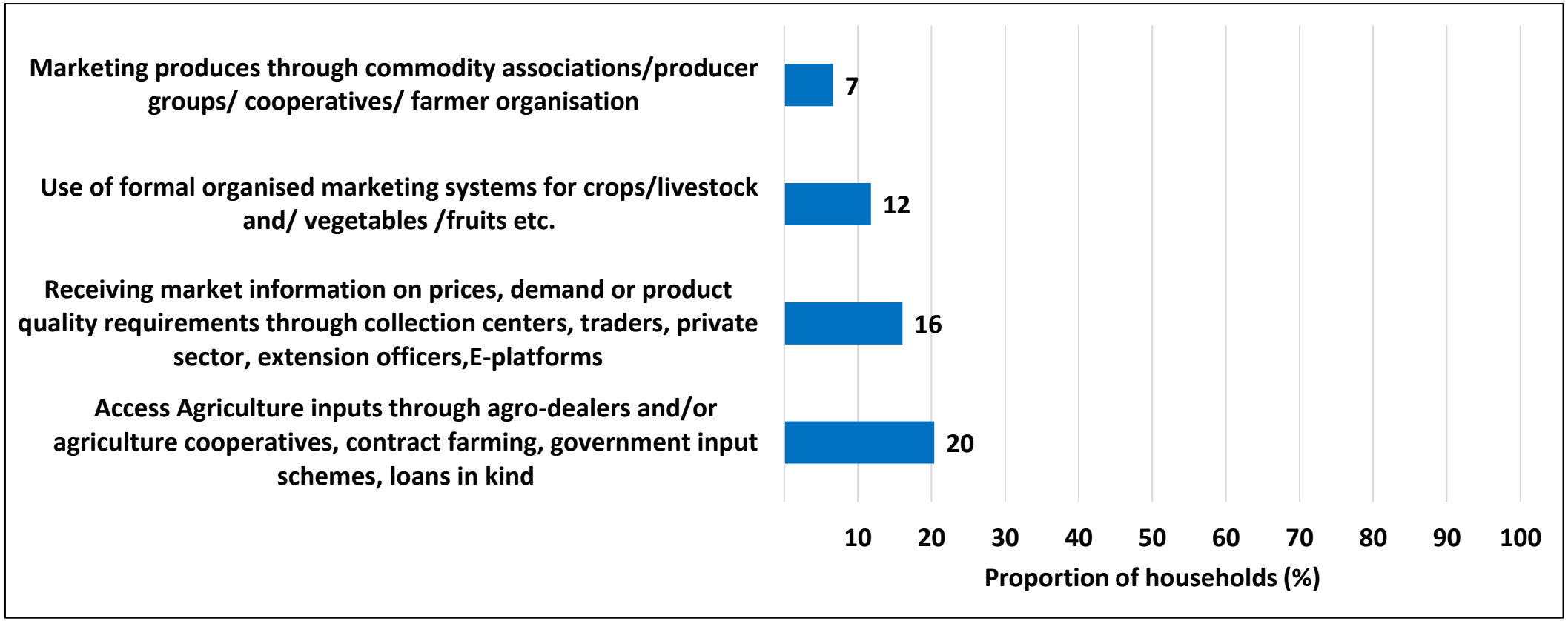
- The average household stocks as at 1 April for mealie-meal were 9.8kgs and maize 0.8kg.

Households Practicing Climate Smart Agriculture

District	Quality certified seeds (%)	Community seed banks (%)	Adapted, suitable Improved Varieties (%)	Growing traditional grains (%)	Crop rotation (%)	Intercropping (%)	Cover cropping (%)	Mulching (%)	Integrated Pest Management (%)	Compost /Organic fertilizer (%)	Drip/Micro Irrigation (%)	Plant Density (%)	Pfumvudza /Intwasa (%)
Beitbridge	29.8	14.4	39.5	40.8	17.7	15.7	5.0	9.7	8.4	9.7	7.4	5.0	31.1
Bulilima	23.0	3.3	9.7	20.0	55.7	54.7	6.7	19.3	3.0	14.0	4.0	6.0	44.7
Mangwe	3.0	2.3	6.4	42.8	33.1	26.4	8.0	14.0	0.3	3.0	1.3	2.3	24.7
Gwanda	13.0	16.3	52.3	53.3	29.3	16.7	5.7	6.0	3.3	2.0	3.3	1.0	13.0
Insiza	26.7	0.7	11.3	15.0	26.3	14.7	0.3	11.0	5.3	22.0	1.3	2.3	46.3
Matobo	23.6	0.7	21.6	24.9	32.6	12.6	0.7	9.3	2.0	20.3	2.0	0.7	38.5
Umzingwane	24.7	2.0	27.0	9.0	34.0	41.0	1.7	10.3	6.7	19.3	0.3	1.0	52.0
Mat South	**20.5**	**5.7**	**24.0**	**29.4**	**32.7**	**26.0**	**4.0**	**11.4**	**4.1**	**12.9**	**2.8**	**2.6**	**35.8**

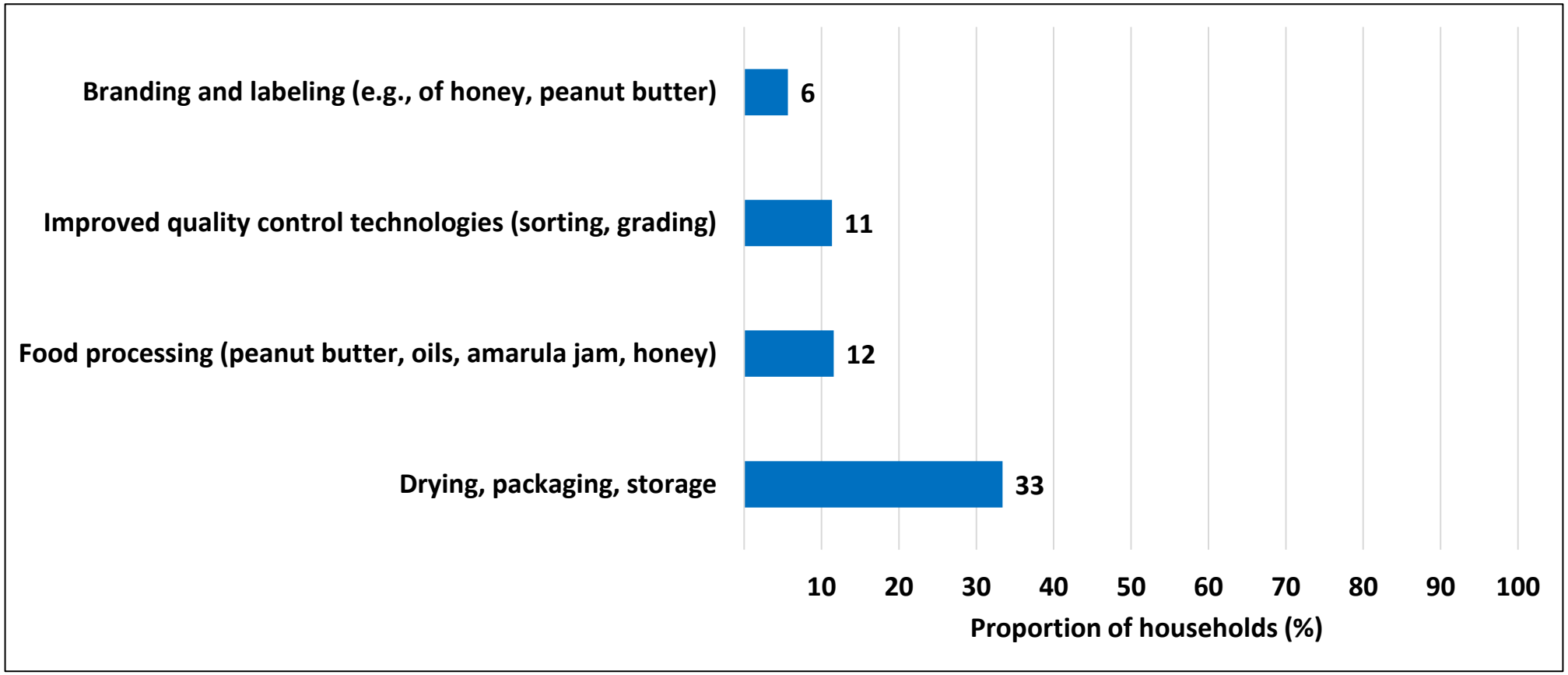
- About 35.8% of the households practised Pfumvudza/Intwasa.

Improved Agricultural Marketing Practices



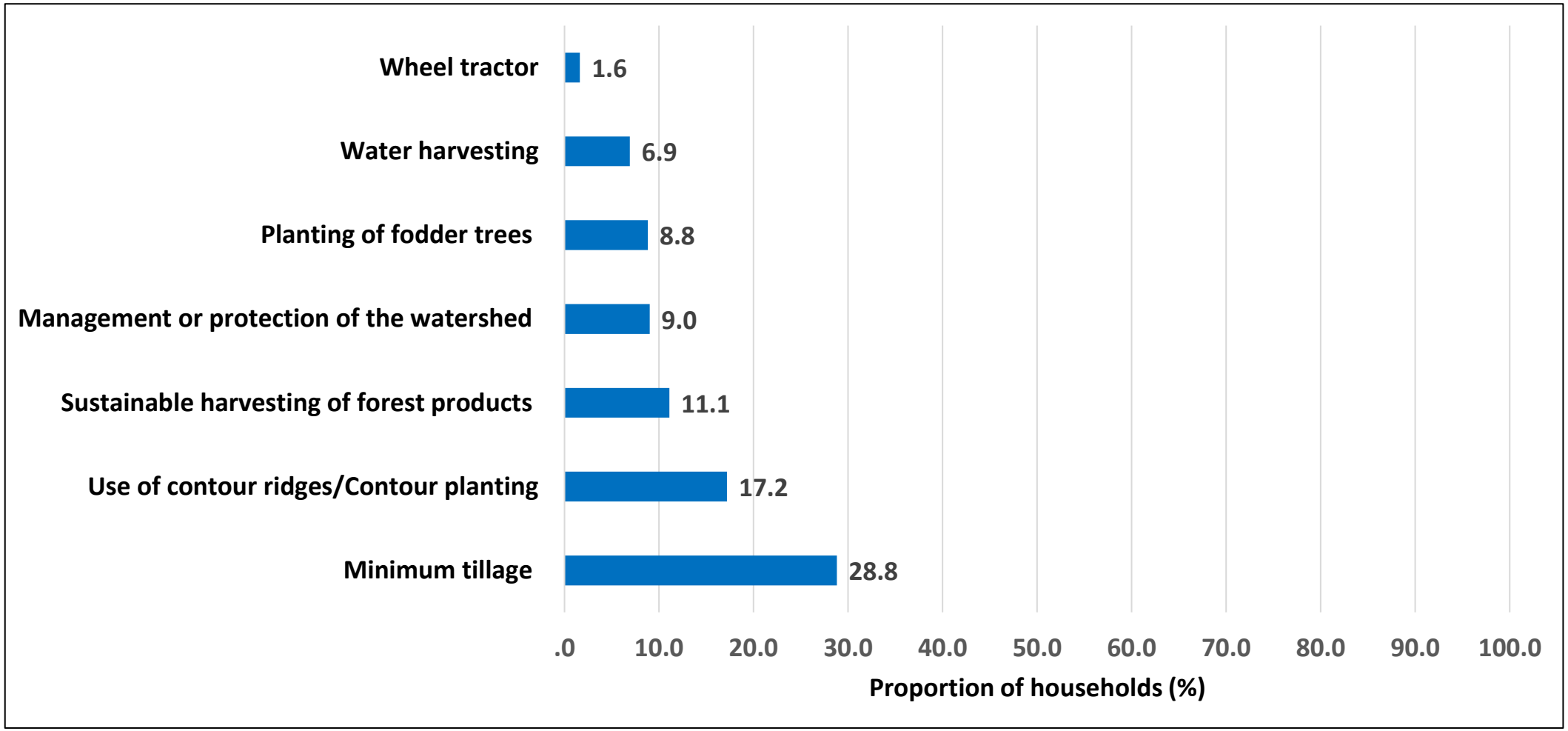
- About 20% of the households accessed agriculture inputs through agro-dealers and/or cooperative, contract farming, government input scheme and loans in kind.

Value Addition



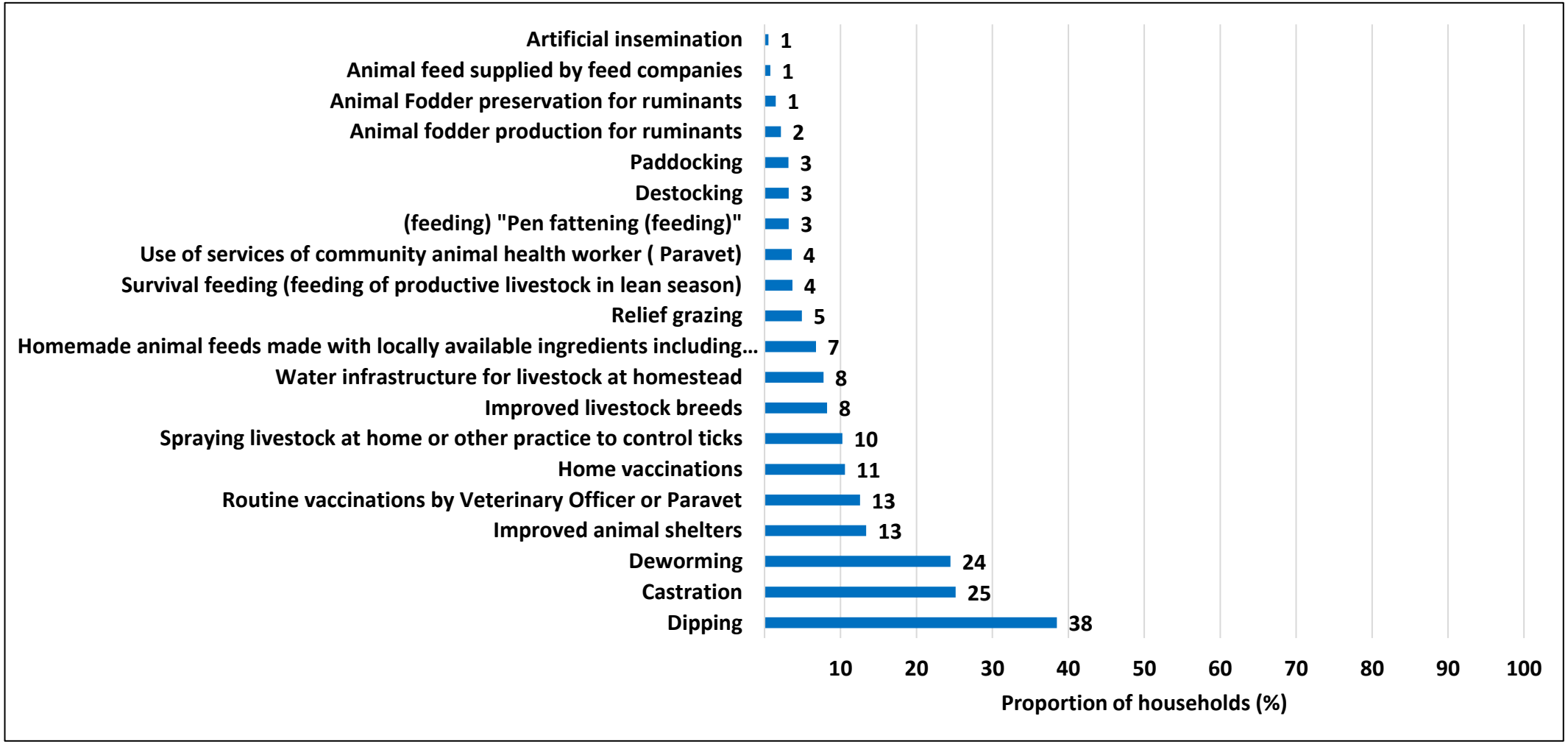
- Drying, packaging,and storage (33%) were the most practised value addition methods.

Adoption of Water and Soil Conservation Strategies



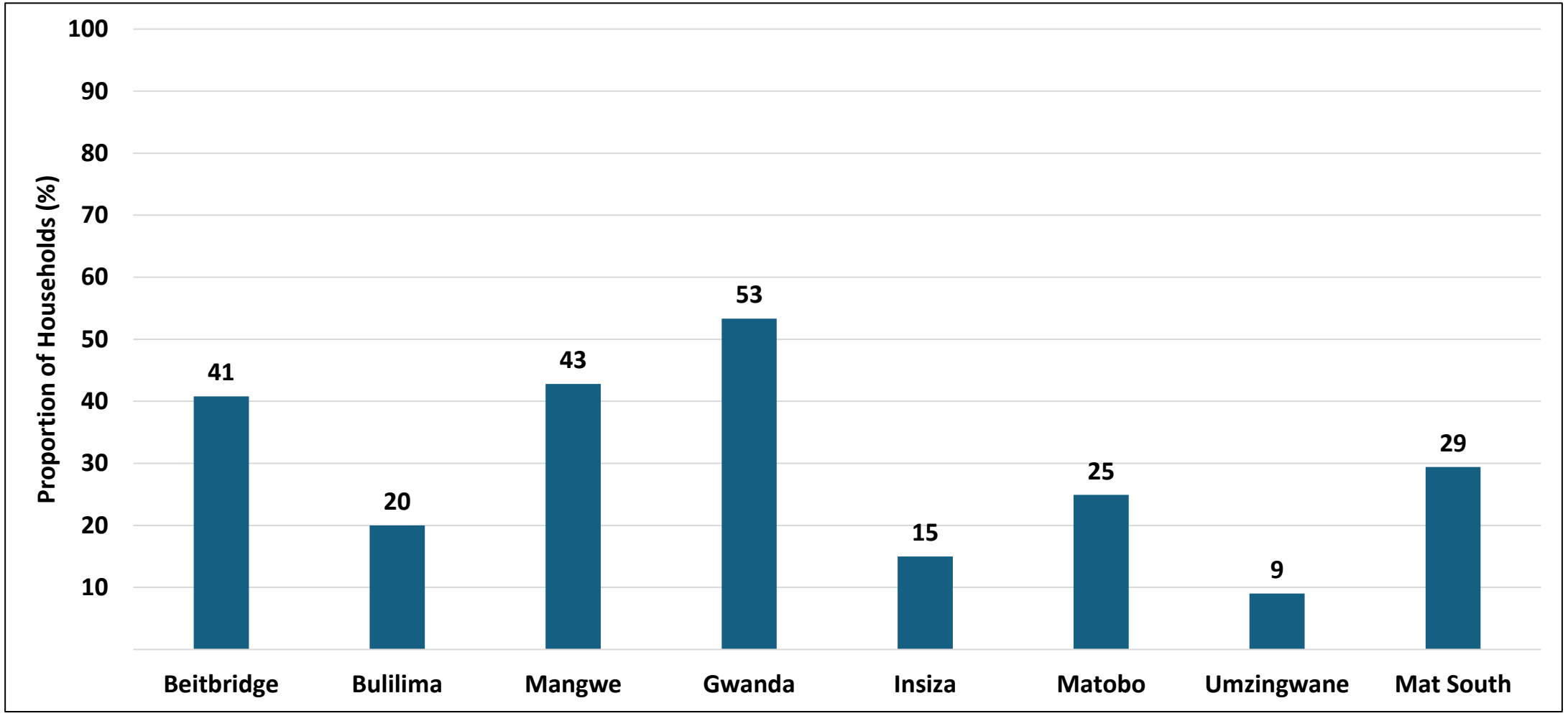
- Minimum tillage (28.8%) was the most practised water and soil conservation strategy.

Improved Livestock Practises



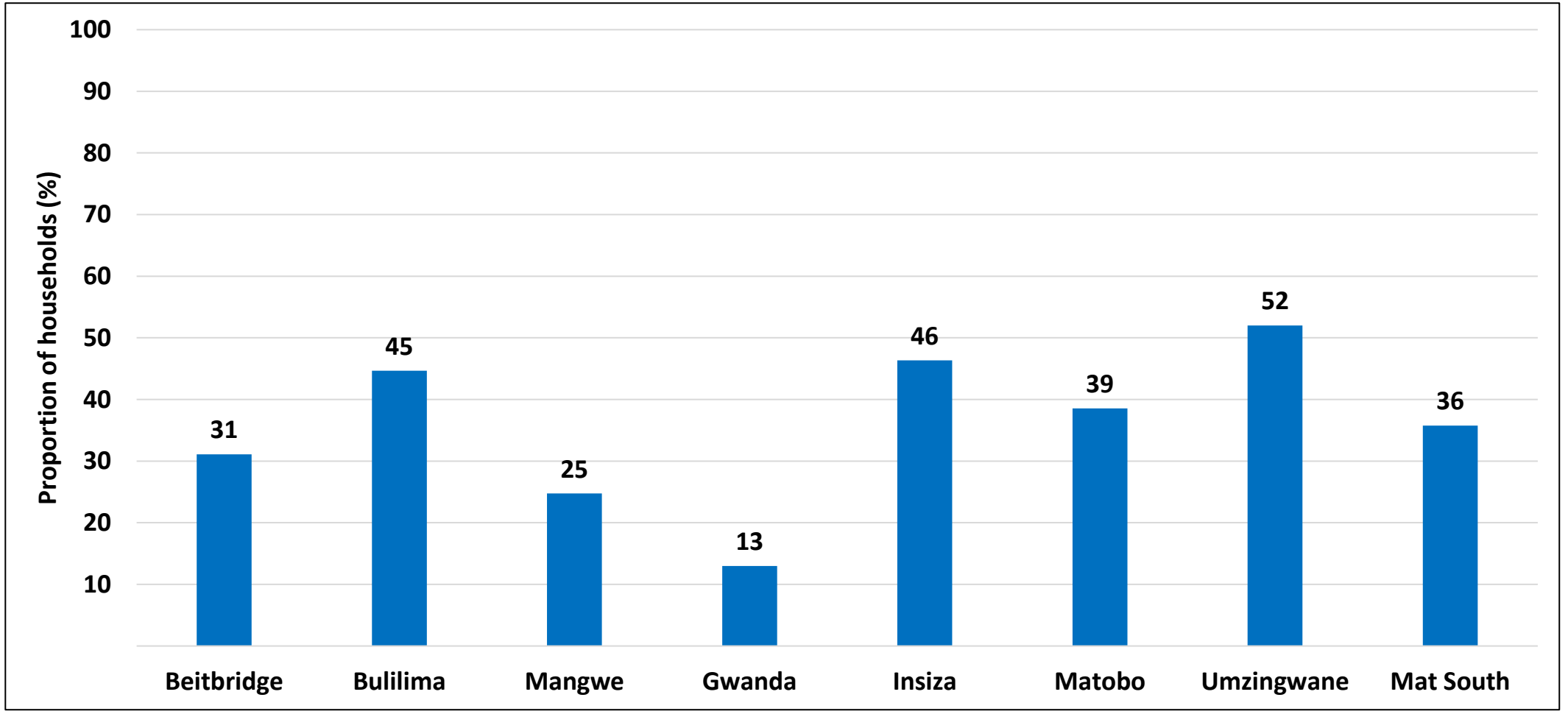
- The most practised livestock improvement strategies were dipping (38%), castration (25%) and deworming (24%) were the most practiced methods.

Households growing Traditional grains



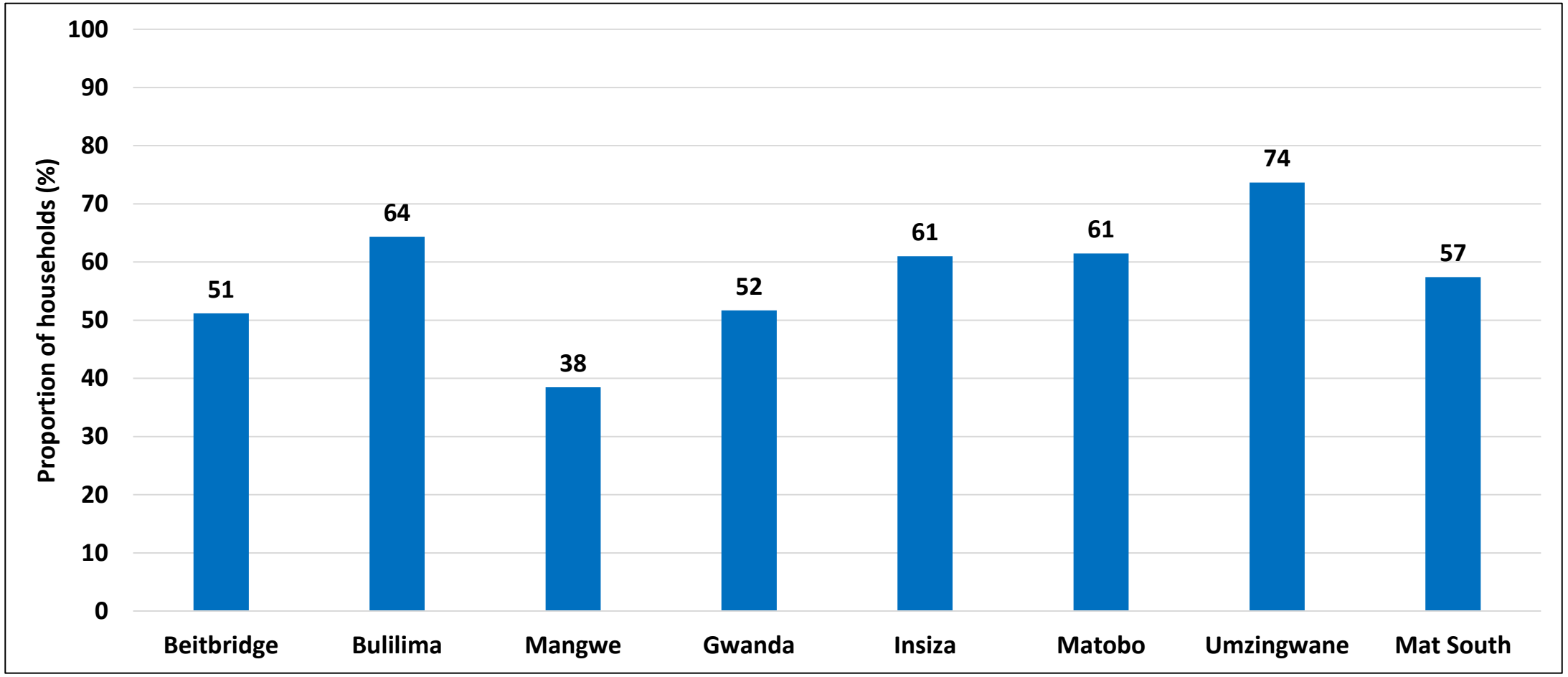
- Gwanda (53%) and Mangwe (43%) had the highest proportions of households that grew traditional grains.

Households Practising Pfumvudza/Intwasa



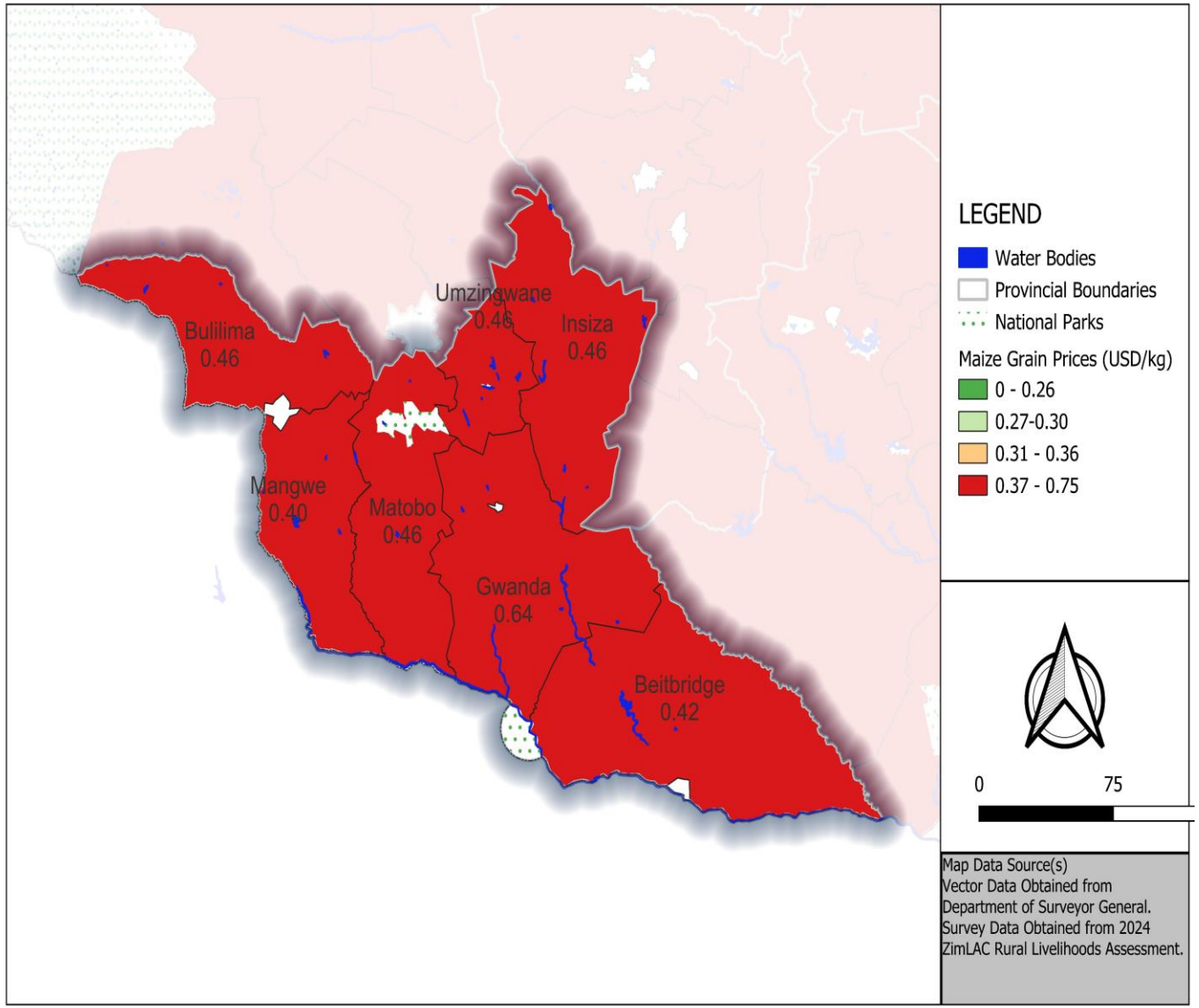
- Umzingwane (52%) and Insiza (46%) had the highest proportion of households that practised Pfumvudza/Intwasa.

Agricultural Extension Visits



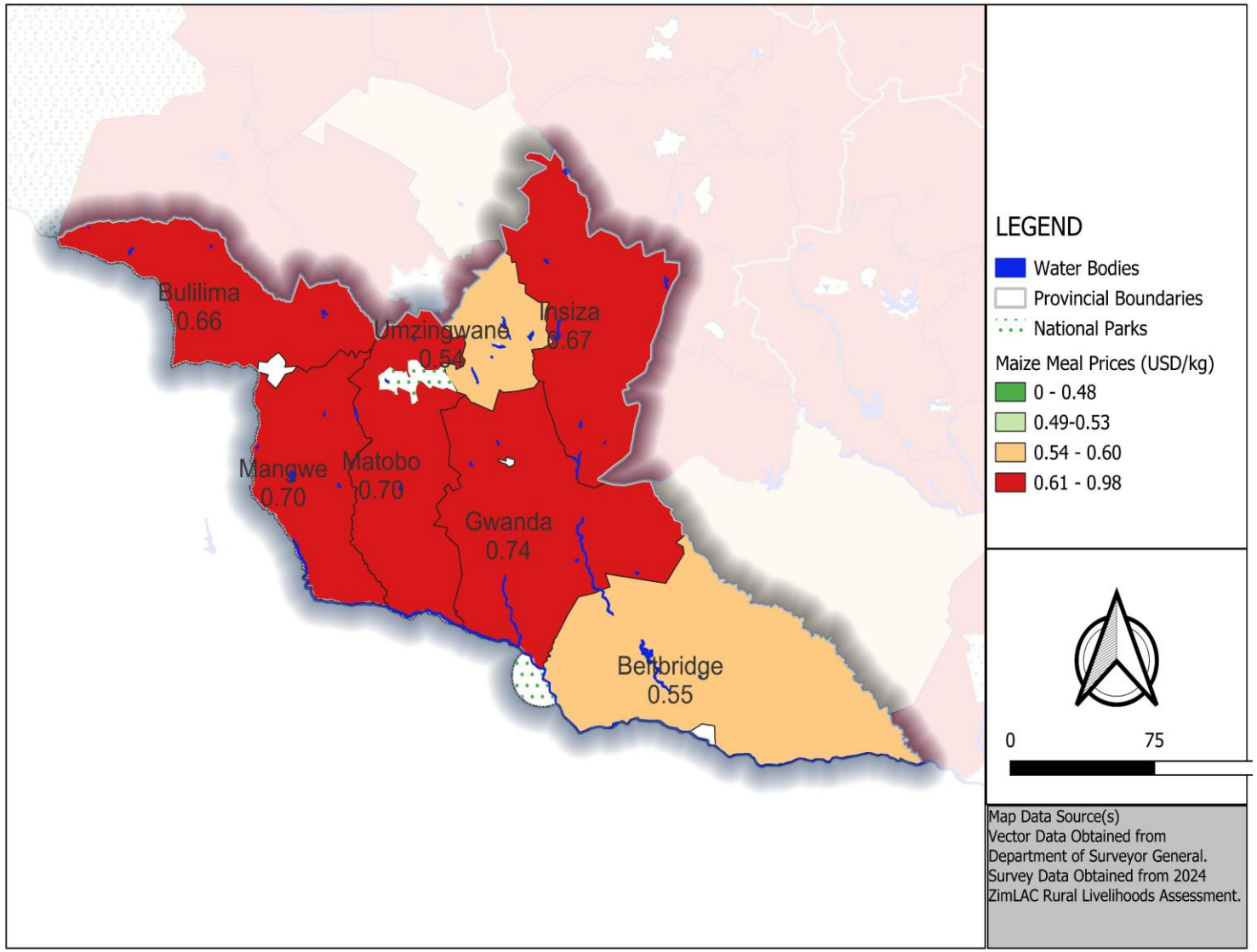
- The proportion of households which received extension services was 57%.

Maize Grain Prices



- Maize grain prices ranged from US$ 0.64 to US$ 0.40 per kg.
- Gwanda had the highest priceat US$ 0.64 per kg.
- Mangwe had the lowest price at US$ 0.40 per kg.

Maize Meal Prices



- Maize meal prices ranged from US$ 0.74 to US$ 0.54 per kg.
- Gwanda had the highest price at US$ 0.74 per kg.
- Beitbridge had the lowest price at US$ 0.55 per kg.

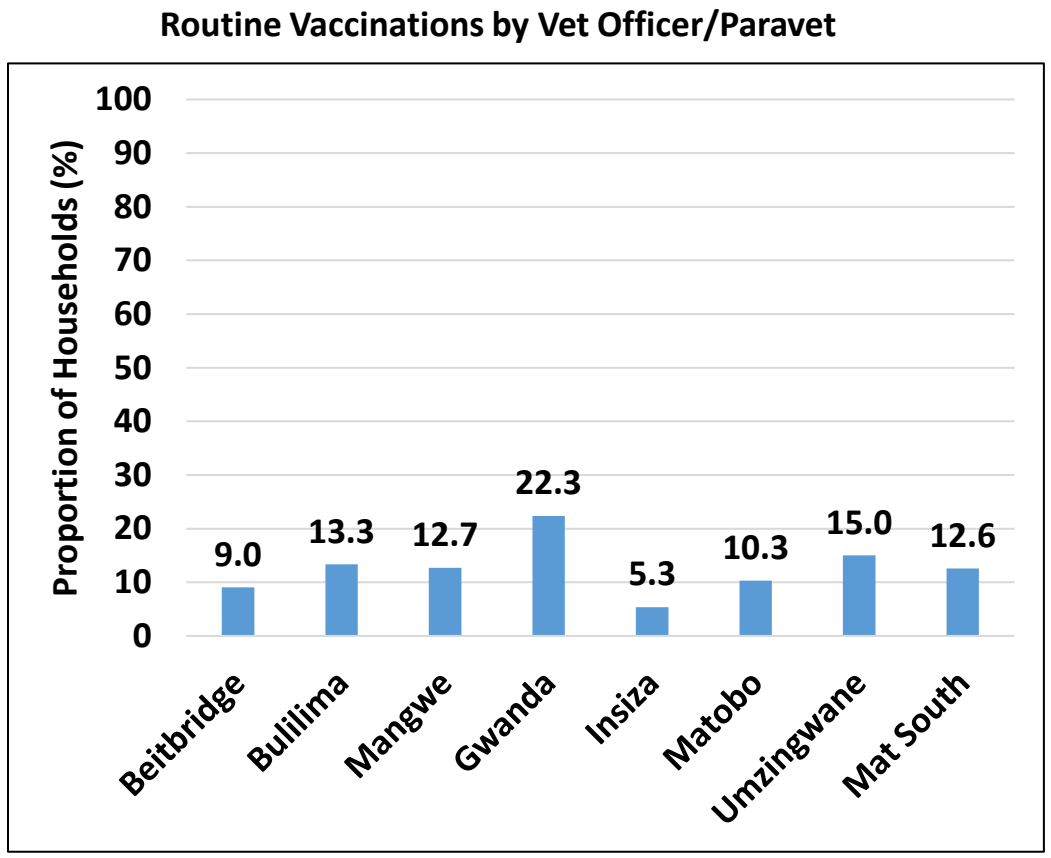
Livestock

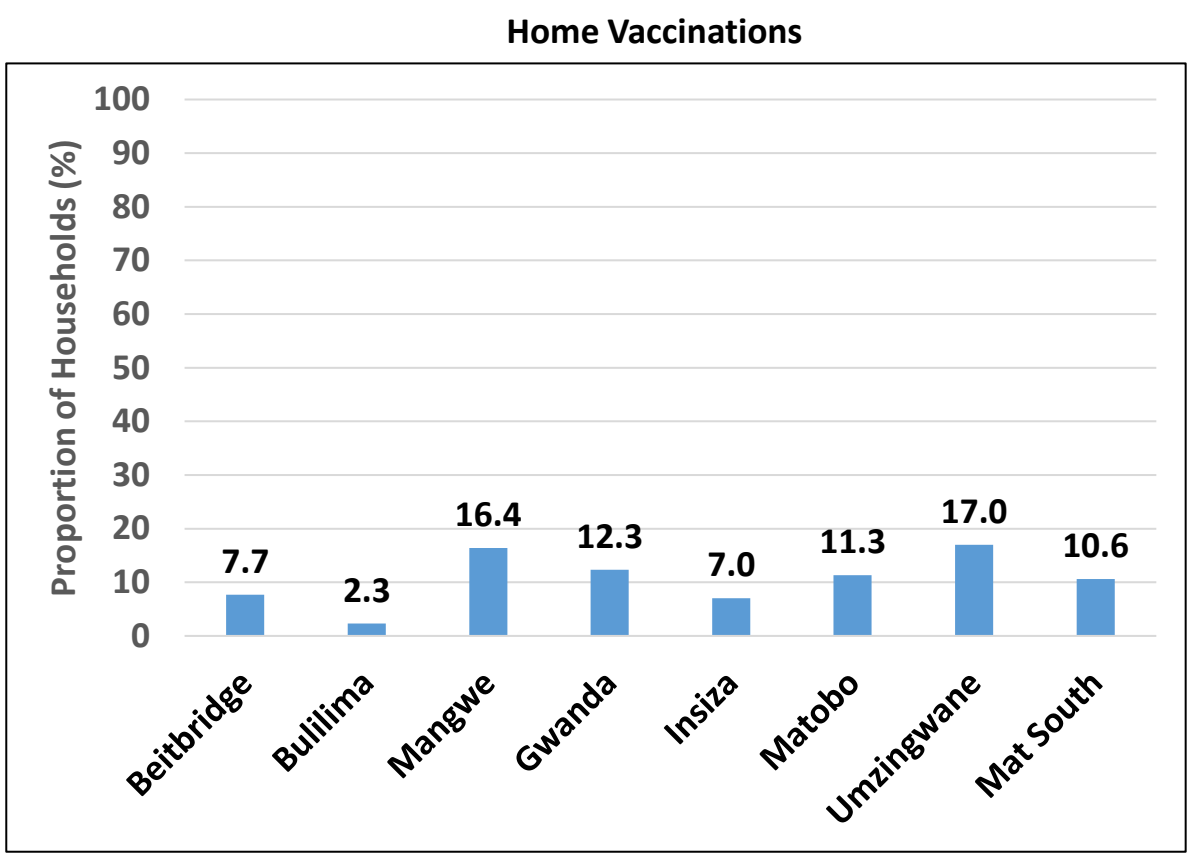
Households Which Owned Cattle

	Zero	One to Two	Three to Five	More than Five
Beitbridge	62.9	3.0	12.4	21.7
Bulilima	56.3	10.0	18.3	15.3
Mangwe	56.5	9.0	19.1	15.4
Gwanda	66.7	7.3	13.3	12.7
Insiza	56.7	8.0	12.3	23.0
Matobo	62.8	7.0	13.6	16.6
Umzingwane	59.0	8.3	14.3	18.3
Mat South	60.1	7.5	14.8	17.6

- About 60.1% of the households did not own cattle in the Province.

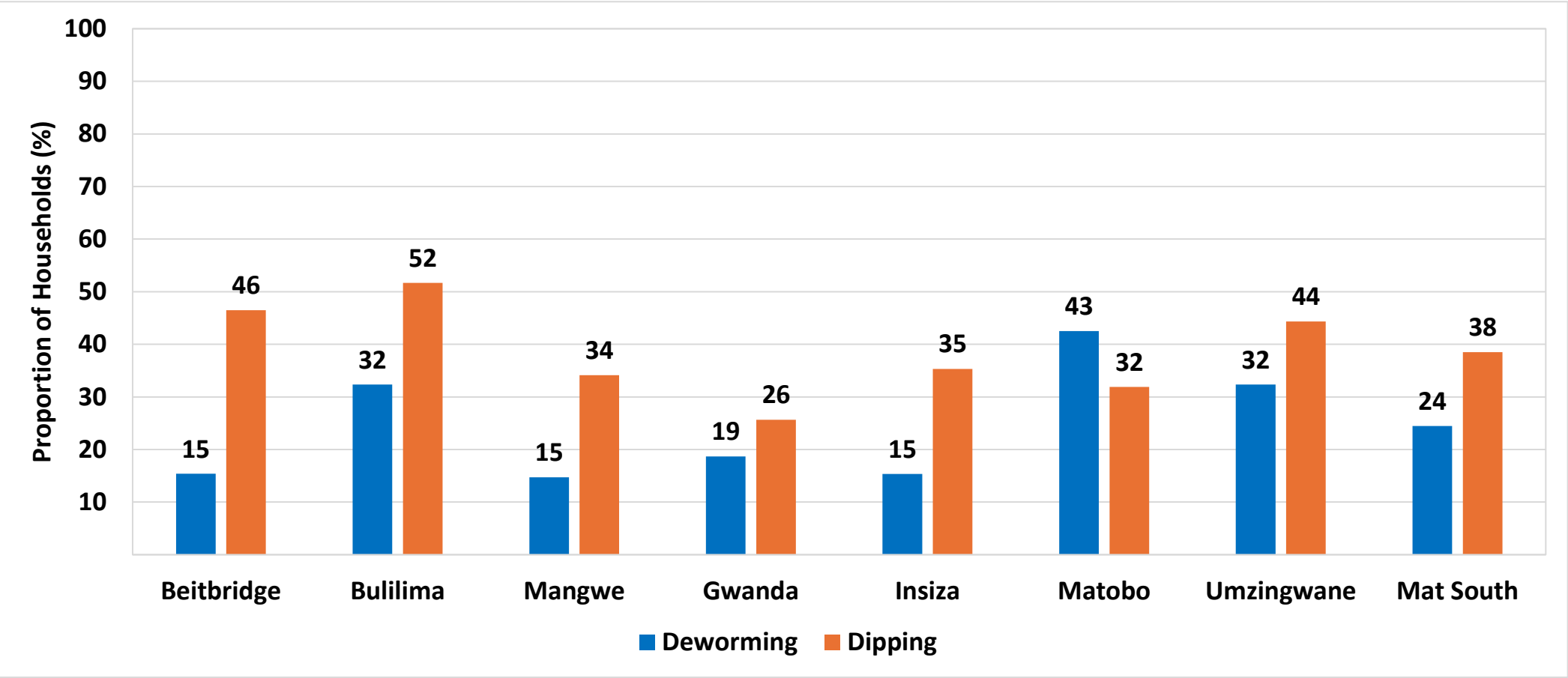
Livestock Vaccinations





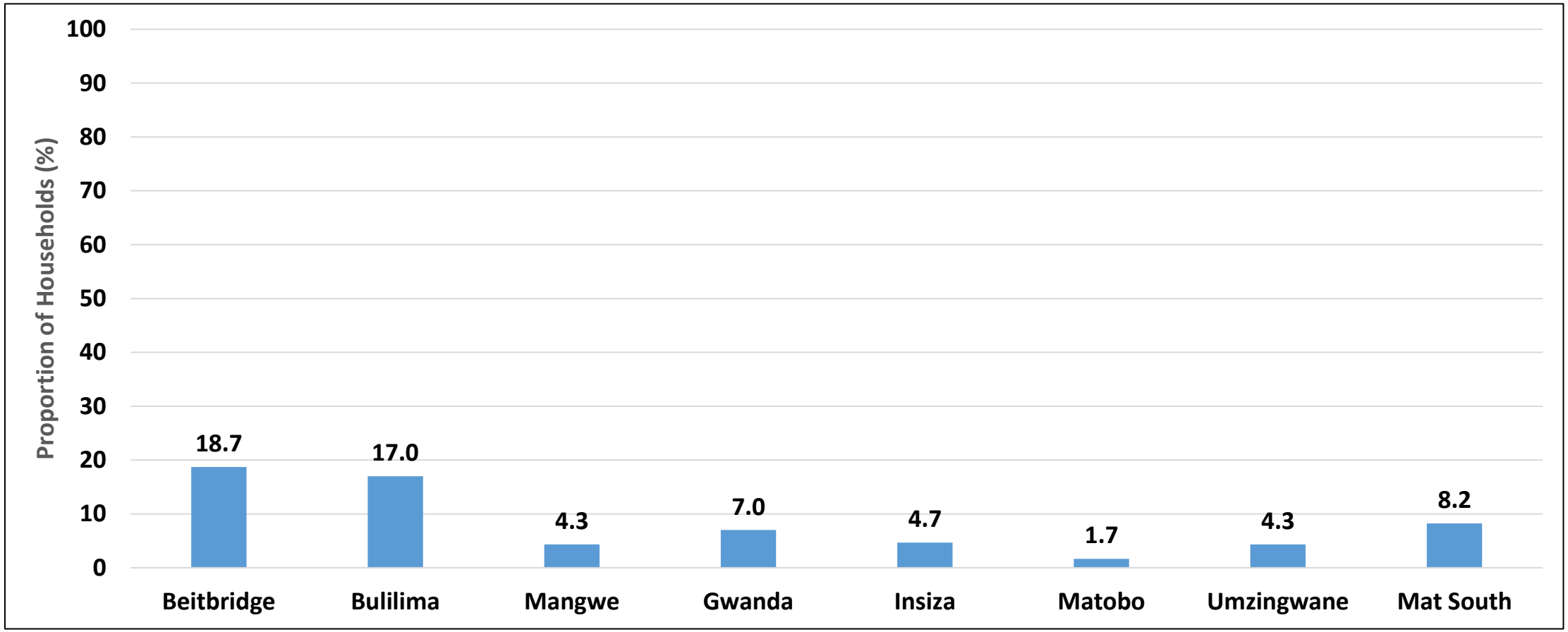
- In Matabeleland South, only 12.6% of the households indicated that they had used vaccinations carried out by a Veterinary Officer or Para Vet.
- On the other hand, 10.6% of the households indicated that they had used home vaccinations.

Livestock Deworming and Dipping



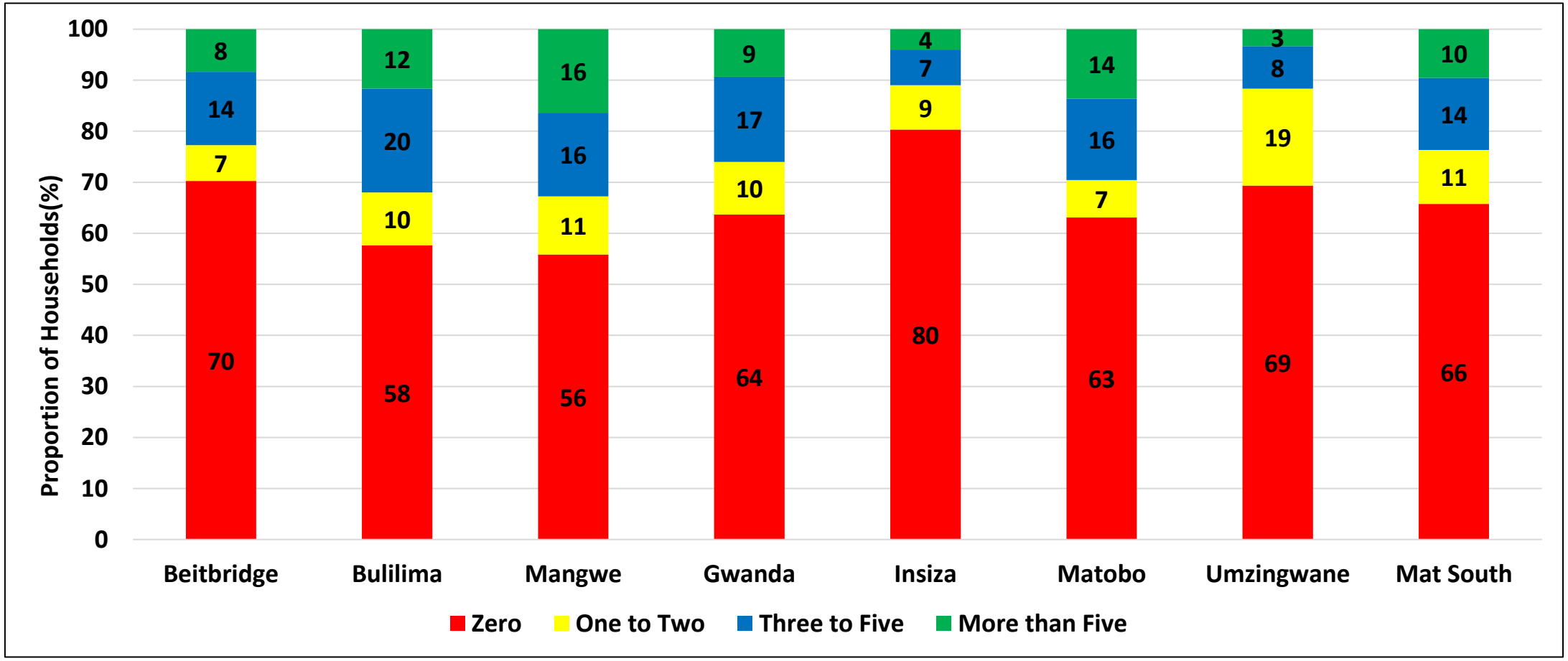
- About 38.5% of the households with livestock indicated that they dipped their livestock. Bulilima (51.7%) had the highest proportion of households dipping their livestock.
- The proportion of households that had dewormed their livestock in the province was 24.5%.

Improved Livestock Breeds



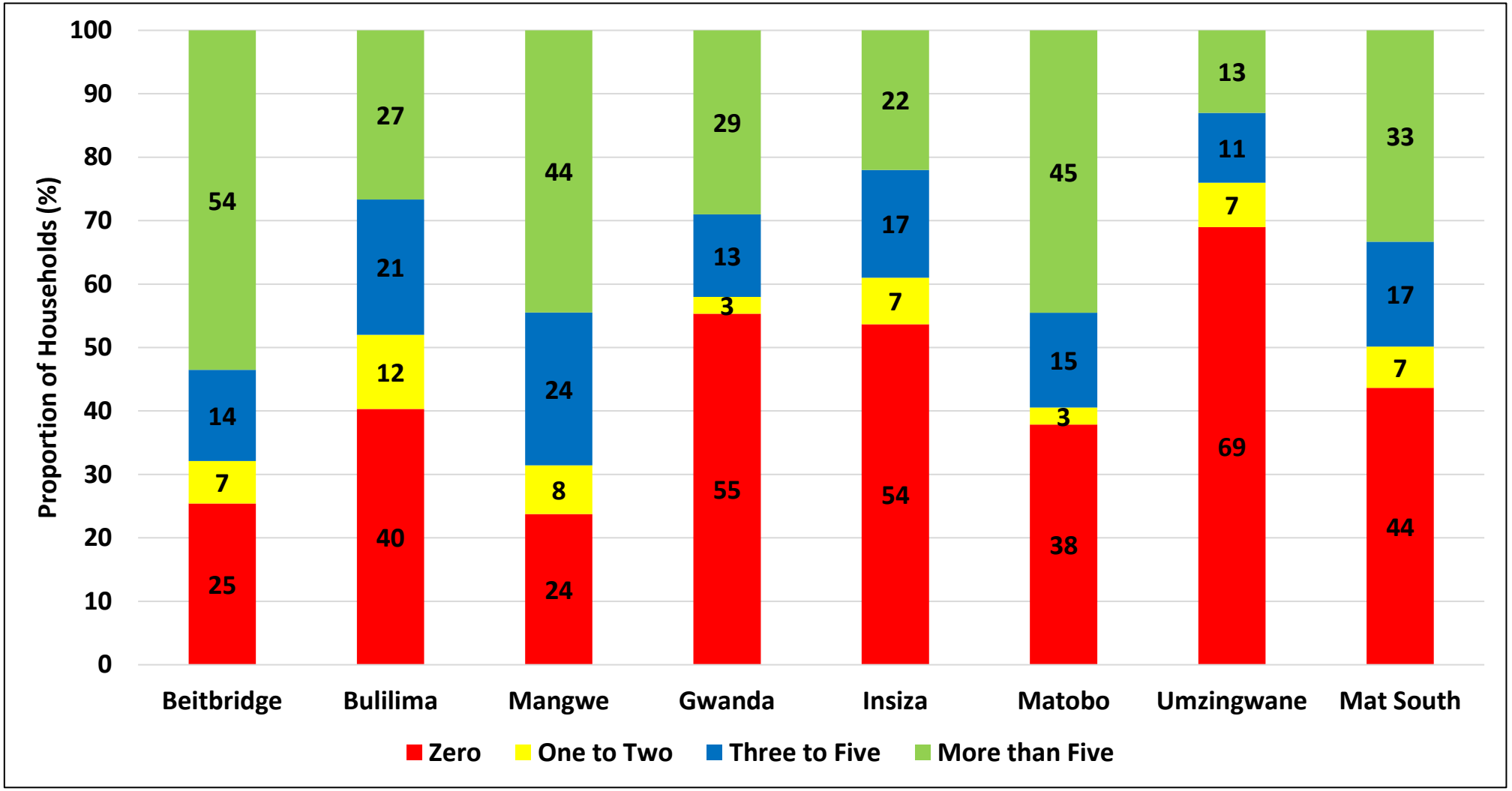
- About 8.2% of the households indicated that they were using improved livestock breeds.
- Beitbridge (18.7%) had the highest proportion of households using improved livestock breeds while Matobo (1.7%) had the lowest.

Households which owned Draught Animals



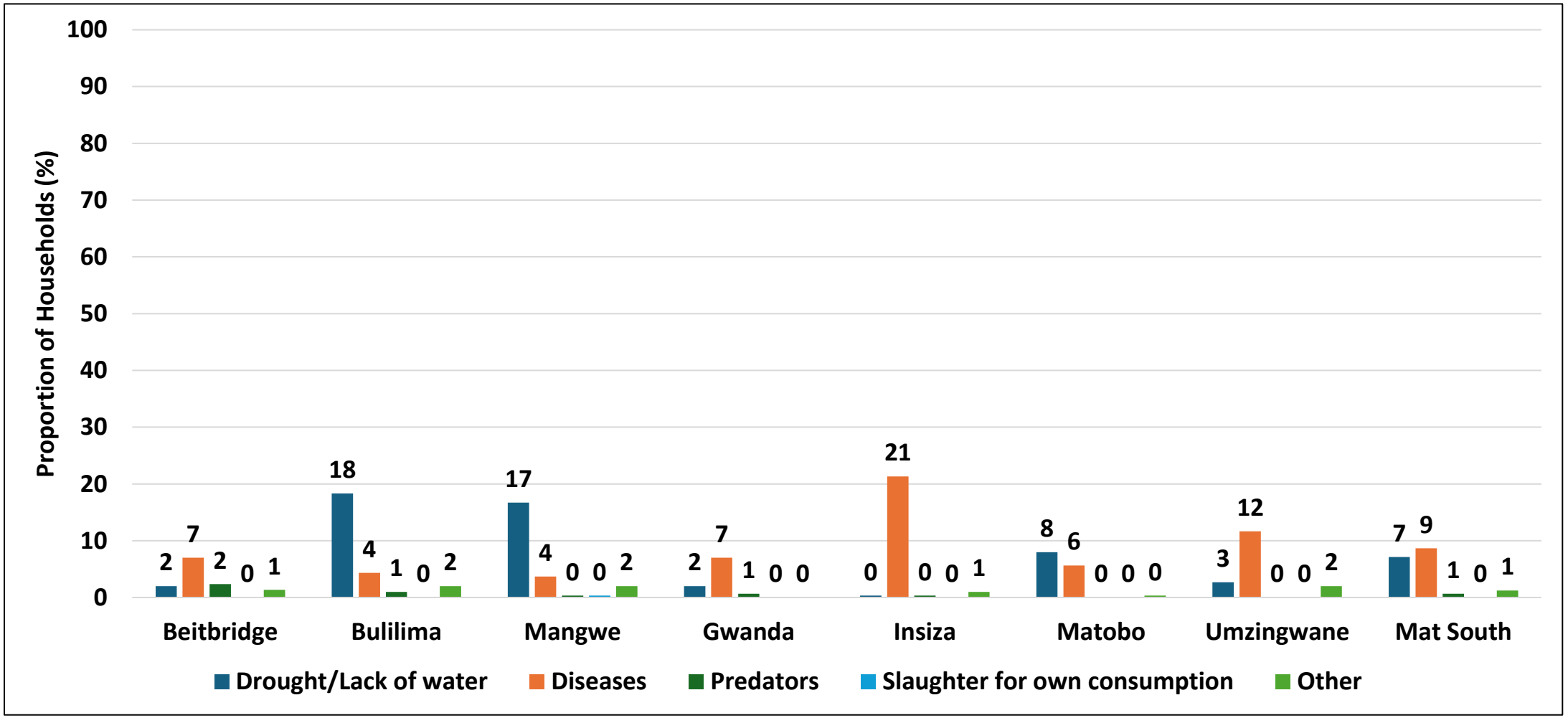
- About 66% of the household did not own draught animals.

Households which owned Goats



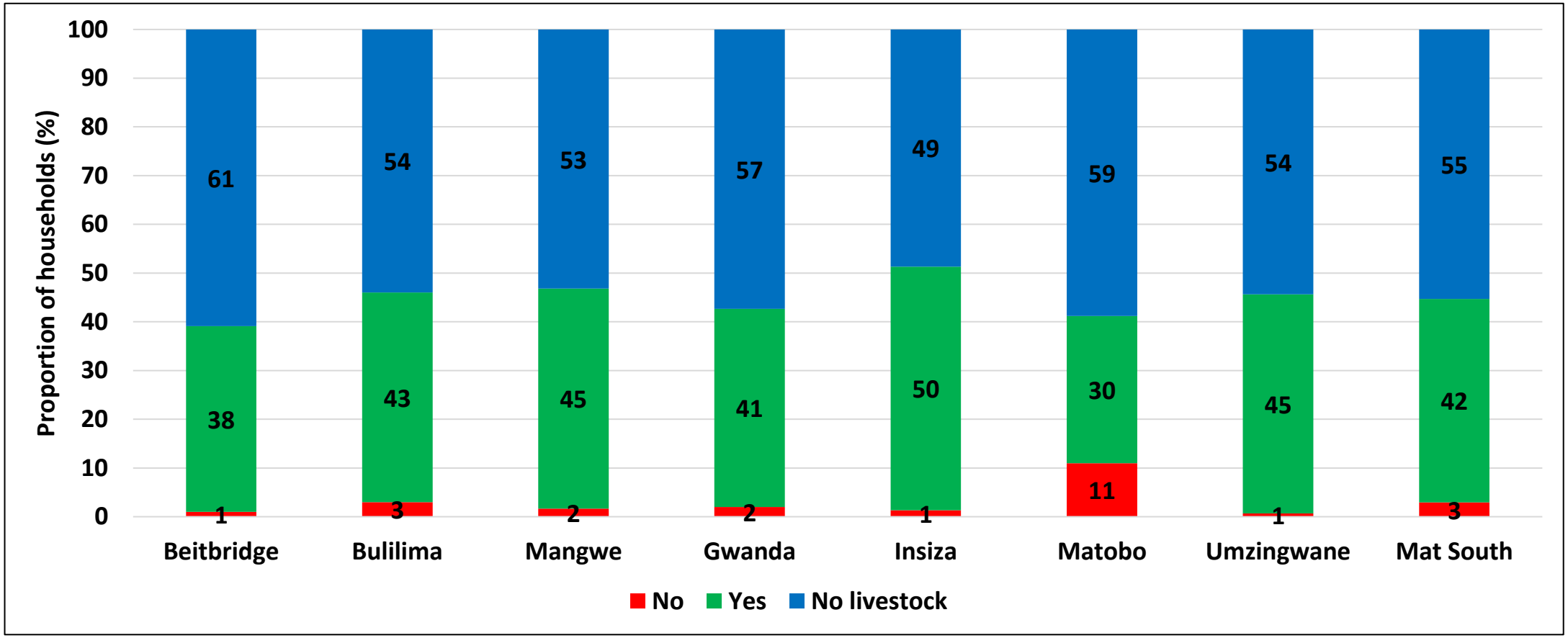
- The proportion of households who owned more than 5 goats was 33%.

Causes of Cattle Deaths



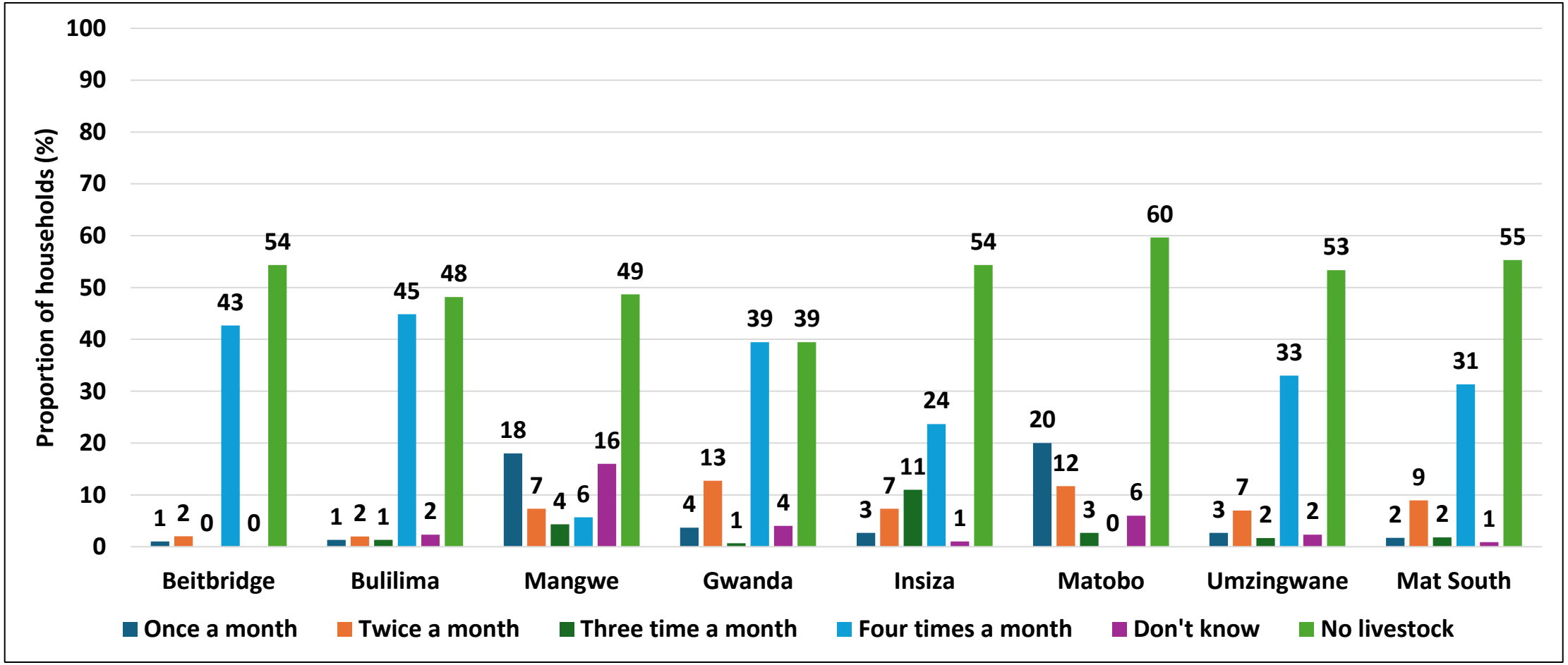
- The major cause of cattle deaths was diseases at (9%) followed by drought/lack of water at 7%.

Access to dipping services



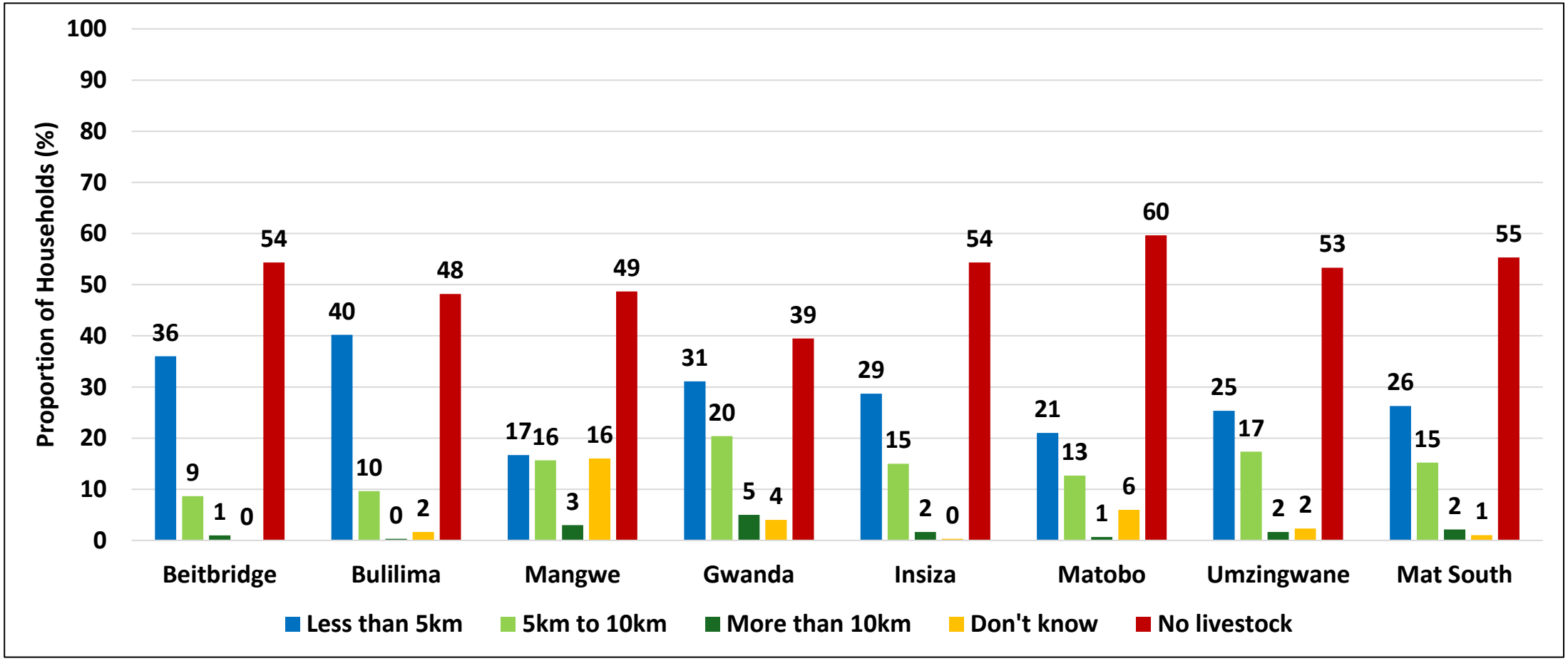
- The proportion of households which had access to dipping services was 42%.

Dipping Times



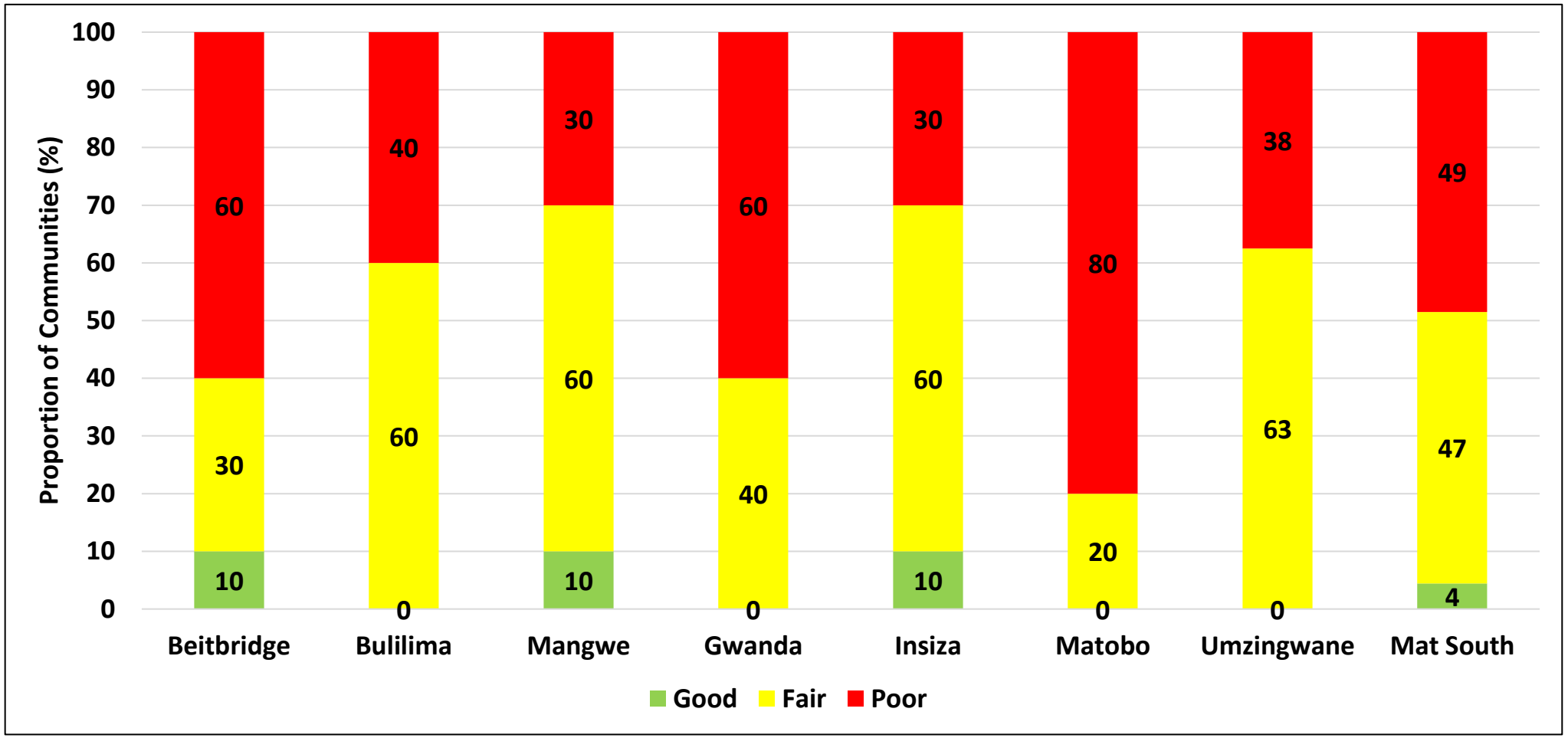
- In Matabeleland South, 31% of households with livestock reported that they dipped their cattle four times a month.

Distance to the Nearest dip tank



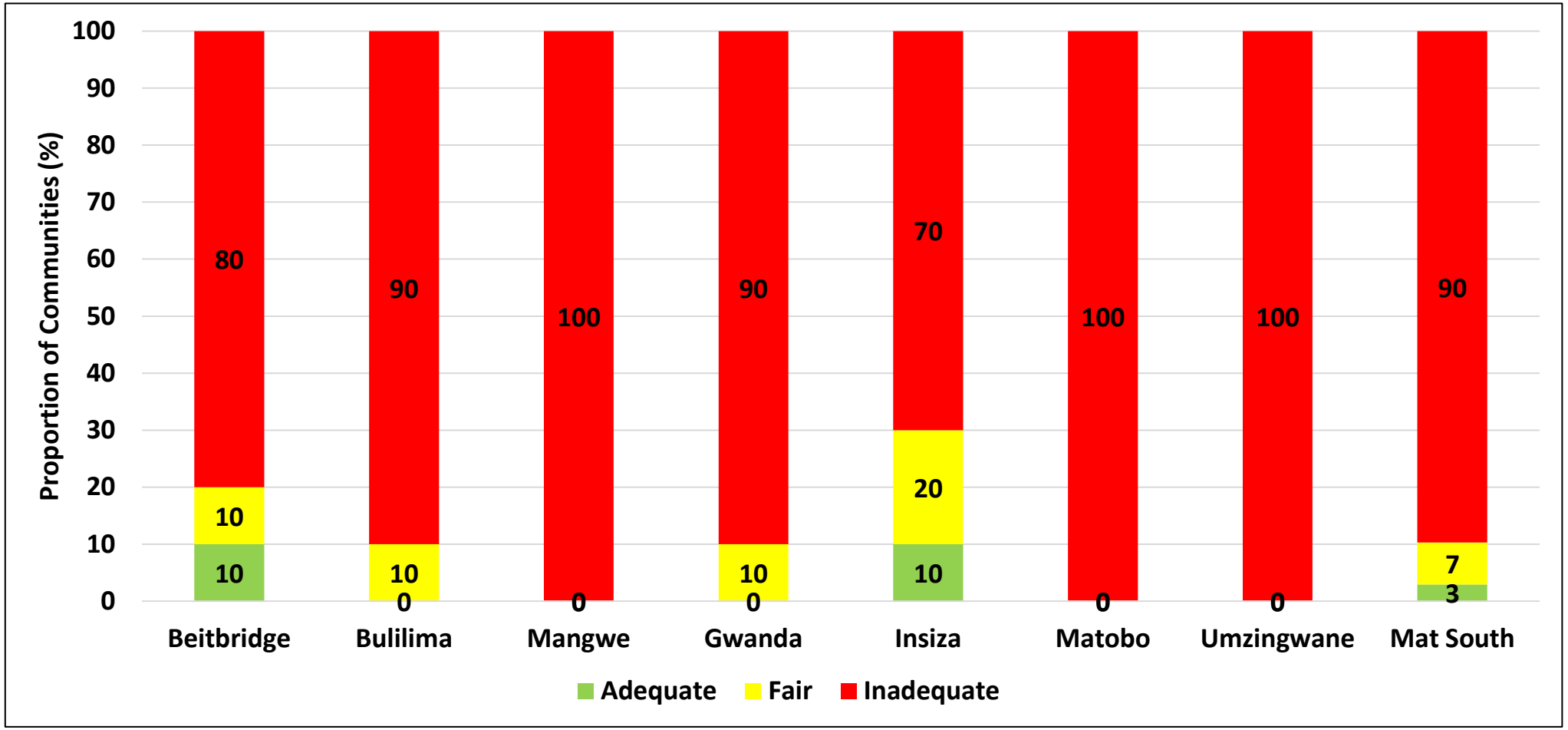
- In Matabeleland South 26% of households reported that the nearest dip tank was less than 5km.

Livestock Condition



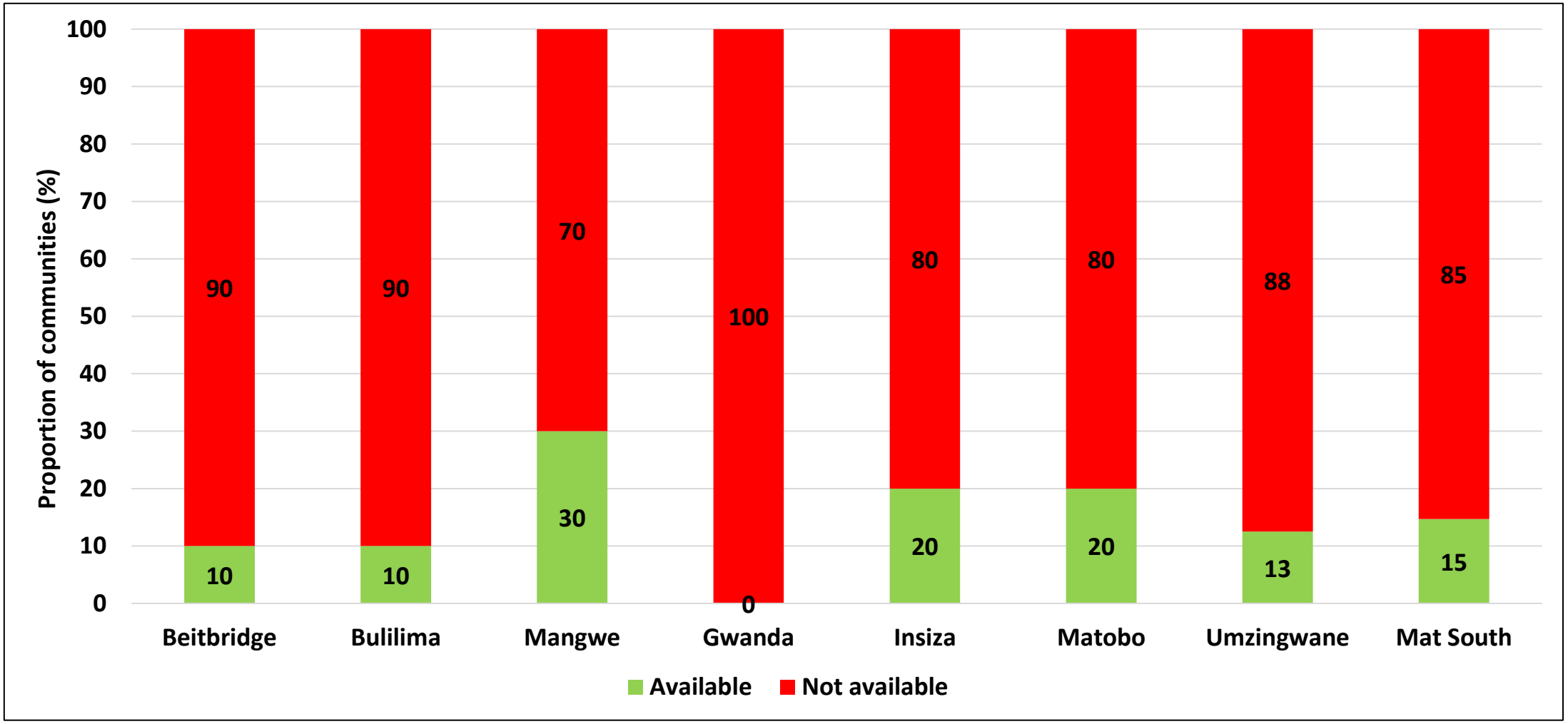
- In Matabeleland South 49% of communities reported that livestock condition was poor while 47% reported that it was fair.

Pastures Availability



- About 90% of communities in Matabeleland South reported that Pastures availability was inadequate.

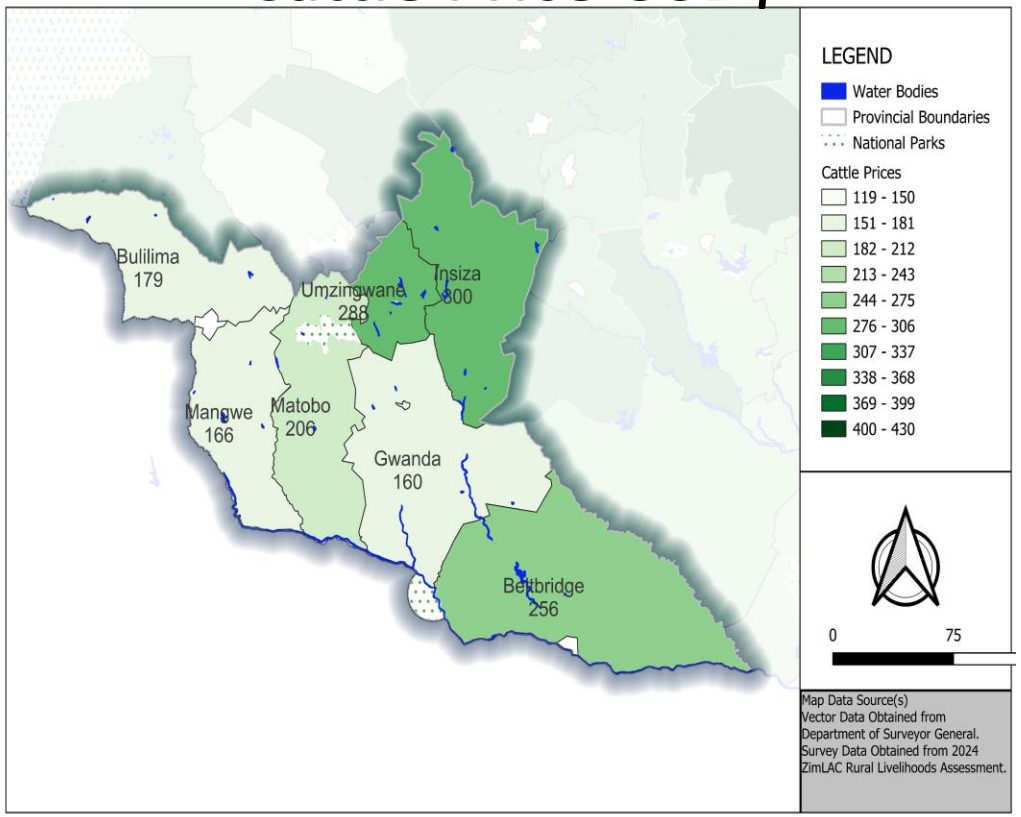
Availability of Water for Livestock



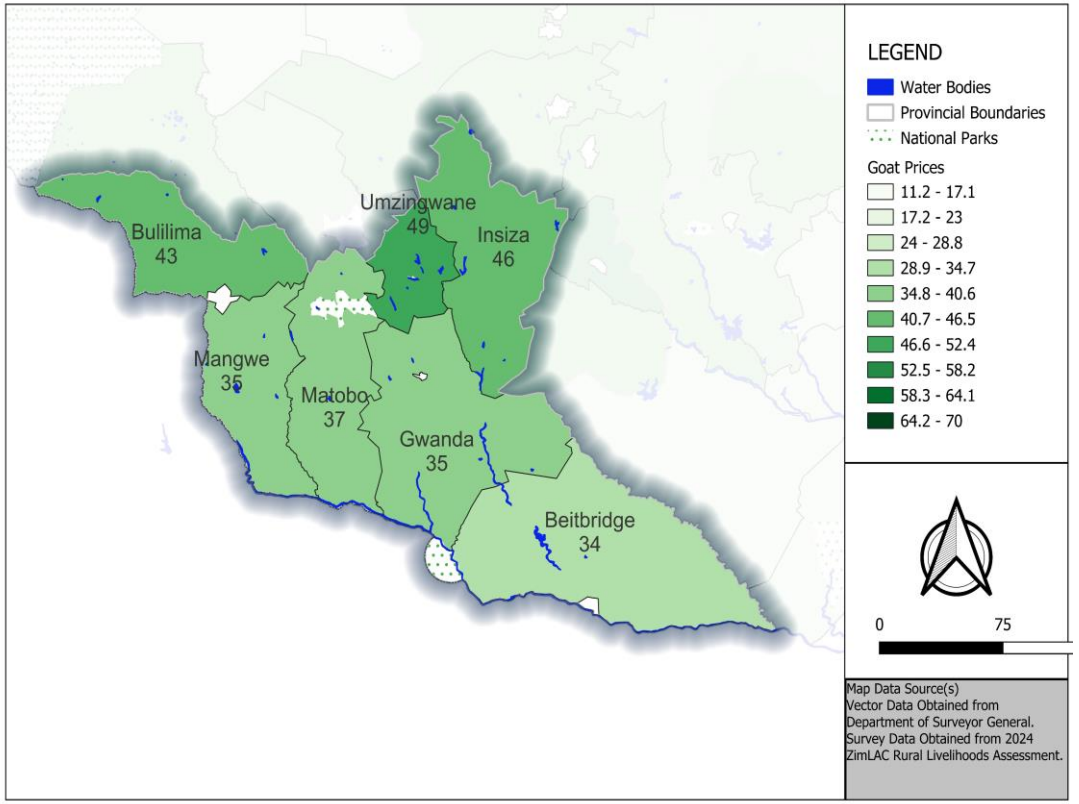
- About 85% of communities in Matabeleland South reported that water for livestock was not available.

Livestock Prices

Cattle Price USD$



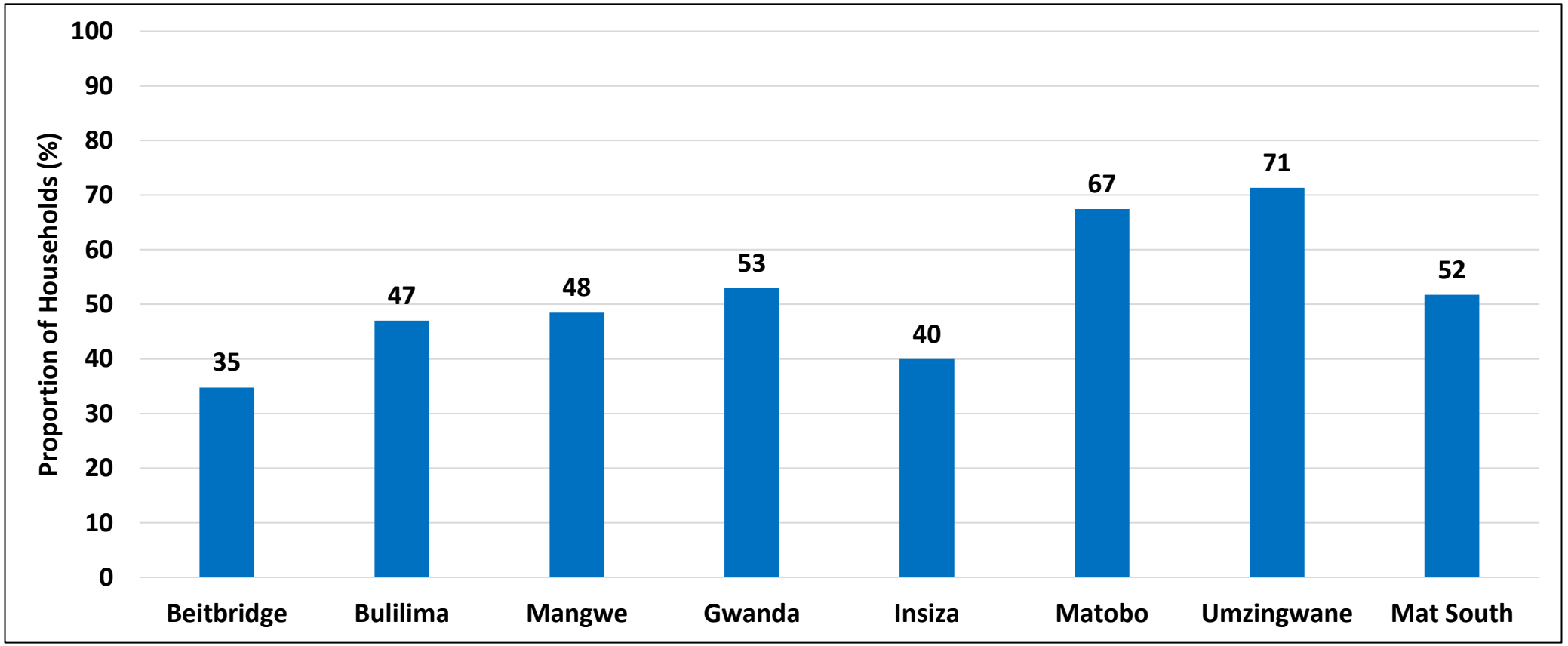
Goat Price USD$



- Cattle prices ranged from US$ 160 to US$ 300. Insiza had the highest price of US$ 300.
- Goats' prices ranged from US$ 35 to US$ 49. Umzingwane had the highest price of US$ 49.

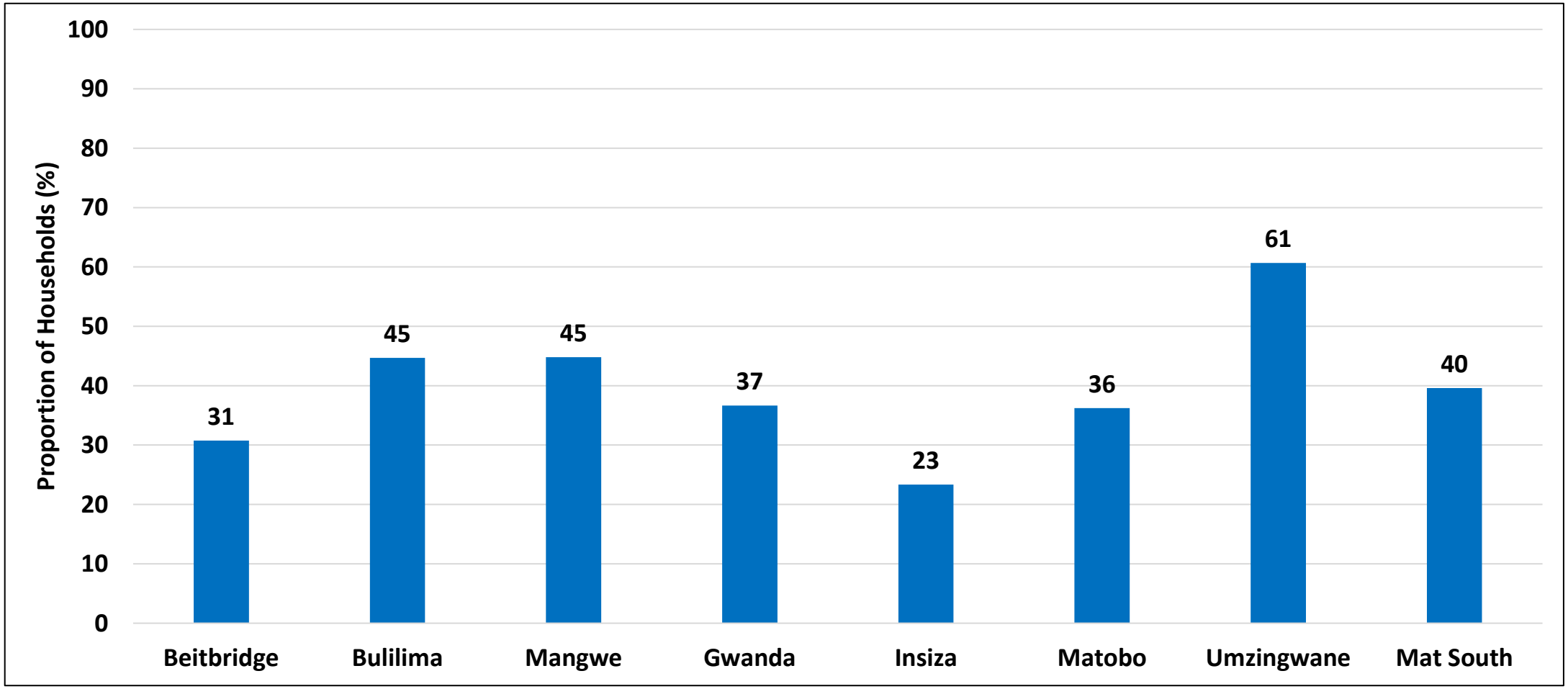
Access to Information Services

Access to Police Services



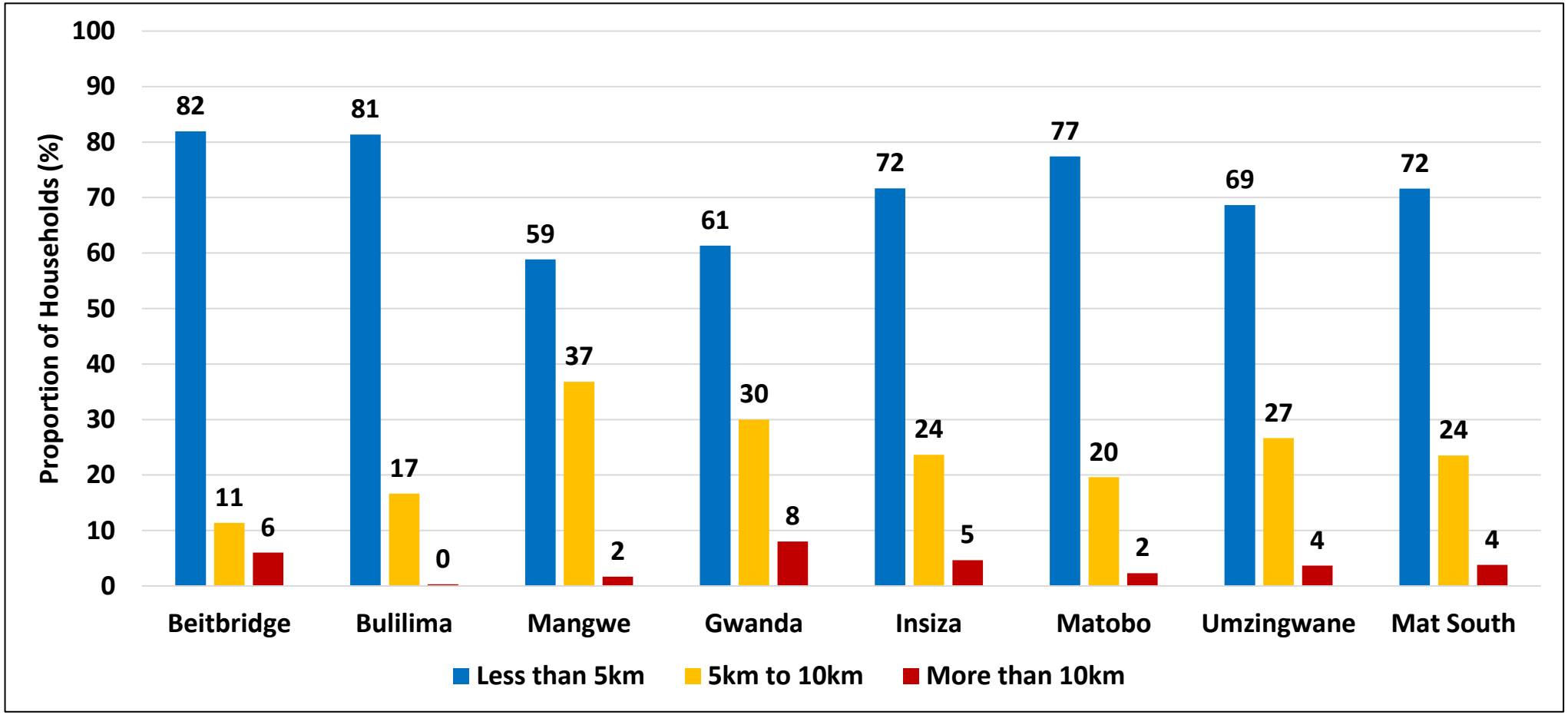
- Approximately 52% of households in Matabeleland South reported that they had police service reachable with in 1 hour.

Access to Victim Friendly Services



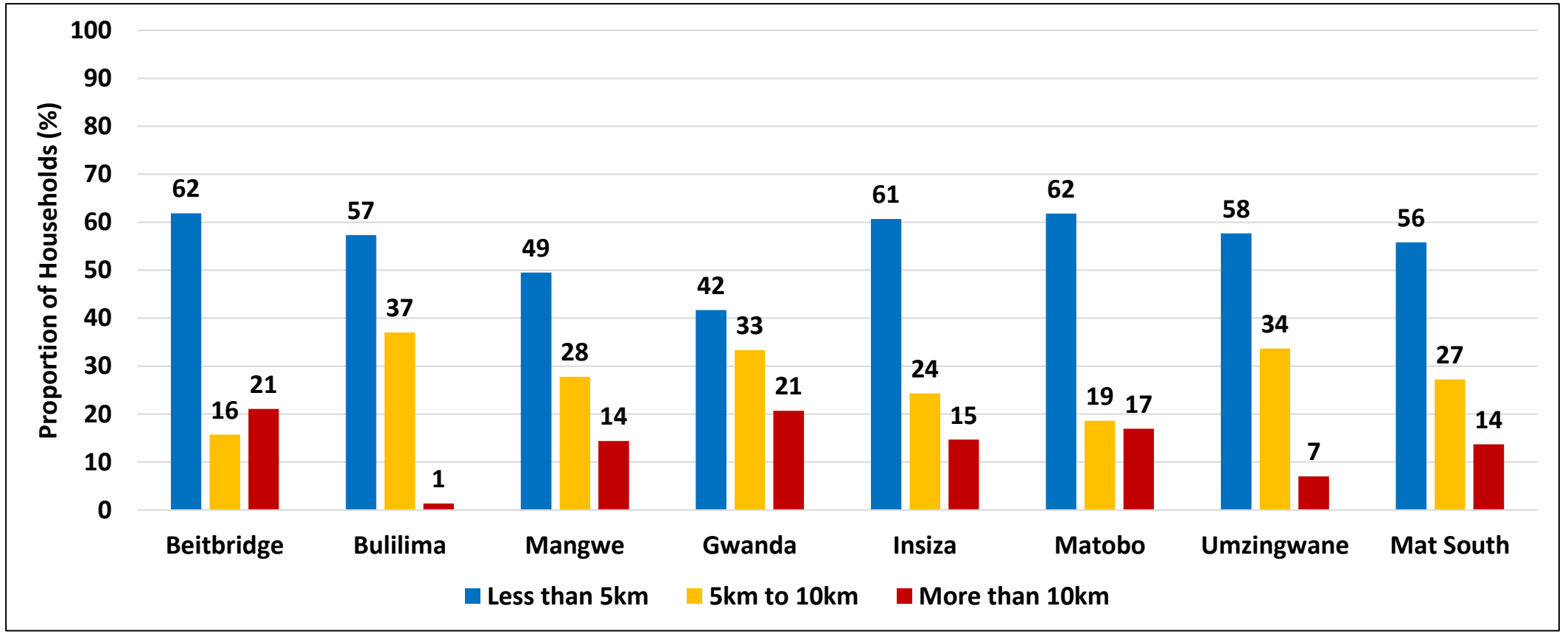
- Approximately 40% of households in the province reported that they had access to Victim friendly services.

Distance to the Nearest Primary School



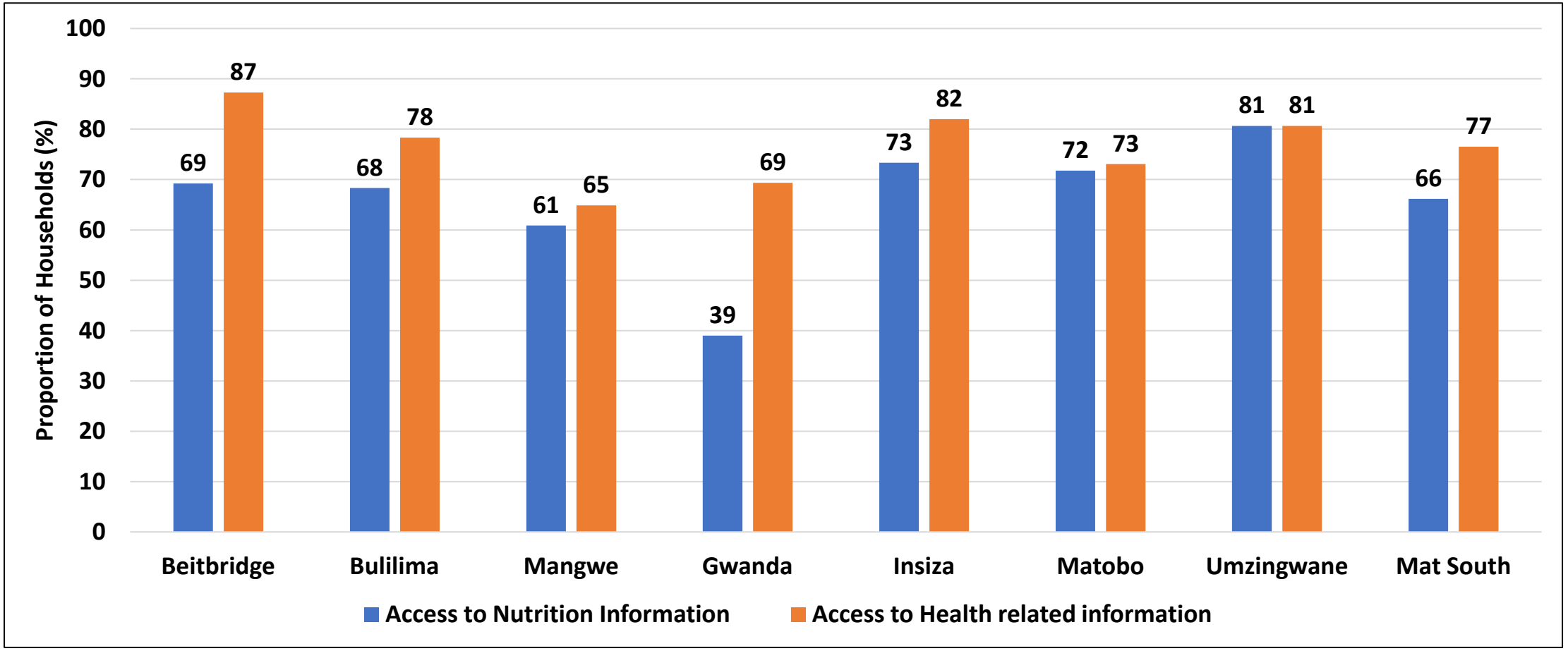
- About 72% of households reported that the approximate distance of the nearest primary school was less than 5km.
- The proportion of households which reported that the approximate distance was more than 10km was 4%.

Approximate Distance to the Nearest Health facility/Clinic



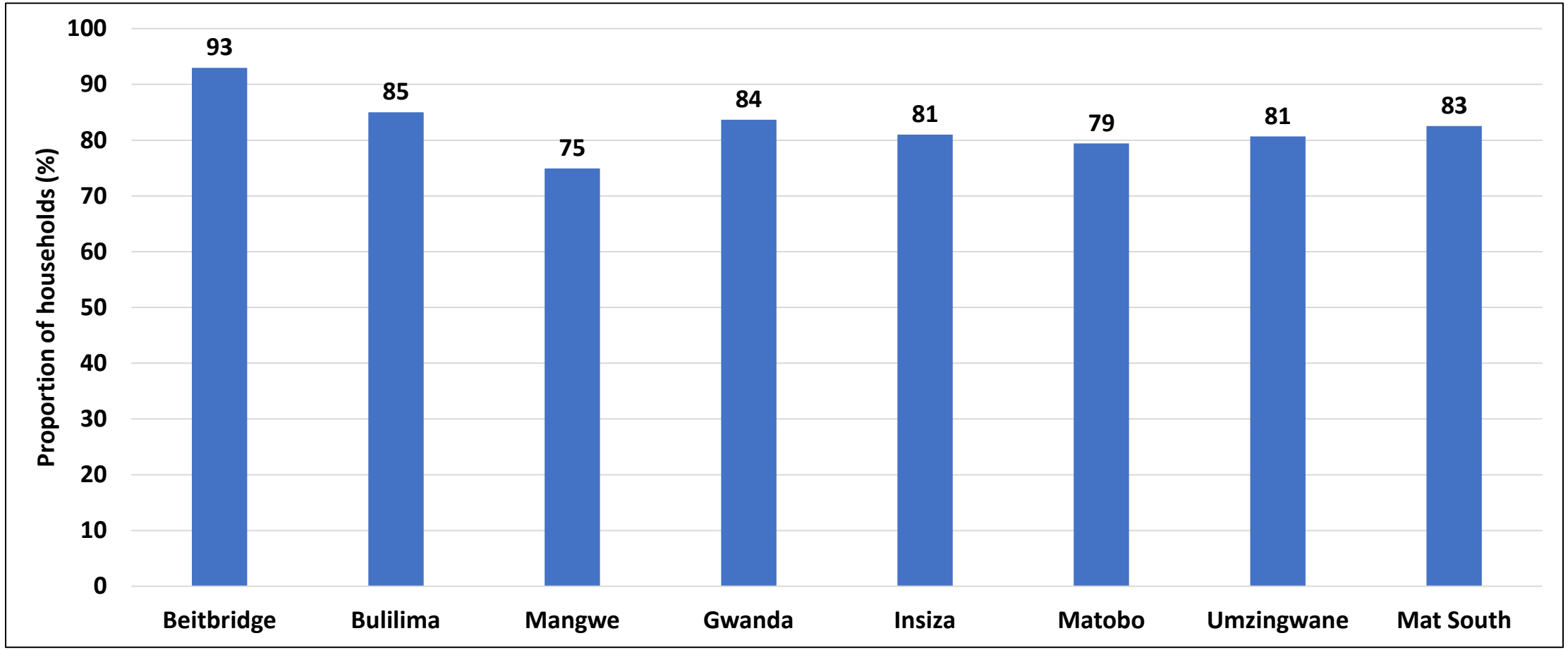
- About 56% of households in the province reported that the approximate distance to the nearest health facility/clinic was less than 5km.
- The proportion of households which reported that the approximate distance was more than 10km was 4%.

Access to Health and Nutrition Information



- About 77% of households reported to have received health related information while 66% received information on nutrition.

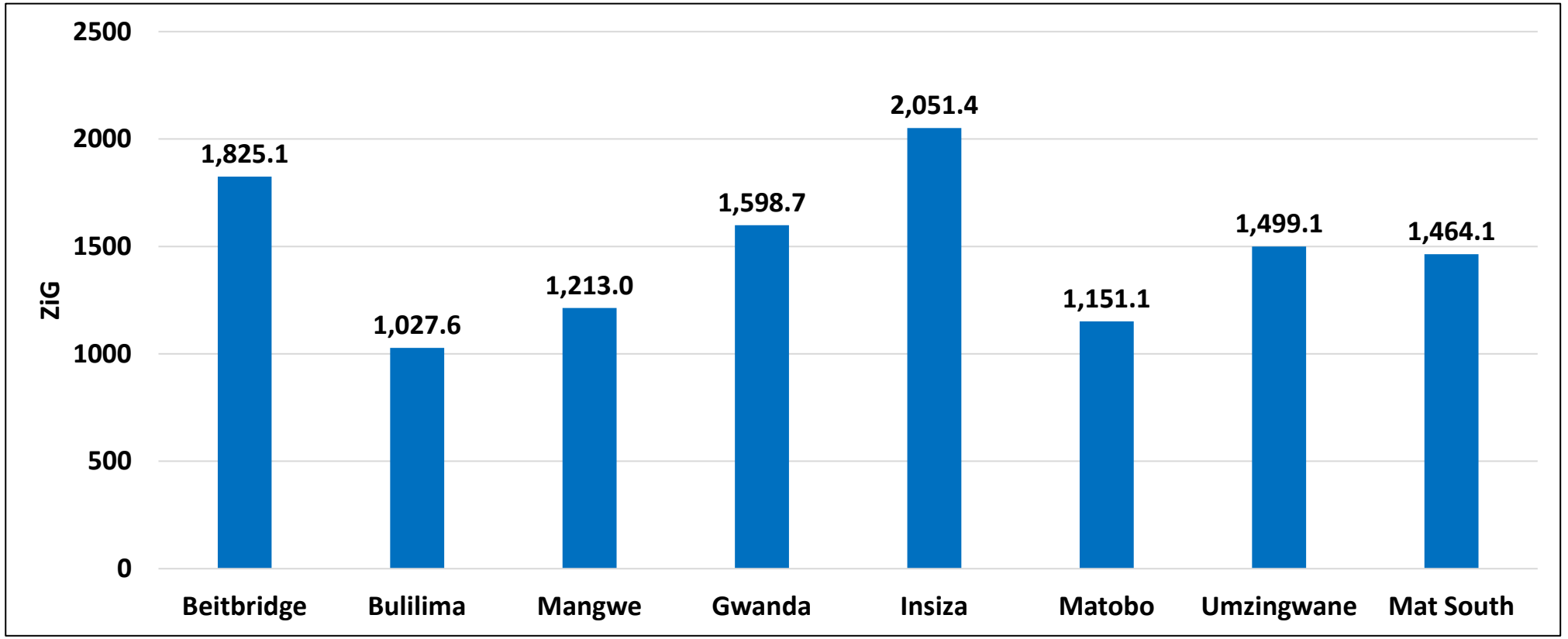
Access to the Services of a Village Health Worker



- The proportion of households who received services of a village worker was 83%.

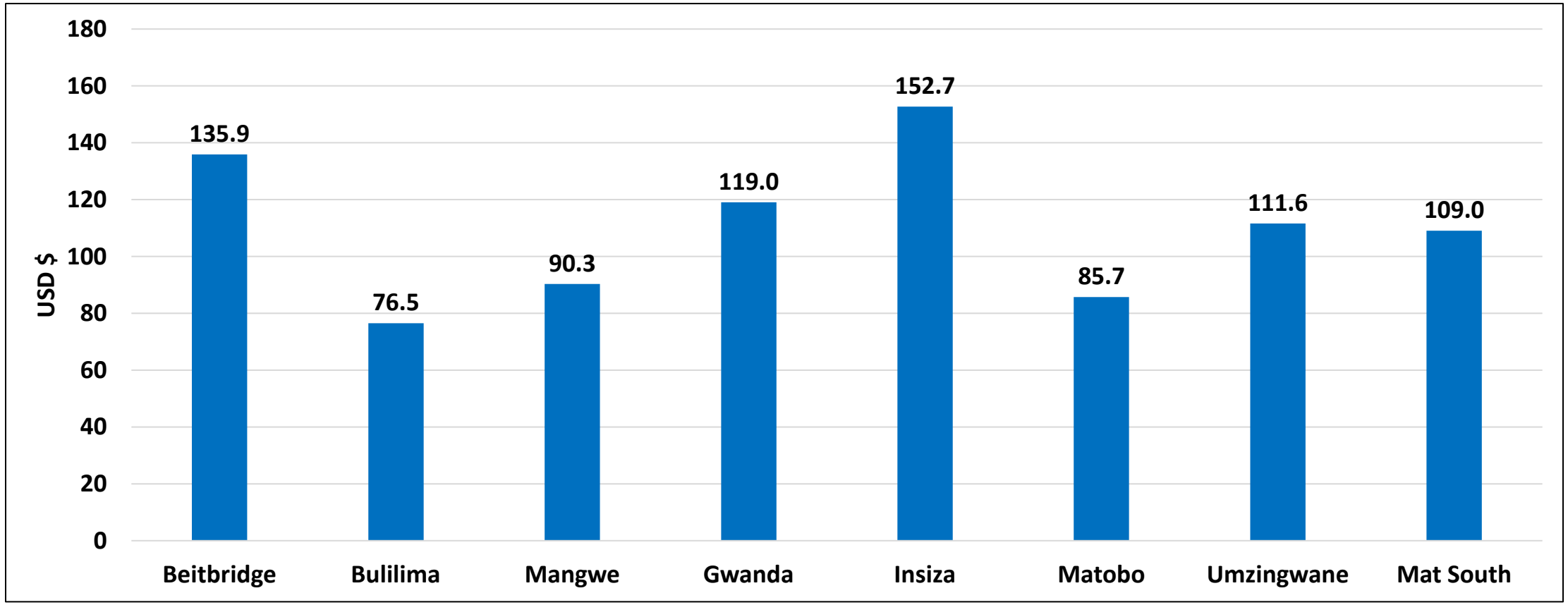
Income and Expenditure

Average Household Monthly Income (ZiG) For April 2024



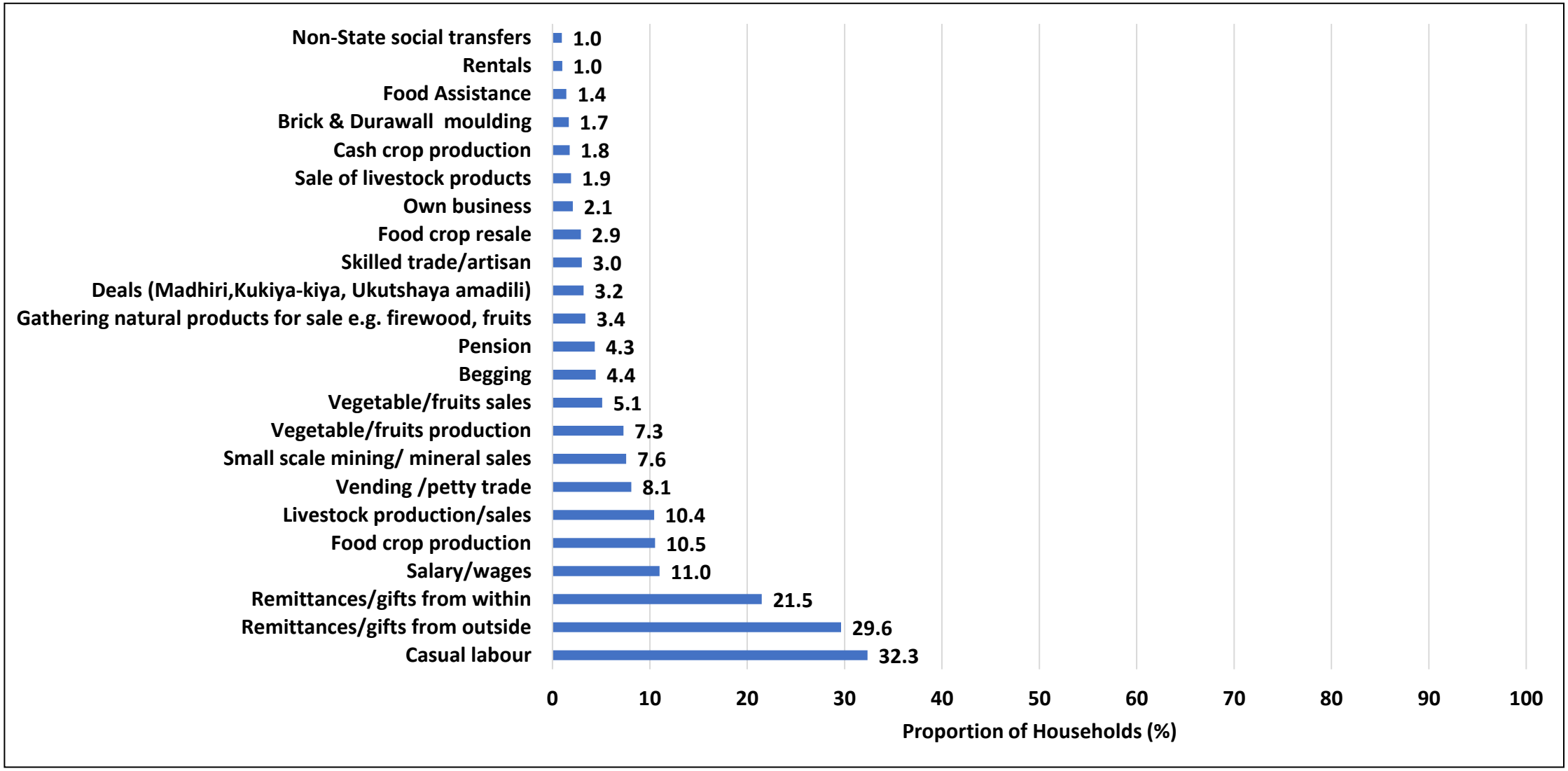
- The average monthly expenditure for Matabeleland South was ZiG 1461.10.
- Insiza (ZiG 2051.40) had the highest monthly expenditure.
- **NB: The USD monthly income and expenditure was calculated using the official exchange rate of Tuesday 30 April 2024.**

Average Household Monthly Income (USD) For April 2024



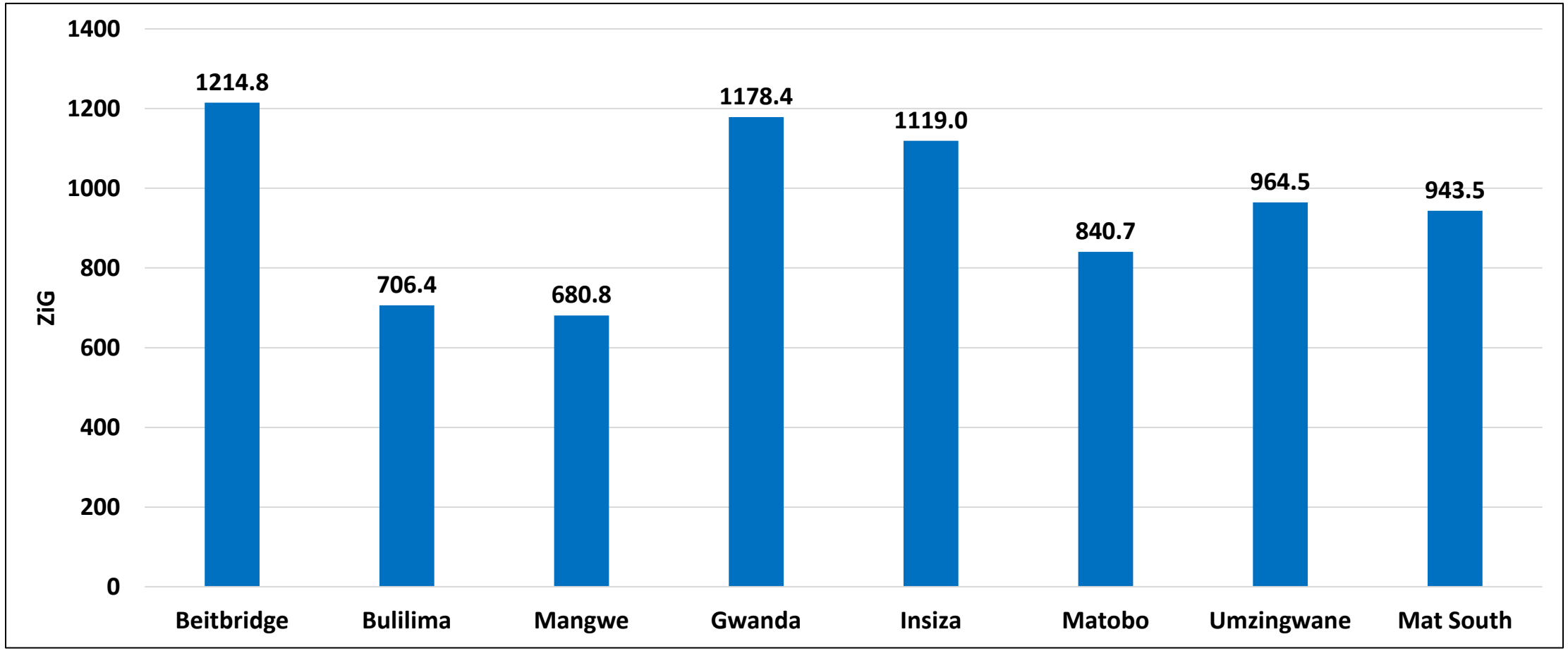
- The average household monthly income was USD $ 109.
- The highest monthly income was reported in Insiza (USD$152.70).

Main Income Sources



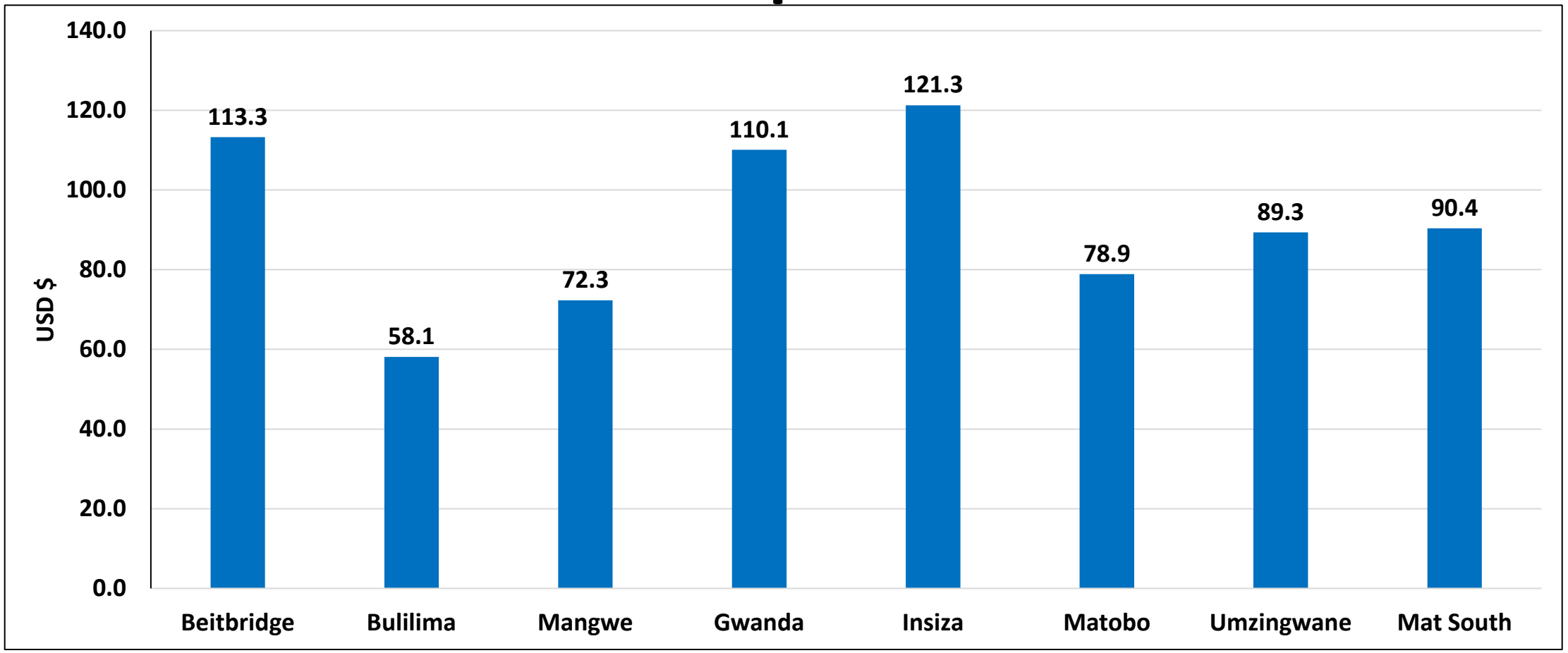
- The main income sources for the province were casual labour (32.3%), remittances and gifts from outside Zimbabwe (29.6%).

Average Household Monthly Expenditure (ZiG) for April 2024



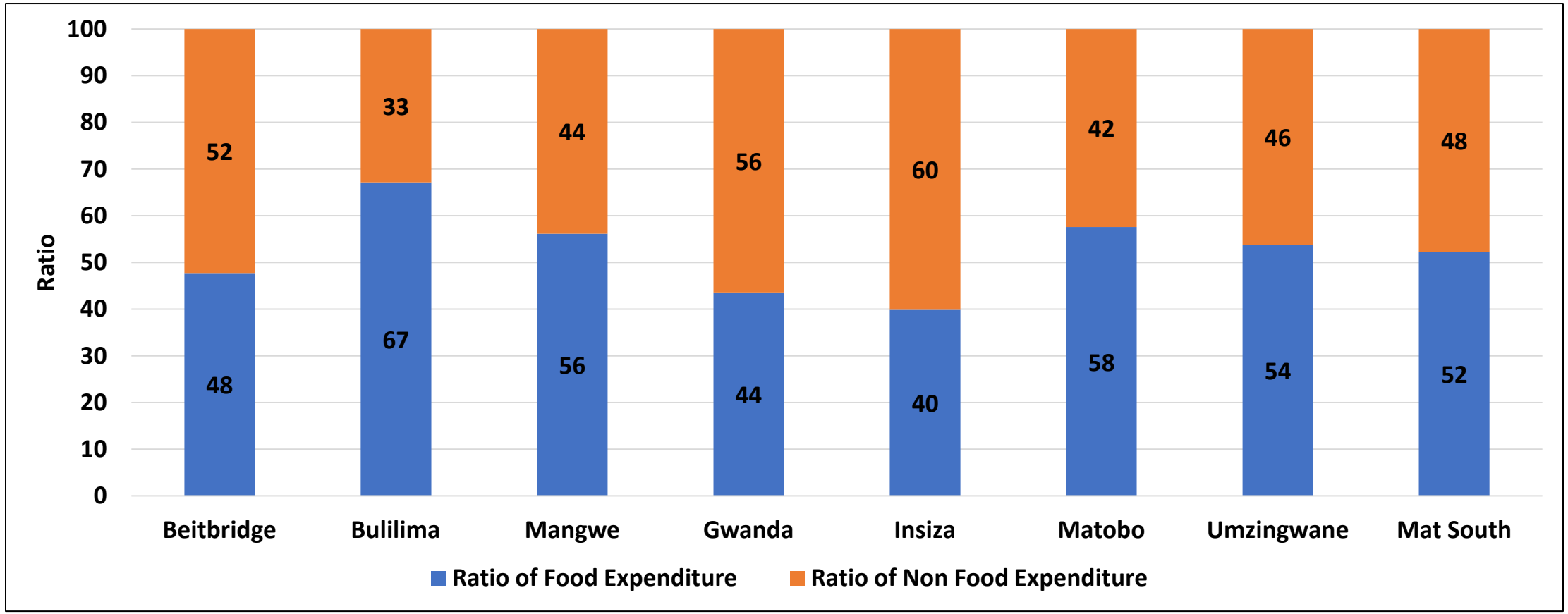
- Beitbridge (ZiG 1214.80) had the highest monthly expenditure.

Average Household Monthly Expenditure (USD) for April 2024



- Average expenditure for the month of April was USD$90.40.
- Bulilima (USD$ 58.10) reported the lowest expenditure.

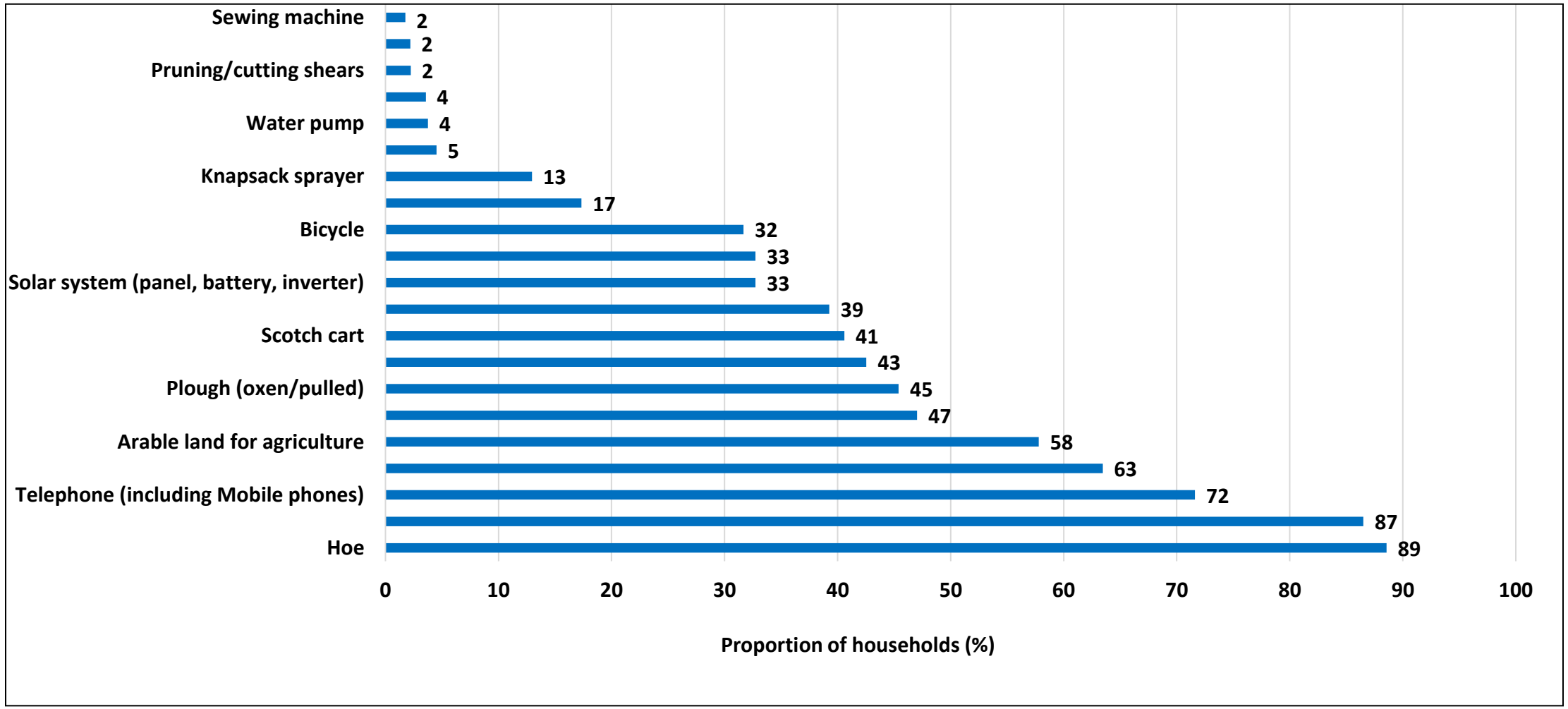
Food and Non-food Expenditure Ratio



- The proportion of food expenditure was 52% and non food expenditure was 48%.

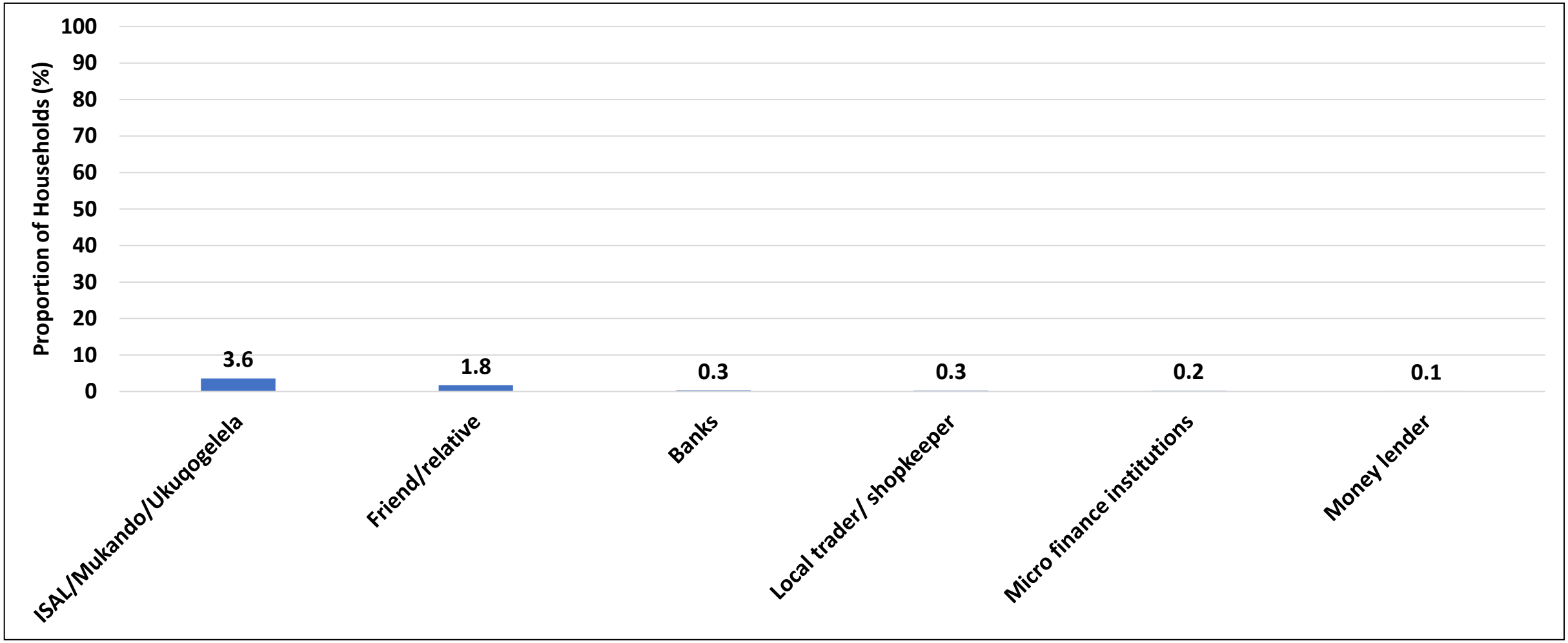
Assets and Loans

Assets



- Most households owned hoes (89%) and mobile phone (87%).

Source of Loans



- ISAL/Mukando/Ukugoqelela (3.6%) was the main source of loans followed by loans from friends or relatives (1.8%).

Child Health

Vitamin A Supplementation for Children 6-59 Months

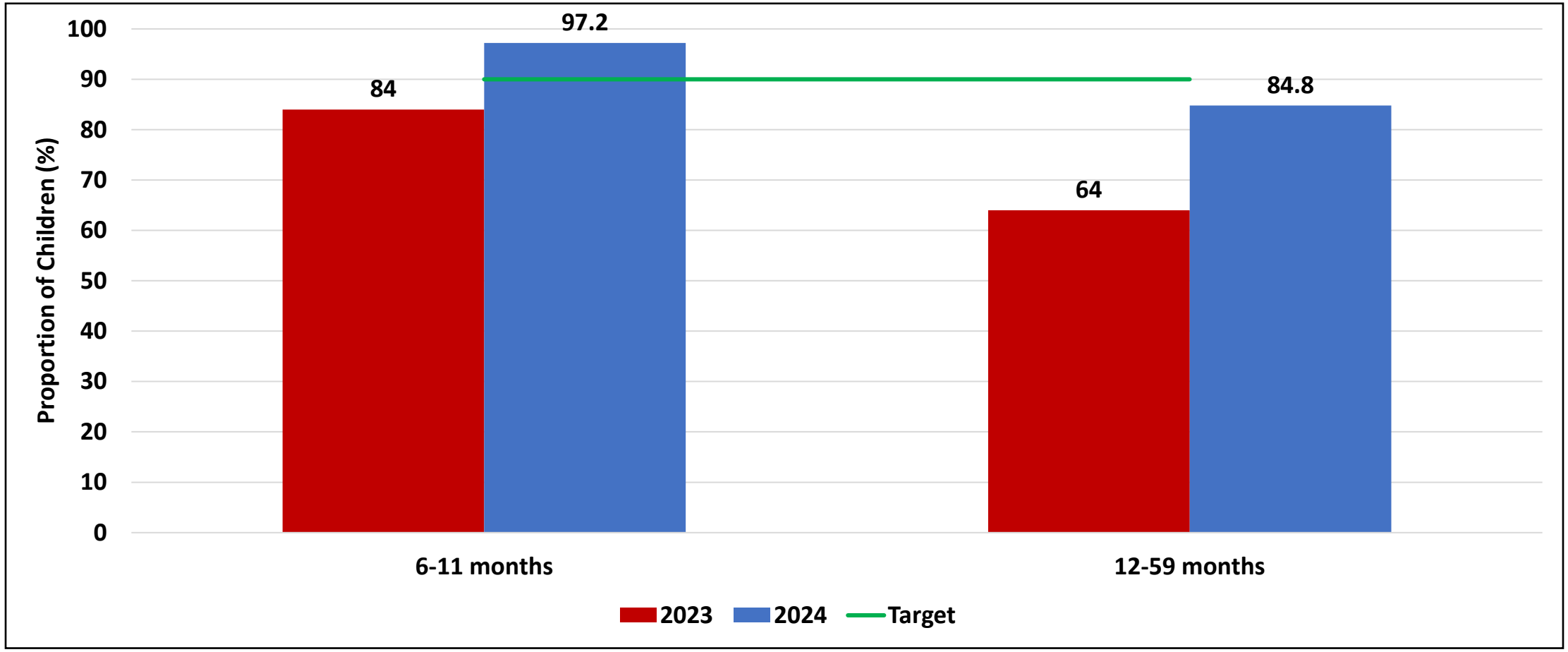
- The World Health Organization recommends Vitamin A Supplementation (VAS) once every six months for children in the age group of 6 59 months.

- VAS is proven to reduce all cause mortality, incidence of diarrhea and measles in children.

The Zimbabwe VAS Schedule

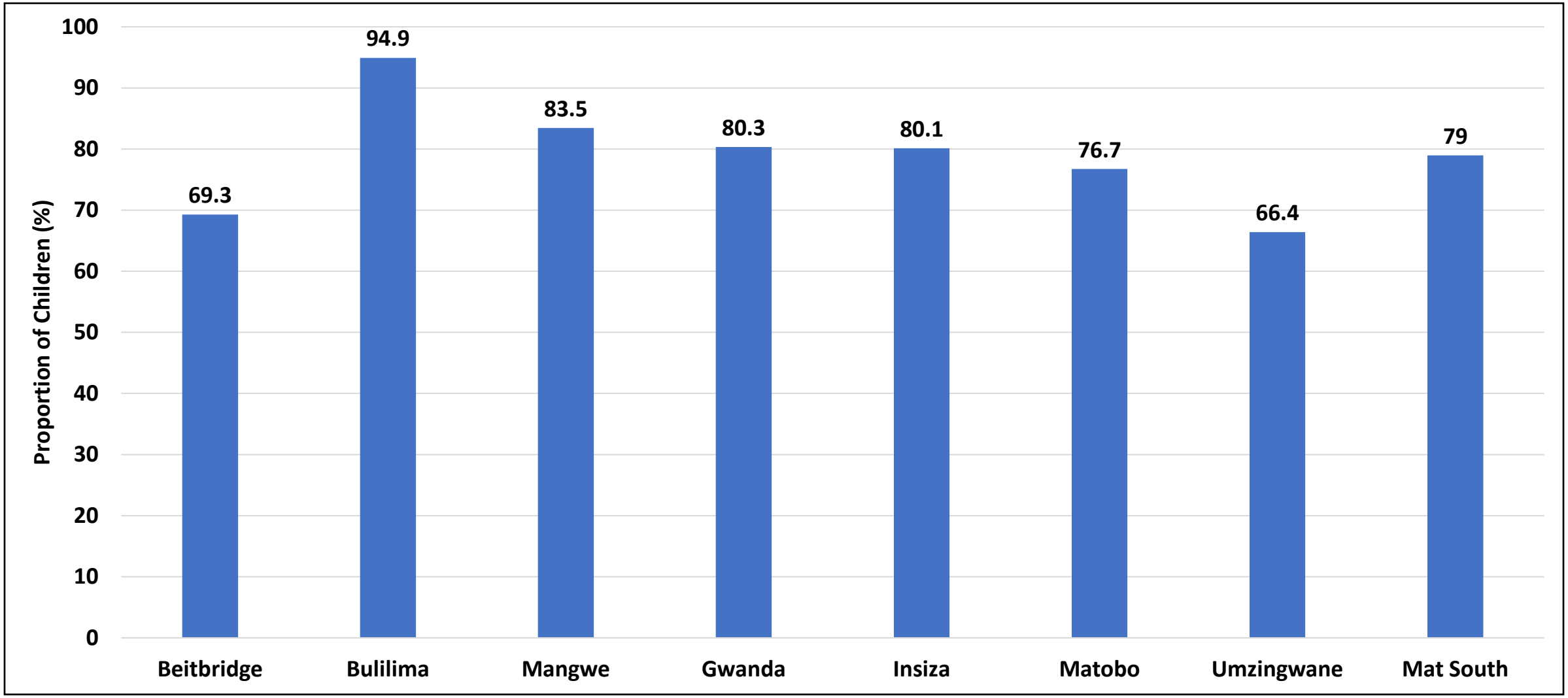
Age Group	Vitamin A Dosage	Timing for Administration
Below 6 months	**Do not give**	**N/A**
6-11 months	**100 000 IU**	**Once at age 6 months**
12-59 months	**200 000 IU**	**Once every 12 months from age 6 months, until child reaches 5 years**

Vitamin A Supplementation for Children 6-59 Months



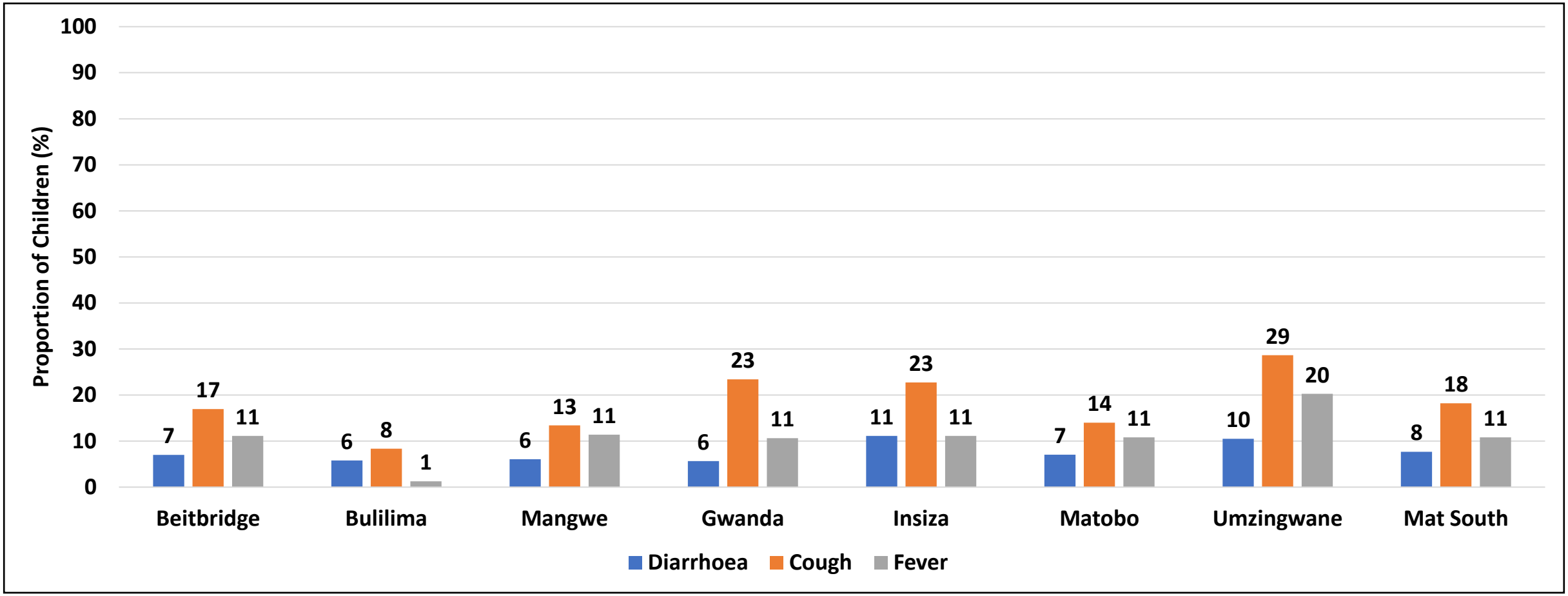
- Nationally, Vitamin A supplementation for children increased for the two age categories.
- However, the 12-59 months category remains a cause for concern since it was below the national target of 90% coverage.

Vitamin A Supplementation by District (12-59 Months)



- Umzingwane (66.4%) and Beitbridge (69.3%) reported the least coverage for vitamin A supplementation for children 12-59 months.

Child Illness (6-59 Months)



- Cough was the most reported illness for children across all the districts, with Umzingwane, Gwanda and Insiza recording the highest.
- Umzingwane also reported the highest proportions for all the child illnesses (diarrhoea, cough and fever).

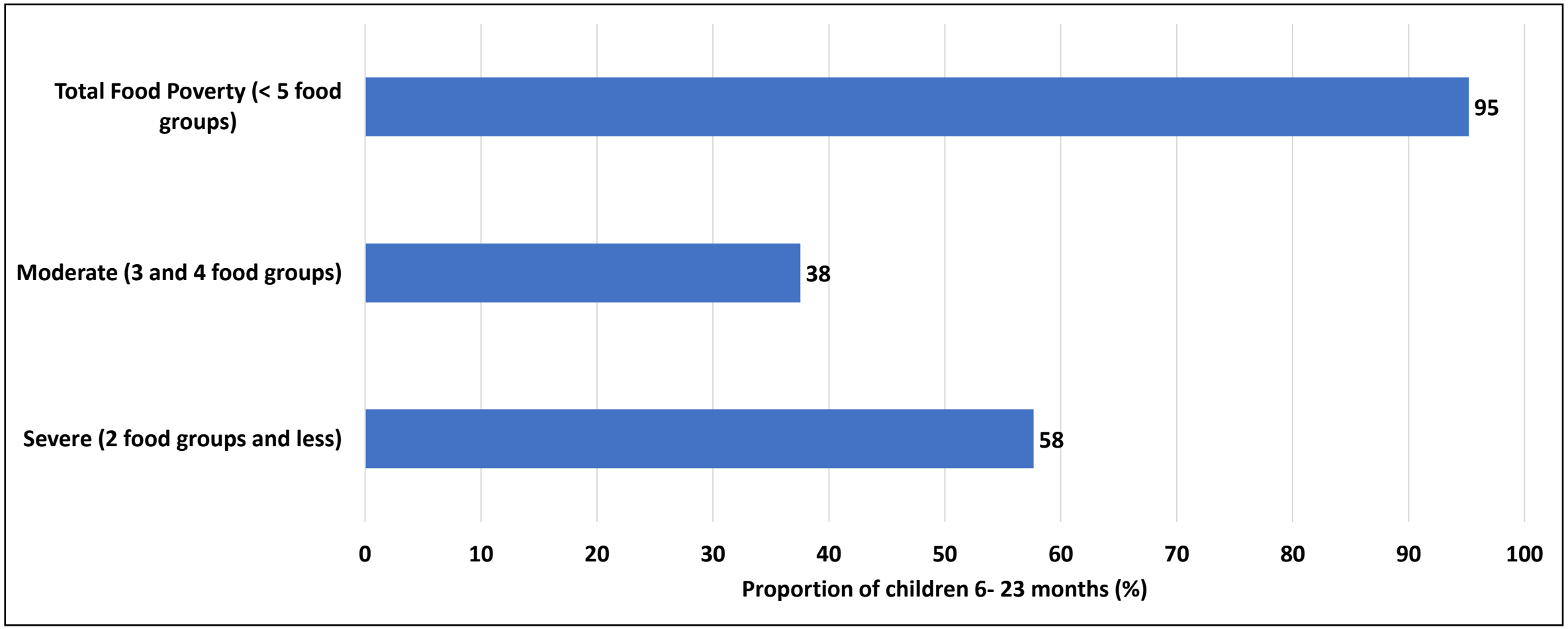
Child Food Poverty

- **Children living in food poverty** is defined as the proportion of children under five years of age consuming foods and beverages from four or fewer of the eight defined food groups.

- **Severe child food poverty** refers to the proportion of children under 5 consuming foods and beverages from zero, one or two out of eight defined food groups during the previous day.

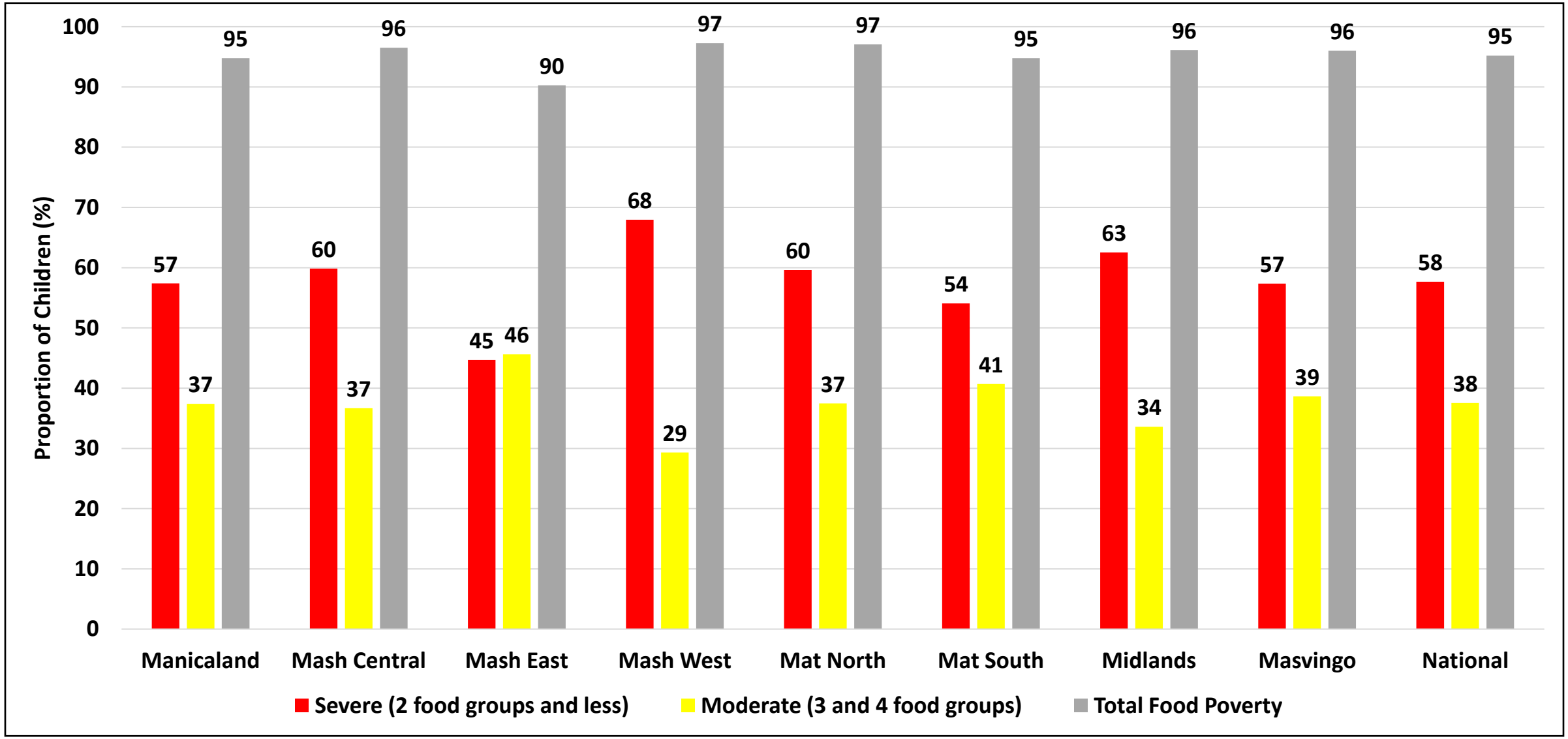
- **Moderate child food poverty** refers to the proportion of children under five 5 consuming foods and beverages from three or four out of eight defined food groups during the previous day.

Child Food Poverty



- Nationally, 95% of children 6 to 23 months consumed a meal which did not meet minimum dietary diversity in the 24 hours preceding the survey.
- Attention needs to be given to the 58% of children who were in severe food poverty.

Child Food Poverty



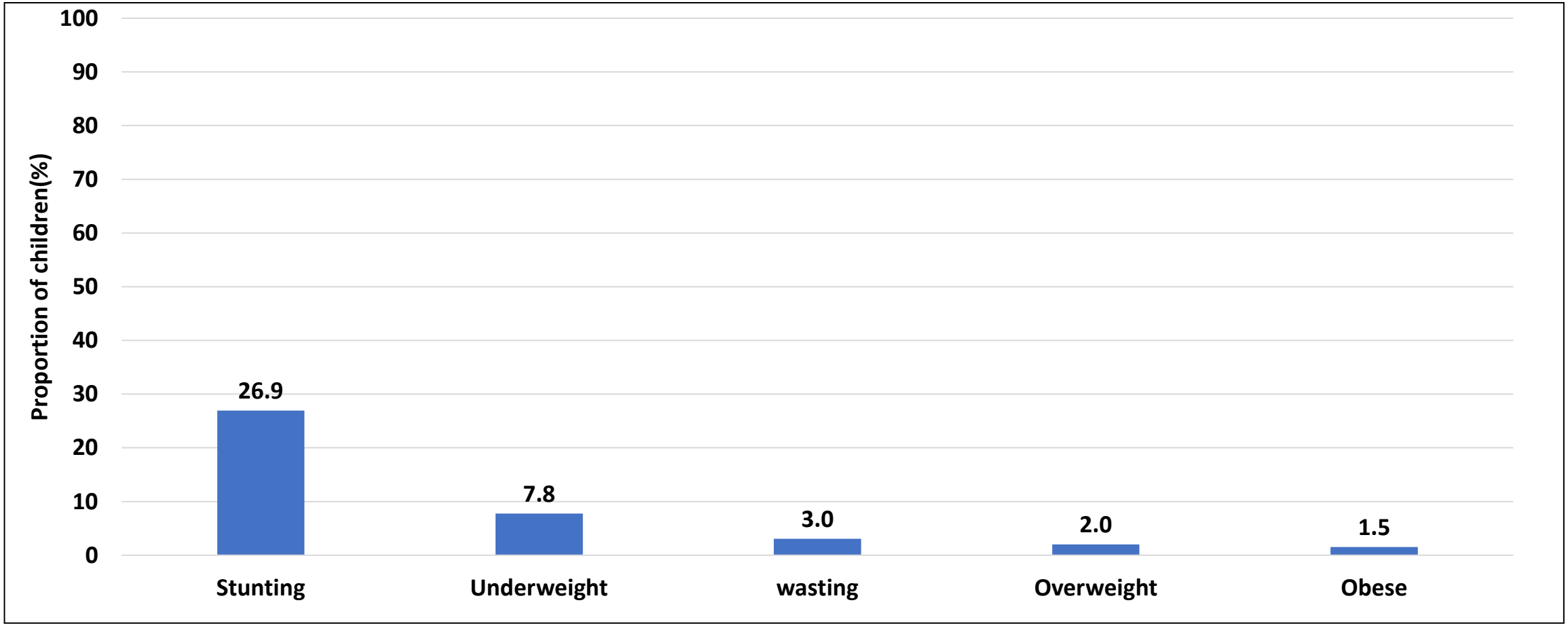
- Matabeleland South reported 54% of children aged 6-23 months experiencing severe food poverty.

Child Nutrition Status

Child Stunting 	The share of children under the age of five who are short for their age (having a low height-for-age), reflecting chronic undernutrition.
Child Wasting 	The share of children under the age of five who are too thin for their height (low-weight-for-height), reflecting acute undernutrition.
Child Underweight 	The share of the children under the age of the five who are too thin for their age (low weight-for-age).
Overweight /Obesity 	The share of children under the age of five who are too heavy for their height (high weight-for-height).

Indicator	Indicator definition (WHO standards, 2006)	Provincial prevalence (%)	Prevalence cut-off values for public health significance
Stunting	Height/Length for age <–2 SD of the WHO Child Growth Standards median	26.9	<2.5%: Very Low 2.5-<10%: Low 10-<20%: Medium 20-<30%: High ≥30%: Very High (DeOniset al., 2019)
Global Acute Malnutrition	Weight for height <-2SD of the WHO Child Growth Standards median and/oedema	3.0	<5% Acceptable 5–9.9%: Poor 10–14.9%: Serious >15%: Critical
Severe Acute Malnutrition	Weight for height <–3 SD of the WHO Child Growth Standards median	0.7	0% = acceptable >0%: Unacceptable
Underweight	Weight for age <-2SD of the WHO Child Growth Standards median and/oedema	7.8	
Overweight	Weight for height >+2 SD of the WHO Child Growth Standards median	2	<2.5%: very low 2.5 to <5%: low 5 to <10%: medium 10 to <15%: high ≥15%: very high
obesity	Weight for height >+3 SD of the WHO Child Growth Standards median	1.5	

Nutrition Status of Children 6- 59 months



- Stunting levels in the province were at 26.9%, underweight 8%, wasting 3% and overweight 2% and obese at 1.5%.

Child Nutrition

Infant and Young Child Feeding

- Infant and young child feeding (IYCF) practices directly affect the health, development and nutritional status of children less than two years of age and ultimately, impact child survival. Improving IYCF practices in children 0–23 months of age is therefore critical to improved nutrition, health and development.
- The World Health Organization (WHO) recommends breastfeeding practices that consist of early initiation of breastfeeding within one hour of birth, exclusive breastfeeding for six months, and continued breastfeeding with complementary feeding for at least two years.
- Exclusive breastfeeding is a low cost, life-saving child survival intervention
- WHO recommends that children aged 6–23 months be fed a variety of foods to ensure that nutrient needs are met. Food group diversity is associated with improved linear growth in young children. A diet lacking in diversity can increase the risk of micronutrient deficiencies, which may have a damaging effect on children's physical and cognitive development.
- Poor-quality diets are one of the greatest obstacles to children's survival, growth, development and learning. During the first two years of life, diets lacking in essential vitamins and minerals can irreversibly harm a child's rapidly growing body and brain and increase the risk of stunting, wasting and micronutrient deficiencies. Meanwhile, foods high in sugar, fat or salt can set children on the path to unhealthy food preferences, overweight and diet-related diseases.

Notes

EGG AND/OR FLESH FOOD CONSUMPTION 6–23 MONTHS (EFF)

- WHO guiding principles for feeding breastfed and non-breastfed children state that “meat, poultry, fish or eggs should be eaten daily, or as often as possible”
- There is evidence that children who consume eggs and flesh foods have higher intakes of various nutrients important for optimal linear growth. Consuming eggs is associated with increased intakes of energy, protein, essential fatty acids, vitamin B12, vitamin D, phosphorus and selenium, and with higher recumbent length
- Introduction of meat as an early complementary food for breastfed infants was associated with improved protein and zinc intake. There is also evidence of low prevalence of egg and flesh food intake across many countries.
- Indicator definition: percentage of children 6–23 months of age who consumed egg and/or flesh food during the previous day.

ZERO VEGETABLE OR FRUIT CONSUMPTION 6–23 MONTHS (ZVF)

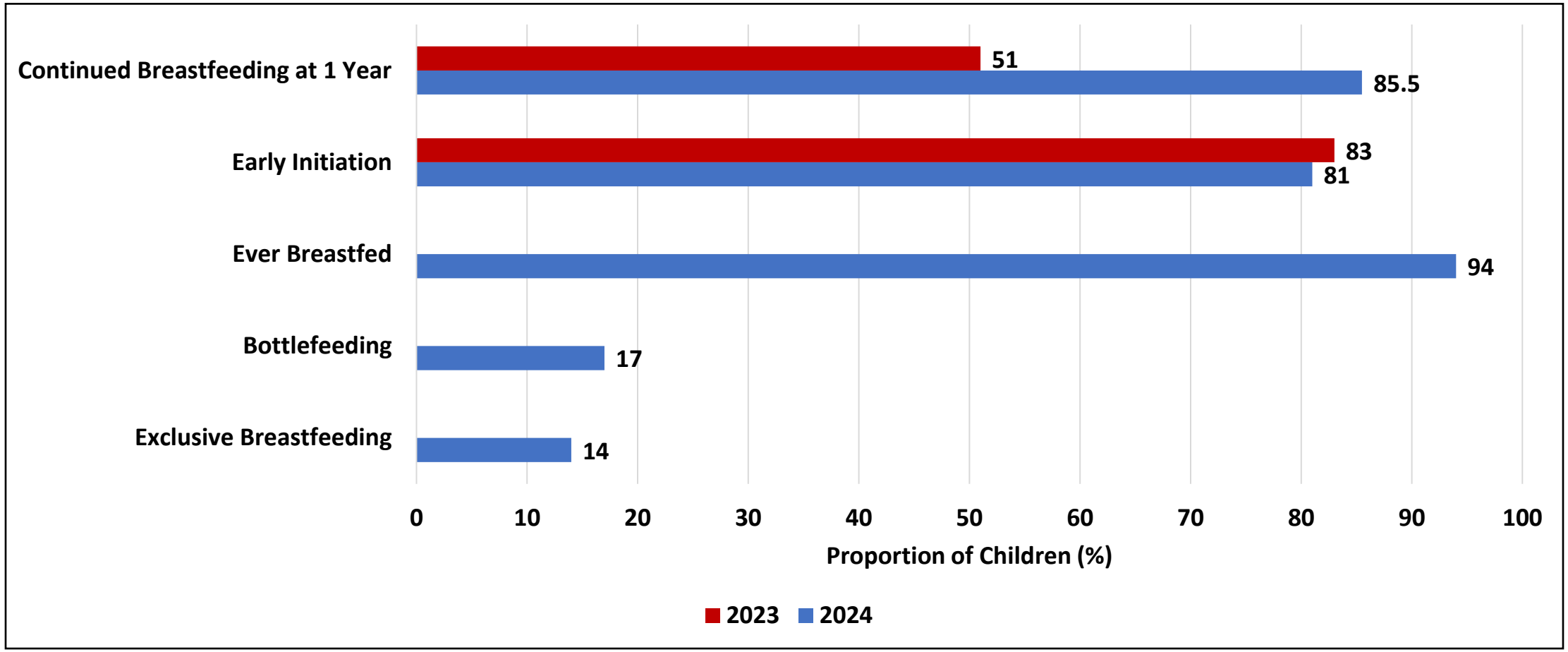
- WHO indicates that low vegetable and fruit consumption is associated with increased risk of noncommunicable diseases (NCDs).
- Non-consumption of vegetables or fruits on the previous day represents an unhealthy practice.
- Indicator definition: percentage of children 6–23 months of age who did not consume any vegetables or fruits during the previous day.

Notes

UNHEALTHY FOOD CONSUMPTION 6–23 MONTHS (UFC)

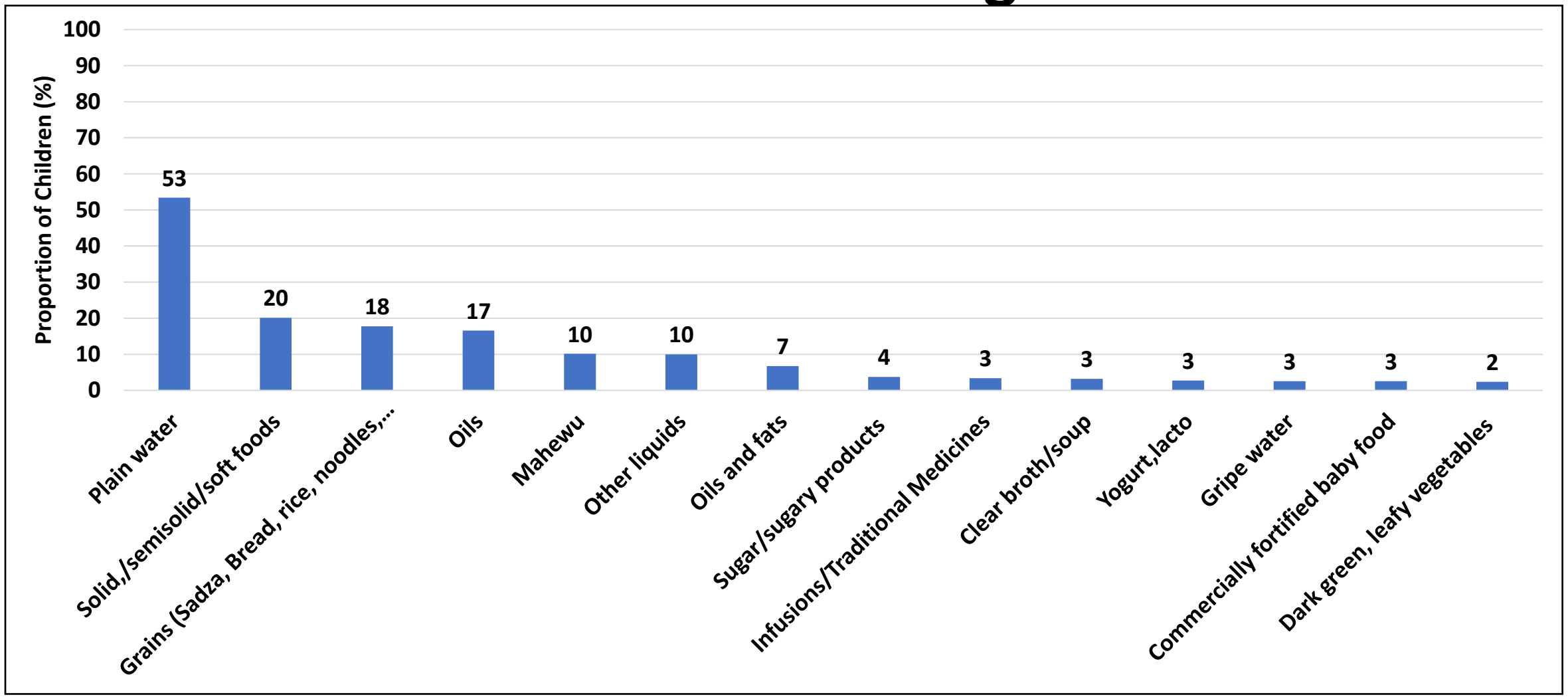
- In many low- and middle-income countries, diet patterns are shifting towards higher intakes of added sugars, unhealthy fats, salt and refined carbohydrates.
- A variety of guidance documents indicate the need to avoid or limit these types of foods when feeding IYC.
- Recent national guidance for feeding IYC advises avoidance of foods such as candies, chocolate, chips, French fries, cakes and cookies: Consumption of such foods may displace more nutritious foods and limit the intake of essential vitamins and minerals.
- Recently, unhealthy snack food and beverage consumption has been associated with a higher risk of nutrient inadequacy, and lower length-for-age among one-year-olds *(43)*.
- Food preferences that begin early in life track into later childhood and adolescence. Such practices, if continued throughout adolescence and adulthood, can increase the risk of becoming overweight or obese, and of related chronic diseases later in life.
- Indicator definition: percentage of children 6–23 months of age who consumed selected sentinel unhealthy foods during the previous day.
- *"sentinel unhealthy foods" are foods or categories of foods (e.g. "sweets"* or *"candies") that are likely to be consumed by IYC and are high in sugar, salt and/or unhealthy fats.*

Breastfeeding Practices



- Exclusive breastfeeding is a low cost, life-saving child survival intervention. The exclusive breastfeeding rate was reported to be 14%. No values were reported for 2023.
- The proportion of children who continued to be breastfed beyond one year increased from 51% to 85.5%.
- At least 94% of the children were ever breastfed.

Foods Given to Children Less than 6 Months in Addition to Breastfeeding



- Nationally, plain water (53%), soft foods (20%), grains (18%) and oils (17%) were the most common foods given to children less than 6 months.

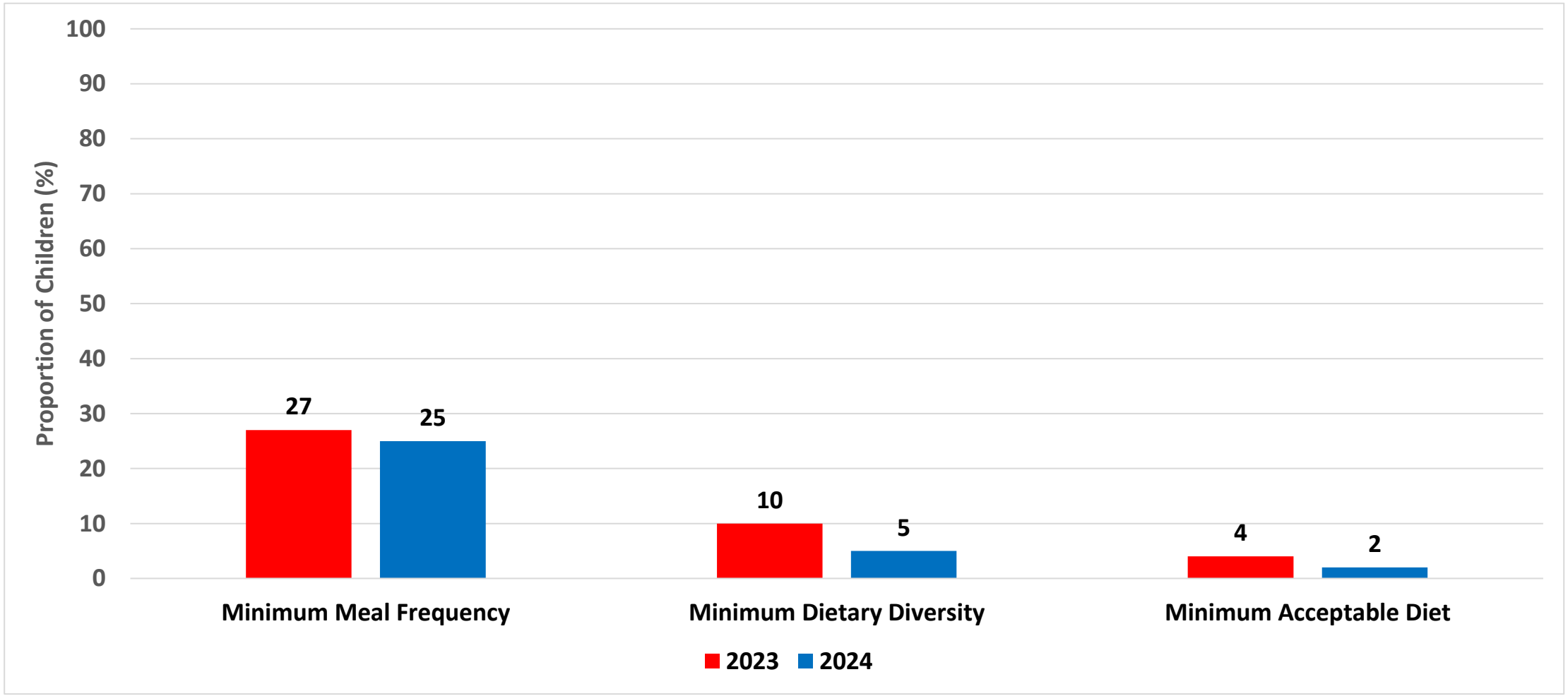
Complementary Feeding

- Minimum Dietary Diversity (MDD) is a proxy indicator for adequate micronutrient density. Both breastfed and non-breastfed infants are expected to consume at least five of the seven food groups that are recommended by the World Health Organisation.

- Minimum Meal Frequency (MMF) is a proxy for a child's energy requirements and is the proportion of breastfed and non-breastfed children 6 to 23 months of age who receive solid, semi-solid, or soft-foods or milk feeds the minimum number of times or more.

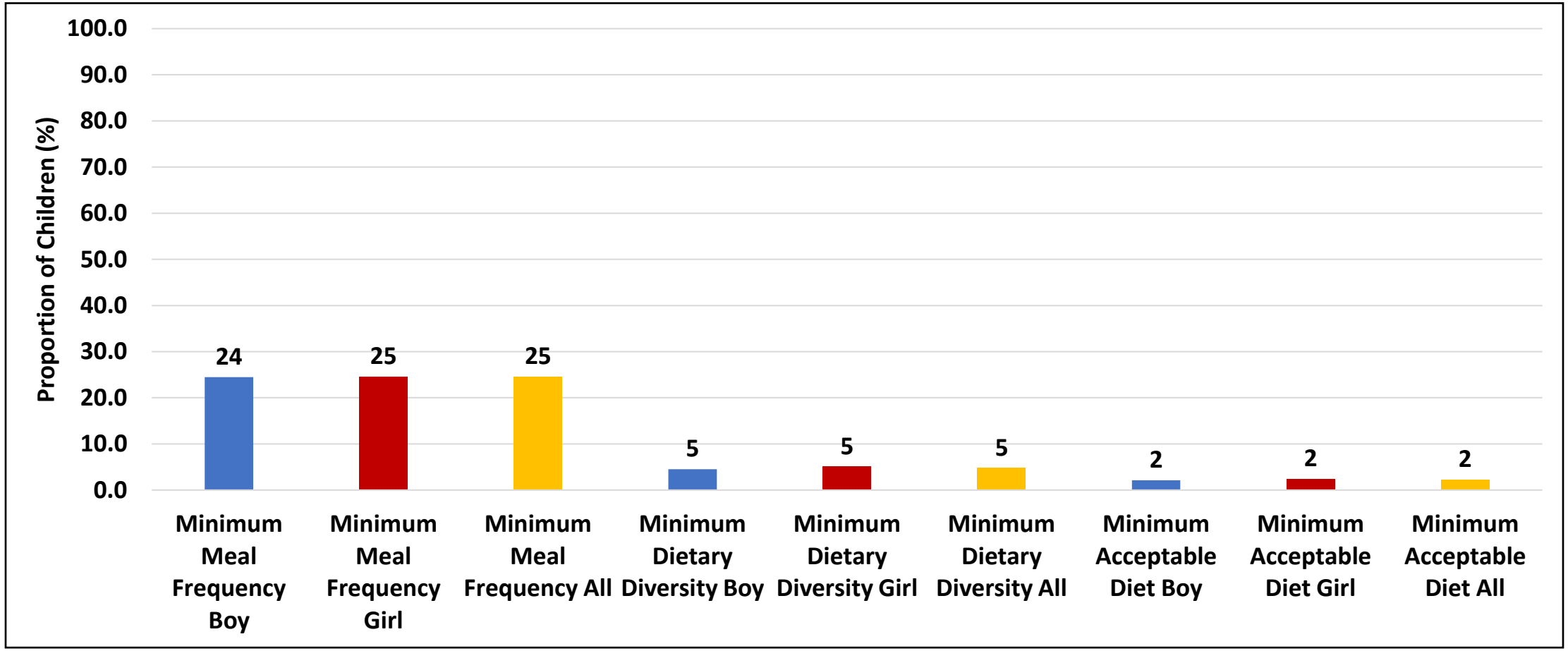
- Minimum Acceptable Diet (MAD) is a composite indicator of minimum meal frequency and dietary diversity. It represents minimum standards of IYCF practices.

Infant and Young Child Feeding Diet Quality



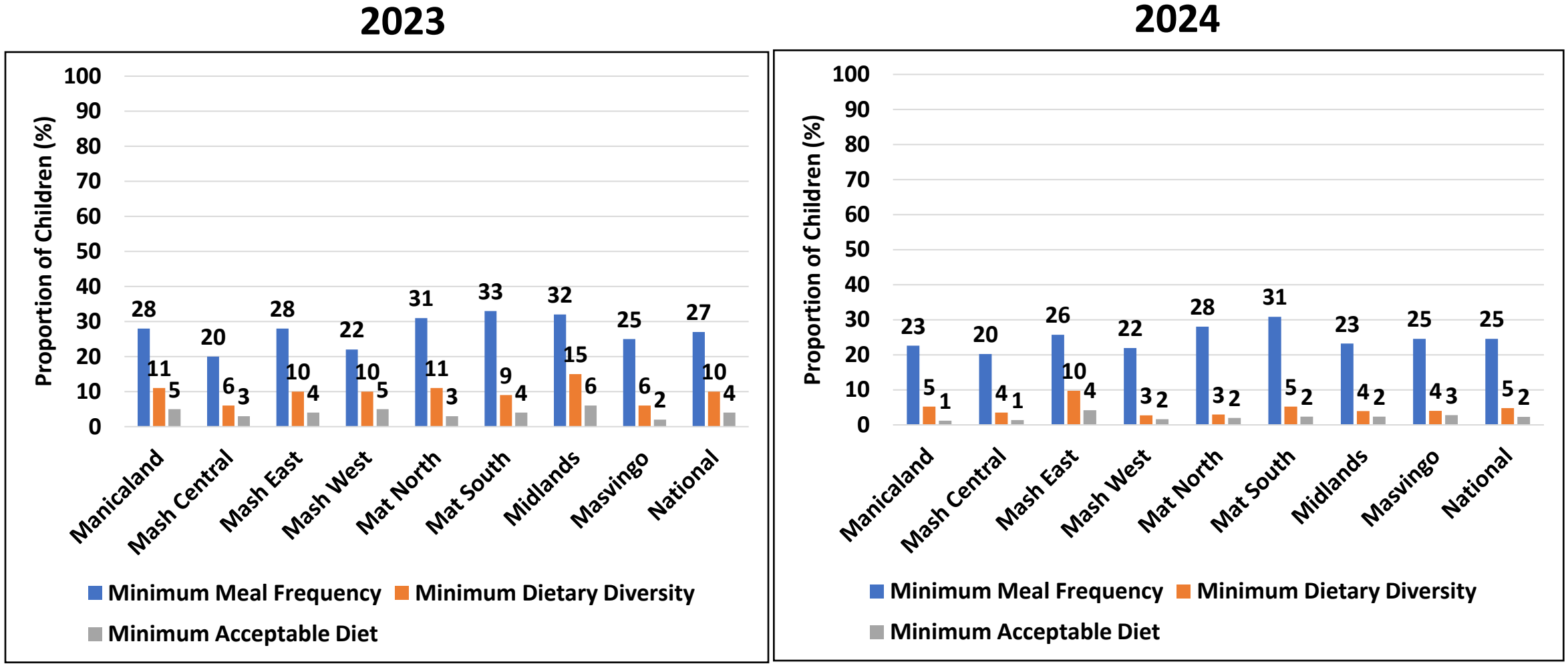
- Nationally, only 2% of children achieved a minimum acceptable diet, a decrease from 4% in 2023. This remains below the national target of 25%.
- Dietary diversity was also low with only 5% of children consuming diversified diets.

Infant and Young Child Feeding Diet Quality: By Sex



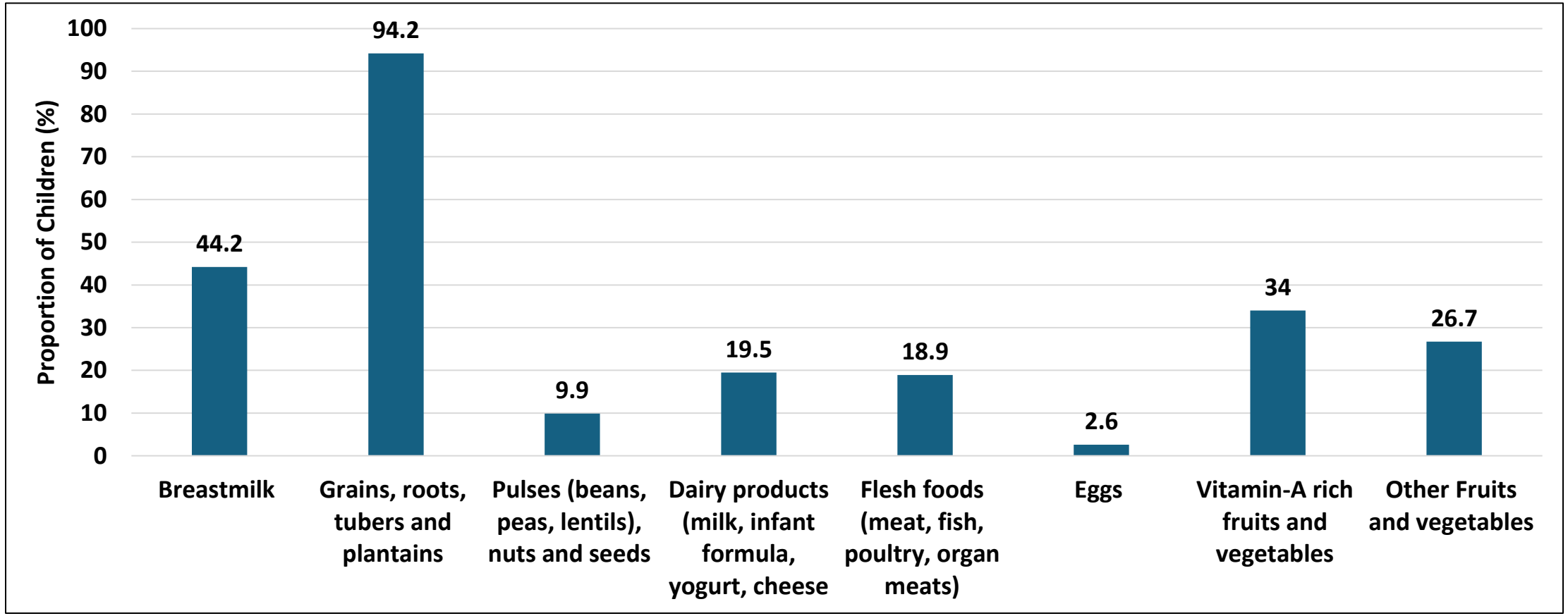
- Nationally, there was no major difference on diet quality by sex.

Infant and Young Child Feeding Diet Quality



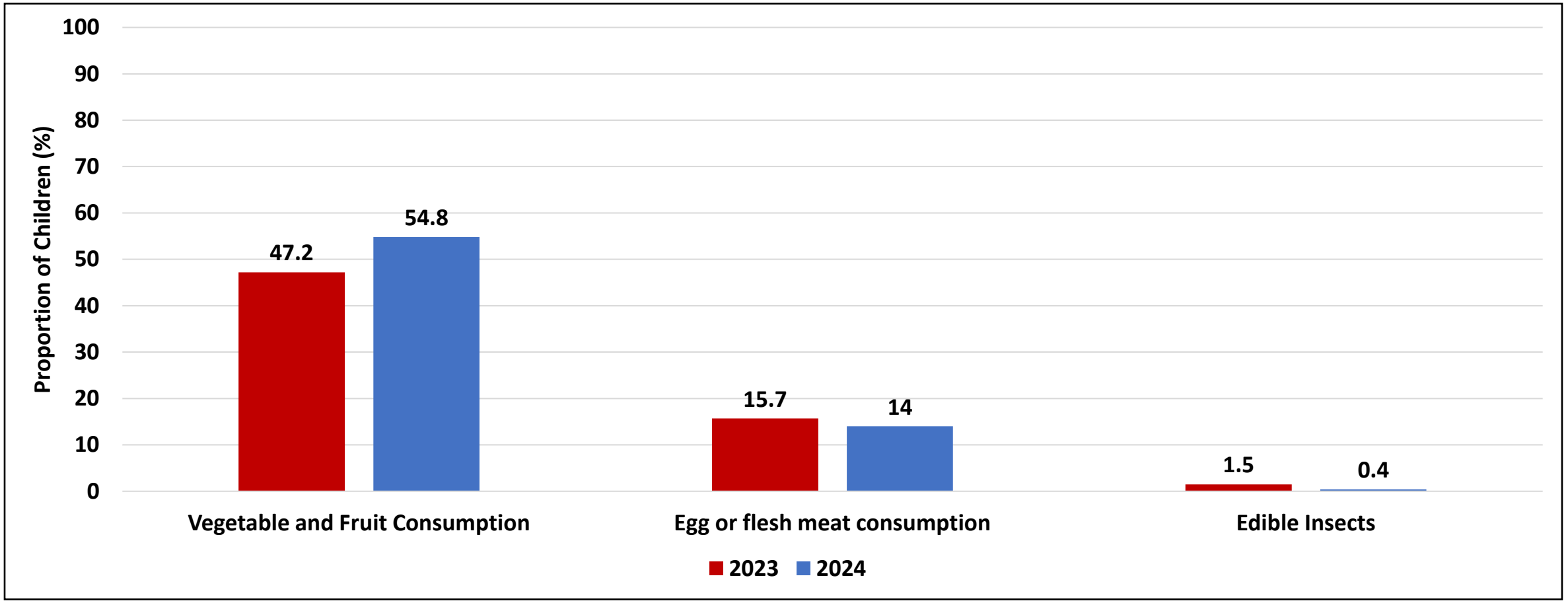
- In Matabeleland South, only 2% of children aged 6-23 months received the Minimum Acceptable Diet, a decrease from 4% recorded in 2023.
- A Minimum Acceptable Diet indicator reflects the proportion of children who receive adequate diverse age-appropriate foods. Adequate nutrition is essential for growth and development of children aged 6-23 months.

Foods Consumed by Children 6-23 Months



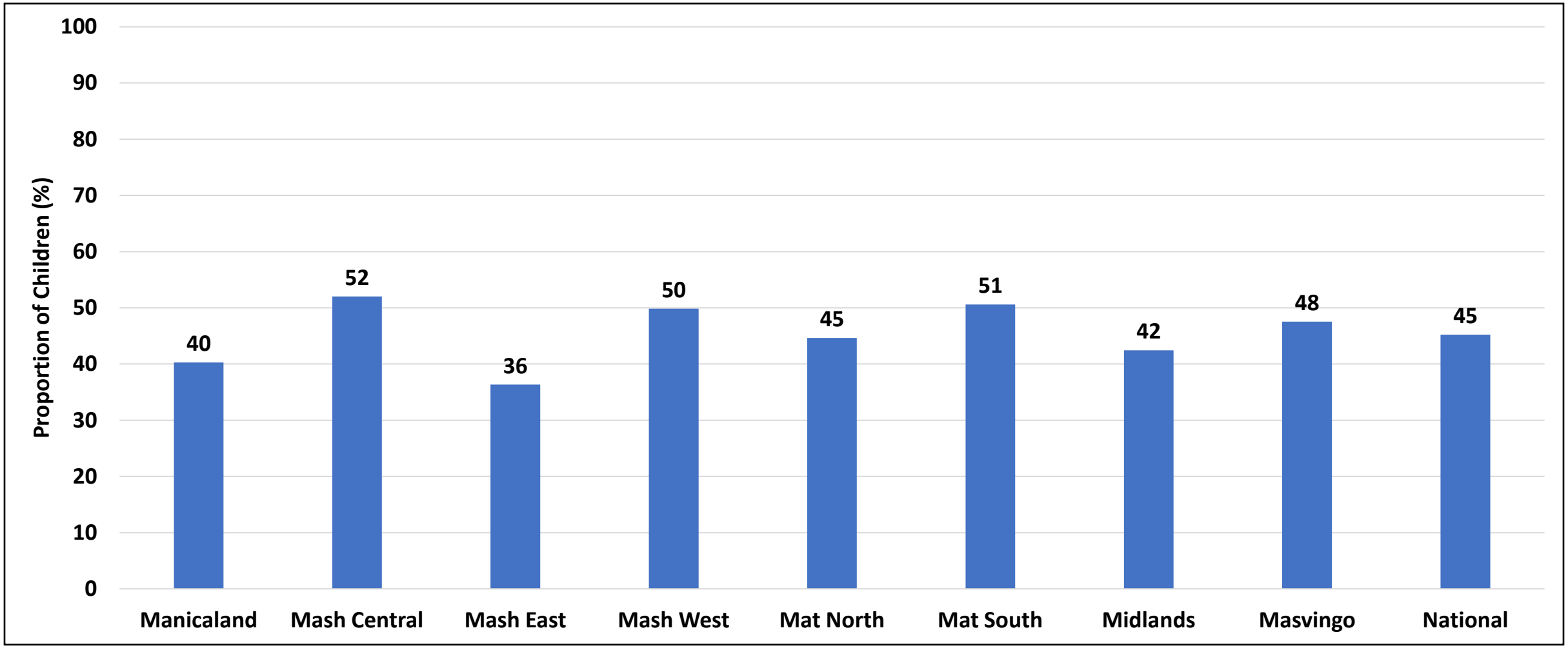
- Most of the children 6-23 months consumed grains, roots and tubers (94.2%), followed by breastmilk (44.2%).

Infant and Young Child Feeding Diet Quality Indicators by Year



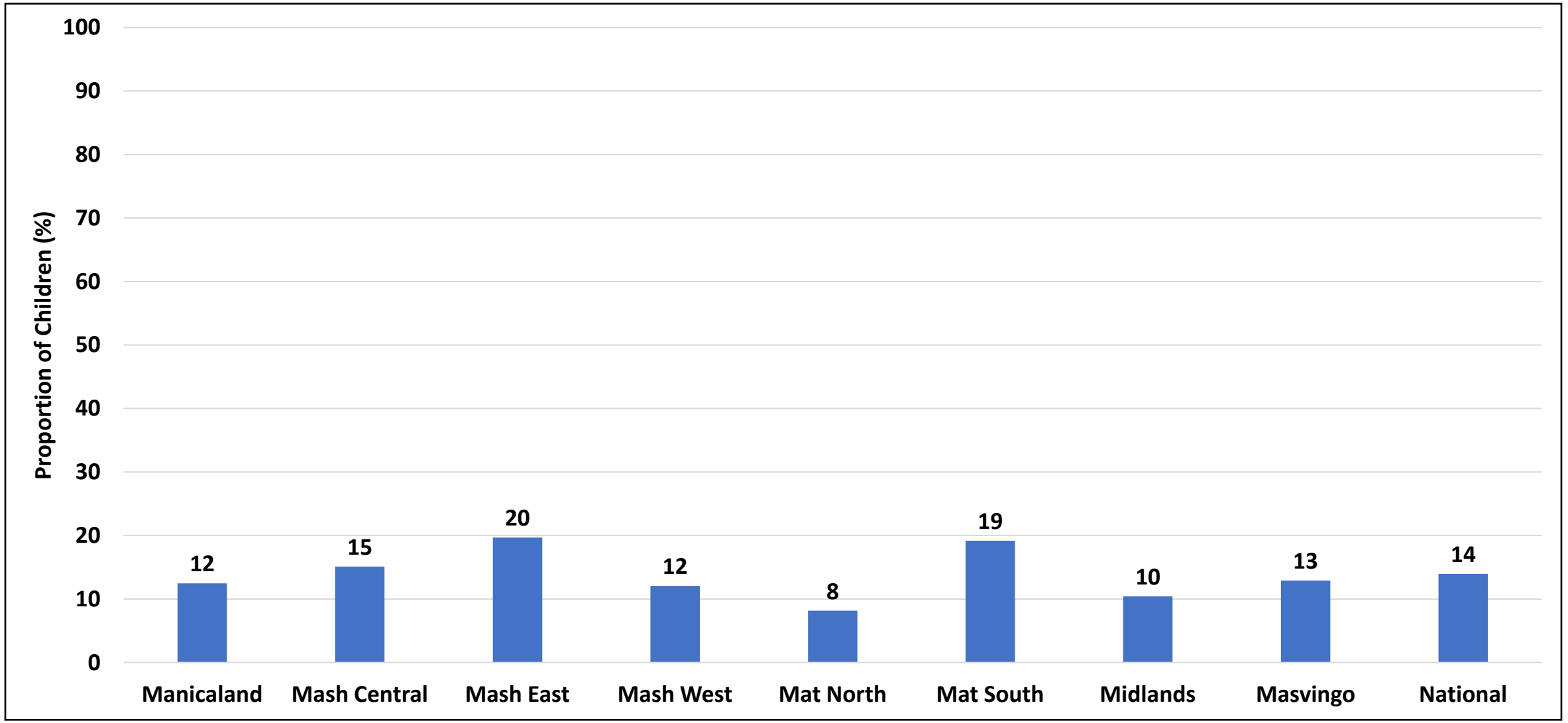
- Vegetable, fruit, egg and flesh meat consumption provides the much-needed nutrients required for optimum growth and development during the window of opportunity (first 1 000 days).
- Nationally, 55% of the children 6 to 23 months consumed vegetables and fruits 24 hours preceding the survey.
- Edible insects were not commonly consumed by children.

Non-Vegetable or Fruit Consumption 6–23 Months (ZVF)



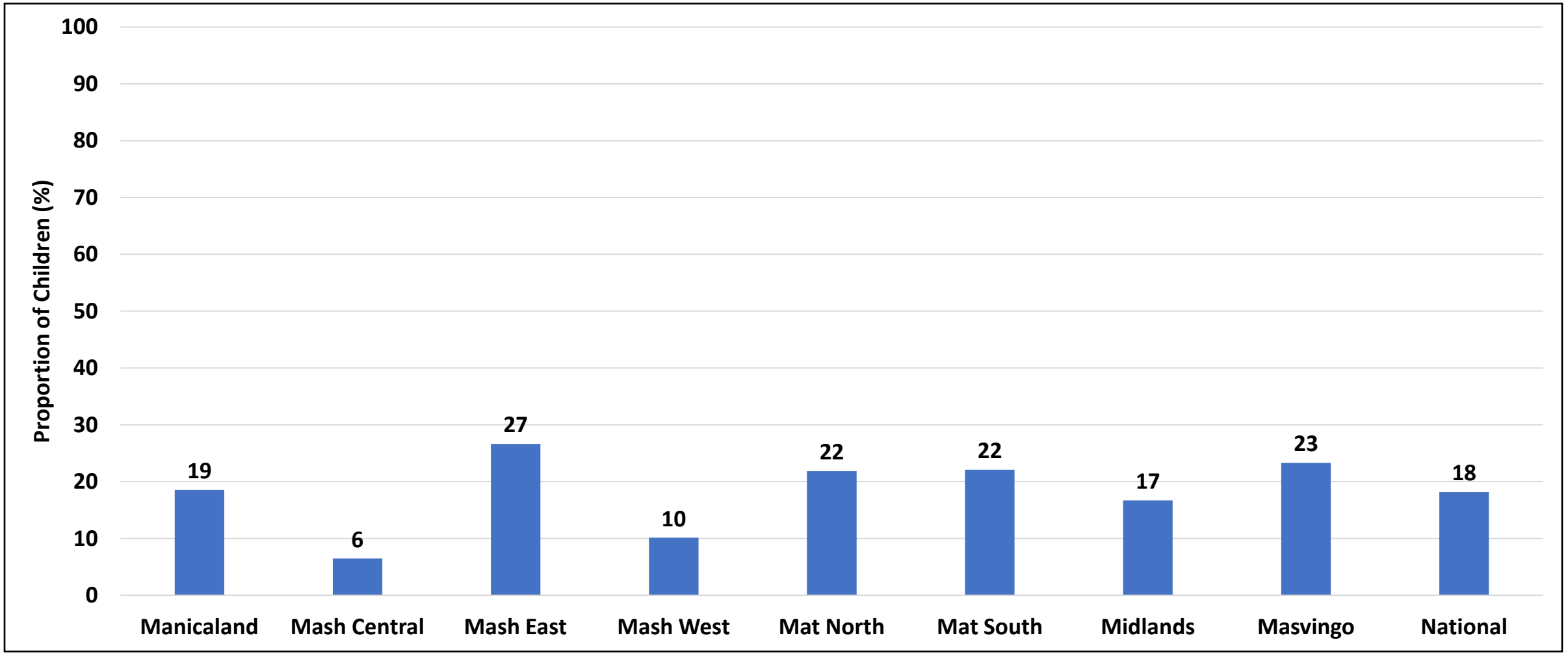
- Nationally, an estimated 45% of children 6-23 months were neither consuming vegetables nor fruits, with Matabeleland South (51%) recording proportions above the national average.

Egg and/Flesh Meat Consumption 6–23 Months (EFF)



- Matabeleland South only 19% of children 6-23 months were consuming egg and/ flesh meat.

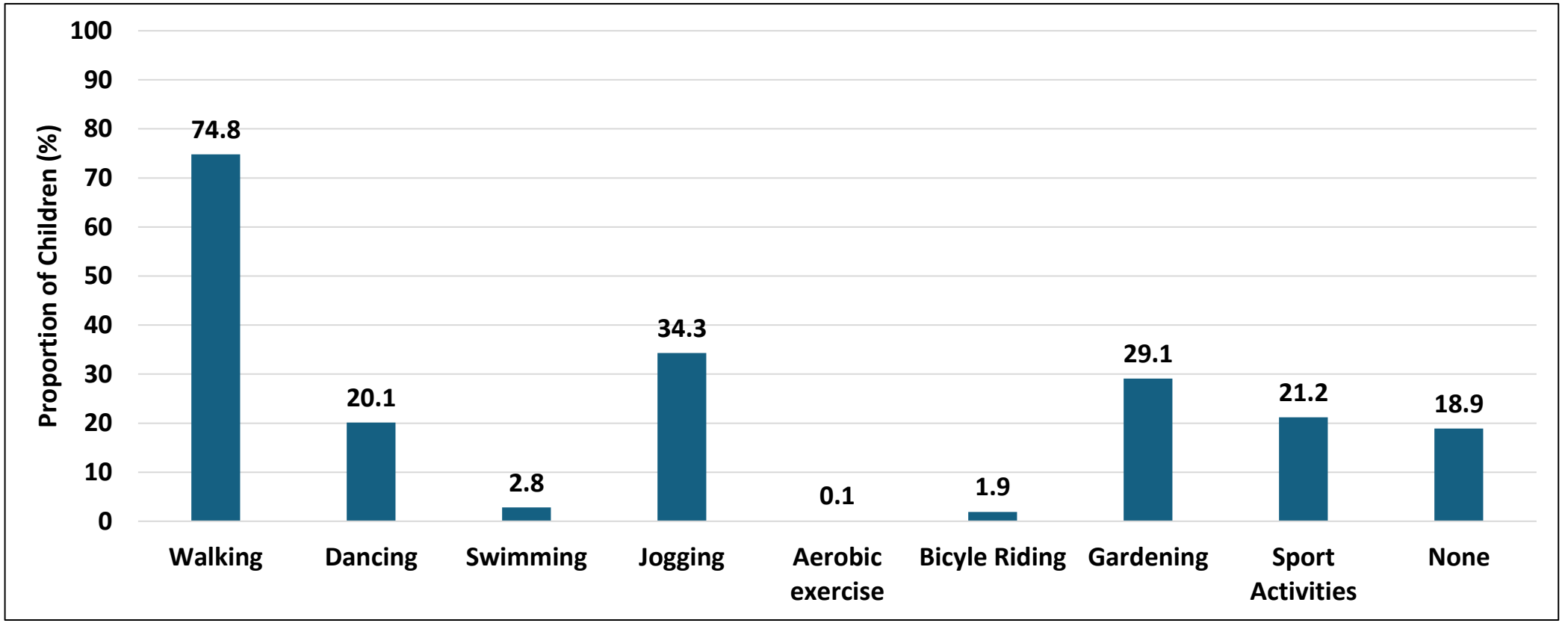
Unhealthy Food Consumption 6–23 Months (UFC)



- An estimated 18% of children 6-23 months were consuming unhealthy foods, with Matabeleland South recording 22%, which was above the national average.

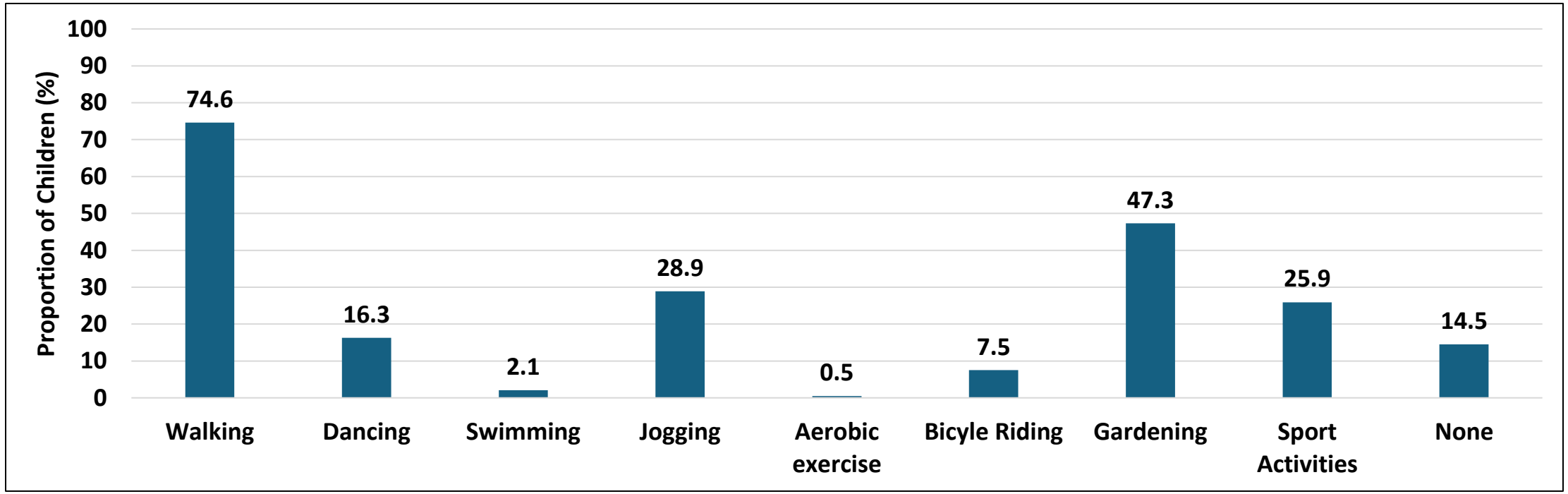
Physical Activity

Type of Physical Activity by children 5-9years



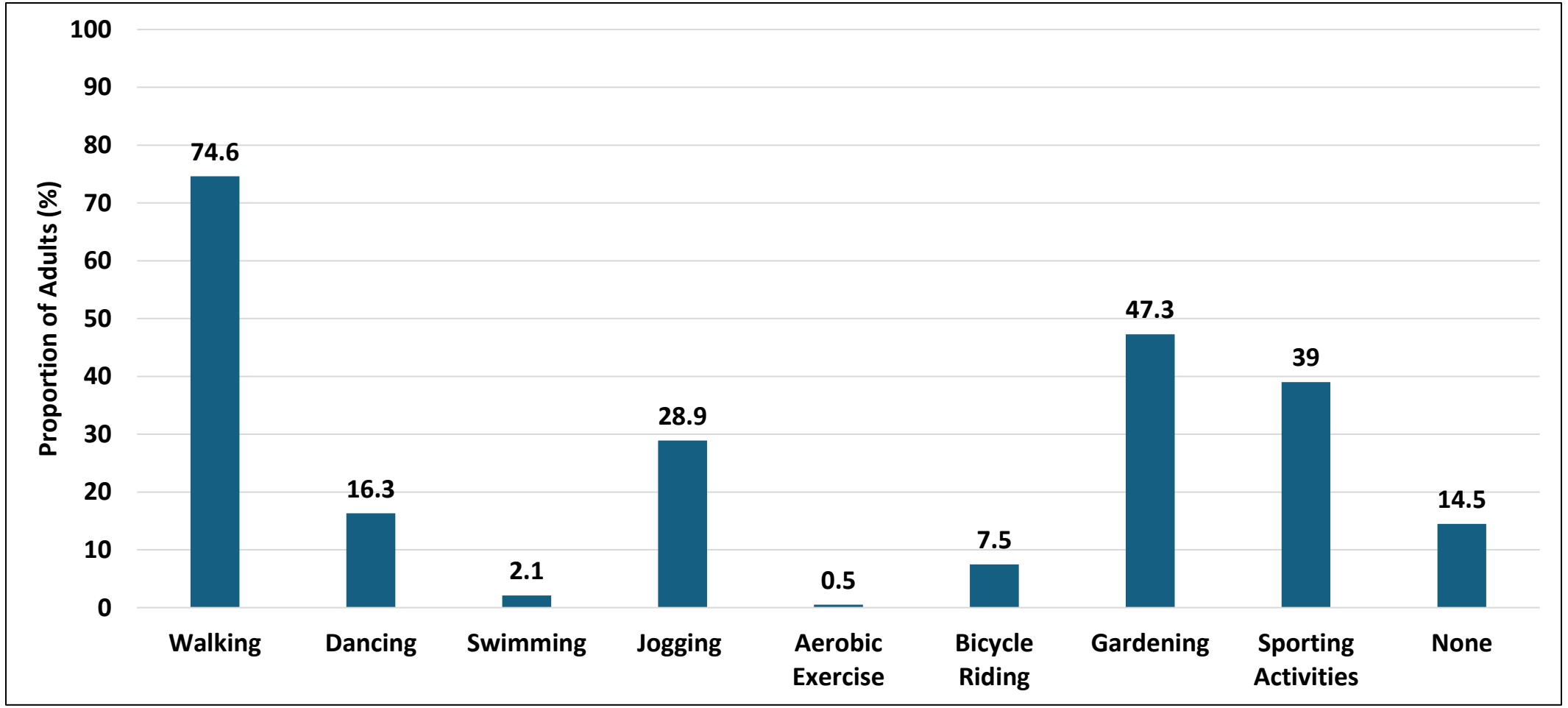
- Establishing healthy habits in childhood is crucial for long-term well-being. The main physical activity engaged in by children 5-9 years old was walking (74.8%).
- Almost 18.9% of children aged 5-9 reported not to be engaging in any physical activity.
- Children who do not engage in regular exercise are more prone to obesity, cardiovascular problems and weakened bones and muscles.

Type of Physical Activity by Adolescents 10-19 Years



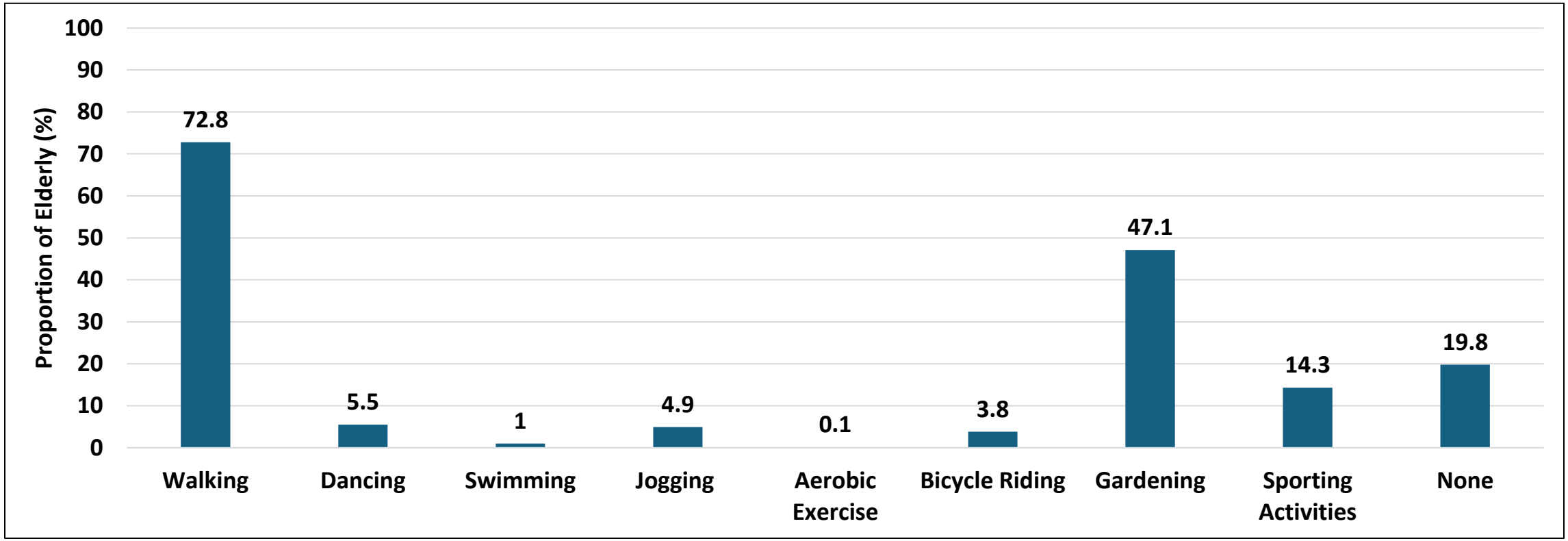
- Investing in adolescent health and physical wellbeing has been shown to yield a health benefit into adulthood.
- Adolescents aged (10-19) engaged in walking (74.6%), gardening (47.3%) and sporting activities (25.9%).
- About 14.5% of adolescents did not engage in any physical activity.
- The adolescence period is generally considered a healthy period but many Non-Communicable Diseases (NCDs) that manifest later in life are a result of modifiable risk behaviors established during this time, such as smoking, unhealthy diet pattern, and low levels of physical activity

Type of Physical Activity by Adults 18-59 Years



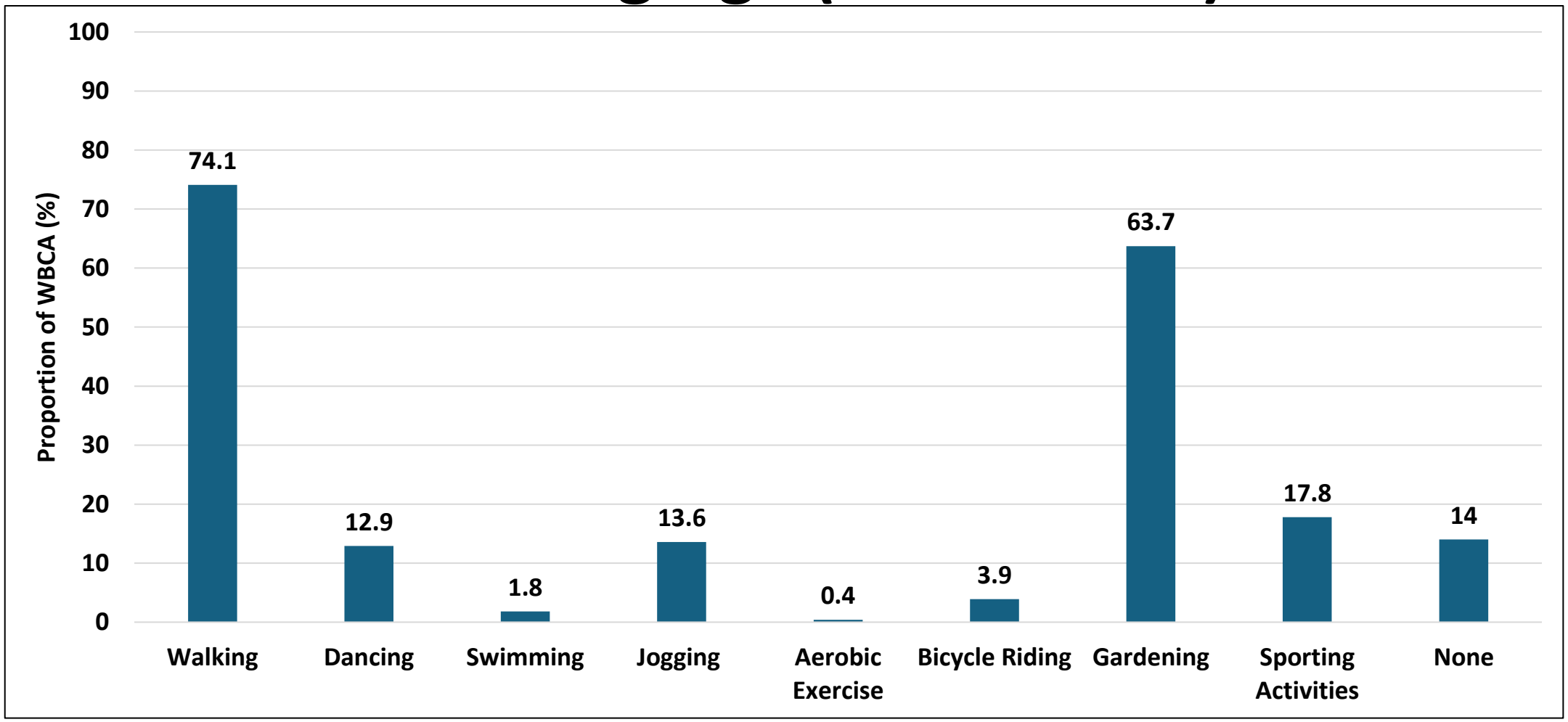
- The main physical activity engaged in by adults aged 18-59 years was walking (74.6%).

Type of Physical Activity by Elderly 60 Years and Above



- The main physical activity engaged in by household members aged 60 years and above was walking (72.8).
- 19.8% of household members 60 years and above reported that they were not engaging in any physical activity.

Type of Physical Activity by Women of Child Bearing Age (15-49 Years)



- The main physical activity engaged in by Women of Child Bearing age was walking (74.1%).

Food Security

Food Security Analytical Framework

- Food security exists when all people at all times, have **physical, social and economic** access to food which is safe and consumed in sufficient quantity and quality to meet their dietary needs and food preferences and it is supported by an environment of adequate sanitation, health services and care allowing for a healthy and active life (Food and Nutrition Security Policy, 2012).
- The four dimensions of food security as give in Figure 3 are:
    - **Availability** of food
    - **Access to food**
    - The safe and healthy **utilisation** of food
    - The **stability** of food availability, access and utilisation

Food Security Analytical Framework

- Household cereal security was determined by measuring a household's potential access to enough cereal to give each member 2100 kilocalories per day in the consumption period 1 April 2024 to 31 March 2025.
- Each of the surveyed households' potential to acquire minimum expenditure food basket was computed by estimating the household's likely disposable income (both cash and non cash) in the 2024/25 consumption year from the following possible income sources;
    - Cereal stocks from the previous season;
    - Own food crop production from the 2023/24 agricultural season;
    - Potential income from own cash crop production;
    - Potential income from livestock ;
    - Potential income from casual labour and remittances;
    - Income from other sources such as gifts, pensions, gardening, formal and informal employment.

Food Security Analytical Framework

- The total energy that could be acquired by the household from the cheapest energy source using its potential disposable income was then computed and compared to the household's minimum energy requirement.
- When the potential energy that a household could acquire was greater than its minimum energy requirements, the household was deemed to be food secure. When the converse was true, the household was defined as food insecure.
- The severity of household food insecurity was computed by the margin with which its potential energy access was below its minimum energy requirements.

Food Security Status at Peak Hunger

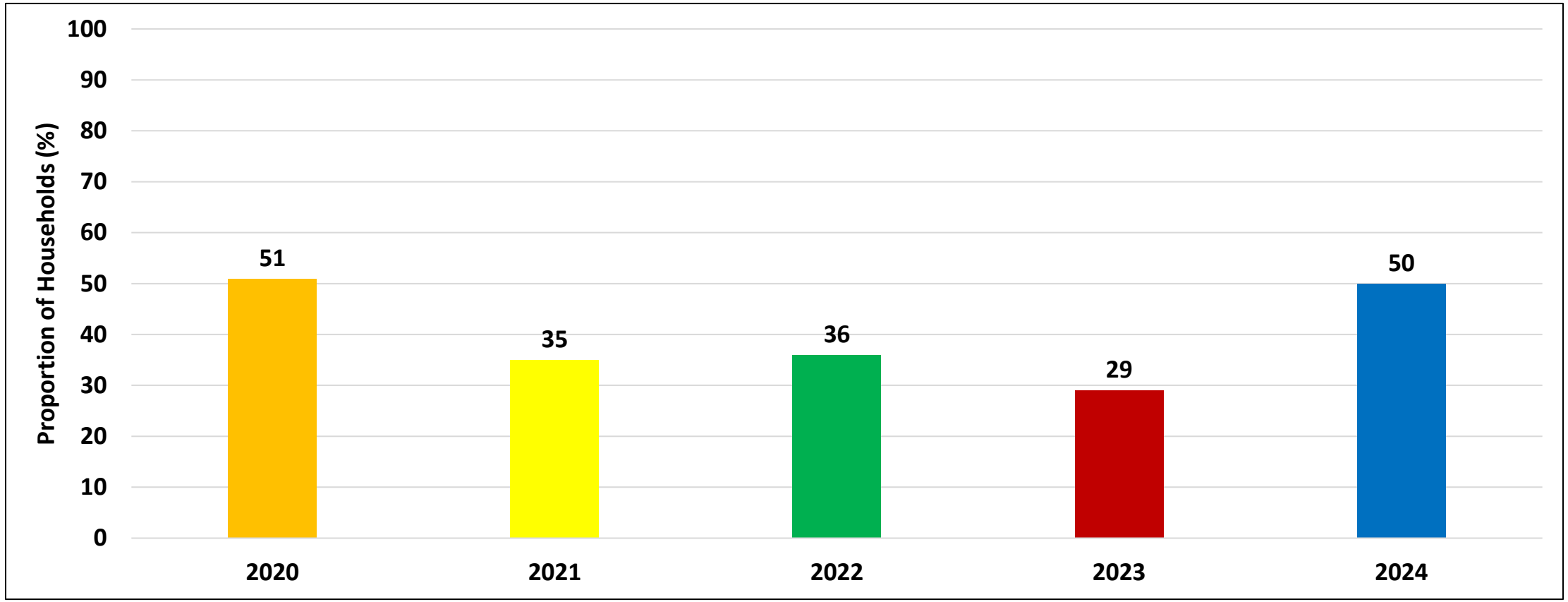
- During the peak hunger period (January to March 2025) it was estimated that approximately **50%** of the rural households will be cereal insecure.
- The 50% of rural households translated into approximately **327,386** individuals requiring a total of **12,113 MT** of cereal (Maize Grain) from the National Strategic Grain Reserves.

Cereal Insecurity by Pillars

	Food insecurity from cereals stocks (%)	Food insecurity from cereals stocks plus food crops (%)	Food insecurity from cereals stocks plus food crops plus cash crops (%)	Food insecurity from cereals stocks plus food crops plus cash crops plus remittances (%)	Food insecurity from cereals stocks plus food crops plus cash crops plus livestock plus casual labour and remittances (%)	Food insecurity from cereals stocks plus food crops plus cash crops plus livestock plus casual labour and remittances plus income (%)
Beitbridge	93	93	93	92	74	47
Bulilima	89	89	89	89	80	48
Mangwe	87	79	79	78	66	44
Gwanda	83	83	83	83	75	53
Insiza	94	93	93	93	78	47
Matobo	87	87	87	87	74	57
Umzingwane	90	89	89	89	74	50
Matabeleland South	**89**	**88**	**88**	**87**	**74**	**50**

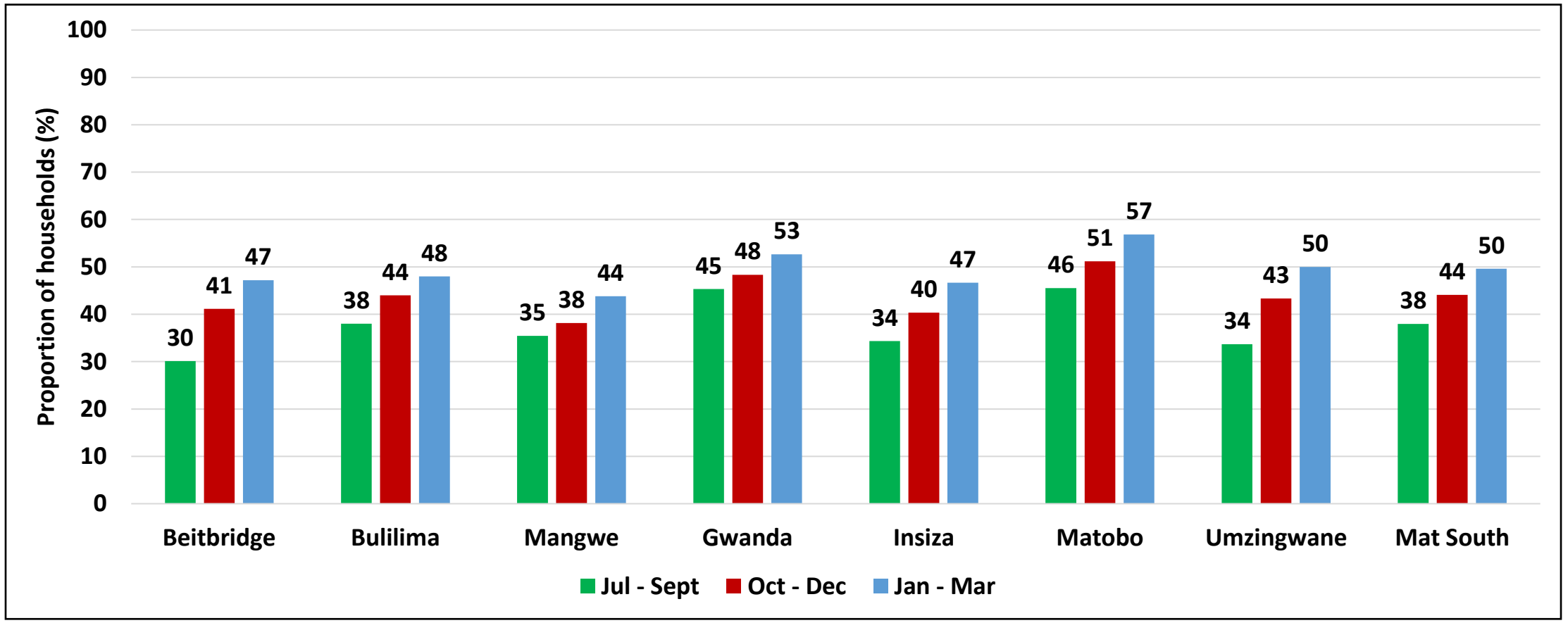
- Considering all sources of potential income, the cereal insecurity prevalence is projected to be 50% during the peak hunger period in the 2024/25 consumption year.

Cereal Insecurity Trends: 2020-2024



- Generally, the household cereal insecurity has deteriorated across all districts due to poor rains.

Cereal Insecurity Progression by Quarter



- About 38% of the rural households in Matabeleland South were projected to be facing food access challenges in the July to September quarter.

Cereal Insecure Population by Quarter

	Food Insecure Population		
	Jul - Sept	**Oct - Dec**	**Jan - Mar**
Beitbridge	28,294	38,669	44,328
Bulilima	32,528	37,664	41,088
Mangwe	23,243	24,997	28,724
Gwanda	56,462	60,198	65,595
Insiza	42,197	49,571	57,355
Matobo	43,556	48,961	54,366
Umzingwane	24,193	31,139	35,930
Mat South	**250,472**	**291,199**	**327,386**

- Gwanda (65,595) and Insiza (57,355) were projected to have the highest populations of cereal insecure people during the peak hunger period.

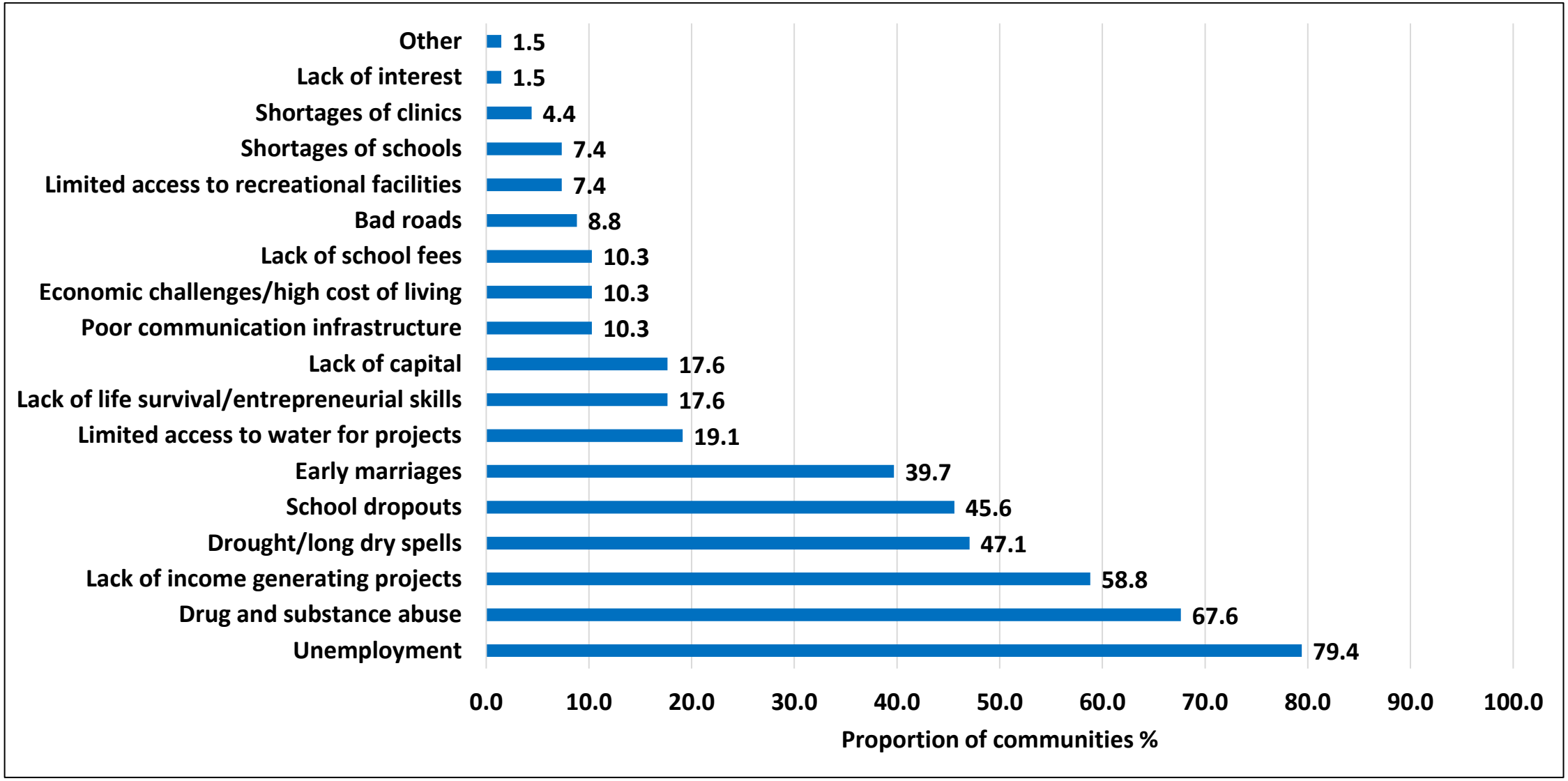
Cereal Requirements (MT) by Province by Quarter

	Cereal Requirements		
	Jul - Sept	**Oct - Dec**	**Jan - Mar**
Beitbridge	1,047	1,431	1,640
Bulilima	1,204	1,394	1,520
Mangwe	860	925	1,063
Gwanda	2,089	2,227	2,427
Insiza	1,561	1,834	2,122
Matobo	1,612	1,812	2,012
Umzingwane	895	1,152	1,329
Matabeleland South	**9,267**	**10,774**	**12,113**

- Gwanda (2,427MT) and Insiza (2,122MT) were projected to have the highest cereal requirements during the peak hunger period.

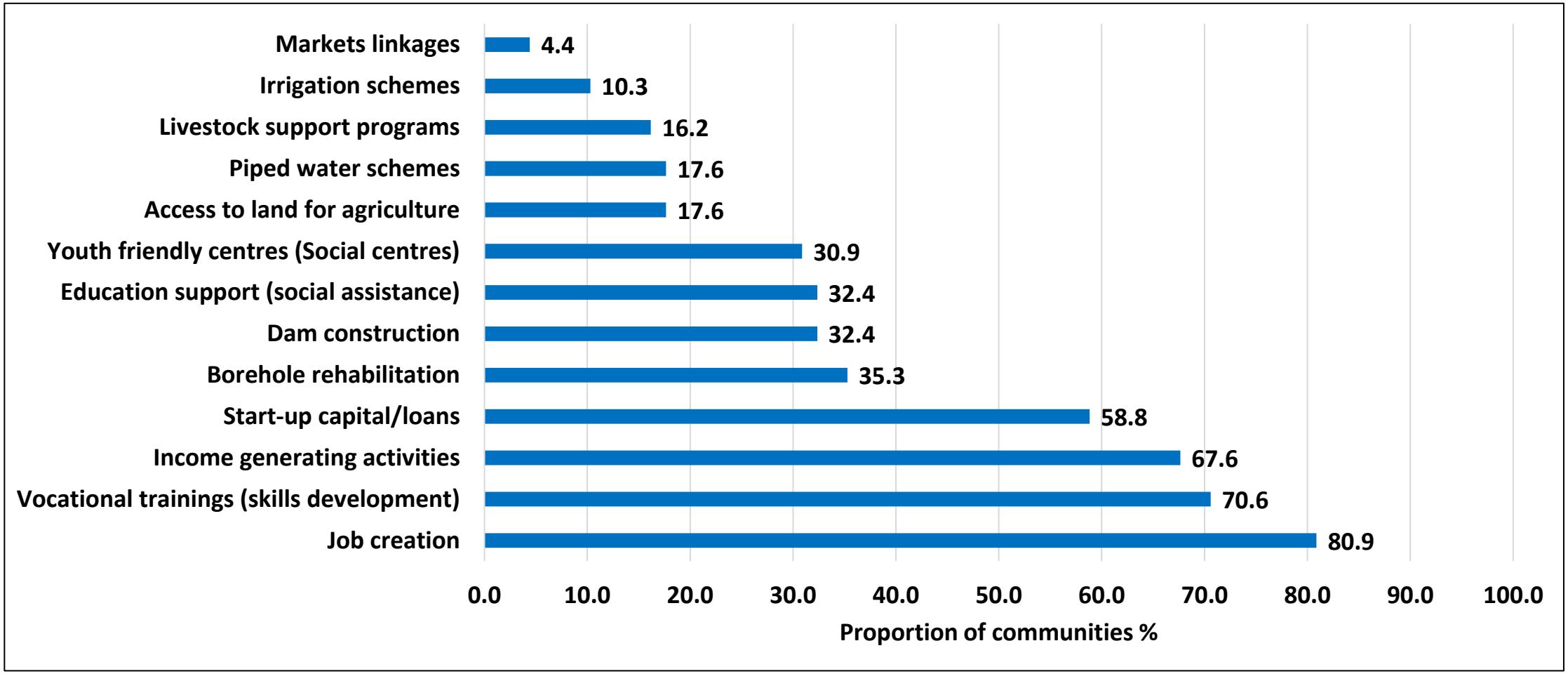
Development Priorities and Challenges

Youth Challenges



- The major Youth challenges reported by communities were unemployment (79.4%), drug and substance abuse (67.6%) and lack of income generating projects (58.8%).

Youth Priorities



- The main youth priorities reported by communities were Job creation (80.9%) , vocational trainings (70.6%), income generating activities (67.6%) and startup capital/loans (58.8%) .

Conclusions and Recommendations

- Approximately 50% of the rural population in Matabeleland South will be food insecure during the peak hunger period. This proportion translates to 327,386 people requiring 12,113MT of cereal. There is need for the Ministry responsible for agriculture to strengthen climate smart agriculture initiatives. These include the Pfumvudza/Intwasa programme, promotion of drought resilient crops and promotion of livestock production. It is also recommended that the Ministry responsible for social protection upscales support for vulnerable households as an immediate intervention.
- The proportion of households in Matabeleland South which received any form of social protection support was (39%). The Province should also strengthen its resilience building programmes to reduce the proportion of households which depend on social assistance.
- At least 26% of the households were practising open defecation. In addition, the majority of households in the province had no hand washing stations at the toilet facility (58%). It is therefore recommended that the WASH sector promotes WASH specific awareness and education programmes. The sector should also come up with measures to have improved hand washing facilities at the toilet

Conclusions and Recommendations

- Approximately 25.1% of school going age were not in school. The main reason reported was financial challenges (12.5%). The proportion of children who received a hot meal at school was 10.3%. Government through the Ministries responsible for education and social protection and development partners should promote upscaling of available social safety nets for children. These include the education assistance programme and the school feeding programme. In addition, the programmes should target the most vulnerable households so that the Sustainable Development Goal target 4.1 is achieved. There is need for the Ministries responsible for Education and Agriculture to also advocate for a waiver for the procurement of local foods from small scale farmers. Moreso, schools with reliable water sources should continue to be supported to have nutrition gardens to promote the sustainability of the home-grown school feeding programme.
- Prolonged mid-season dry spells (90.0%) and cash shortages (65.8%) were the most prevalent shocks experienced by households. It is recommended that a multisectoral approach be adopted in responding to the shocks. The initiatives should include water harvesting, borehole drilling, and irrigation.
- While a high proportion of children (94%) were ever breastfed, only 14% of infants under six months of age were exclusively breastfed, falling short of the World Health Assembly's target of 50% by 2025. Efforts to address childhood undernutrition, micronutrient deficiencies and overnutrition need to be integrated to achieve global nutrition targets.

Conclusions and Recommendations

- Early initiation of breastfeeding is one of the high impact child survival strategies. About 81% of the children were breastfed within the 1st hour of birth. Innovative Baby Friendly Hospital Initiatives such as localised on job mentorship, should be expanded to cover all institutions offering delivery services to improve optimal breastfeeding practices. In addition, strengthening of community care groups, community synergy initiatives and attendance of anti-natal care sessions initiatives is recommended to ensure continuum of care during the window of opportunity (first 1000 days). This should be augmented by task-sharing with other relevant Ministries such as those responsible for gender and women affairs, agriculture, bringing in the multisectoral approach to realise optimal IYCF practices at community level.

- The Minimum Acceptable Diet (MAD) remained low at 2%, below the national target of 25%. Only 4.8% of children were consuming diversified diets. Additionally, children consuming unhealthy foods (22%) and those not consuming fruits and vegetables (51%) further impact negatively on children diet quality outcomes. Through collaborative efforts by the Ministries responsible for ICT, higher and tertiary education as well as the Private Sector, there is need to come up with innovative ways of disseminating nutrition messaging such as digitalising messaging targeting the population.

- Stunting in the province was 27% which is very high. Various interventions to reduce stunting need to be implemented. These include improving access to food during the first 1000 days, social behaviour change programmes, nutrition sensitive social protection programmes and sanitation conditions.

Conclusions and Recommendations

- About 60.1% of households did not own cattle and 25% did not own goats. In Matabeleland about 92% of the communities indicated that the pastures were inadequate and of poor quality. For those who owned livestock, the most common improved livestock practices were deworming (24%) and dipping (38%). Given that a significant portion of households lack cattle and goats, and that pastures are often inadequate, the government's ongoing efforts to expand livestock ownership, improve pasture quality and introduce efficient livestock practices like deworming and dipping must be intensified to mitigate livestock poverty and enhance the overall quality of life in rural communities. It is recommended that the Government, particularly the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development, implement comprehensive strategies and investments to bolster the animal health industry. This should encompass the establishment of robust drought mitigation measures to secure livestock feed and water, thereby curtailing livestock mortality. Additionally, fostering a policy framework that encourages sustainable production, effective livestock risk management, and the adoption of advanced practices through research and technological innovation is crucial.
- The major youth challenges reported were unemployment (79.4%) and drug and substance abuse (67.6%). The Ministry responsible for Youth and Women Affairs should strengthen and upscale income projects for youths. In addition, a multisectoral approach on drug and substance abuse should also strengthen its youth engagement targeting youth in schools and in the community.

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