

Zimbabwe

BUILDING FORWARD

Country Overview

1. Background

Zimbabwe's WASH Sector is coordinated and managed by the National Action Committee (NAC) for water, sanitation and hygiene (WASH). The NAC is an interministerial committee which facilitates a multisectoral and integrated approach to WASH programming; integrating the three components of water, sanitation and hygiene as well as the technical expertise resident in the different ministries and government line ministries and departments.





Mandate of the National Action Committee

The National Action Committee's brief and mandate relates to the overall management responsibility, coordination and guidance of the three subsectors of Rural WASH, Urban WASH and Water Resources Management that it superintends over. It is assisted in its day-to-day coordination and management of the WASH Sector by its executive secretariat, the Department







of National WASH Coordination which is housed in the ministry chairing the Main NAC, the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development. The NAC Urban WASH Subcommittee is chaired by the Ministry of Local Government & Public Works through the department responsible for Urban Local Authorities. The subcommittee works through urban local authorities (ULA) and their various fora such as the Engineers, Health Officers, Treasurers, and Town Clerk's forum. The NAC Water Resources management Subcommittee is chaired by the Department of Water Resources Development and Utilisation in the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development. The subcommittee works through catchment and subcatchment councils. The NAC Rural WASH Subcommittee is chaired by the District Development fund and is replicated at provincial and district levels through the Provincial & District Water and Sanitation Subcommittees that also incorporate members of the Urban WASH and the Water Resources Management Sub-committees. At sub-district level, the NAC structure is replicated by the Ward Water Supply and Sanitation Subcommittee (WWSSC's) which brings together extension workers for joint programming. At Village level the Village Water Supply and Sanitation Subcommittee (VWSSC's) is the WASH management unit and assisted by community health clubs, sanitation action groups and water point management committees.

The NAC is also assisted by various taskforces and *ad hoc* subcommittees in its day-to-day business. These include amongst many:

Sustainability Subcommittee mandated with research and sustaining sub-sector interventions and is chaired by the Ministry of Health and Child Care, National Institute of Health Research National Sanitation and Hygiene Taskforce chaired by MoHCC, Environmental Health Services Department and mandated with national sanitation and hygiene development in the sub-sector

Planning and Budgeting Subcommittee, mandated with sector programming, planning and strategy development for the subsector and is chaired by Ministry of Finance and Economic Development

The Information and Knowledge Management Taskforce chaired by the Rural Local Authorities Department in MLGPW, mandated with the development of the sector WASH Information and Management Framework The WASH Sector Coordination and Information Forum, chaired by the MLAFWRD, responsible for humanitarian coordination. This is formerly the WASH Cluster, for which government assumed leadership, and provides a monthly coordination forum with sector partners







2

2. WASH Sector Status

Since the advent of the new millennium, the sector has witnessed a decline in access and coverage levels of WASH services and a massive reversal of WASH gains made since independence in 1980. As such, Zimbabwe failed to meet the 2015 WASH MDGs and is *unlikely to meet the SDG targets if a state of emergency is not declared over WASH services*. The indicators for water, sanitation and hygiene as measured by the Joint Monitoring Program (2020) are reversing and urgent action is required to address this scenario.

Water Supply Challenges

The national water supply challenge is characterized by poor coverages and low acess to water supply with only 63% of the population having acess to at least basic¹ water supply. Access levels depict a poverty dimension wherein 37% of the poorest have access to basic water whilst 96% of the richest access basic water supply services. The rural-urban divide exists with 48% of the rural



and urban areas, there is high incidence of aged, obsolete, and overloaded infrastructure with high water losses and limited to service in some areas.

Rural Water Supply

The rural WASH sub-sector is punctuated by poor coverage, high non-functionality of water points due to:

- i. Aged and obsolete infrastructure
- ii. Unserviced areas (particularly the resettlement areas)
- iii. Proliferation of sub-standard spares and accessories for hand pumps and solar pumps
- iv. Weak operation and maintenance regime
- v. Community based management model under threat
- vi. Poorly capitalized service providers (e.g., Pump Operators and Village Pump Mechanics)
- vii. The climate change challenge







3

¹ Basic water supply refers to drinking water from an improved source, provided collection time is not more than 30 minutes for a round trip including queueing.

Urban Water Supply

Urban water supply in Zimbabwe is bedeviled by a myriad of challenges which include but not limited to:

- i. Old and dilapidated infrastructure.
- ii. Unavailability of water treatment chemicals
- iii. Weak Operation and maintenance
- iv. Uneconomic water tariffs
- v. Poor collection efficiency
- vi. Sprouting peri-urban settlements
- vii. Pollution of raw water sources
- viii. Reduction in raw water sources
- ix. Power shortages at treatment plants
- x. High non-revenue water (39.8%) as according to the 2018 Service Level Benchmarking Report
- xi. The climate change challenge

Reversing the negative trend – Water Supply

To address the foregoing challenges, the following strategies are proposed:

Rural Water Supply

- i. Urgent rehabilitation and repair of non-functional water points (*boreholes, deep wells and piped water schemes*)
 - District maintenance teams and Village Pump Mechanic brigades established to spearhead rehabilitations
 - Equipping of the district maintenance teams
 - Headwork rehabilitations
 - Enhanced water quality monitoring
- ii. Establishment of new water points in unserviced areas (priority under the Presidential Rural Development Programme)
- iii. Development of solar powered piped water schemes (on high yielding boreholes; new and/or existing)
- iv. Revive the family well programme
- v. Quality assurance and capacity building of spare manufacturers (currently the pre- and post-delivery inspections, SAZ certification)







vi. Research and development into alternative water abstraction, purification technologies

Urban Water Supply

- i. Rehabilitation and upgrading of water supply infrastructure
- ii. Completion and/or Development of new raw water sources (e.g., Gwayi Shanangani-Matabeleland North; Kunzvi for Harare)
- iii. Development of new water treatment plants
- iv. Strengthen O&M within local authorities
- v. Review of the water tariff regime
- vi. Customer engagement campaigns to improve customer willingness to pay
- vii. Intelligent billing systems to improve collection efficiency
- viii. Development of Urban WASH Information Management System

Sanitation and Hygiene

Sanitation, just like water, is plagued by poor coverages and low access rates with only 36% of the



total population having access to at basic² least sanitation and rampant open defaecation at 23% nationally. Open defaecation is а poverty function wherein 59% of the poorest practice open

defaecation as compared to 0% in the richest quintile. The rural-urban divide is still glaring with 35% of the rural population practicing open defaecation as compared to 0% in urban. Management of wastewater has remained poor with raw sewage being dumped into the river ecosystems becoming the major pollutant. The urban sight has become an eyesore due to heaps of uncollected solid waste accumulating in most urban settlements.





5

 $^{^2}$ At least basic acess to sanitation means the population is using t east improved facilities which are not shared with other households or are using improved facilities which are not shared with other households & where excreta are safely disposed in situ or transported and treated off-site.

Rural Sanitation and Hygiene

Only thirty-two percent (32%) of the population in the rural hinterland have access to at least basic sanitation. This is due to a number of constraining factors including but not limited to:

- i. Poor coverage of improved pit latrines (BVIPS)
- ii. Most latrines have become unusable either because they have been filled up or have collapsed,
- iii. High dependency syndrome especially amongst the rural population
- iv. Weak strategies for health and hygiene promotion
- v. Sanitation delivery approaches that are highly supply driven targeting wrong beneficiaries.
- vi. Limited technology options available to the communities
- vii. Poor soap management for handwashing at public places, and
- viii. The Climate change challenge

Urban Sanitation and Hygiene

Only forty-two percent (42%) of the population in urban areas have access to at least basic sanitation. This owes to, but not limited to:

- i. Poor infrastructural coverage [toilets averaging 86.1%, sewerage network coverage at 75.3% and collection of sewage is at 94% (2018 SLB report)]
- ii. Dilapidated sewer network such that very little sewage is reaching the treatment plants.
- iii. Poor sewer treatment and hence excess capacity in sewer treatment due to low water supply
- iv. Collapse of the sewer reticulation infrastructure
- v. Parallel development and unserviced settlements
- vi. Inadequate solid waste collection and disposal equipment. Coverage of receptacles remains very low at 53% and hence to dumping of sold waste.
- vii. Absence of standard landfills with only Bulawayo and Norton out of the 32 LAs having proper landfill sites.
- viii. The recycling of solid waste remains very low at an average of 5%.

Reversing the negative trend – Sanitation and Hygiene

To address the sanitation and hygiene challenges, the following strategies are proposed:

- i. Improve Enabling Environment for Sanitation and Hygiene
 - a. Review of the National Sanitation and Hygiene Policy and Strategy
 - b. Amend minimum sanitation and hygiene standards in urban areas
 - c. Develop a WASH Climate Change response strategy
 - d. Develop a WASH Financing Strategy including setting up WASH Accounts for tracking Sanitation and Hygiene Funds for accountability and transparency





6

- ii. Demand-led approaches focused on behaviour change and community managed approaches for sustained elimination of open defaecation
 - a. Demand led sanitation and hygiene promotion (*triggering of all villages, national toilet per household campaign*)
 - b. Community led hand washing campaign
- iii. Prioritise sanitation and hygiene financing
- iv. Institutional reform i.e., capacitate Taskforces for WASH in Schools and WASH in Health Care Facilities
- v. Capacity building of the critical mass of extension workers (Participatory Health and Hygiene Education, Sanitation Focused Participatory Health and Hygiene Education, motorization etc)
- vi. Increased sector advocacy to raise the profile of sanitation and hygiene in the country. Zimbabwe continues to commemorate the National sanitation Week, Global Handwashing Day and World Toilet Days which serves as a reminder of the struggles faced by billions of people who still lack access to improved sanitation and hygiene.
- vii. Strengthen Community Health Clubs as vehicles for health promotion
- viii. Unlock climate change financing through development of proposals targeting existing funding arrangements like the Green Climate Fund (GCF)







7