ZIMBABWE LIVELIHOODS ASSESSMENT COMMITTEE (ZIMLAC)

2025
RURAL LIVELIHOODS ASSESSMENT REPORT

MIDLANDS

Foreword

Under the leadership of FNC, the Zimbabwe Livelihoods Assessment Committee (ZimLAC) remains committed to providing timely and reliable information on the food and nutrition security situation to inform the development of robust food and nutrition response programmes, policies and strategies. The 2025 Rural Livelihoods Assessment underpins the value of precision sustainable livelihoods planning to provide spatially resolved data to guide efficient targeting of interventions to those populations with the greatest need, to reduce social development disparities and accelerate progress. The results will enable quantification of inequalities and identification of successes and failures of programmes and policies at local level.

The 25th Rural Livelihoods Assessment Report provides updates on pertinent rural household livelihoods issues which include demographics, housing, education, health, nutrition, WASH, energy, social protection, food consumption patterns, food and income sources, income levels, expenditure patterns, debts, coping strategies, shocks and food security. The report will assist the country to evaluate its performance against set targets and aspirations; monitoring the continuing implementation of the National Development Strategic policies, Agriculture related policies, Social Assistance and Social Protection related policies, the Food Nutrition Security Policy, as well as the country's progress against regional and global commitments. The assessment is one of the documents that will be useful in providing baseline data critical for the development of the National Development Strategy 2 (NDS 2).

Our sincere gratitude goes 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. These resources also went a long way in facilitating the collection of data to enable the representation of key indicators at district level.

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
- Ministry of Public Service, Labour and Social Welfare
- Ministry of Health and Child Care
- Ministry of Local Government and Public Works
- Ministry of Women Affairs, Community, Small and Medium Enterprise Development
- Rural District Councils (RDCs)
- ZIMSTAT
- United Nations Children's Fund (UNICEF)
- START NETWORK
- United Nations World Food Programme (WFP)
- United Nations Development Programme
- United Nations Food and Agriculture Organisation (FAO)
- World Vision
- Red Cross
- Plan International
- LID Agency

Introduction and Background

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 12 urban and 25 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 for improved 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.
- Providing baseline data for NDS 2

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 2025/2026 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, water, sanitation and hygiene), assets, 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 and stressors experienced by communities on food and nutrition security.
6. To identify development priorities for communities.

Contextual Analysis

- The 2024-25 production season generally experienced a delayed start. A normal to below normal rainfall pattern was experienced from October to November 2024, influenced by a weak La Niña. However, a transition into a stronger La Niña phase in the second half of the season resulted in more favourable rainfall, providing optimal conditions for planting and growth of crops.
- According to the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development's Crops, Livestock and Fisheries Assessment Report (CLAFA – 2), most Pfumvudza crops were planted during November 2024 (40%) and December 2024 (41%), with a smaller portion of crops planted later in January 2025 (19%).
- There was a 290% increase in food crop production compared to last season. The season also experienced an increased production of sorghum and pearl millet due to improved agroecological tailoring of crops. Maize production is estimated at 2,293,556 MT while Traditional Grains production is estimated to be 634,650 MT. Total cereal production is expected to be 2,928,206 MT. (CLAFA – 2).
- Yield levels from Pfumvudza/Intwasa in maize for the 2024/25 season were slightly higher than those from conventional farming.
- Tobacco production is expected to increase by 15%, Cotton by 52% and Sunflower by 303%. (CLAFA – 2).

Contextual Analysis

- According to the International Monetary Fund (IMF) staff team that conducted the 2025 Article IV Consultation;
- Zimbabwe is experiencing a degree of macroeconomic stability despite lingering policy challenges. During the first half of 2025, better climate conditions and historically high gold prices have boosted agricultural and mining activity, strengthening the current account and contributing to the recovery, with growth projected at 6 percent in 2025.
- On April 5, 2024, the Reserve Bank of Zimbabwe introduced a new currency called Zimbabwe Gold (ZiG; code: ZWG). which is backed by a composite basket of foreign currency and precious metals (mainly gold) held by the RBZ. This structured currency was designed to foster simplicity, certainty and predictability in monetary and financial affairs. The RBZ aimed to consolidate the currency's stability, maintain low inflation and ensure a stable exchange rate.
- Following the introduction of the new Currency, Banks were required to convert existing Zimbabwe dollar balances into ZWG.
- The monetary policy formulation and implementation pursued by the Reserve Bank since 5 April 2024 created relative price, currency and financial stability in the economy. This stability is evidenced by:
    - ZWG month on month inflation which stabilised to 0.5% in February 2025 and -0.1% in March 2025.
    - Greater exchange rate stability, with foreign exchange parallel market premiums below 20%, resulting in price and currency stability.
    - Increased foreign currency inflows.
    - Increased availability of foreign currency and;
    - Sustained financial sector stability and soundness.

Government Mitigatory Measures

The following people-centered measures were implemented to ensure food and nutrition security for all:

- **Food Mitigation:** Government targeted 6 million people in rural areas with a package comprised of pulses, oils and cereal.
- **Presidential Borehole Drilling Scheme:** In order to alleviate water scarcity challenges and climate change, Government is implementing the Presidential Borehole Drilling Scheme. The scheme aims to increase access to safe drinking water.
- **Strengthening of Multi-Sectoral Structures** in order to operationalise a cohesive response to the food and nutrition challenges.
- **Easing of restrictions on maize grain trade (Statutory Instrument 56 of 2023)** thus increasing maize grain flows and improving availability.
- **Emergency Road Rehabilitation Programme** – the Government of Zimbabwe through Statutory Instrument 47 of 2021 declared all roads to be a state of national disaster on 9 February 2021. The second Emergency Road Rehabilitation Programme (ERRP II) was launched and the objectives of the programme are to improve the road network, which was extensively damaged during the rainy season and to harness the potential of the transport system in promoting economic growth.

Government Mitigatory Measures

The Government of Zimbabwe and the RBZ implemented a range of policy measures:

- **Monetary Policy Rate:** Set at 35% in September 2024 to curb inflationary pressures.
- **Money Supply Control:** Established strict controls to prevent excess liquidity from undermining the new currency.
- **Export Retention Thresholds:** Reduced from 75% to 70% in February 2025 to enhance foreign exchange liquidity in the formal market.
- **IMF Agreement Delay:** Postponed an IMF staff-level agreement to allow reforms to consolidate before committing to new external programmes.
- **Public Spending Control:** Maintained tight control over public spending and subsidies.
- **ZWG Adoption:** Promoted broader use of ZWG across public services and transactions, with over 90% adoption reported by mid-2024. Mandated the use of point-of-sale (POS) systems by all businesses for transactions in both ZWG and USD, making this a pre-condition for business licensing.
- **Interest Rates:** Upwardly reviewed minimum deposit interest rates, with ZWG savings deposits at 5%, time deposits at 7.5%, and USD savings deposits at 2.5%, time deposits at 4%.
- **Targeted Finance Facility:** Introduced a facility extended to wholesalers and retailers.
- **Reporting Currency:** Mandated the use of ZWG as the reporting currency for all entities with immediate effect.

Government Mitigatory Measures

- The 2024 mid-term budget review presented on July 25, 2024 focused on consolidating economic transformation and addressing challenges like the impact of the El Nino-induced drought on agricultural output. While economic growth was projected at 2% for 2024, down from the initial 3.5% projection, measures were being implemented to maintain economic stability and achieve fiscal consolidation.

- The Reserve Bank noted that most banks had stopped charging monthly bank maintenance or service charges for individual bank accounts with a conservative daily balance of USD 100 and below or its equivalent in ZWG for a period of up to 30 days. The exemption for monthly bank maintenance or service charges for accounts with a conservative daily balance of USD 100 or below was extended to Micro, Small and Medium Enterprises (MSMEs) with effect from 1 September 2024.

- To further promote the use of electronic means of payment, the Reserve Bank with effect from 1 September 2024 exempted electronic transactions of less than USD 10 or the ZWG equivalent from bank charges. This measure was aimed at removing the cost of using electronic means of payments by according such transactions a near-cash characteristic, consistent with the Reserve Bank's drive towards digital cash.

- The Reserve Bank reiterated that the country was in a multicurrency environment and all domestic transactions must be settled in either ZWG or foreign currency, except in cases where there were explicit exemptions to sell in US dollars. In this context, all economic agents were expected to adhere to the multicurrency system in place.

Government Mitigatory Measures

- On September 27 2024, the Reserve Bank of Zimbabwe slashed the value of the ZWG by 43%, taking it from 13.56 ZWG to the US dollar at its launch to ZWG 24.4 to the dollar.

- The Reserve Bank made efforts to ensure that the Monetary Policy stance remained supportive of the envisaged growth of 6% in 2025.

- The Government, through a high-level task force on business malpractices launched a multi-agency initiative in 2024 to clamp down on unethical business practices and smuggling. The task force was led by the Ministry of Industry and Commerce and involved collaboration between the Zimbabwe Revenue Authority (ZIMRA), the Zimbabwe Republic Police (ZRP), the Reserve Bank of Zimbabwe, the Consumer Protection Commission and other law-enforcement agencies.

- In addition to reducing smuggling, the operation aimed to regularise imports, ensuring that all importers paid the appropriate duties and taxes. This move was intended to protect consumers from harmful products such as hazardous foodstuffs and cosmetics, while also safeguarding businesses from unfair competition stemming from counterfeit or substandard goods. It further supported legitimate traders by addressing issues such as counterfeiting and intellectual property violations.

Assessment Methodology

Methodology – Assessment Design

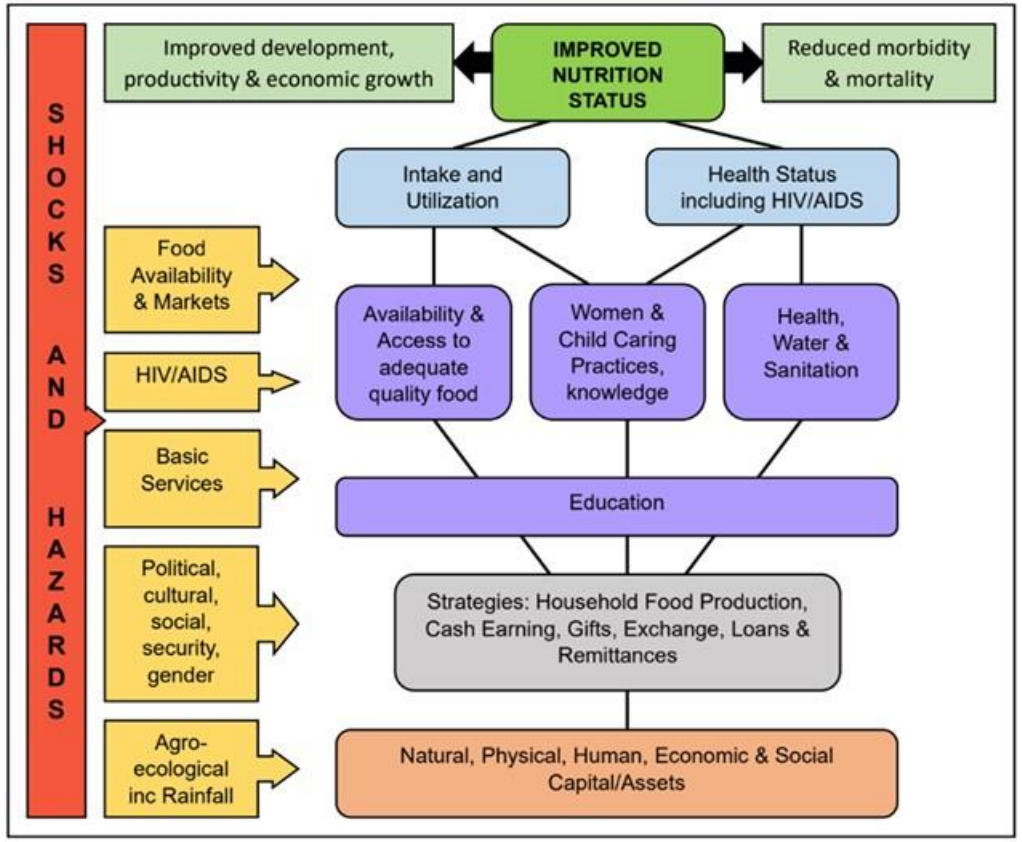


Figure 1: Food and Nutrition Conceptual Framework

- 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.
- The frameworks also place nutrition as an outcome of multi sectoral drivers at various levels and its role in driving the economic development.

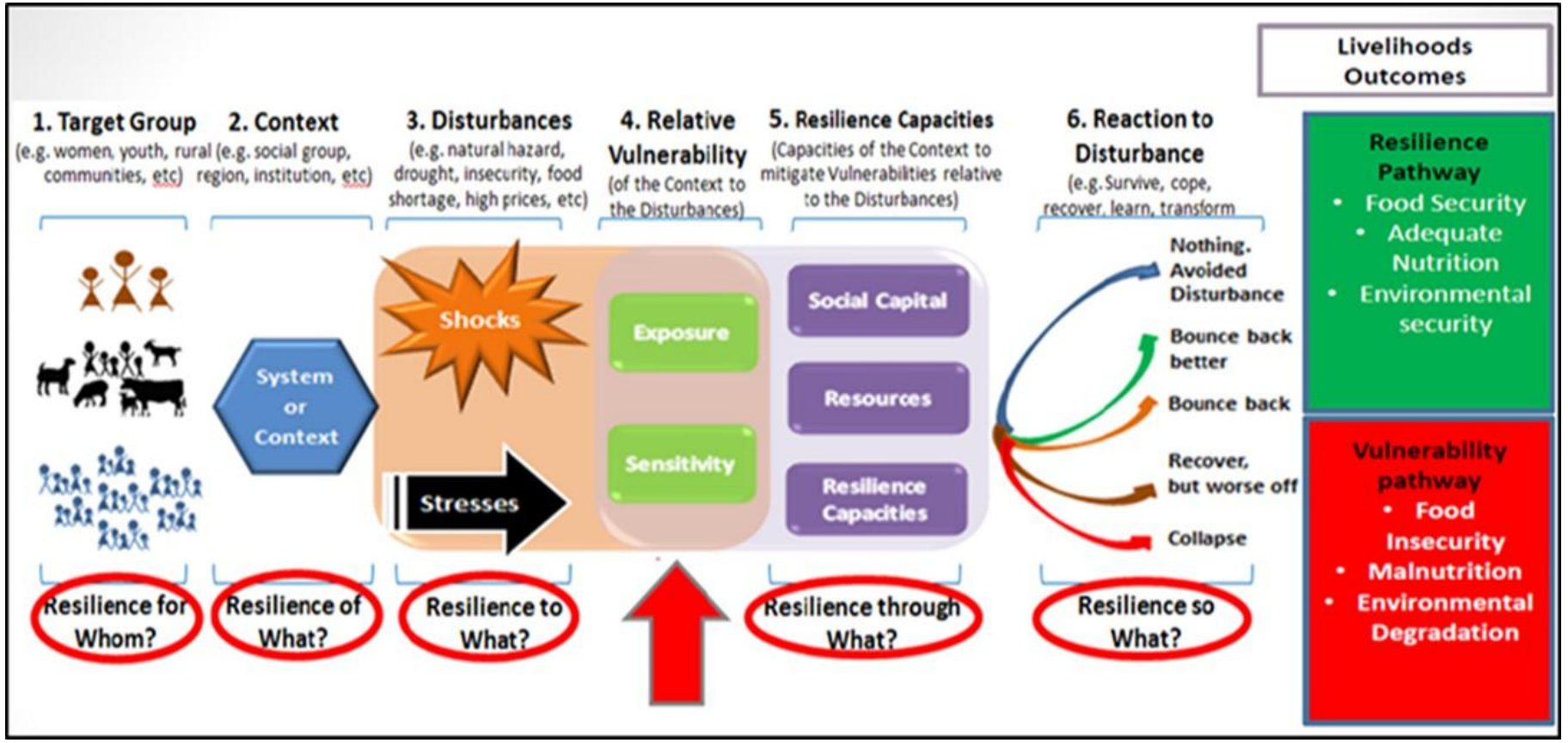
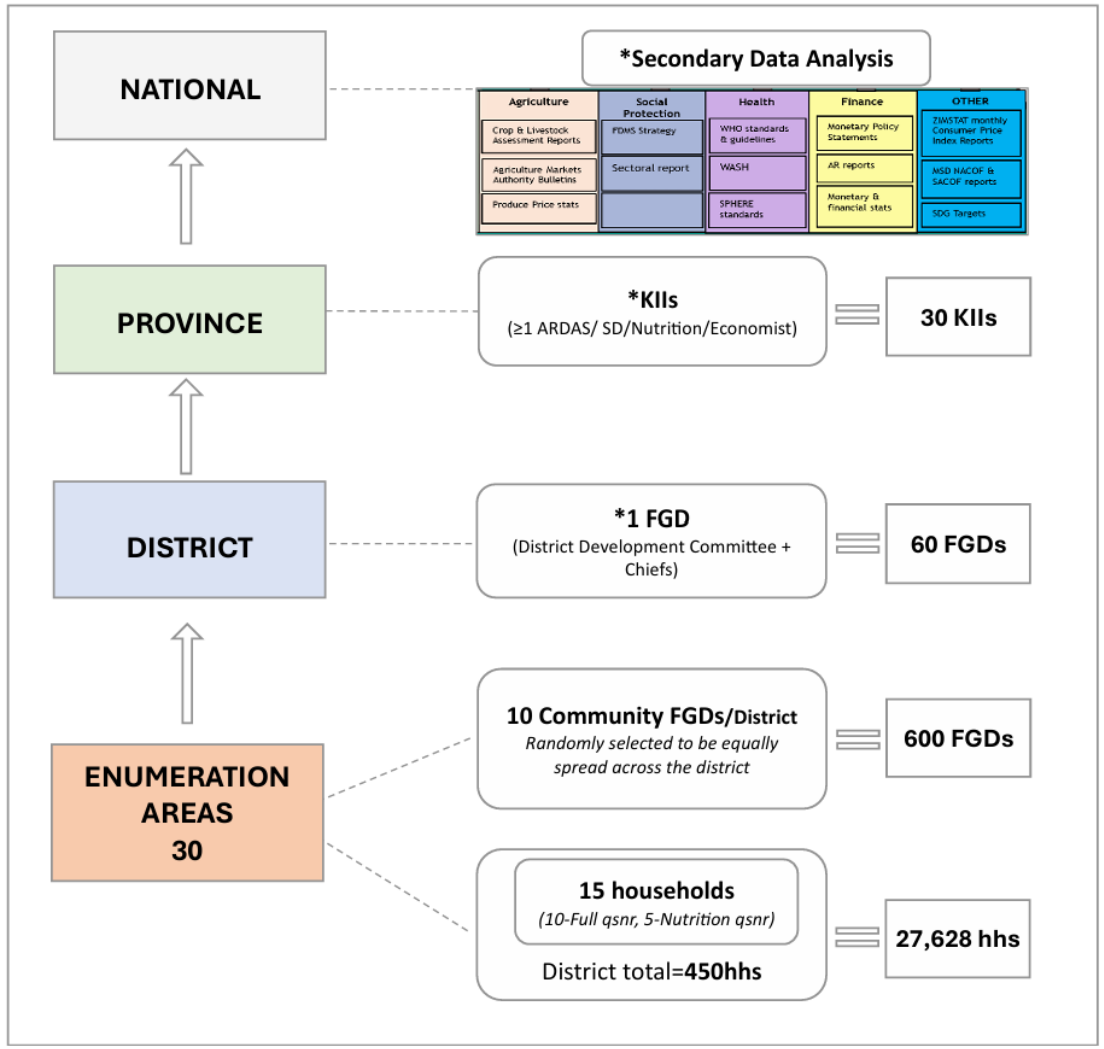


Figure 2: Zimbabwe Resilience Framework (UNDP Zimbabwe, 2015)

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 and the community Focus Group Discussion (FGD) guide.
- ZimLAC national supervisors (including Academia, Provincial Agritex Extension Officers, Provincial Nutritionists and Provincial Coordinators) 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. Four enumerators (including 1 anthropometrist) were selected from each district for data collection.
- Primary data collection took place from 21 May to 11 June 2025. Various secondary data sources and field observations were used to contextualise the analysis and reporting.

Methodology – Assessment Process



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 8 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 15 households per EA (village).
- At least 300 households were sampled per district. A total of 2402 households were interviewed.
- 8 Rural District Development Committee Focus Group Discussions and 10 Community Focus Group Discussions were held across all the districts.

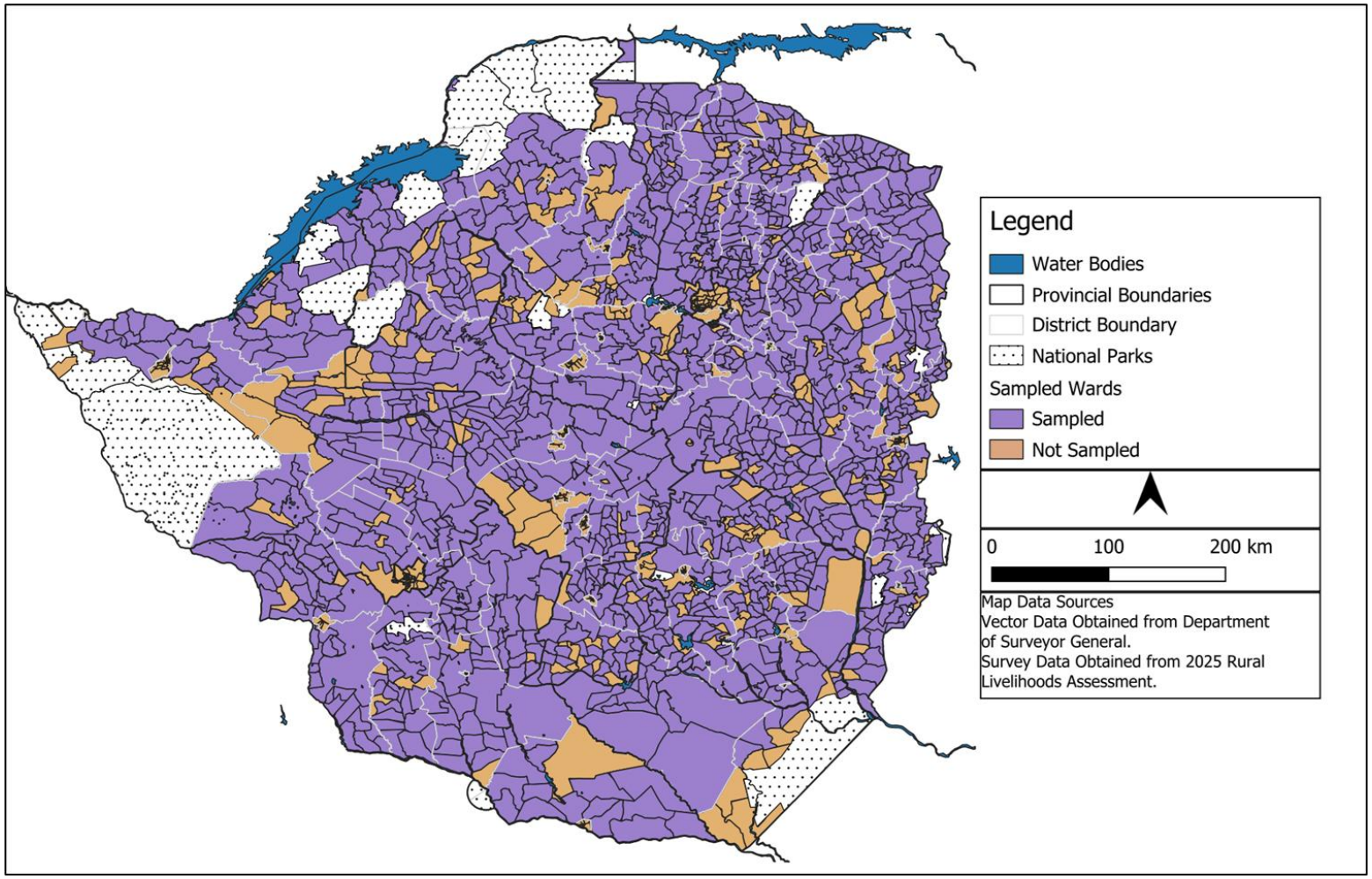
District	Households
Chirumhanzu	302
Gokwe North	300
Gokwe South	301
Gweru	300
Kwekwe	299
Mberengwa	300
Shurugwi	300
Zvishavane	300
Midlands	2402

Methodology- Sampling and Sample Size for Nutrition Outcomes

- All members in the households were considered for anthropometric measurements, while adults were considered for non-communicable disease risk factors and individual diets targeted at women and children under 5 years.
- At least 450 households were sampled per district and a total of 3627 households were interviewed.

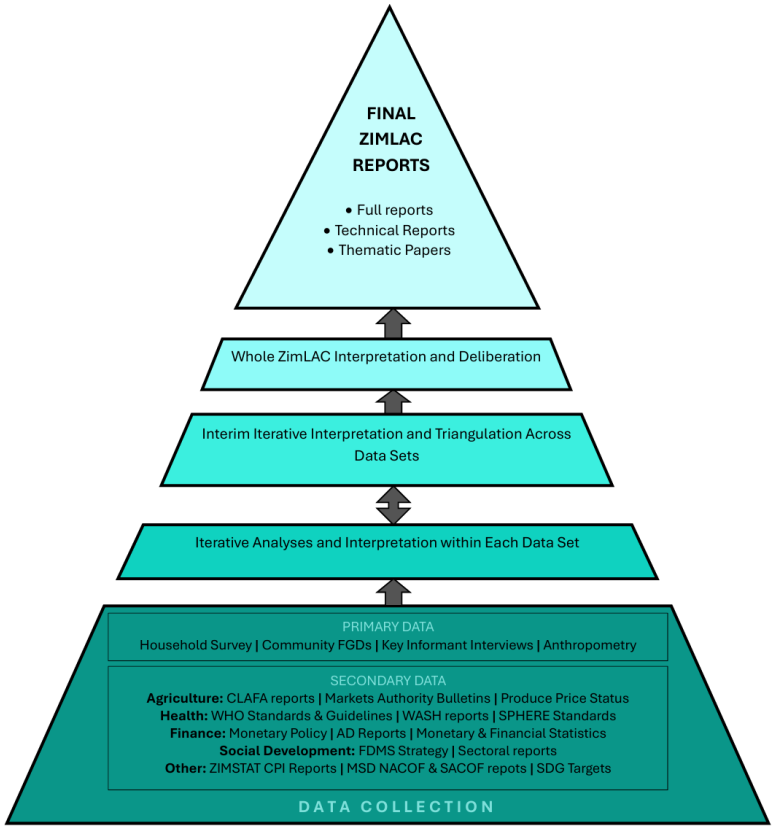
District	Households
Chirumhanzu	481
Gokwe North	456
Gokwe South	449
Gweru	452
Kwekwe	439
Mberengwa	447
Shurugwi	450
Zvishavane	453
Midlands	3627

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
- 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 2025 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

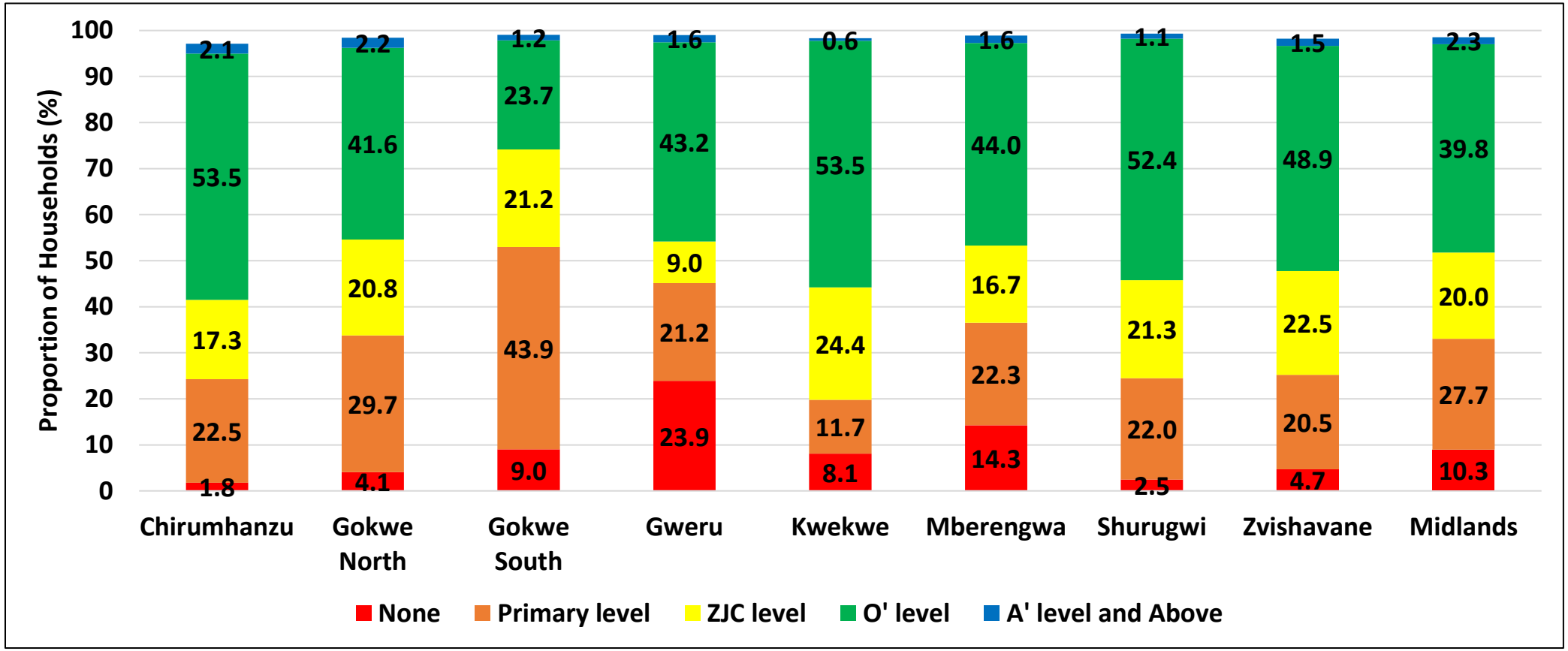
Household Characteristics

Characteristics of Respondents

Average Age of Respondent (Years)		Sex of Respondent	
		Male (%)	**Female (%)**
Chirumhanzu	47	34.4	65.6
Gokwe North	40	23.3	76.7
Gokwe South	45	19.6	80.4
Gweru	43	24.3	75.7
Kwekwe	39	21.4	78.6
Mberengwa	46	31.7	68.3
Shurugwi	49	33	67
Zvishavane	42	22.7	77.3
Midlands	**41**	**26.3**	**73.7**

- The average age of the respondents was 41 years.
- About (73.7%) of the respondents were female.

Education level of Respondent



- The respondents had attained some form of education.

Composition of Sampled Households

Average Household Size		Sex (%)		Household Members (%)						
		Male	Female	0 - 4 years	5 - 9 years	10 – 17 years	18 - 49 years	50 - 59 years	60 - 64 years	65+ years
Chirumhanzu	4	46.8	53.2	24.5	9.1	12.5	39.1	7.2	1.6	6.1
Gokwe North	4.3	46.1	53.9	30.3	8.6	12.8	38.1	4.4	1.3	4.5
Gokwe South	4.3	46.6	53.4	29.7	8.4	14.7	33.5	7.1	1.2	5.4
Gweru	4.8	45.7	54.3	23.0	12.8	16.7	34.9	5.0	1.8	5.7
Kwekwe	4.1	44.5	55.5	30.3	7.1	9.2	41.1	6.1	2.5	3.6
Mberengwa	4.1	44.3	55.7	29.8	7.3	13.3	35.5	5.9	1.9	6.4
Shurugwi	3.3	44.3	55.7	30.8	4.8	10.4	35.6	7.6	1.8	9.1
Zvishavane	4	42.2	57.8	33.9	8.5	8.8	37.5	4.8	1.4	5.2
Midlands	**4**	**45.2**	**54.8**	**28.7**	**8.5**	**12.6**	**36.8**	**6**	**1.7**	**5.7**

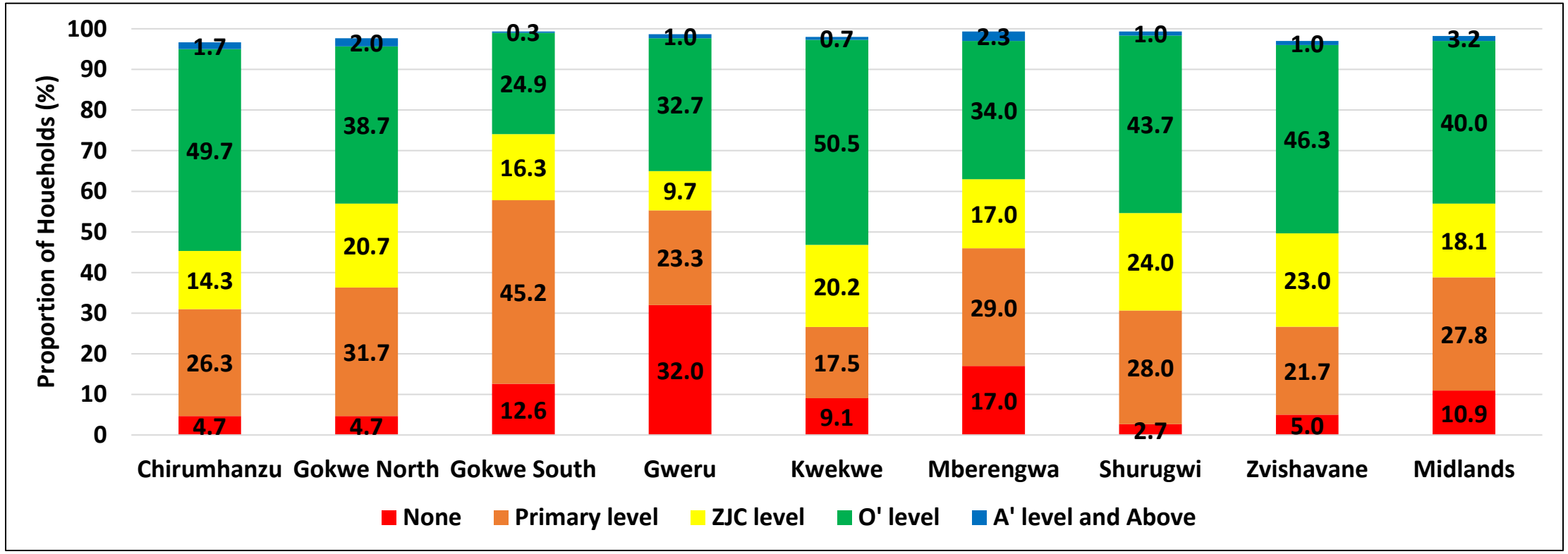
- The average household size was 4.
- Of the sampled population, (54.8 %) were female and (45.2 %) were male.

Characteristics of Household Head

	Household Head Average Age (Years)	Sex (%)		Household Head by Category (%)	
		Male	Female	Elderly Headed 65 Years and Above	Child Headed
Chirumhanzu	50.0	62.6	37.4	24.2	0.7
Gokwe North	42.0	64.7	35.3	13.3	0.0
Gokwe South	50.0	69.1	30.9	20.6	0.0
Gweru	46.5	64.7	35.3	23.3	0.0
Kwekwe	46.0	71.6	28.4	13.4	0.7
Mberengwa	48.5	60.0	40.0	24.7	0.0
Shurugwi	52.0	54.0	46.0	29.0	0.0
Zvishavane	43.0	49.7	50.3	18.7	0.0
Midlands	**47**	**62**	**38**	**20.9**	**0.2**

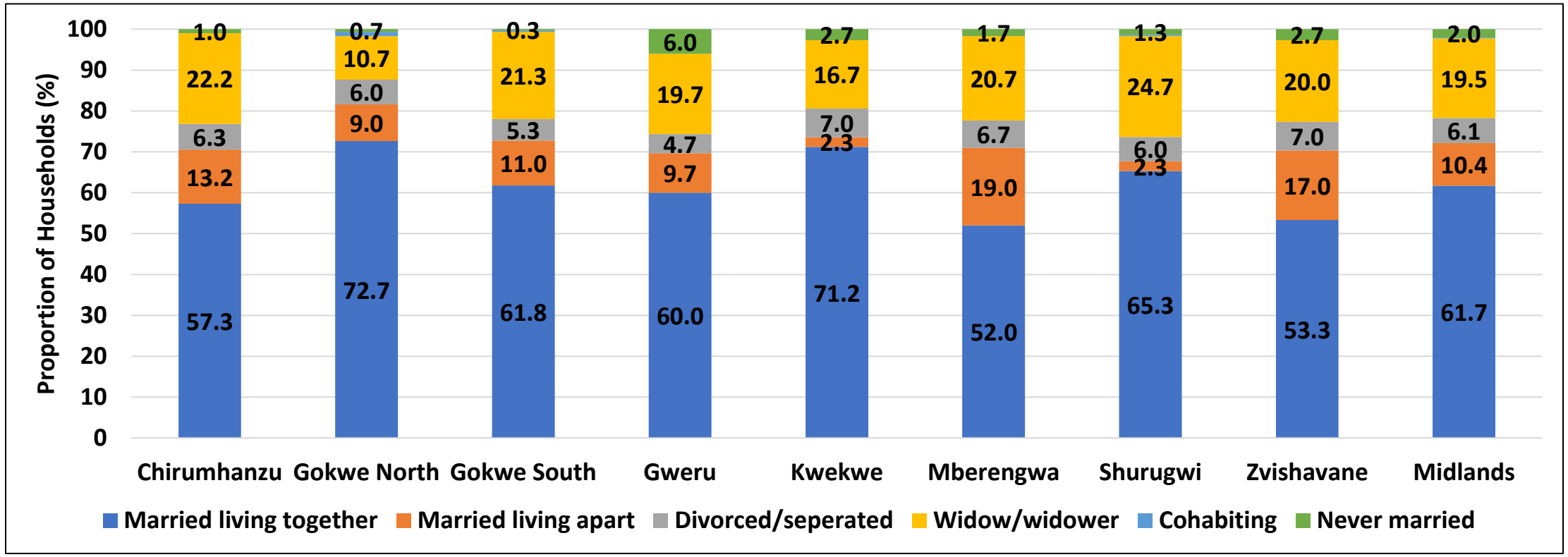
- The average age of household heads was 47 years.
- The highest proportion of households which were headed by the elderly was in Shurugwi (29%).

Characteristics of Household Head: Education Level Attained



- About (27.8%) of the household head had attained primary level education.

Characteristics of Household Head: Marital Status



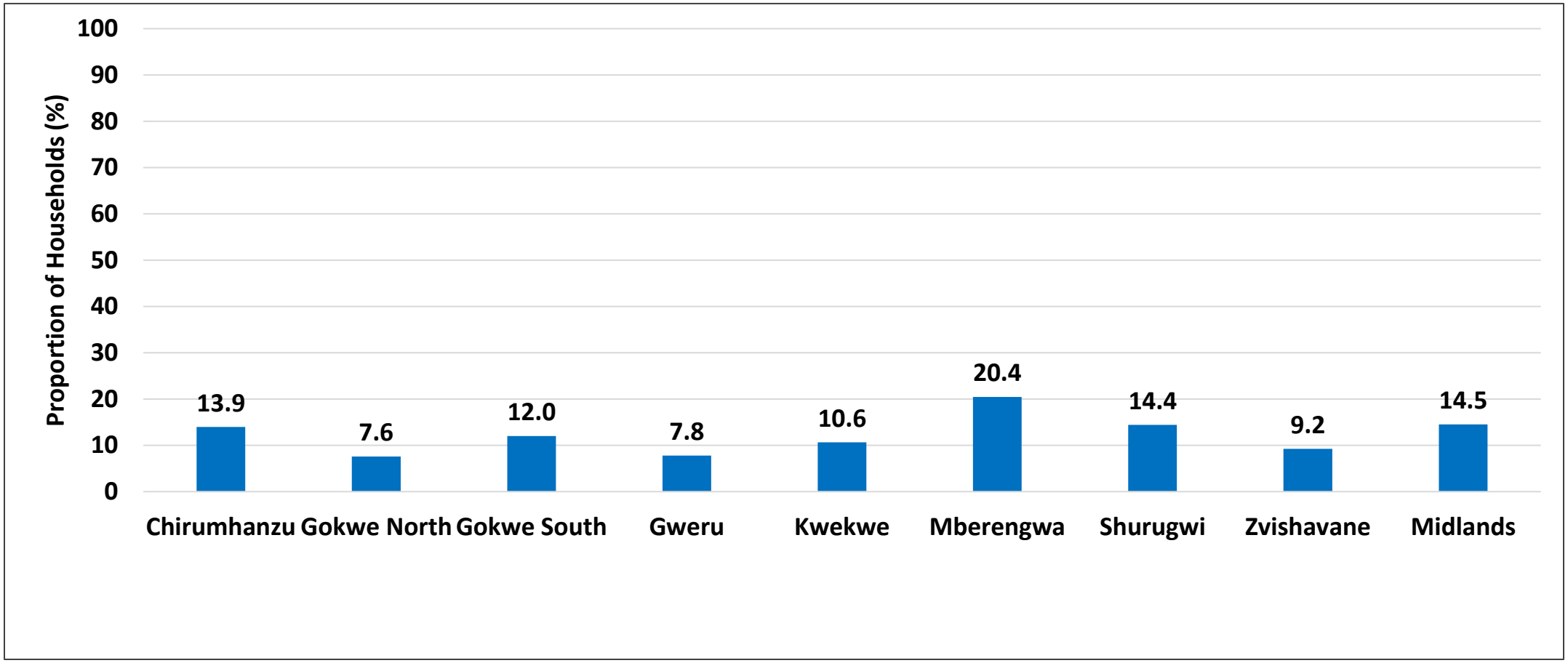
- The majority of the household heads (61.7%) were married and living together.
- Shurugwi (24.7%) and Chirumhanzu (22.2 %) had the highest proportion of household heads who were widowed.

Characteristics of Household Head: Religion

	Roman Catholic (%)	Protestant (%)	Pentecostal (%)	Apostolic Sect (%)	Zion (%)	Other Christian (%)	Islam (%)	Traditional (%)	Other religion (%)	No religion (%)
Chirumhanzu	37.1	3.3	8.6	35.8	5.3	0.0	0.0	0.0	0.7	9.3
Gokwe North	3.3	10.3	8.7	49.0	10.0	6.0	0.0	3.3	0.0	9.3
Gokwe South	8.6	15.3	7.0	43.2	7.6	0.0	0.0	0.0	0.0	18.3
Gweru	2.0	1.0	9.0	23.0	2.7	50.7	0.3	0.3	0.7	10.3
Kwekwe	9.4	14.4	10.0	28.1	3.3	4.3	0.7	0.7	1.3	27.8
Mberengwa	2.7	18.7	7.0	39.0	21.0	2.0	0.7	0.7	0.7	7.7
Shurugwi	9.3	1.3	4.7	30.0	5.7	33.0	0.0	0.7	4.7	10.3
Zvishavane	2.7	8.3	18.3	31.0	9.7	11.7	0.0	1.3	0.7	16.3
Midlands	**9.4**	**9.1**	**9.2**	**34.9**	**8.2**	**13.4**	**0.2**	**0.9**	**1.1**	**13.7**

- The majority of household heads were from the Apostolic Sect (34.9%) while (13.7%) of the household heads had no religion.

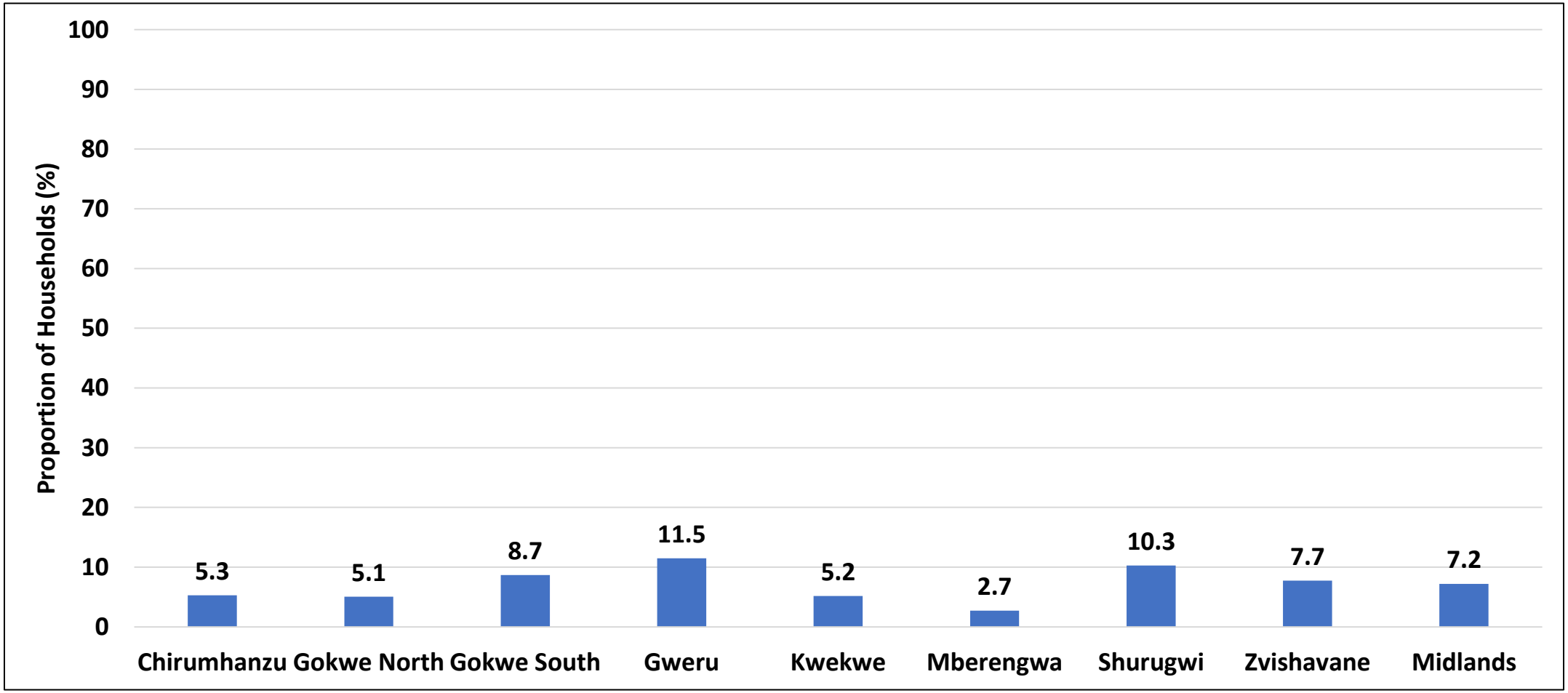
Orphaned Children



- The proportion of households with orphans was (14.5%).
- Mberengwa had the highest proportion of orphans (20.4%).

Chronic Conditions

Chronic Conditions



- The proportion of households with at least a member who had a chronic condition was 7.2%.

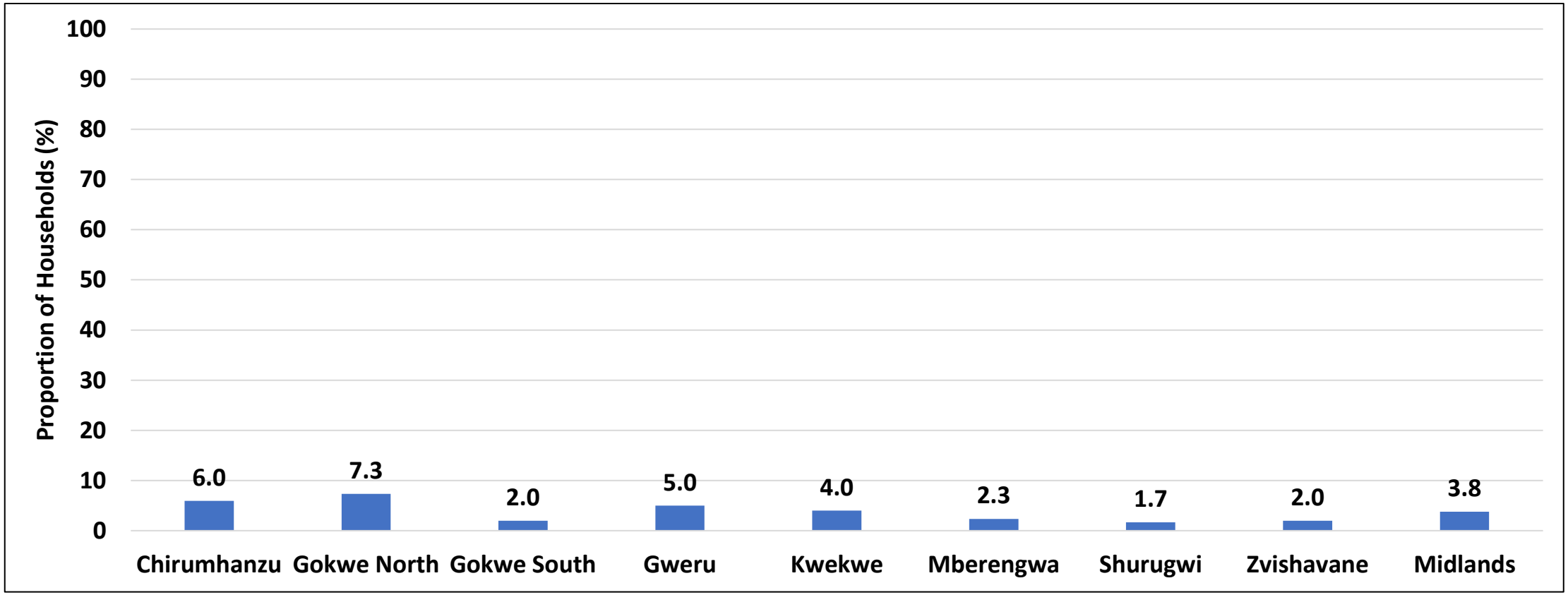
Chronic Conditions (7.2%)

	Chronic Condition												
	HIV infection, AIDS (%)	Heart disease (%)	Diabetes, high blood sugar (%)	Asthma (%)	Hypertension, High blood pressure (%)	Arthritis, chronic body pain (%)	Epilepsy, seizure , fits (%)	Stroke (%)	Cancer (%)	Tuberculosis (%)	Kidney diseases (%)	Ulcer, chronic stomach pain (%)	Other (%)
Chirumhanzu	1.1	0.4	1.4	0.2	2.1	0.4	0.2	0.1	0.1	0.1	0.0	0.3	0.0
Gokwe North	1.1	0.3	0.8	0.6	1.3	0.3	0.2	0.3	0.2	0.0	0.0	0.0	0.2
Gokwe South	3.2	0.2	1.6	0.4	2.4	0.6	0.3	0.2	0.0	0.1	0.2	0.0	0.2
Gweru	4.7	0.4	1.9	0.5	4.5	0.9	0.0	0.1	0.0	0.1	0.0	0.3	0.3
Kwekwe	1.2	0.2	1.7	0.1	1.4	0.1	0.1	0.1	0.3	0.2	0.0	0.0	0.2
Mberengwa	0.8	0.0	0.4	0.0	0.4	0.6	0.0	0.2	0.2	0.0	0.0	0.0	0.1
Shurugwi	4.3	0.6	1.9	0.8	3.8	0.1	0.0	0.2	0.0	0.0	0.1	0.0	0.2
Zvishavane	2.4	0.3	1.7	0.8	1.4	0.0	0.0	0.0	0.3	0.1	0.1	0.7	0.1
Midlands	**2.4**	**0.3**	**1.4**	**0.4**	**2.3**	**0.4**	**0.1**	**0.1**	**0.1**	**0.1**	**0.0**	**0.2**	**0.2**

- HIV infections/AIDS (2.4%) and hypertension (2.3%) were the most chronic conditions reported.

Disability

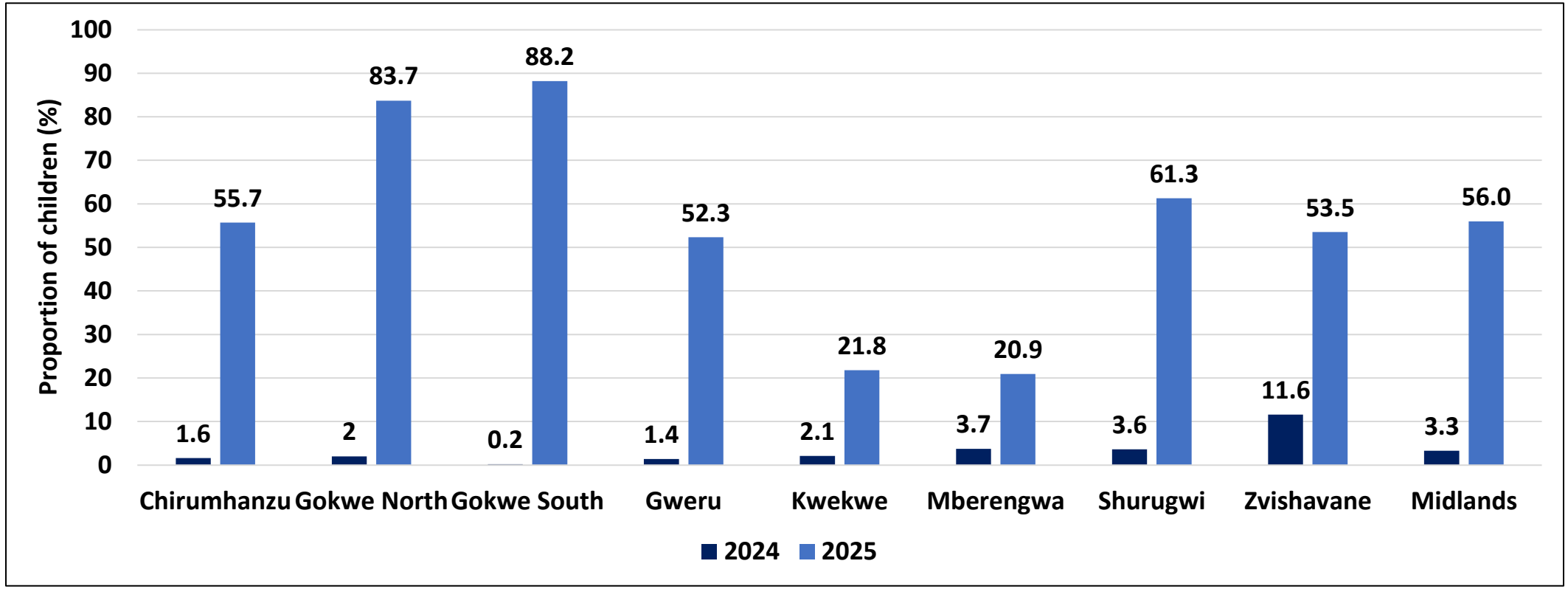
Disability Conditions



- The proportion of households with at least one person with any form of disability was 3.8%.
- Gokwe North (7.3%) had the highest proportion of households with at least one person with any form of disability.

Education

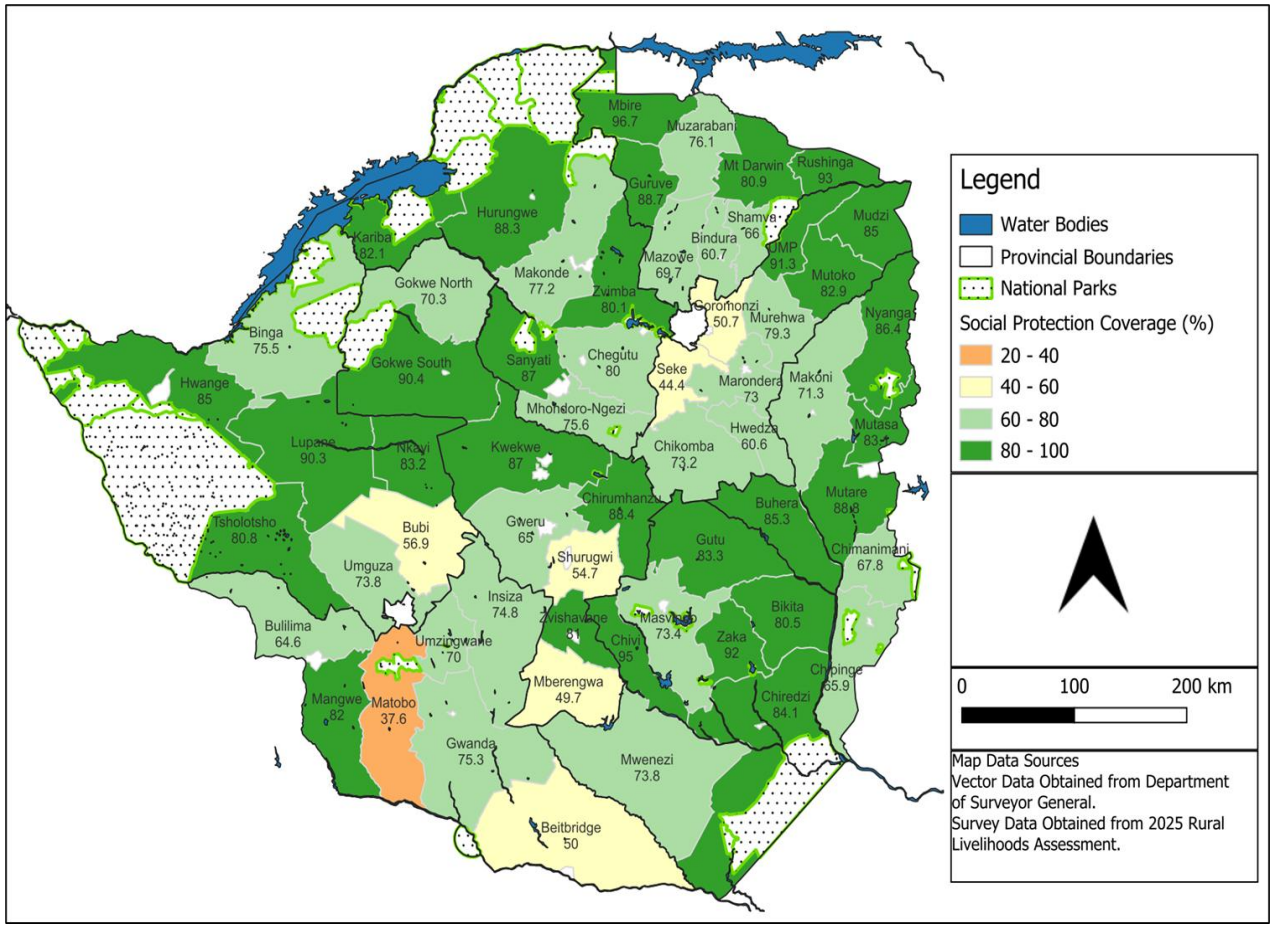
Proportion of Children Receiving Hot Meals at School



- There has been an improvement in the proportion of children who received a hot meal at school during the first term of the term of the year from 3.3% in 2024 to 56% in 2025.
- The highest proportion of children who received a hot meal were in Gokwe North (83.7%) and Gokwe South (88.2%).

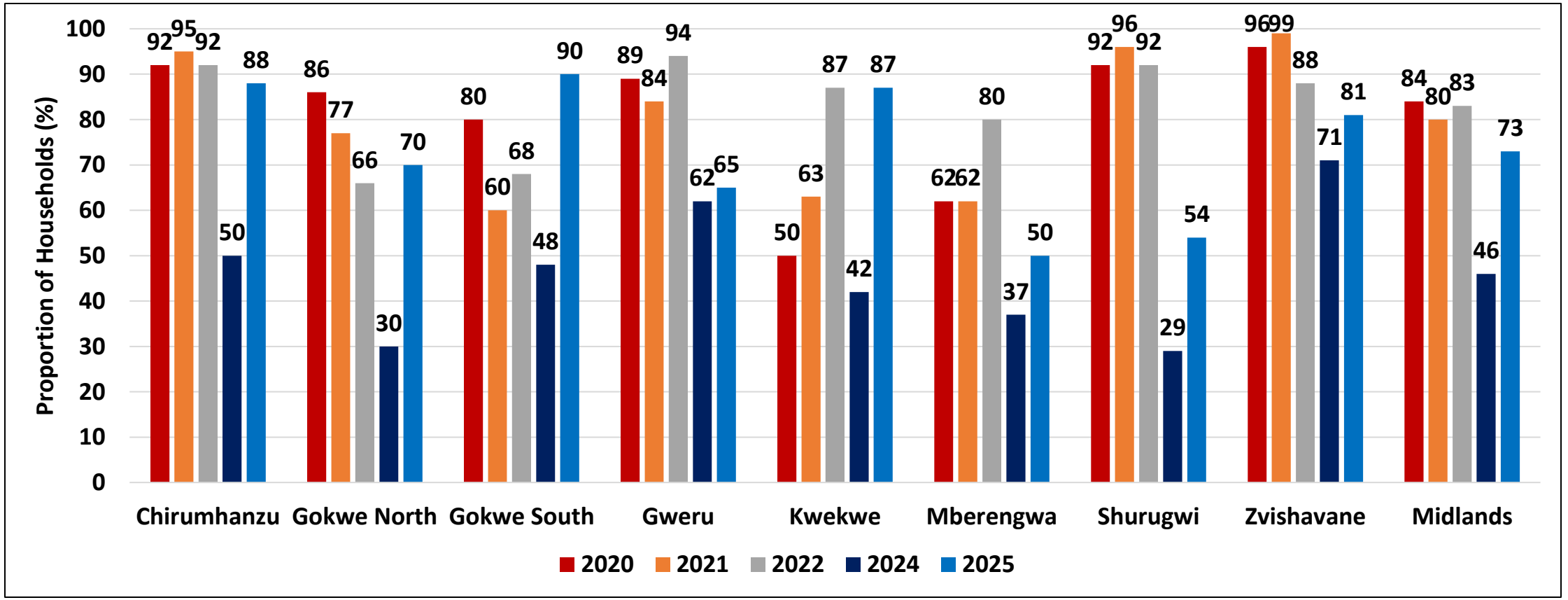
Social Protection

Households which Received Any Form of Support



- Gokwe South (90.4%) had the highest proportion of households that received any form of support, Mberengwa (49.7%) had the least.

Households Which Received Any Form of Support



- Support increased from 46% in 2024 to 73% in 2025. This may be attributed to the need to respond to the El- Nino induced drought which was experienced in the 2024/2025 season.

Sources of Support

	Government Support (%)		UN/NGO Support (%)		Church Support (%)		Urban Relatives (%)		Rural Relatives (%)		Diaspora Relatives (%)		Mutual Groups Support (%)	
	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025
Chirumhanzu	46	81	1	0	0	0	2	41	1	39	1	39	0	0
Gokwe North	30	54	0	6	0	1	0	14	0	24	0	4	0	1
Gokwe South	45	76	1	59	1	5	1	19	0	19	2	4	0	1
Gweru	58	63	5	9	2	1	4	4	3	8	1	4	1	0
Kwekwe	40	83	1	9	1	2	4	6	0	7	1	4	0	1
Mberengwa	34	33	2	12	1	1	3	6	1	20	2	2	1	0
Shurugwi	29	44	0	23	0	1	1	21	1	25	2	5	0	2
Zvishavane	66	74	12	17	0	1	13	19	5	31	7	8	0	0
Midlands	**43**	**64**	**3**	**17**	**1**	**2**	**4**	**16**	**1**	**22**	**2**	**9**	**0**	**1**

- The Government remained the major source of support which increased from 43% in 2024 to 64 % in 2025.

Forms of Support from Government

	Food (%)	Cash transfers (%)	Vouchers (%)	Crop inputs (%)	Large stock (pass on) (%)	Large stock (non-pass on) (%)	Small livestock support (%)	Other livestock support (%)	WASH inputs (%)	Weather and climate (%)
Chirumhanzu	76.2	1	0.7	61.9	0	0	0	0	0	0
Gokwe North	54	0	0	1.7	0	0	0	0	0	0
Gokwe South	27.9	0	0	65.8	0.3	16.3	0	12	1	0
Gweru	55.3	0	0.3	34.3	0	0.3	0	0.3	0.3	0.3
Kwekwe	78.9	6.7	1	38.5	0	0	0.3	0.7	1	0
Mberengwa	32.3	0	0	17	0.3	0	0.3	0	0	0
Shurugwi	28.7	0.7	0	32.3	0	0.7	0	0	0.3	1.7
Zvishavane	66.7	1.3	1.3	41.7	0	0	0	1	0	0.3
Midlands	**52.5**	**1.2**	**0.4**	**36.7**	**0.1**	**2.2**	**0.1**	**1.7**	**0.3**	**0.3**

- The major forms of support received by households from Government were food (52.5%) and crop inputs (36.7*%).*
- Food support from the Government was high in Kwekwe (78.9%) and low in Gokwe South (27.9%).

Forms of Support from UN/NGOs

	Food (%)	Cash transfers (%)	Vouchers (%)	Crop inputs (%)	Large stock (pass on) (%)	Large stock (non-pass on) (%)	Small livestock support (%)	Livestock support: Teak grease (%)	Other livestock support (%)	WASH inputs (%)	Weather and Climate (%)
Chirumhanzu	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gokwe North	3.0	0.0	2.0	0.0	0.0	0.0	0.0	0.0	0.3	0.3	0.3
Gokwe South	58.8	0.0	0.0	1.0	0.0	0.0	0.0	0.7	0.0	0.0	0.0
Gweru	7.7	0.3	0.0	0.7	0.0	0.0	0.3	0.0	0.0	0.0	0.0
Kwekwe	6.7	0.3	2.0	0.7	0.0	0.0	0.0	0.0	0.3	1.7	0.0
Mberengwa	11.7	0.0	1.0	1.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Shurugwi	23.3	0.0	0.0	1.3	0.0	0.3	0.0	0.0	0.0	0.0	0.3
Zvishavane	15.7	0.7	1.0	8.3	0.3	0.0	0.0	0.0	0.0	0.0	0.0
Midlands	**15.9**	**0.2**	**0.7**	**1.7**	**0.0**	**0.0**	**0.0**	**0.1**	**0.1**	**0.2**	**0.1**

- Households received support from UN/NGOs in the form of food assistance (15.9%) and crop inputs (1.7%).

Migration

Types of Migration

	Migrated to Urban Areas from Rural Areas (%)	Joined from Other Rural Areas (%)	Joined from Urban Areas (%)	Joined from outside Zimbabwe (%)	Migrated to Stay Outside Zimbabwe (%)
Chirumhanzu	43.4	1.0	1.0	1.7	31.1
Gokwe North	9.7	1.3	2.3	0.3	2.3
Gokwe South	9.6	0.7	2.0	0.0	2.7
Gweru	9.3	0.7	3.3	0.3	5.0
Kwekwe	8.7	1.7	4.0	0.7	1.7
Mberengwa	6.0	1.0	0.7	0.7	1.7
Shurugwi	7.7	0.0	1.3	0.0	1.3
Zvishavane	8.7	0.7	1.7	0.3	3.3
Midlands	**12.9**	**0.9**	**2.0**	**0.5**	**6.2**

- The main type of migration reported was migration to urban areas from rural areas (12.9%).

Reasons for Migrating to Urban Areas

	Better livelihood options (%)	Employment opportunities (%)	New job (%)	Newly acquired residential land (%)	Request by a relative (%)	Educational purposes (%)	Access to better standards of living (health, WASH, electricity) (%)	Marriage (%)	Business opportunity (%)	Illness (%)	Other (%)
Chirumhanzu	0.0	38.1	0.7	0.0	2.6	1.3	0.0	0.3	0.3	0.3	0.0
Gokwe North	0.3	7.0	0.0	0.0	0.0	0.7	0.0	0.7	0.0	0.3	0.7
Gokwe South	0.7	7.0	0.3	0.0	0.7	0.0	0.0	0.3	0.3	0.0	0.3
Gweru	0.0	8.0	0.7	0.0	0.3	0.0	0.0	0.3	0.0	0.0	0.0
Kwekwe	3.7	5.4	1.7	0.3	1.0	1.0	0.0	0.0	0.0	0.0	0.3
Mberengwa	3.0	4.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Shurugwi	0.3	3.3	2.7	0.0	0.7	0.3	0.0	0.7	0.0	0.0	0.3
Zvishavane	0.7	7.7	3.3	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0
Midlands	**1.1**	**10.1**	**1.2**	**0.0**	**0.7**	**0.4**	**0.0**	**0.3**	**0.1**	**0.1**	**0.2**

- The main reason for rural to urban migration was reported to be employment opportunities (10.1%).

Reasons for Migrating Outside Zimbabwe

	Employment (%)	Access to education (%)	Better standards of living (%)	Assist with caring of relative children (%)	Seek for medical treatment (%)	Marriage (%)	Other livelihood opportunities (%)
Chirumhanzu	29.5	0	0	0	0	2	0
Gokwe North	2.0	0	0	0	0	0	0.3
Gokwe South	2.7	0	0	0	0	0	0
Gweru	4.3	0	0.3	0	0	0.3	0
Kwekwe	1	0.3	0	0	0	0	0
Mberengwa	1.7	0	0	0	0	0	0
Shurugwi	1	0	0.3	0	0	0	0
Zvishavane	3.3	0	0.3	0	0	0	0
Midlands	**5.7**	**0**	**0.1**	**0**	**0**	**0.3**	**0**

- The major reason for migrating outside Zimbabwe was employment (5.7%).

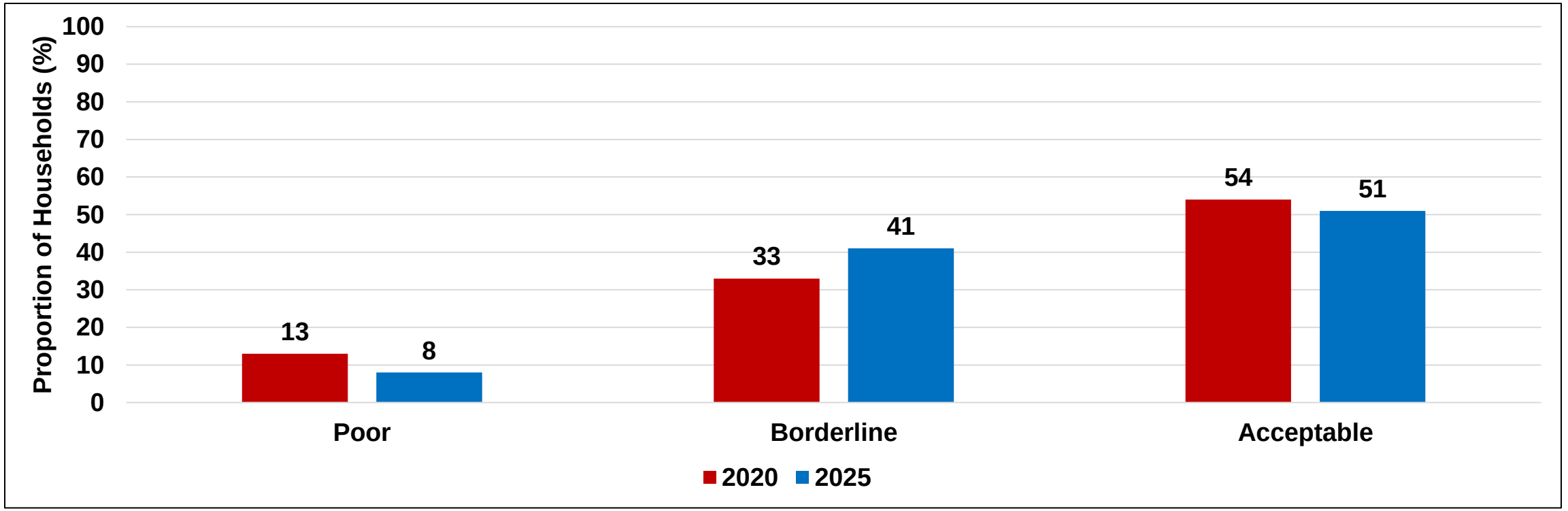
Household Consumption Patterns

Food Consumption Score (FCS)

Food Consumption Score (FCS)

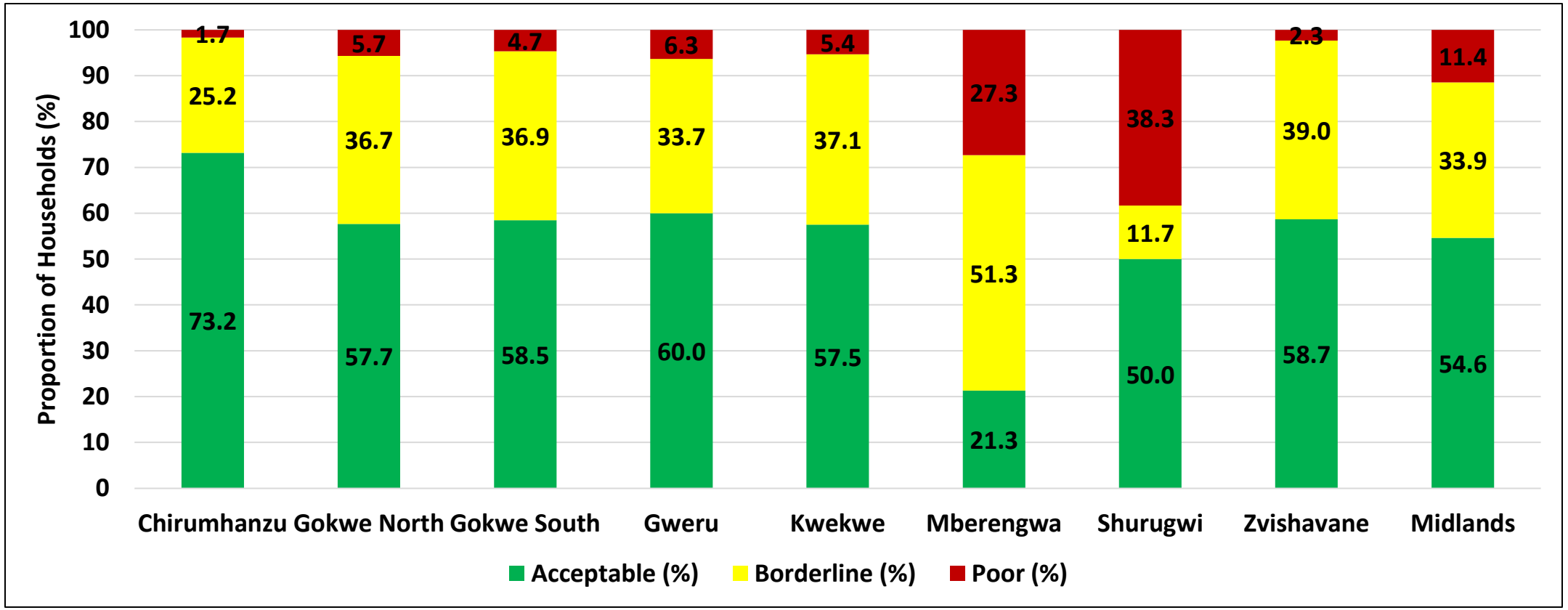
Food Consumption Score Groups	Score	Description
Poor	0-21	An expected consumption of staple 7 days, vegetables 5-6 days, sugar 3-4 days, oil/fat 1 day a week, while animal proteins are totally absent
Borderline	21.5-35	An expected consumption of staple 7 days, vegetables 6-7 days, sugar 3-4 days, oil/fat 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 Trend



- There was a decrease in the proportion of households with acceptable food consumption from 2020 (54%) to 2025 (51%).
- The proportion of households which consumed poor diets decreased from 13% in 2020 to 8% in 2025.
- This reflects a decrease in the quality of diets being consumed by rural households.

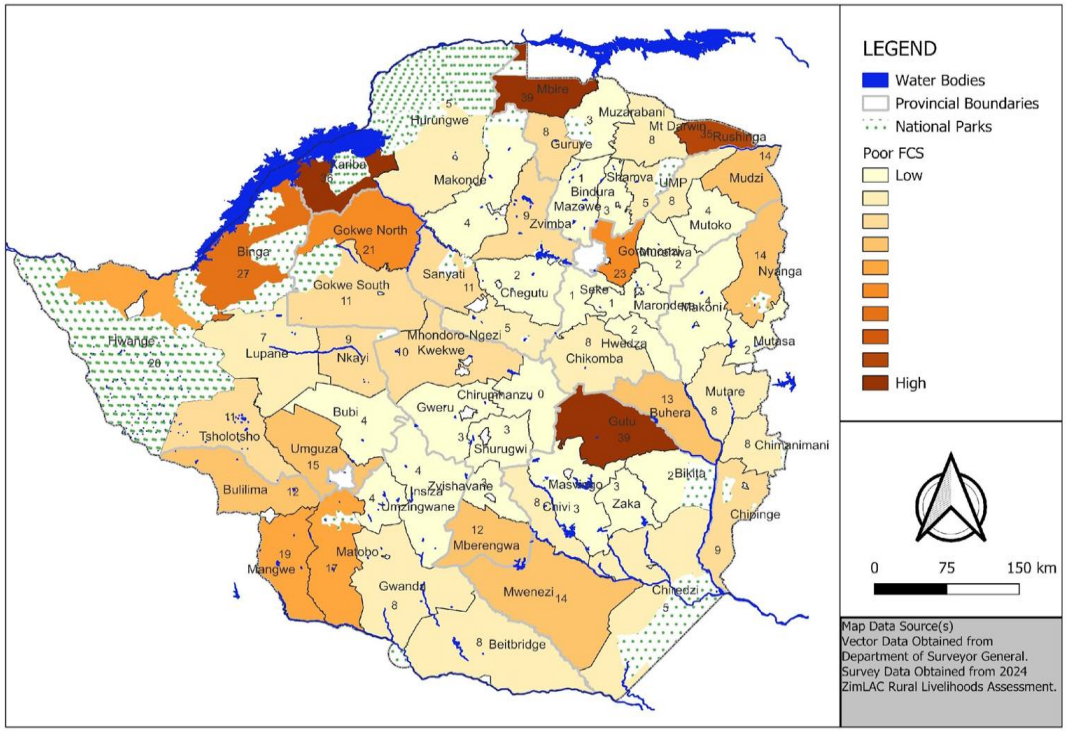
Food Consumption Patterns



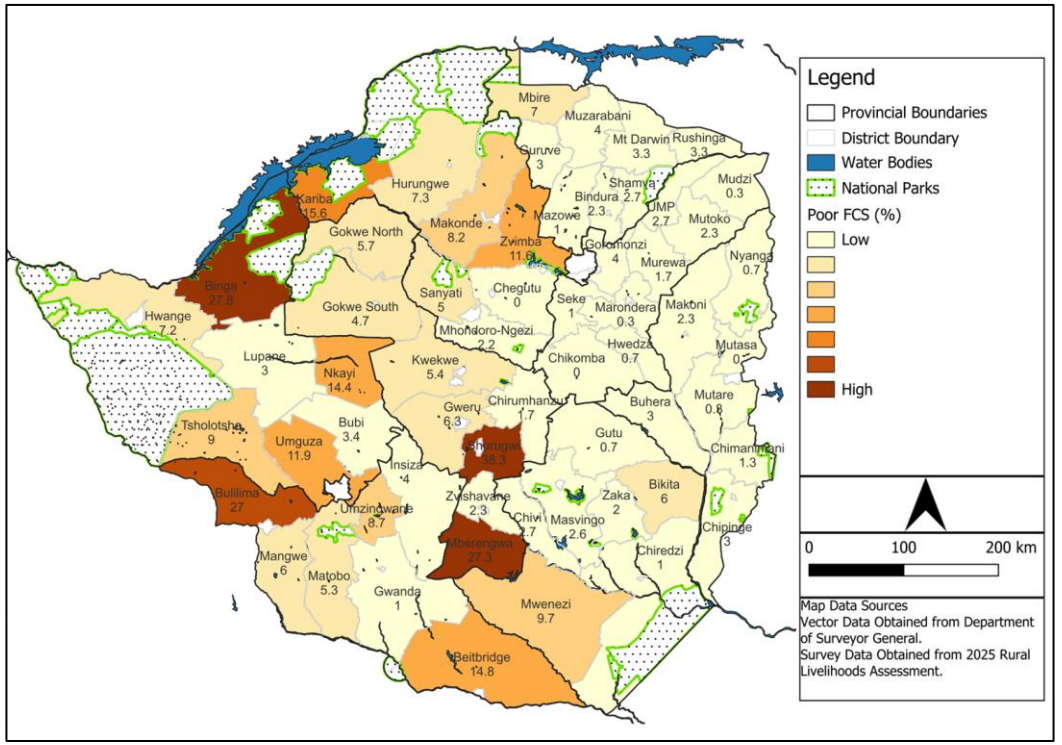
- About 11.4 % of households had poor consumption patterns.
- Shurugwi (38.3%) had the highest proportion of households with poor consumption patterns.

Poor Food Consumption Patterns by District

2024



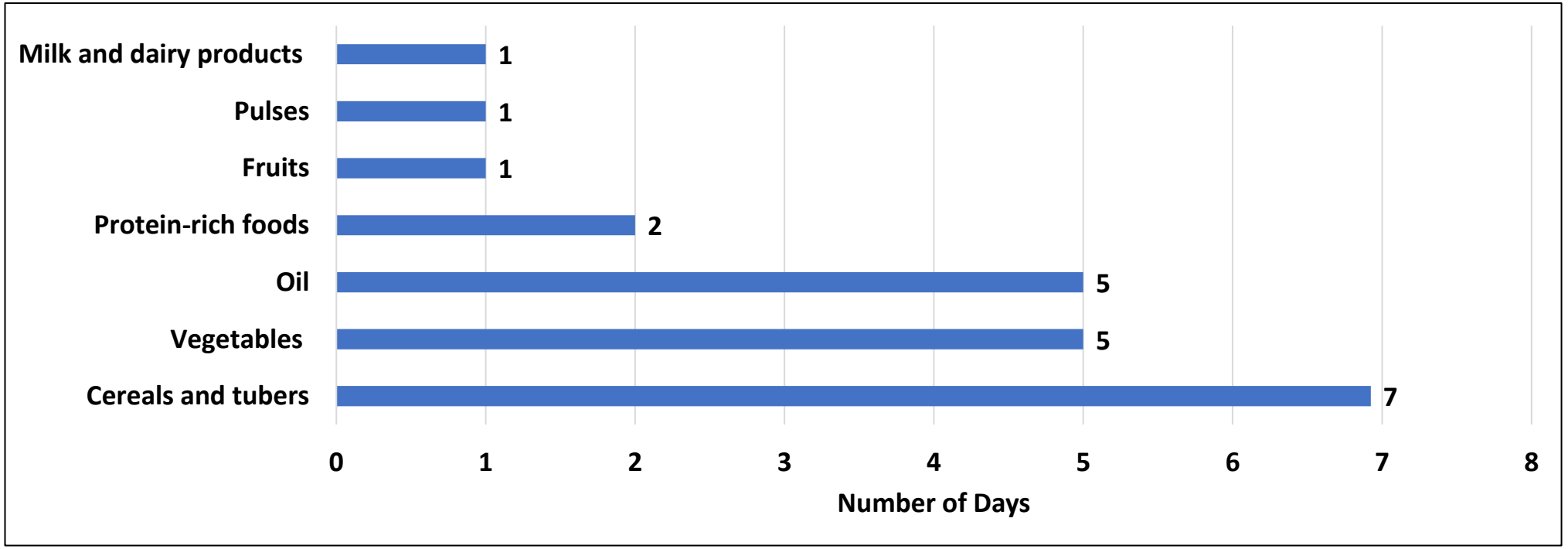
2025



- The proportion of households with poor food consumption decreased in most districts in 2025 when compared to 2024.

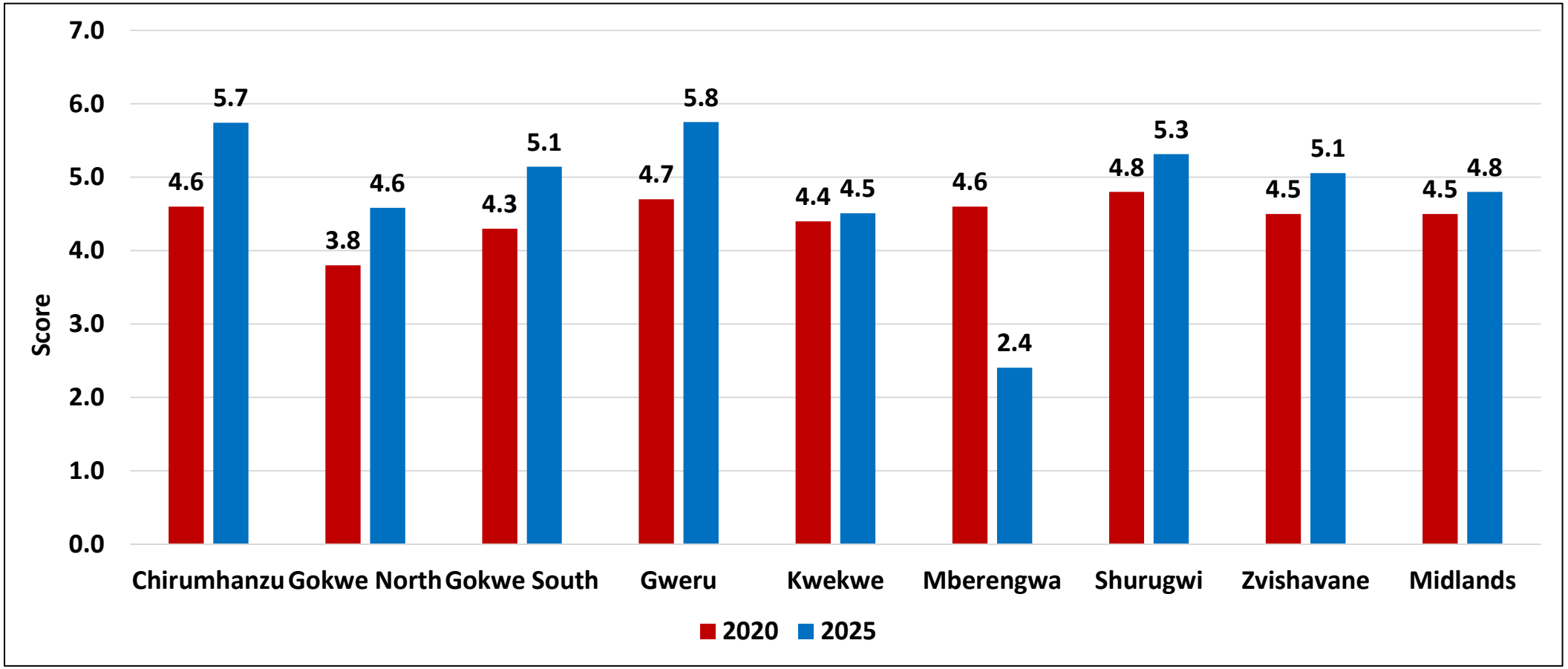
Household Dietary Diversity

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



- Cereals, vegetables and oil have remained the most frequently consumed foods.
- Milk and dairy products and pulses have been the least consumed food items.

Average Household Dietary Diversity Score



- There was a marginal improvement in the dietary diversity score from 4.5 in 2020 to 4.8 in 2025.
- Gweru (5.8) and Chirumhanzu (5.7) had the highest household diversity score in the province whilst Mberengwa (2.4) had the lowest.

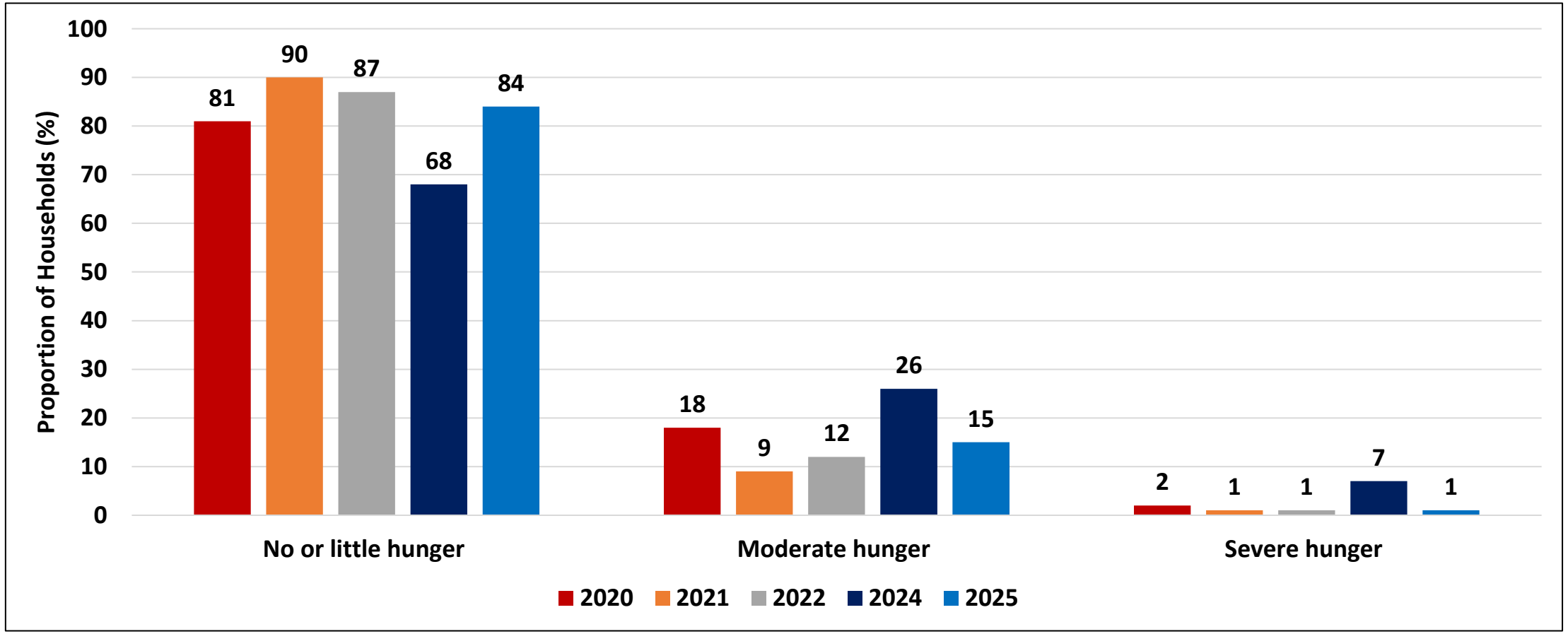
HDDS by Food Groups

	Cereals (%)	Tubers (%)	Pulses (%)	Dairy products (%)	Meat (%)	Fish (%)	Eggs (%)	Vegetables (%)	Fruits (%)	Oil (%)	Sugar (%)	Condiments (%)
Chirumhanzu	97.6	48.0	53.0	46.2	52.4	22.2	49.7	92.0	40.2	96.8	72.7	97.5
Gokwe North	95.5	38.0	42.3	67.9	48.5	30.4	16.2	86.9	80.9	92.1	66.7	86.2
Gokwe South	97.3	55.6	50.2	67.8	37.3	14.8	35.7	90.2	44.0	93.1	63.5	93.7
Gweru	98.3	67.7	69.4	72.9	73.0	26.1	42.9	99.0	66.0	97.6	93.0	98.2
Kwekwe	88.7	37.3	32.0	26.3	52.2	28.6	27.4	75.0	40.7	87.0	64.4	78.5
Mberengwa	54.4	31.0	45.2	37.8	29.0	23.5	53.1	65.7	20.7	75.9	67.0	52.4
Shurugwi	89.9	68.4	56.8	74.5	67.5	18.9	42.4	94.0	70.4	100.0	79.0	94.7
Zvishavane	97.3	38.8	43.8	53.5	44.7	16.9	31.8	96.9	43.4	98.3	89.6	94.2
Midlands	90.4	51.0	50.5	58.2	51.7	22.4	40.7	88.1	54.8	92.7	74.9	90.5

- Oils (92.7%),condiments (90.5%), cereals (90.4%) and vegetables (88.1)% were the most consumed food groups.
- Meat consumption was highest in Gweru (73%) and Shurugwi (67.5%).

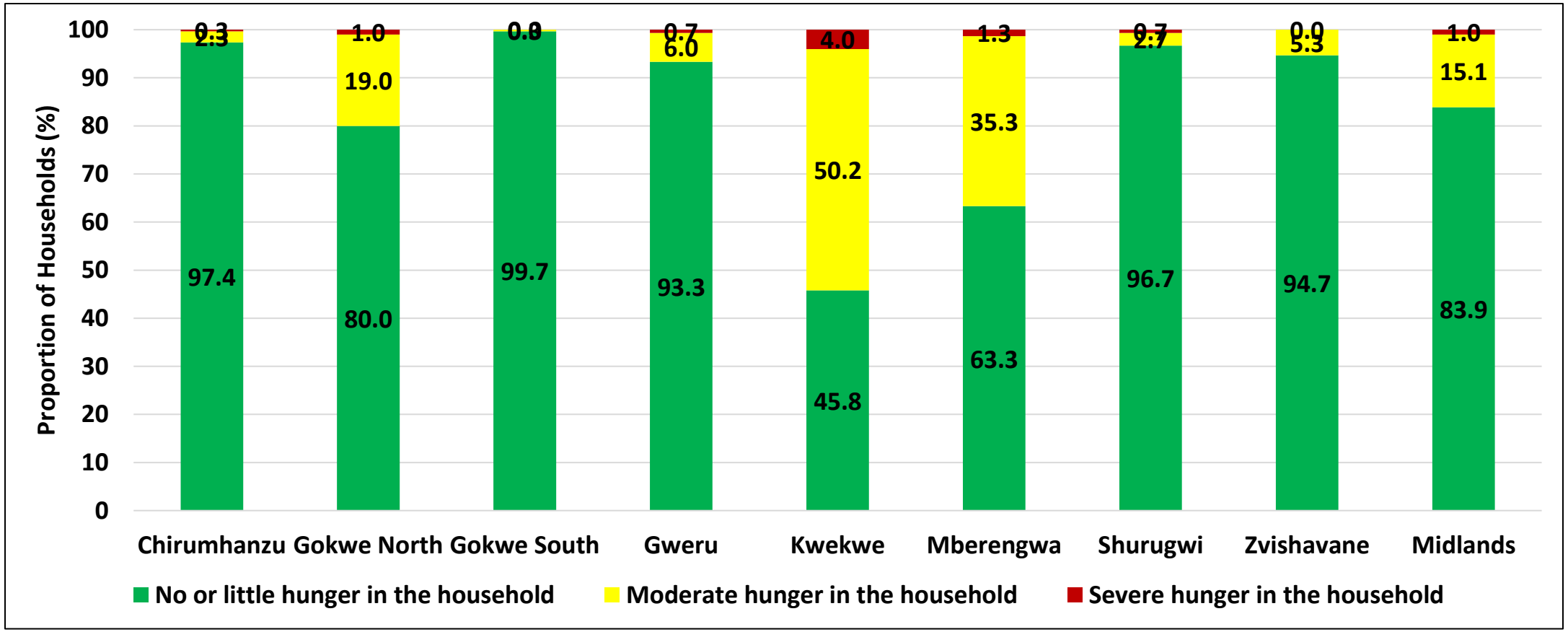
Household Coping

Household Hunger Scale



- The proportion of households which experienced no or little hunger increased from 68% in 2024 to 84% in 2025.

Household Hunger Scale



- Gokwe South (99.7%) had the highest proportion of households with no or little hunger whilst Kwekwe (4%) had the highest proportion of households with severe hunger.

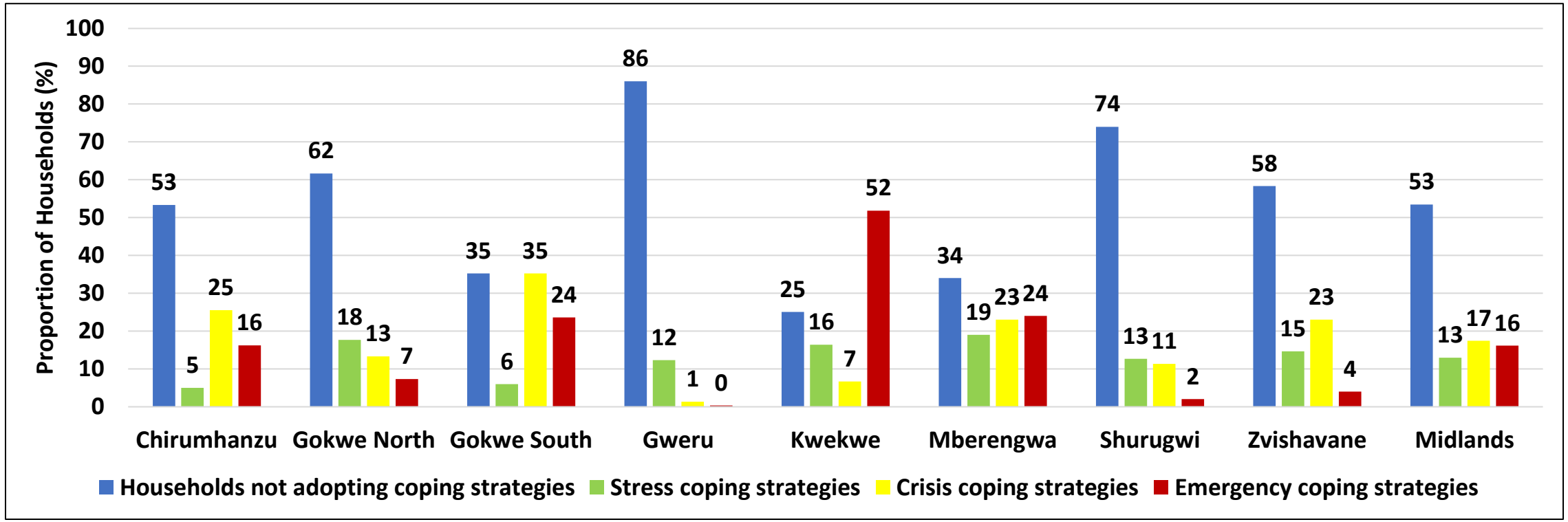
Livelihood Based Coping Strategy

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	• Sold household assets/goods (radio, furniture, television, jewellery etc.) • Sold more animals than usual • Spent savings • Borrowed money
Crisis	• Consumed seed stocks that were to be saved for the next season • Decreased expenditures on fertilizer, pesticide, fodder, animal feed, veterinary care, etc. • Harvest immature crops (e.g., green maize)
Emergency	• Mortgaged/sold the house where the household was permanently living or land • Begged (asked strangers for money/food) or scavenged • Sold last female (productive) animal

Households Maximum Livelihoods Coping Strategies



- About 16% of the households in the province were engaging in emergency coping strategies.
- Kwekwe (52%) had the highest proportion of households engaging in emergency coping strategies.

Food Safety

Importance of Food Labelling

Importance of Food Labelling

- Provides essential nutritional information (e.g., energy, fat, sugar, salt) to help make healthier choices.
- Lists ingredients and allergens, protecting consumers with dietary restrictions or food allergies.
- Shows expiry and manufacturing dates, helping avoid consumption of unsafe or expired products.
- Displays origin and manufacturer details, supporting traceability and product accountability.
- Indicates certifications and standards compliance (e.g., fortification logo, organic, Halal), ensuring quality and regulatory adherence.

Why Consumers Should Read Food Labels

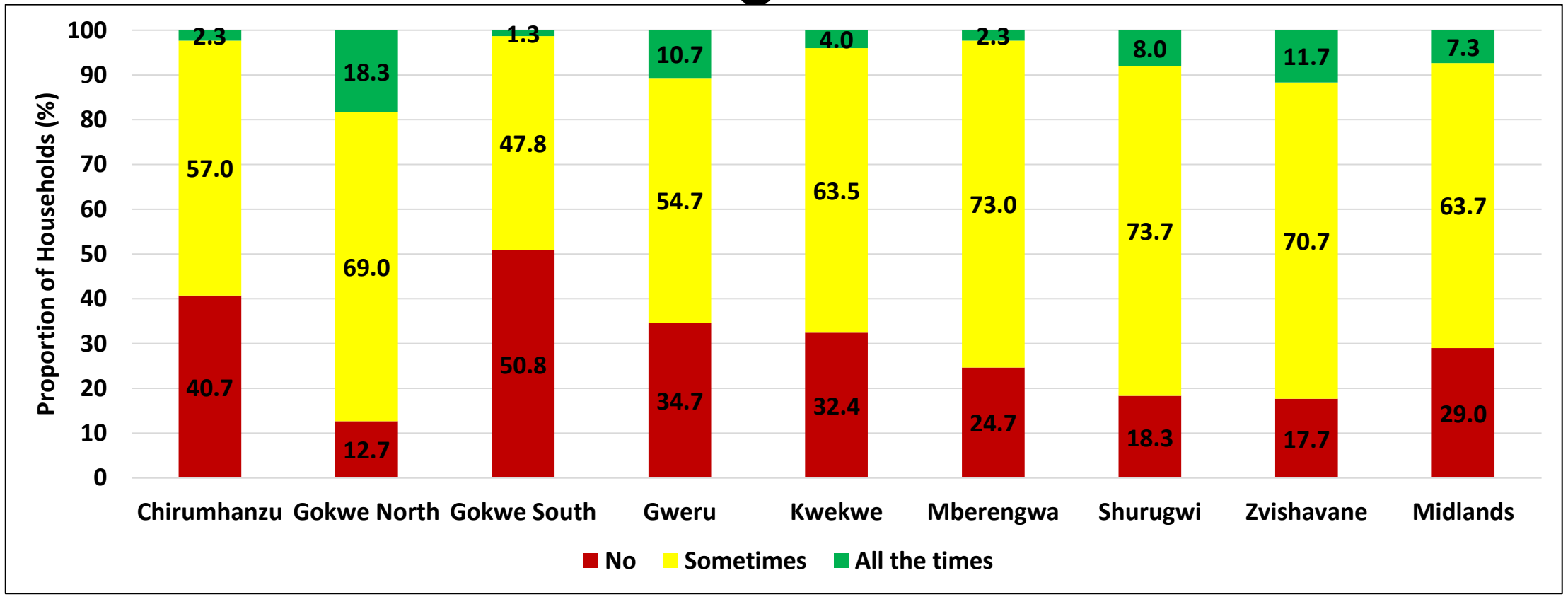
- Helps choose foods that align with health needs (e.g., diabetes, hypertension, child feeding).
- Avoids misleading claims (e.g., “sugar-free”, “natural”) by checking actual contents.
- Supports informed decisions on food value, cost-efficiency, and portion size.
- Protects against adverse reactions by identifying allergens (e.g., peanuts, gluten, sulphites).
- Empowers consumers to hold food producers accountable for food safety and nutrition quality.

Factors Considered by Households When Purchasing Food Items

	Brand/source (%)	Expiry /Best before date (%)	Nutritional content (%)	Storage instructions (%)	Other (%)	No other consideration (%)
Chirumhanzu	28.8	57.9	31.8	26.8	0.7	38.1
Gokwe North	43.3	78.0	31.7	20.7	3.0	6.0
Gokwe South	44.9	51.2	6.6	9.0	4.7	22.6
Gweru	30.3	73.7	11.3	2.7	1.7	10.7
Kwekwe	78.9	55.2	28.1	14.0	3.7	3.7
Mberengwa	16.3	46.0	9.0	4.0	4.0	49.0
Shurugwi	16.3	75.0	18.0	5.7	1.7	17.7
Zvishavane	52.7	82.0	20.7	1.0	0.3	10.0
Midlands	**38.9**	**64.9**	**19.7**	**10.5**	**2.5**	**19.7**

- Most households in Midlands (64.9%) reported to have considered expiry/best before date when purchasing food items.

Households Which Read Food Labels Before Purchasing Food Items



- Generally, across the province, most households reported to be reading food labels (63.7%) sometimes.
- In Gokwe South, 50.8% of the households reported not to be reading food labels before purchasing food items.

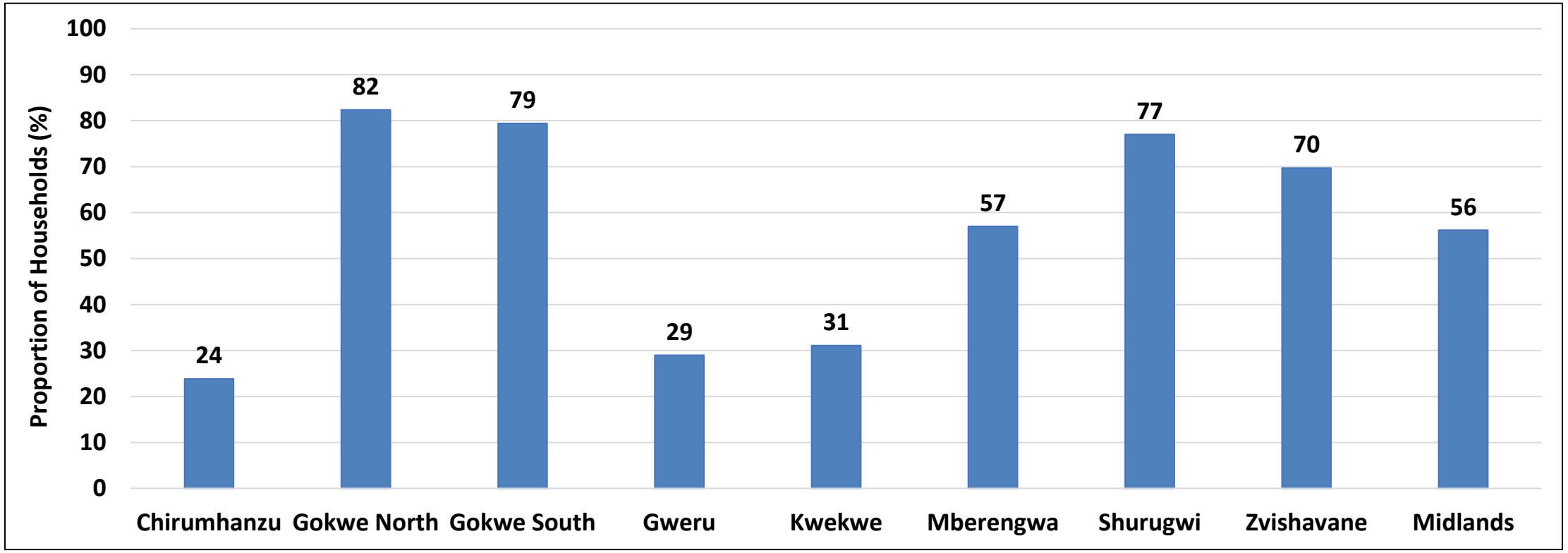
Importance of Observing Pre-Harvest Intervals (PHIs) on Pesticides

- The Pre-Harvest Interval (PHI) is the minimum number of days that must pass between the last pesticide application and the harvesting of fruits or vegetables. This allows pesticide residues to degrade to safe levels before the crop is consumed.

Importance of Observing PHI

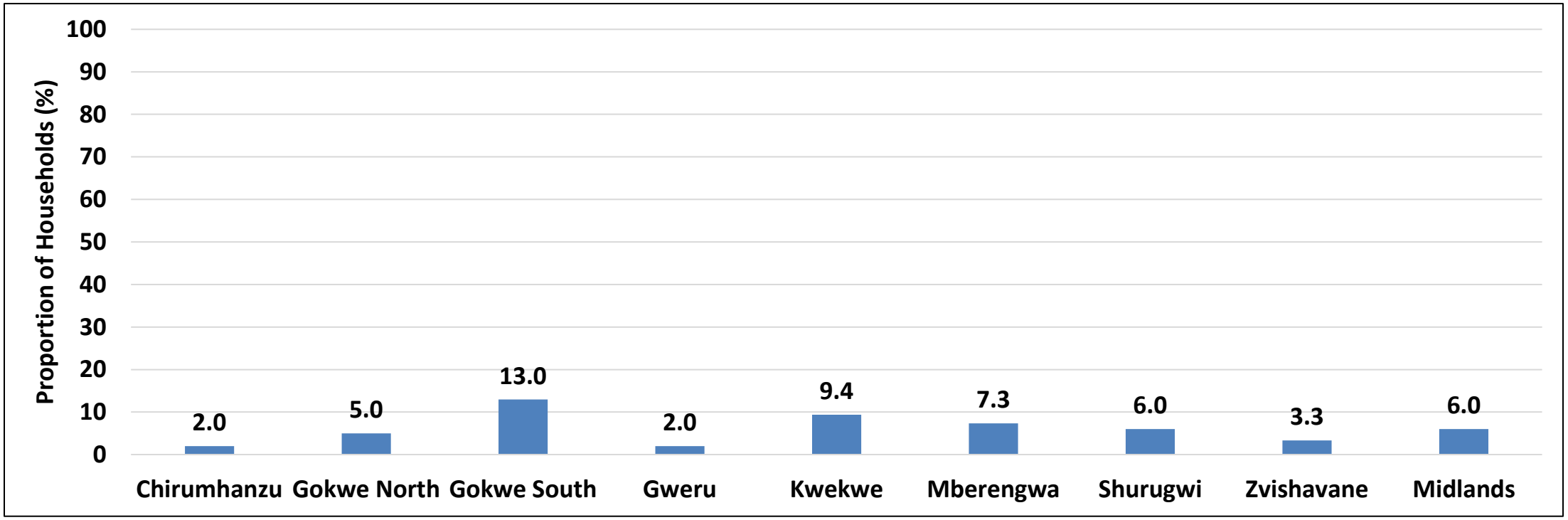
- Protects consumer health by preventing exposure to harmful pesticide residues that can cause acute poisoning, cancer or reproductive issues.
- Reduces residue levels to within acceptable safety limits set by regulatory authorities (e.g., WHO, FAO, Codex).
- Supports food safety and quality, ensuring that fruits and vegetables meet national standards and retain consumer trust.
- Preserves export markets by complying with international residue limits (Maximum Residue Limits – MRLs).
- Promotes responsible farming by reinforcing good agricultural practice.

Knowledge on Fruits and Vegetables Sprayed with Pesticides



- About 56% of the households reported that they had knowledge about the pre-harvest interval to be observed after spraying fruits and vegetables with pesticides.

Consumption of Vegetables or Fruits that were Sprayed with Pesticides



- About 6% of the households reported consuming vegetables or fruits before the recommended pre-harvest interval after pesticide application.

Importance of Observing Withdrawal Periods on Antibiotics in Livestock

- The withdrawal period is the minimum time that must pass between the last antibiotic treatment of an animal and the slaughter or harvesting of animal products (milk, eggs, meat) to ensure no harmful drug residues remain.

Importance of Observing Withdrawal Periods

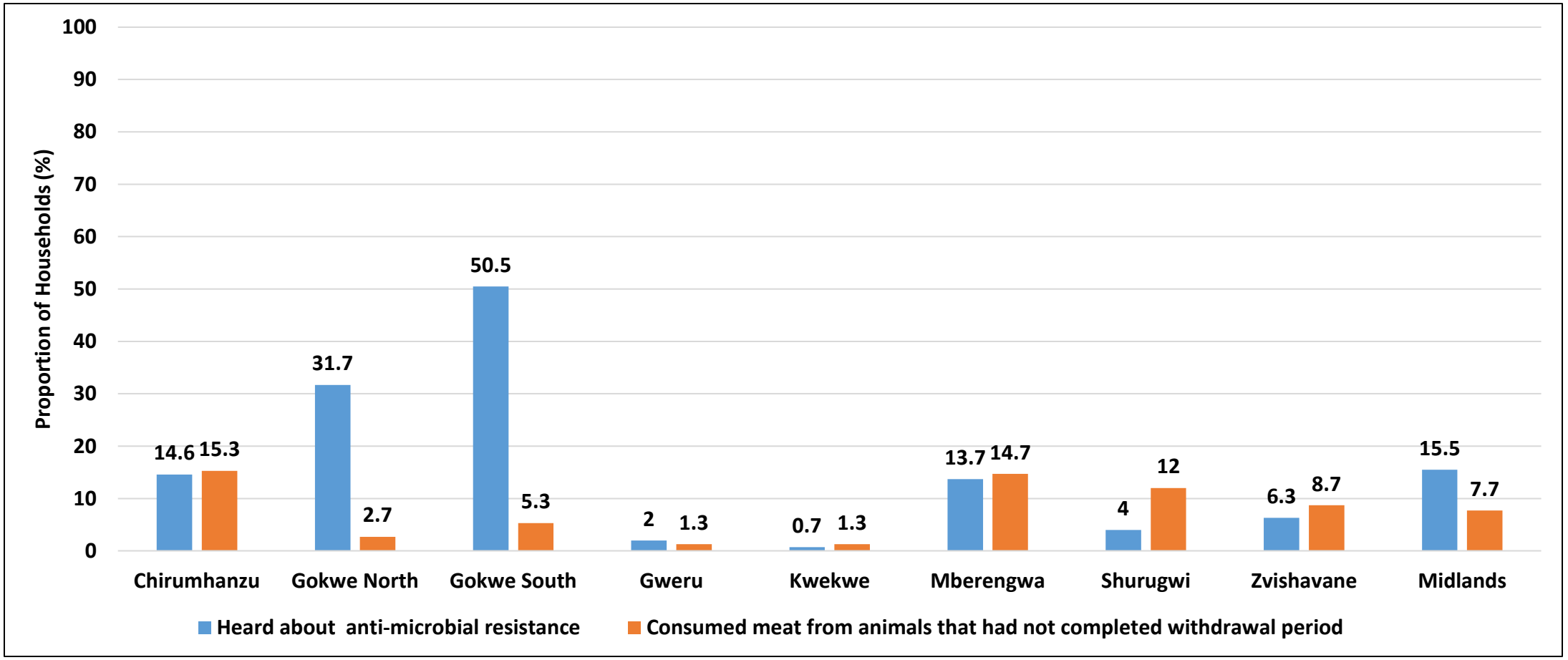
- Protects human health by preventing consumption of animal products with antibiotic residues that can cause allergic reactions or toxicity.
- Prevents antibiotic resistance, a major global threat where bacteria become resistant to treatment due to overexposure to antibiotics.
- Ensures compliance with food safety standards, helping farmers to meet national and international regulations (e.g., Codex, WHO).
- Preserves market access by ensuring products are safe for trade.
- Maintains consumer trust in animal-derived foods such as meat, milk and eggs.

Use Antibiotics to Treat Livestock

	Use antibiotics to treat livestock (%)				Read the instructions regarding withdrawal period (%)			
	Rarely	Sometimes	Often	Always	Rarely	Sometimes	Often	Always
Chirumhanzu	0	0	0	0	0	0	0	0
Gokwe North	0	2.0	0	0	0	4.0	0	0
Gokwe South	8.3	4.2	0	0	4.2	8.3	0	0
Gweru	3.8	1.3	0	0	8.8	0	0	0
Kwekwe	22.9	2.9	1.4	0	18.6	1.4	0	0
Mberengwa	5.4	14.3	1.8	0	7.1	10.7	5.4	1.8
Shurugwi	0	2.8	0	2.8	0	5.6	0	2.8
Zvishavane	0	0	0	1.6	0	3.1	0	0
Midlands	**5.9**	**3.4**	**0.5**	**0.5**	**6.1**	**3.7**	**0.7**	**0.5**

- About 5.9 % of the households indicated that they rarely read instructions on the withdrawal period when treating animals with antibiotics.

Knowledge of Anti-microbial Resistance



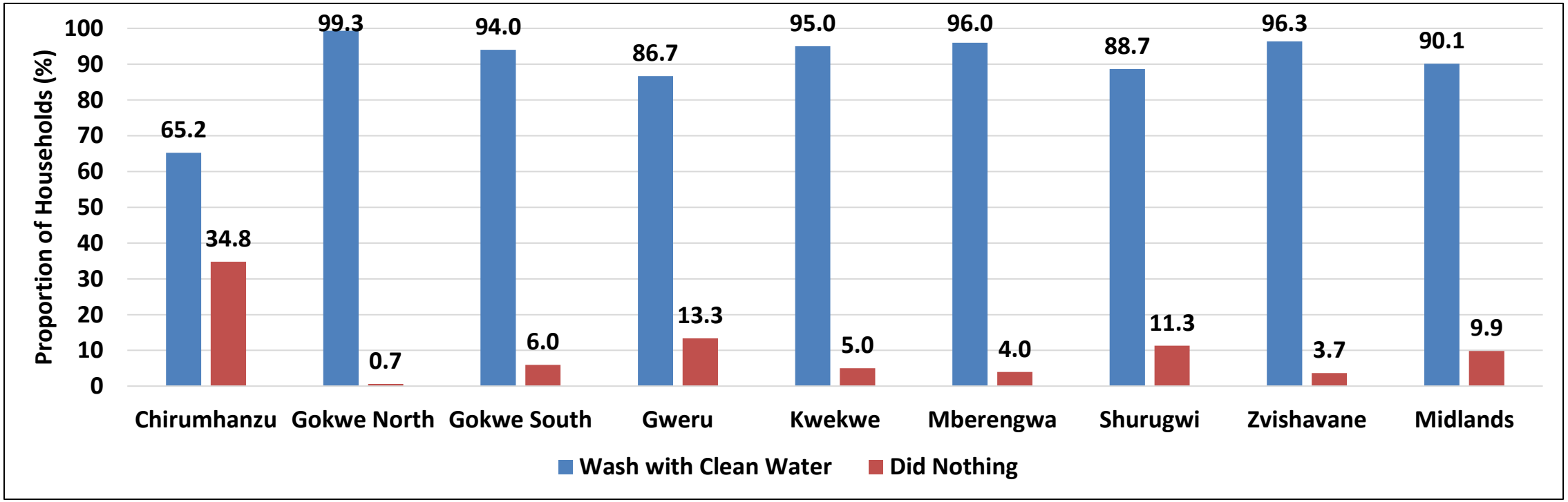
- About 15.5% of the households had heard about anti-microbial resistance.
- At least 7.7% were consuming meat from livestock that had not completed the withdrawal period.

WHO Five Keys to Safer Food

Ensuring food safety is **key** to preventing food borne illnesses which are contracted through consumption of unsafe foods:

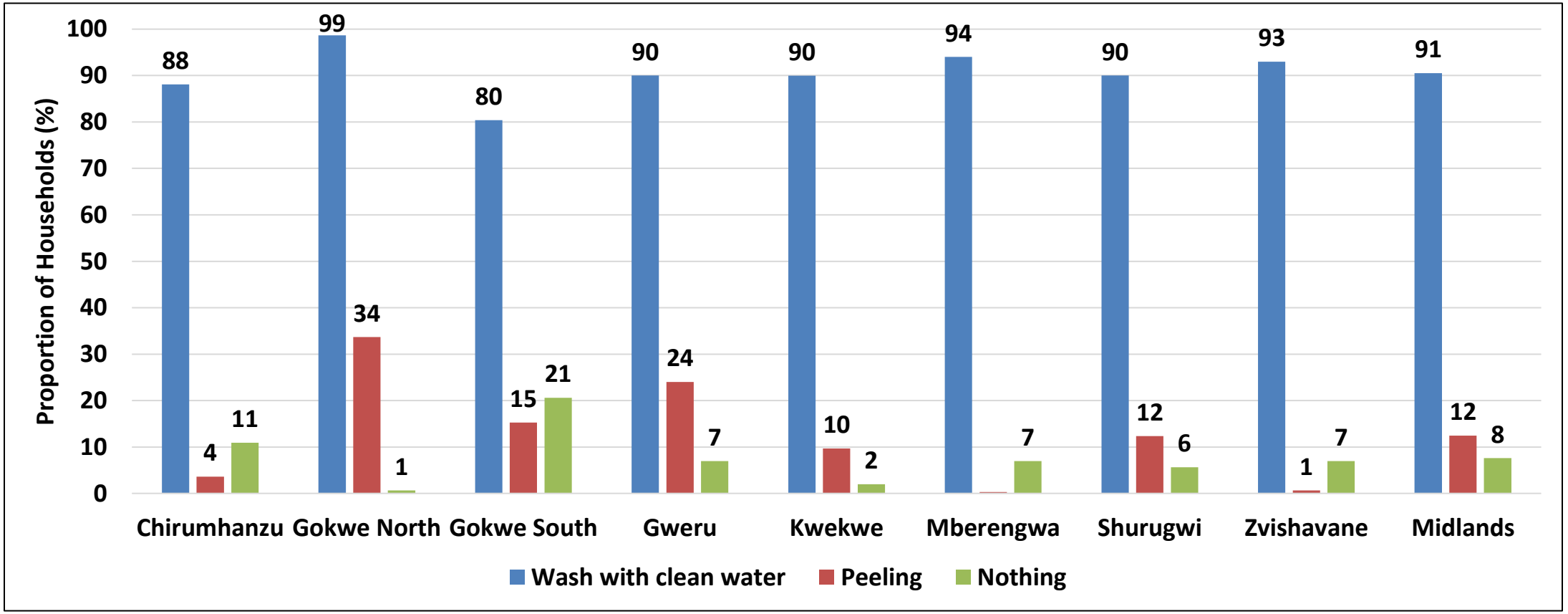
Five Keys	Key Steps
Keep clean	• **Wash hands before handling food** and often during food preparation • **Wash hands after going to the toilet** • Wash and sanitise all surfaces and equipment used for food preparation • Protect kitchen areas and food from insects, pests and other animals
Use safe water and raw materials	• **Use safe water** *households improved water source*) **or treat it to make it safe** *households treat water)* • Select fresh and wholesome foods • Choose foods processed for safety, such as pasteurised milk • Wash fruits and vegetables, especially if eaten raw • Do not use food beyond its expiry date
Separate raw and cooked	• Separate raw meat, poultry and seafood from other foods • Use separate equipment and utensils such as knives and cutting boards for handling raw foods • Store food in containers to avoid contact between raw and prepared foods
Cook thoroughly	• Cook food thoroughly, especially meat, poultry, eggs and fish • Bring foods like soups and stews to boiling to make sure that they have reached 70°C • Reheat cooked food thoroughly
Keep food at safe temperatures	• Do not leave cooked food at room temperature for more than 2 hours • Refrigerate promptly all cooked and perishable food (preferably below 5°C) • Keep cooked food piping hot (more than 60°C) prior to serving • Do not store food too long even in the refrigerator • Do not thaw frozen food at room temperature

Safe Ways of Handling Meat and Fish



- Most households (90.1%) reported to have practiced safe ways of handling meat and fish and about (9.9%) did nothing.

Safe Ways of Handling Fruits and Vegetables



- Most households reported to have washed fruits and vegetables with clean water (91%).

Safety of Food During Storage, Cooking and Serving

	Use clean and fresh utensils (%)	Keep food at correct temperatures (%)	Keep food closed or covered (%)	Separate raw and cooked food (%)	Cook food completely (%)
Chirumhanzu	58.9	49.7	78.1	44.7	24.5
Gokwe North	84.0	27.3	81.3	40.0	11.0
Gokwe South	88.0	60.8	51.8	57.5	24.3
Gweru	81.0	25.7	49.0	33.0	20.3
Kwekwe	79.3	33.4	29.1	15.4	1.3
Mberengwa	68.3	20.3	53.0	39.0	45.3
Shurugwi	87.3	6.7	34.7	14.3	13.0
Zvishavane	63.3	36.0	50.3	20.7	39.0
Midlands	**76.3**	**32.5**	**53.5**	**33.1**	**22.4**

- Almost all districts had knowledge on safety of food during storage, cooking and serving.

Most Common Food Items Purchased from Vendors

	Cereal (rice,pasta, mealie meal, traditional grains) (%)	Biscuits, sweets and snacks (%)	Drinks (%)	Fruits and vegetables (%)	Meat and meat products (%)	Dairy products (%)
Chirumhanzu	12	38	47	34	16	6
Gokwe North	27	20	10	70	34	16
Gokwe South	5	33	39	57	14	3
Gweru	12	15	3	61	13	2
Kwekwe	38	20	16	39	21	2
Mberengwa	9	22	38	30	4	10
Shurugwi	44	36	27	72	30	16
Zvishavane	5	54	44	17		
Midlands	**19**	**30**	**28**	**47**	**16**	**7**

- The most reported common food items purchased from vendors were fruits and vegetables (47%), biscuits, sweets and snacks (30%) and drinks (28%).

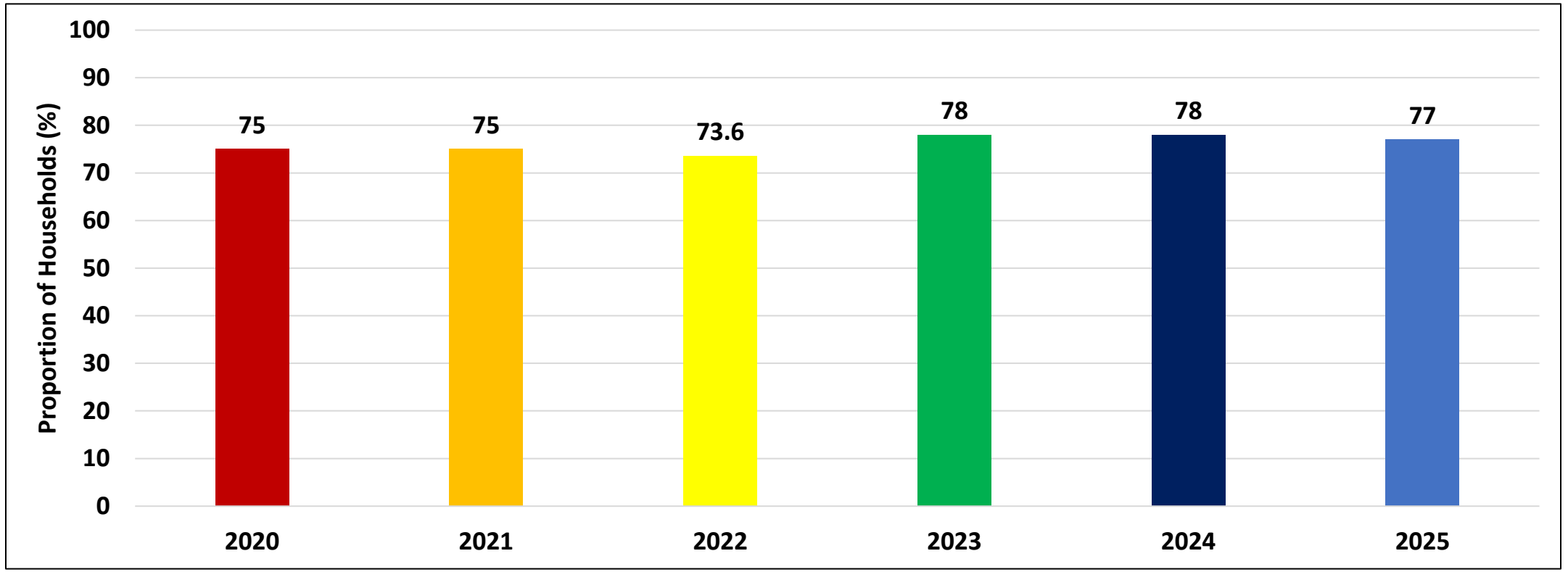
Water, Sanitation and Hygiene (WASH)

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 by Year



- Access to improved water sources increased from 75% in 2020 to 77% in 2025.

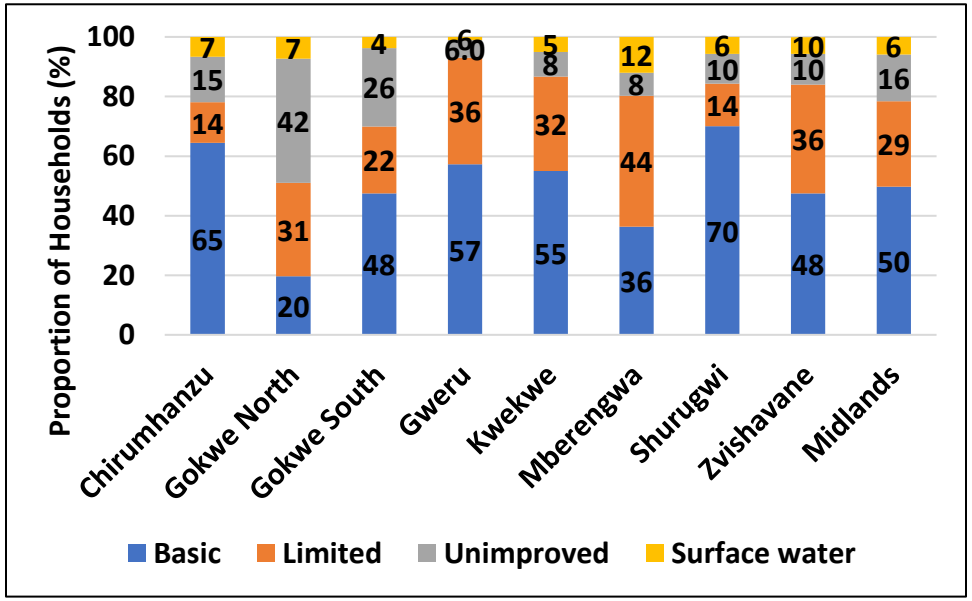
Main Source of Drinking Water

	Piped into dwelling (%)	Piped into yard or plot (%)	Piped into public tap or standpipe (%)	Piped into neighbor (%)	Borehole/ Tube well (%)	Protected well (%)	Unprotected well (%)	Protected spring (%)	Unprotected spring (%)	Surface water (%)
Chirumhanzu	0.7	9.9	5.3	4.3	30.1	30.5	18.9	0.0	0.0	0.3
Gokwe North	0.0	0.3	13.3	0.0	30.0	13.0	22.7	0.7	2.3	8.0
Gokwe South	5.6	1.0	6.6	10.0	19.3	34.2	11.0	0.0	0.0	1.7
Gweru	2.0	2.3	5.3	3.3	32.3	44.7	8.0	0.0	0.0	1.3
Kwekwe	0.7	3.0	4.3	2.7	61.2	13.4	11.0	1.7	0.7	0.0
Mberengwa	1.7	0.0	0.3	1.0	40.0	17.0	20.0	0.3	2.7	12.3
Shurugwi	0.7	1.7	8.7	2.7	38.7	30.7	16.0	0.0	0.7	0.3
Zvishavane	2.0	2.0	9.0	5.0	50.0	11.0	11.3	0.0	0.3	5.3
Midlands	**1.7**	**2.5**	**6.6**	**3.6**	**37.7**	**24.3**	**14.9**	**0.3**	**0.8**	**3.7**

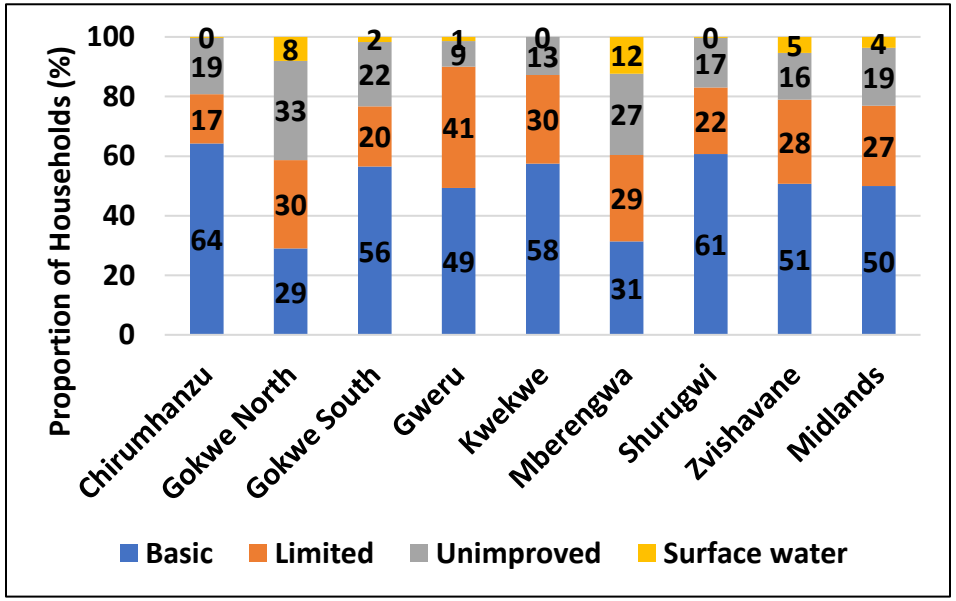
- The majority of households were drinking water from boreholes or tube wells (37.7%).
- About 3.7% of the households were drinking surface water.

Main Drinking Water Services

2024



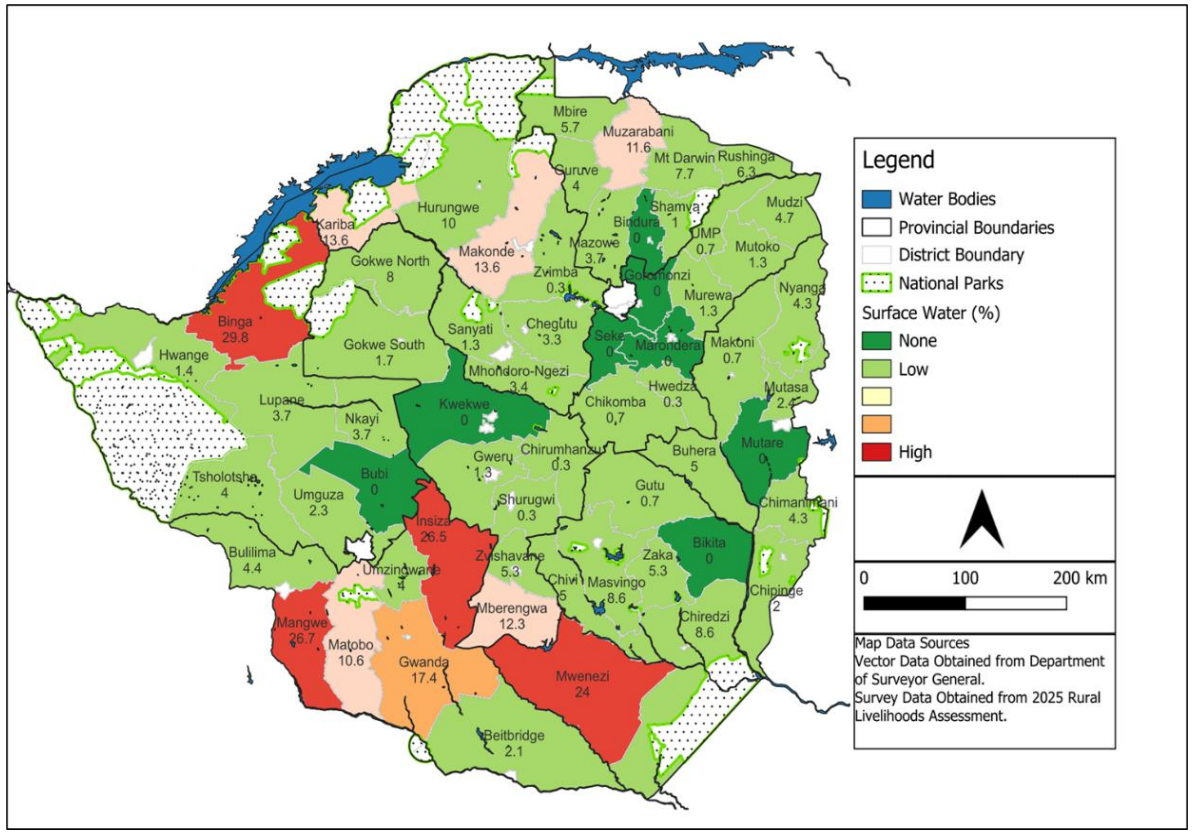
2025



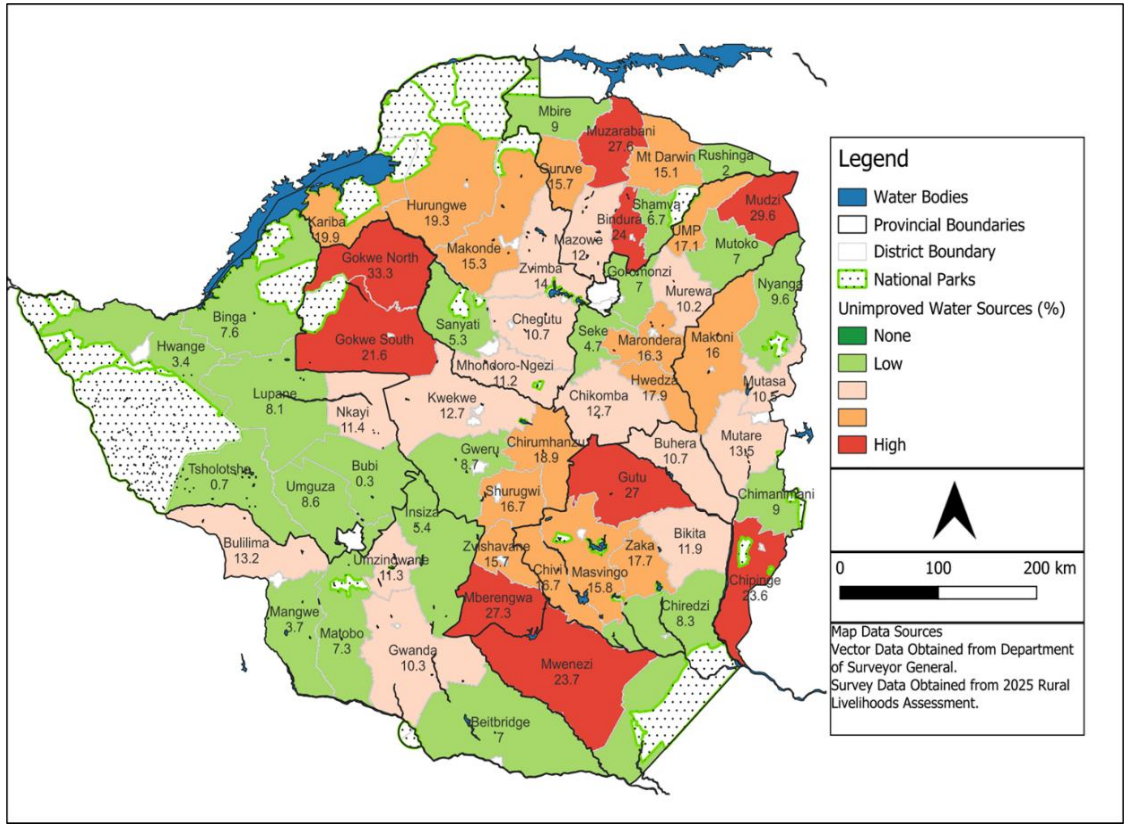
- There was no change in the proportion of households accessing basic water services from 2024.

Water Services

Households Drinking Surface Water

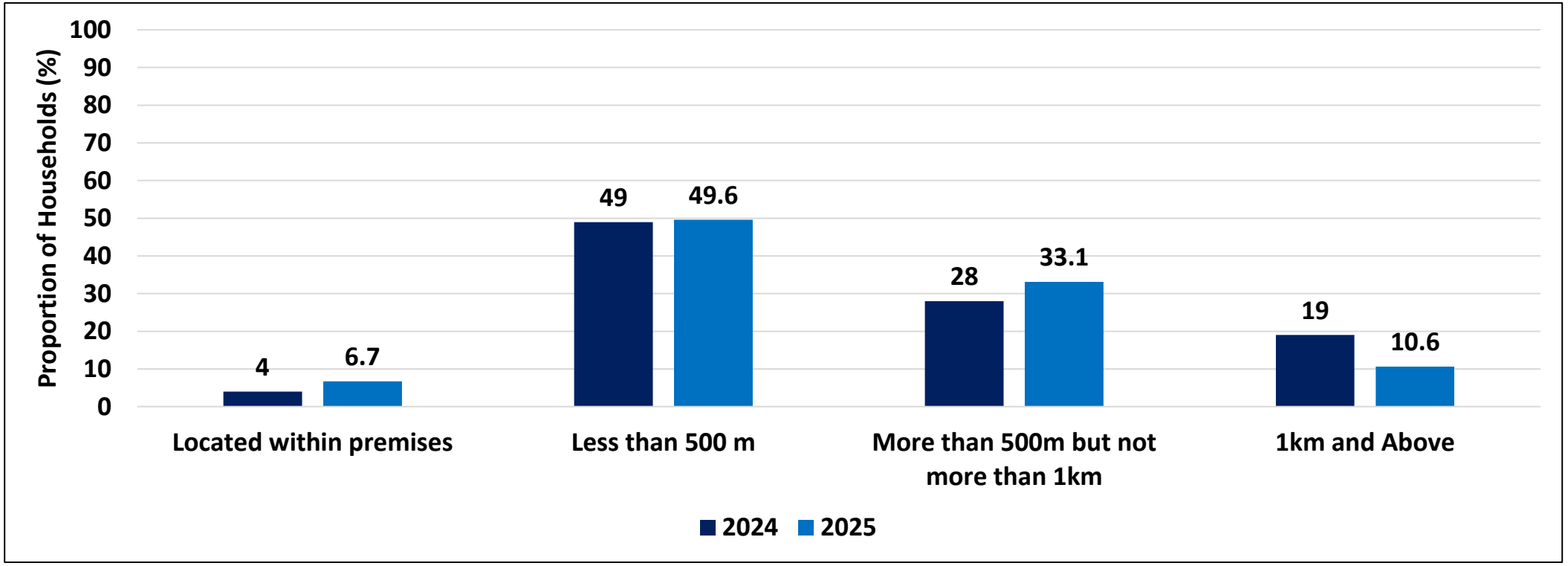


Households Using Unimproved Water



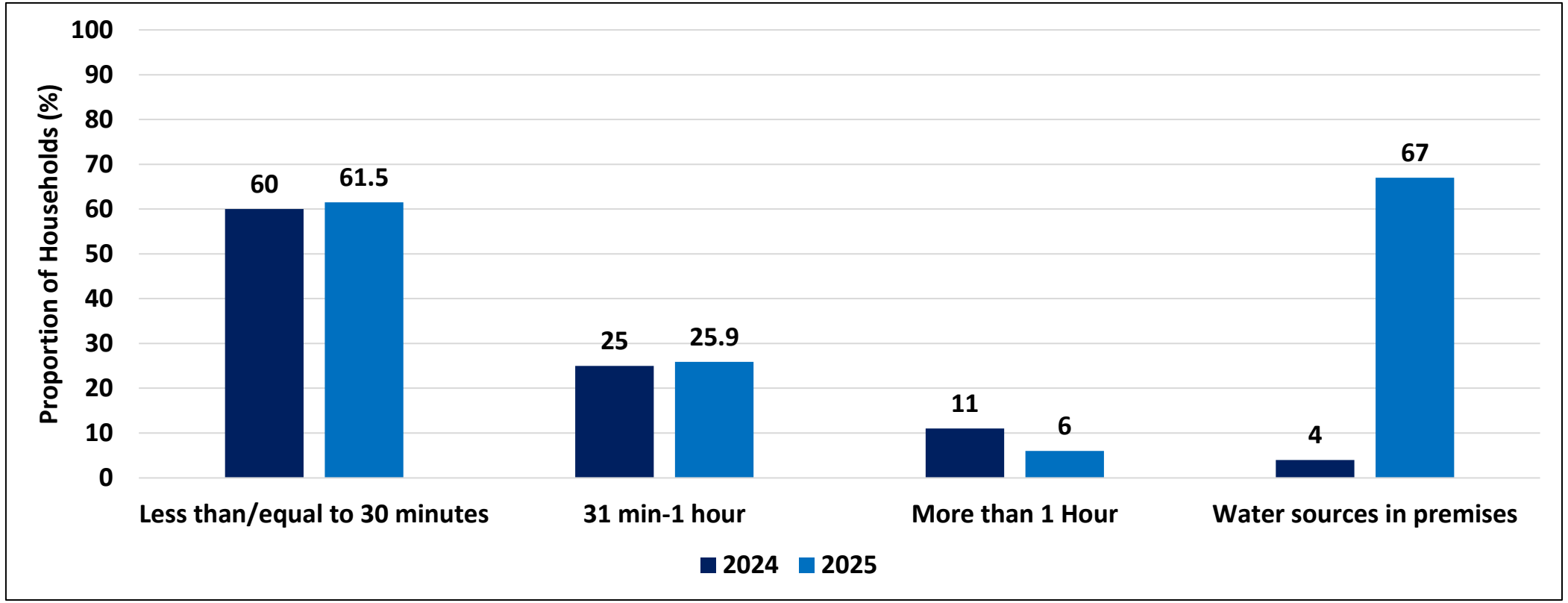
- Mberengwa (12.3%) had the highest proportion of households which were drinking surface water.
- Gokwe North (33.3%) had the highest proportion of households using unimproved water services.

Distance Travelled to Main Water Source



- About 49.6% of the households accessed water less than 500m from their homes in 2025.
- The proportion of households travelling 1km and above to their main water source decreased from 19% in 2024 to 10.6% in 2025.

Time Taken to and from Main Drinking Water Source



- About 61.5% of the households accessed water less than 30 minutes from their homes in 2025
- The proportion of households travelling more than 1 hour to their main water source decreased from 11% in 2024 to 6% in 2025.

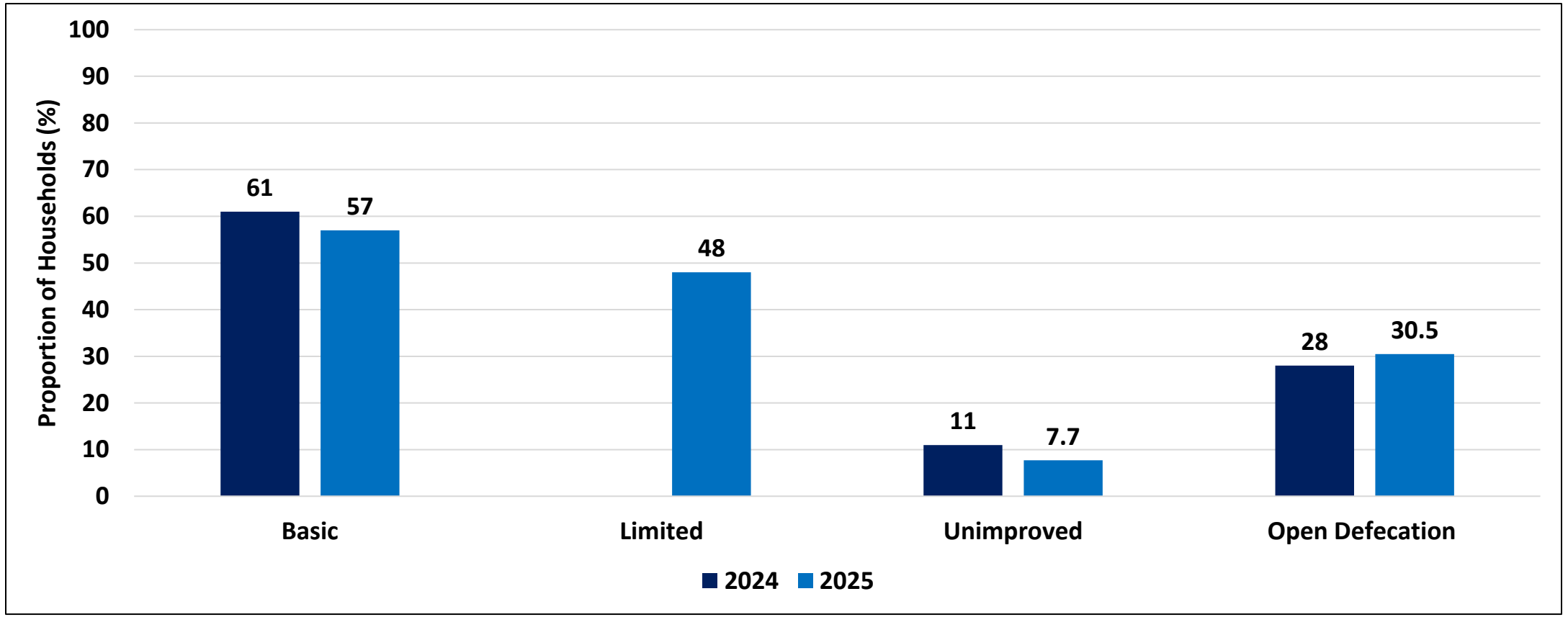
Sanitation

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.

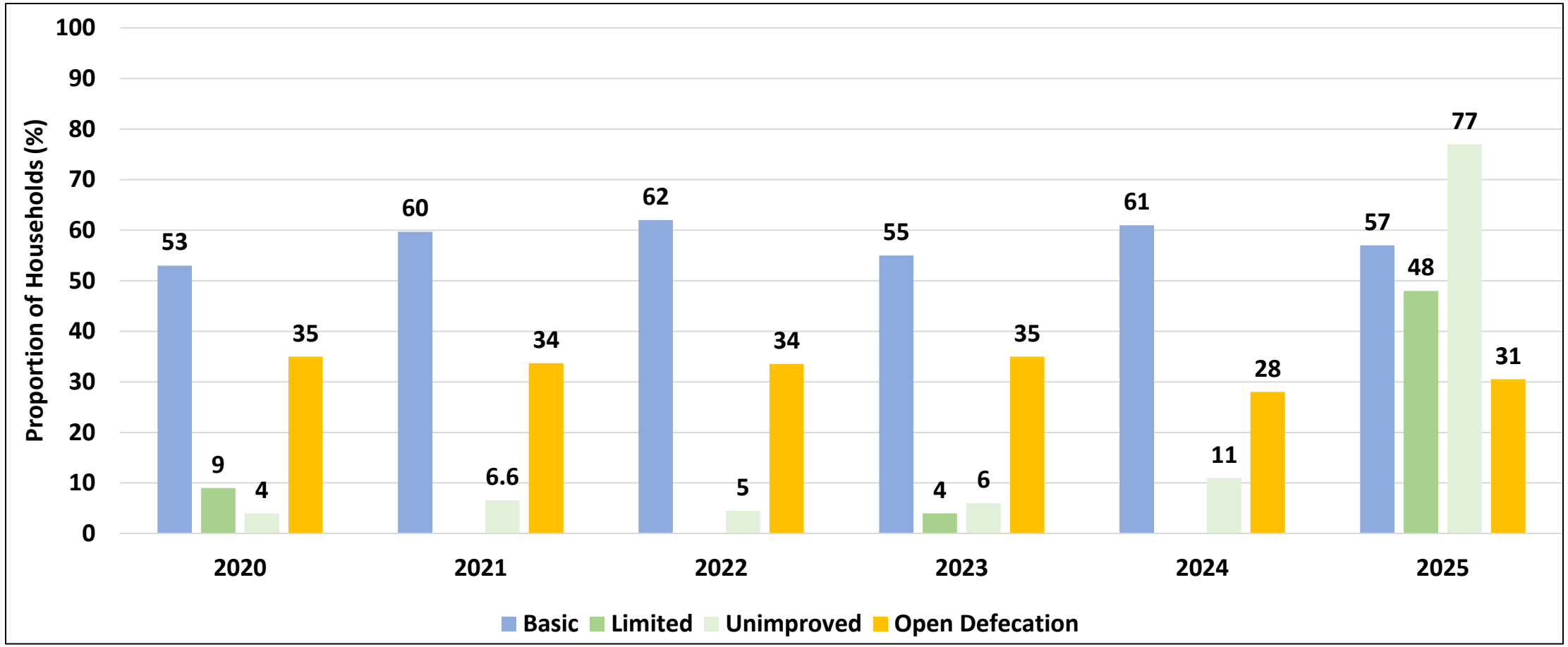
Note: Improved sanitation facilities: Facilities that ensure hygienic separation of human excreta from human contact. They include flush or pour flush toilet/latrine, Blair ventilated improved pit (BVIP), pit latrine with slab and upgradeable Blair latrine.

Household Sanitation Services



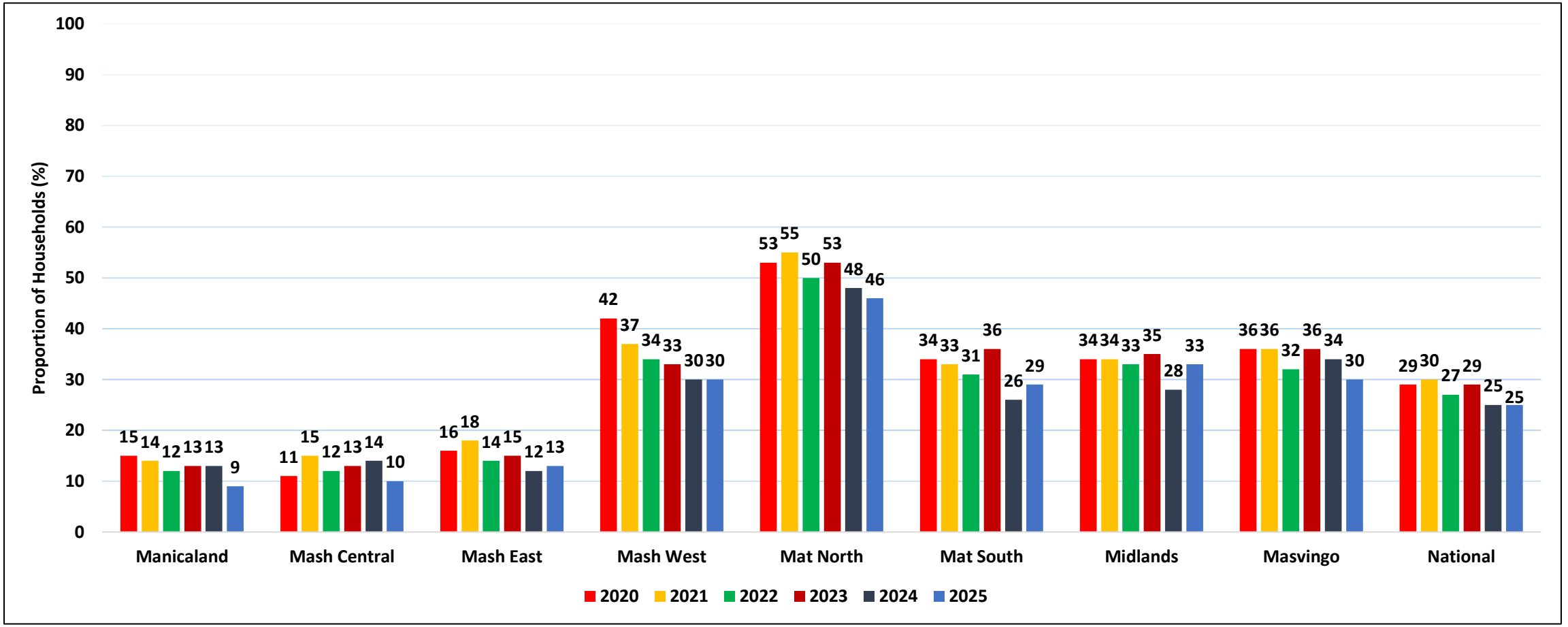
- There was a slight decrease in the proportion of households with basic sanitation services from 61% in 2024 to 57% in 2025.
- There was an increase in the proportion of households practising open defecation from 28% in 2024 to 30.5% in 2025.

Household Sanitation Services



- There was a slight increase in the proportion of households with basic sanitation services from 53% in 2020 to 57% in 2025.
- There was a decline in the proportion of households practicing open defecation from 35% in 2020 to 30.5 % in 2025.

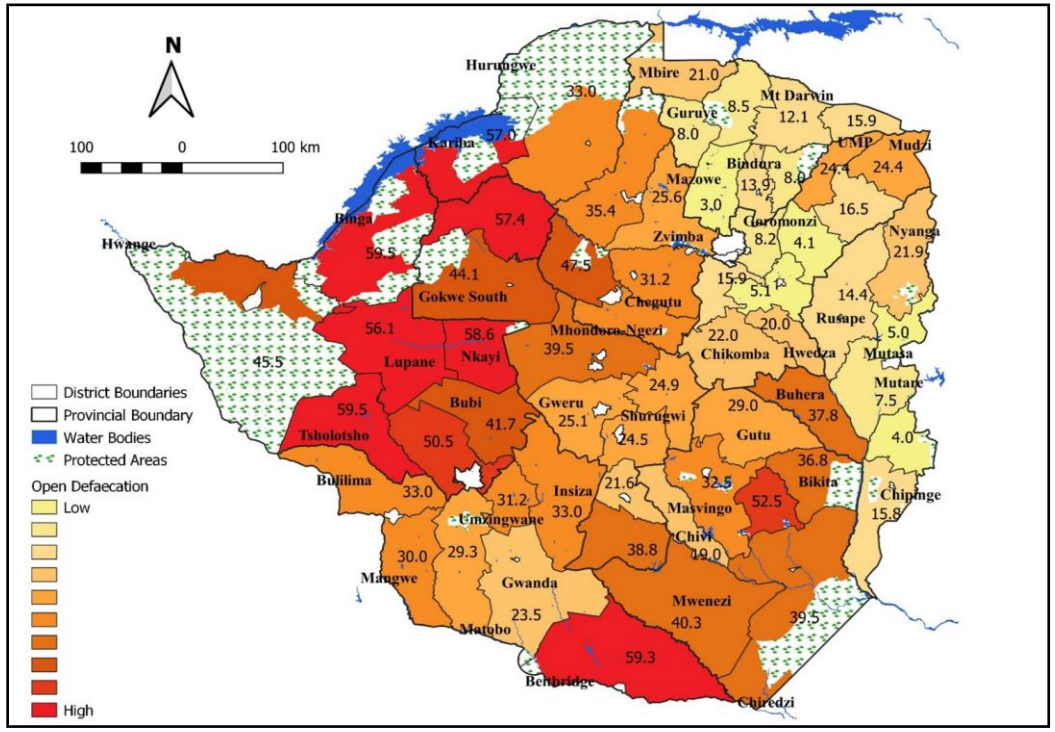
Open Defecation by Year



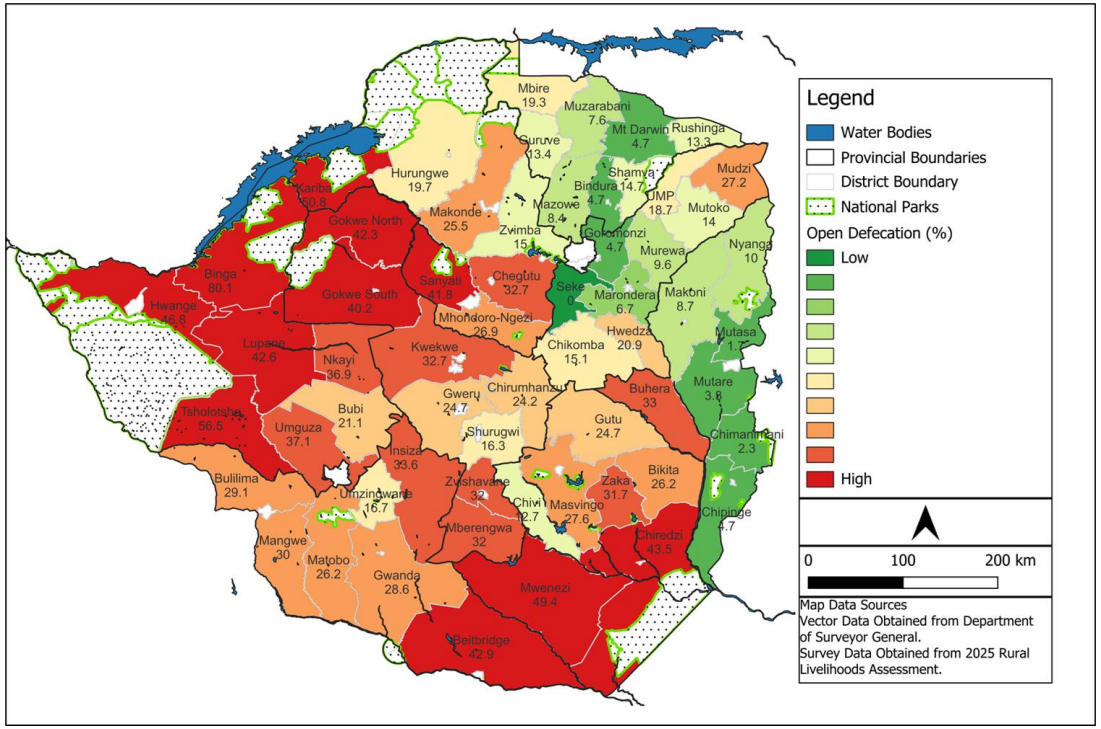
- There has been no significant change on the proportion of households which practised open defecation from 2020 up to 2025.

Open Defecation By District

2020



2025



- Gokwe North (42.3%) had the highest proportion of households which practised open defaecation.

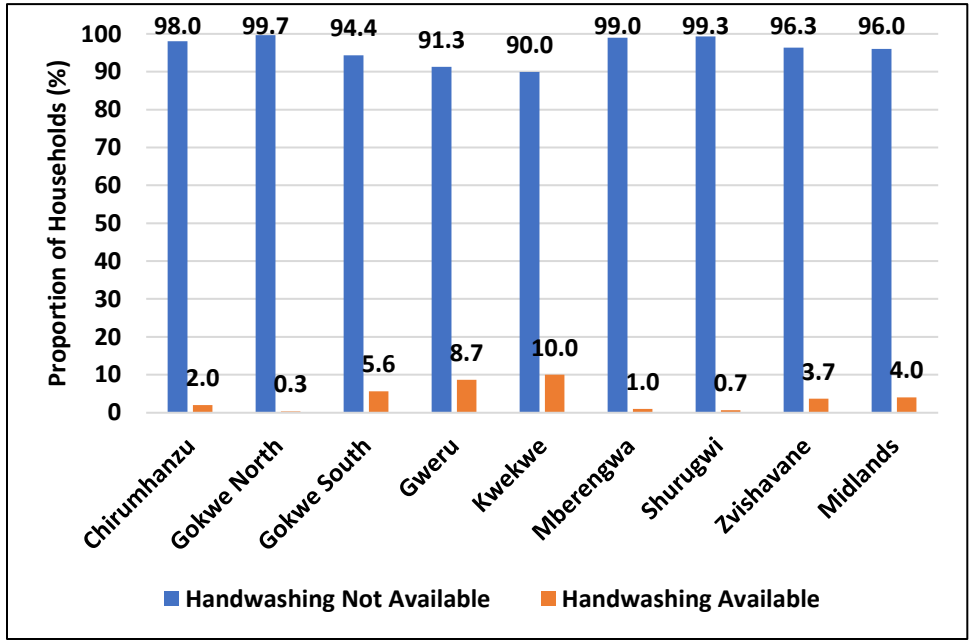
Ladder for Hygiene

Service level	Definition
Basic	Availability of a handwashing facility on premises with soap and water.
Limited	Availability of a handwashing facility on premises without soap and water. Access to Handwashing Services
No Facility	No hand washing facility on premises.

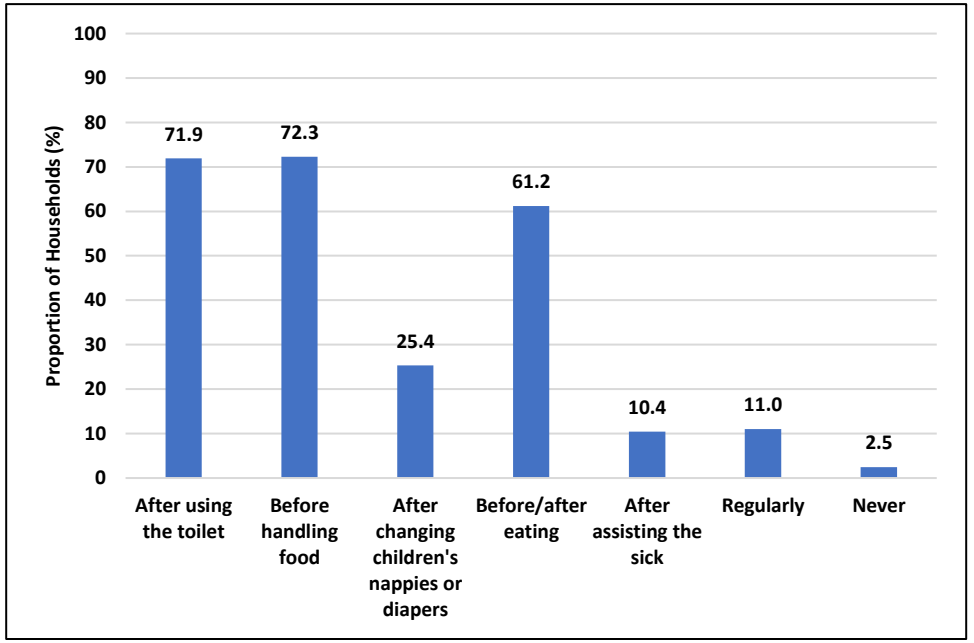
Note: handwashing facilities may be fixed or mobile and include a sink with tap water, buckets with taps, tippy taps, and jugs or basins designated for hand washing. Soap includes bar soap, liquid soap, powdered detergents and soapy water but does not include sand, soil, ash and other handwashing agents.

Handwashing

Handwashing facilities



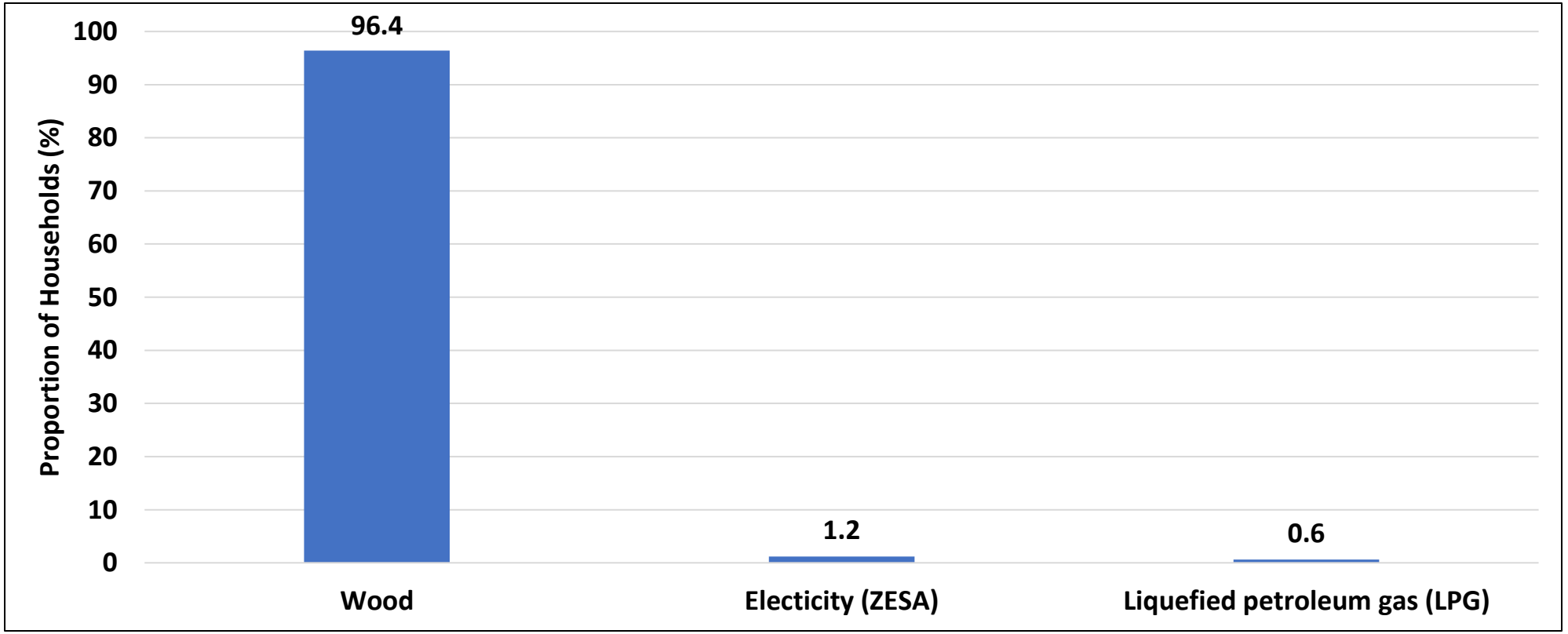
Handwashing at Critical Times



- The proportion of households without handwashing facilities was 96%
- The majority of households reported that they washed their hands after using the toilet (71.9%) whilst 2.5% reported that they never washed their hands.

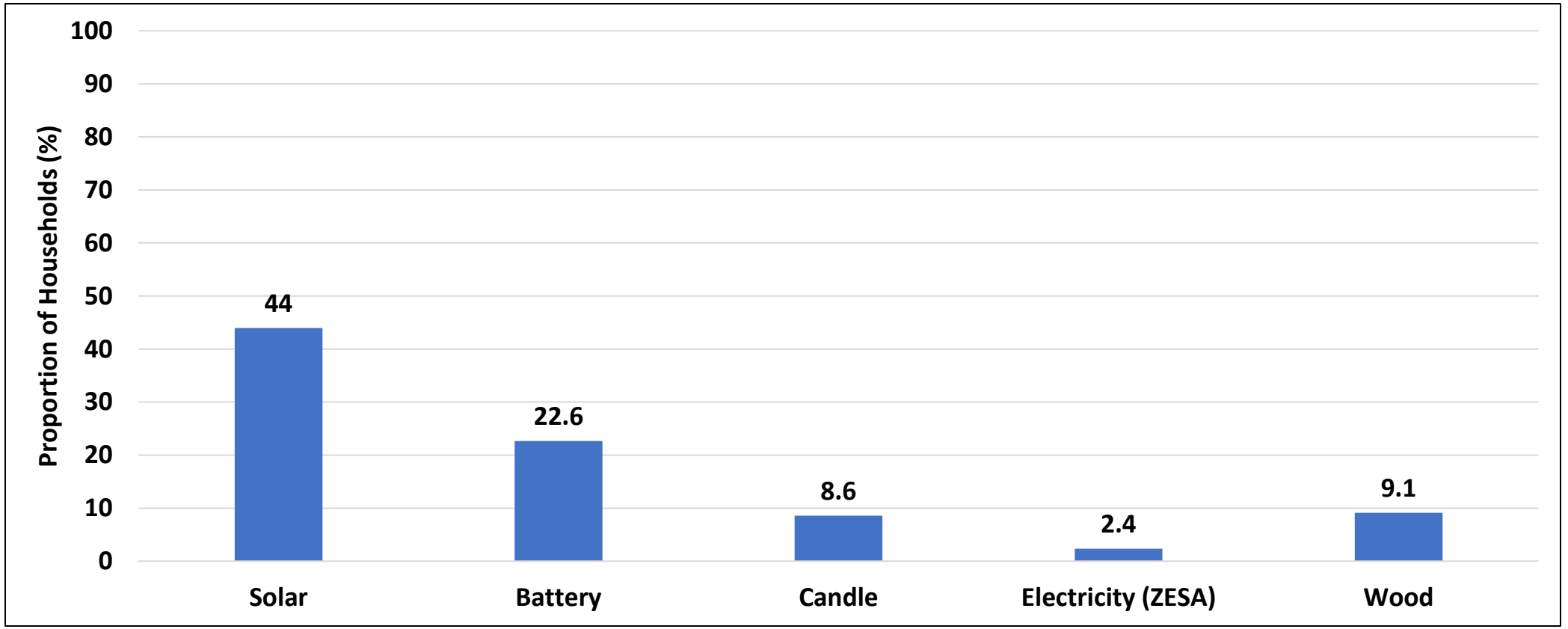
Energy

Type of Energy Used for Cooking



- About 96.4% of households reported using wood for cooking

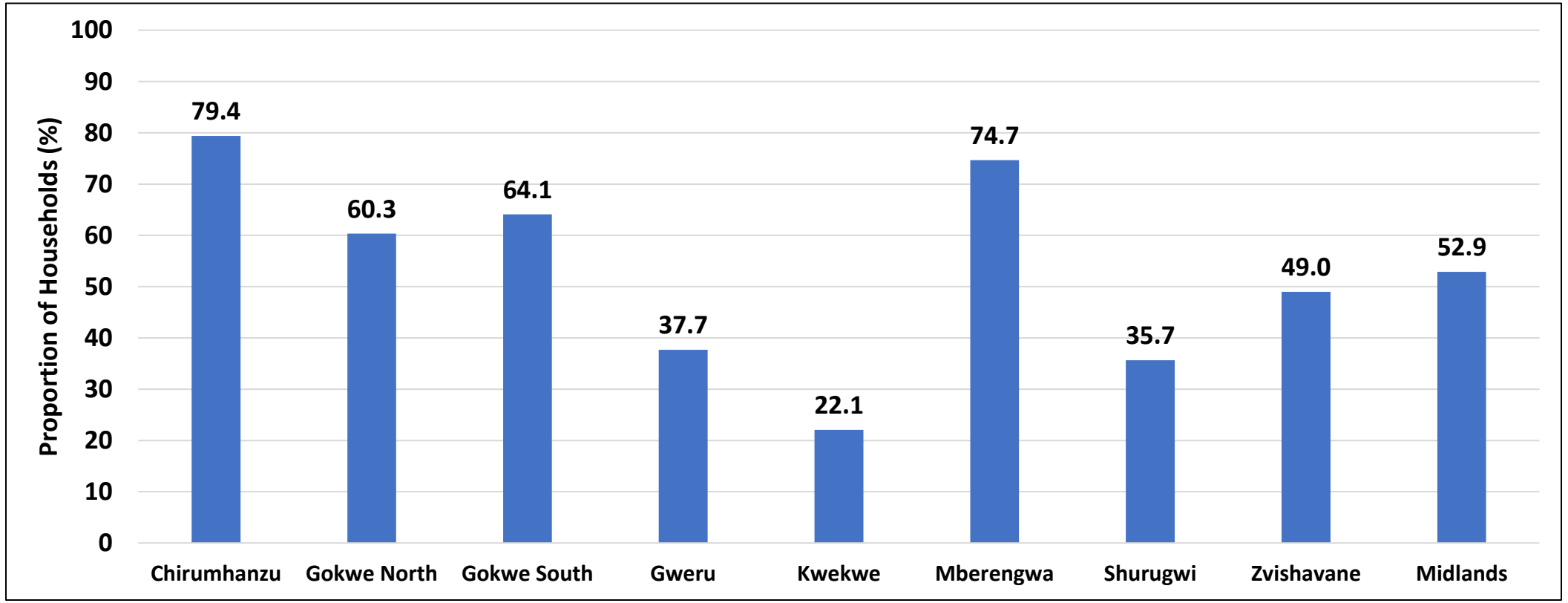
Type of Energy Used for Lighting



- Solar (44%) and battery (22.6%) were the most reported type of energy used for lighting.

Climate Change

Household Knowledge on Climate Change



- Chirumhanzu (79.4%) had the highest proportion of households which reported having knowledge on climate change while Kwekwe (22.1%) had the lowest.

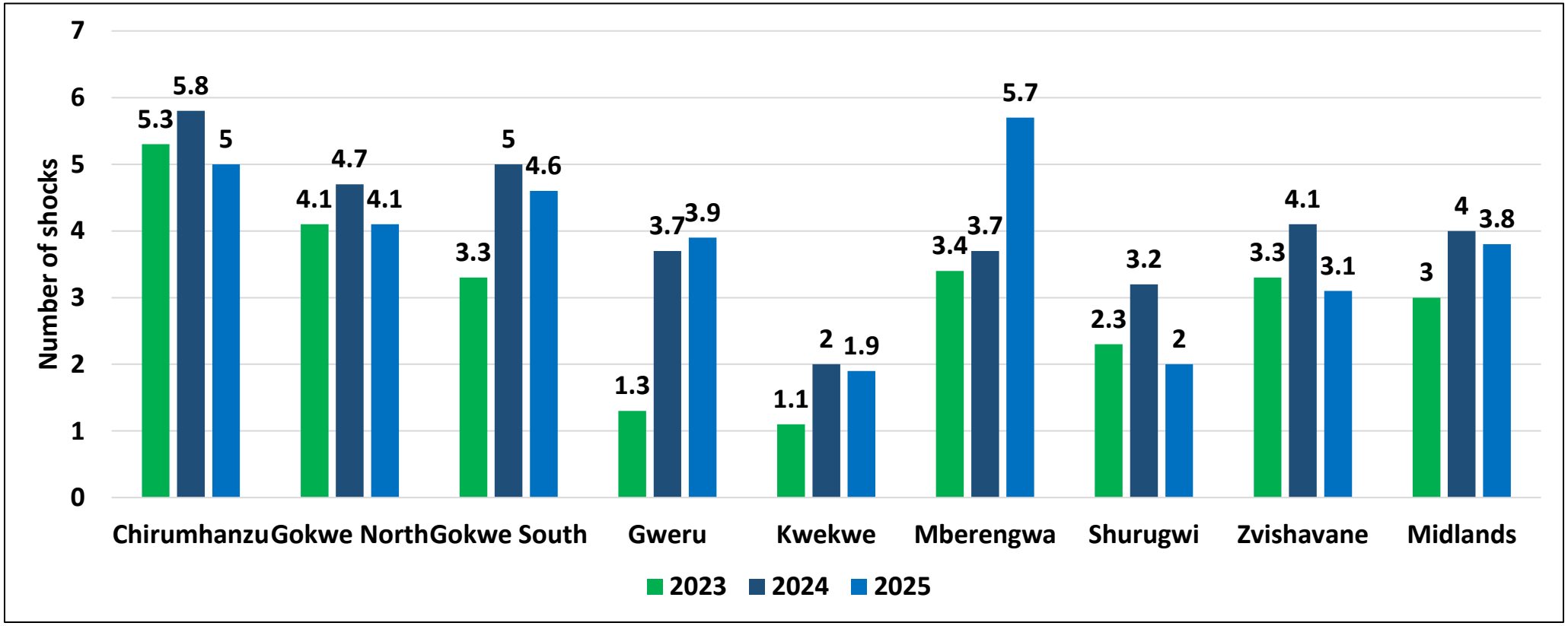
Perceived Effects of Climate Change on Households

	Not enough food (food insecurity) (%)	Increased droughts (water supply) (%)	More health risks (%)	Extreme temperatures (hot/cold temperatures) (%)	Severe storms (cyclones, hurricanes, typhoons) (%)	Loss of species (%)	Poverty and displacement (%)
Chirumhanzu	59.3	11.6	1.0	1.0	0.0	0.0	0.3
Gokwe North	43.7	14.7	0.0	9.3	2.3	0.0	1.3
Gokwe South	39.2	15.3	1.7	4.7	2.0	0.7	1.7
Gweru	11.0	18.0	0.3	6.3	0.0	.0	0.0
Kwekwe	16.7	7.0	0.0	0.0	0.0	0.0	0.0
Mberengwa	50.3	16.3	0.3	0.7	0.0	1.3	1.0
Shurugwi	10.0	4.7	2.3	9.7	0.3	0.7	2.3
Zvishavane	44.7	11.0	2.0	3.7	0.0	0.0	0.0
Midlands	**34.4**	**12.3**	**1.0**	**4.4**	**0.6**	**0.3**	**0.8**

- The province reported the perceived effects of climate change on households to be food insecurity (34.4%) and increased droughts (12.3%).

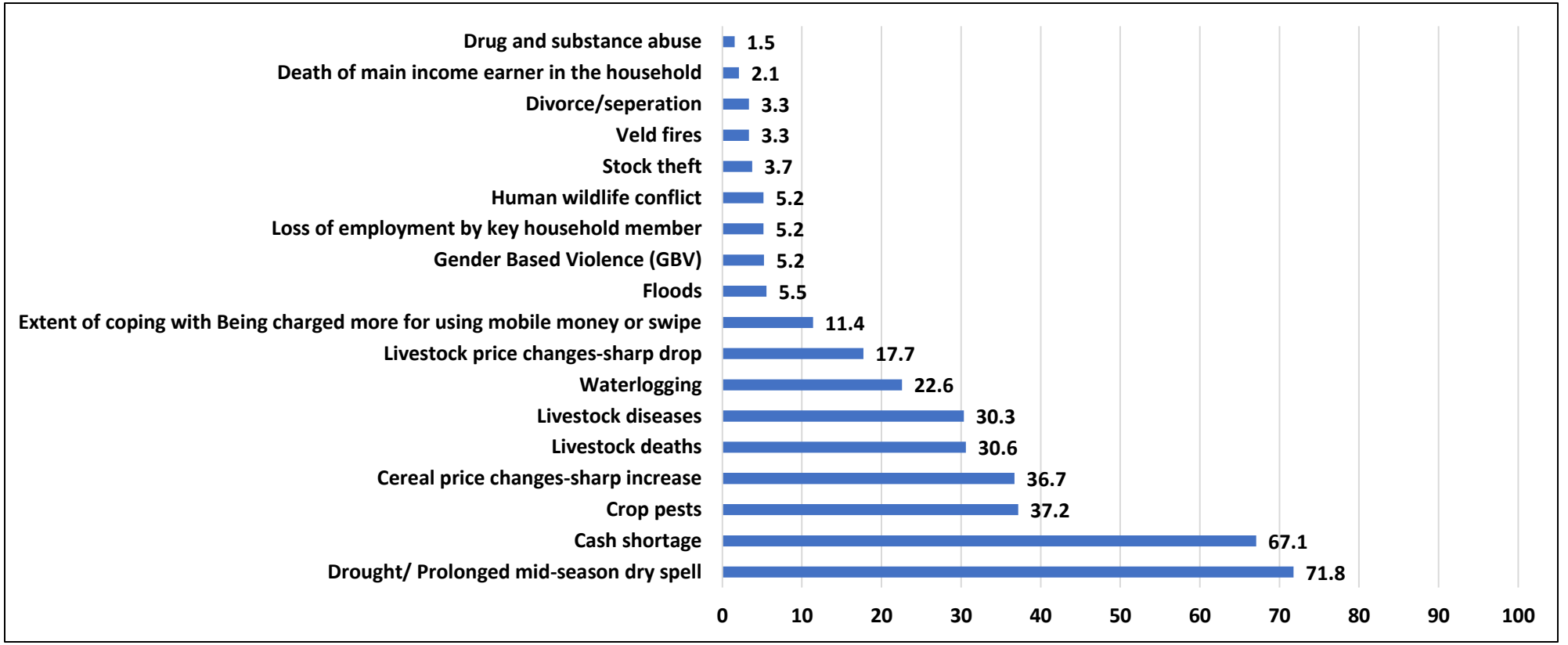
Shocks and Stressors

Number of Shocks and Stressors Experienced by Households



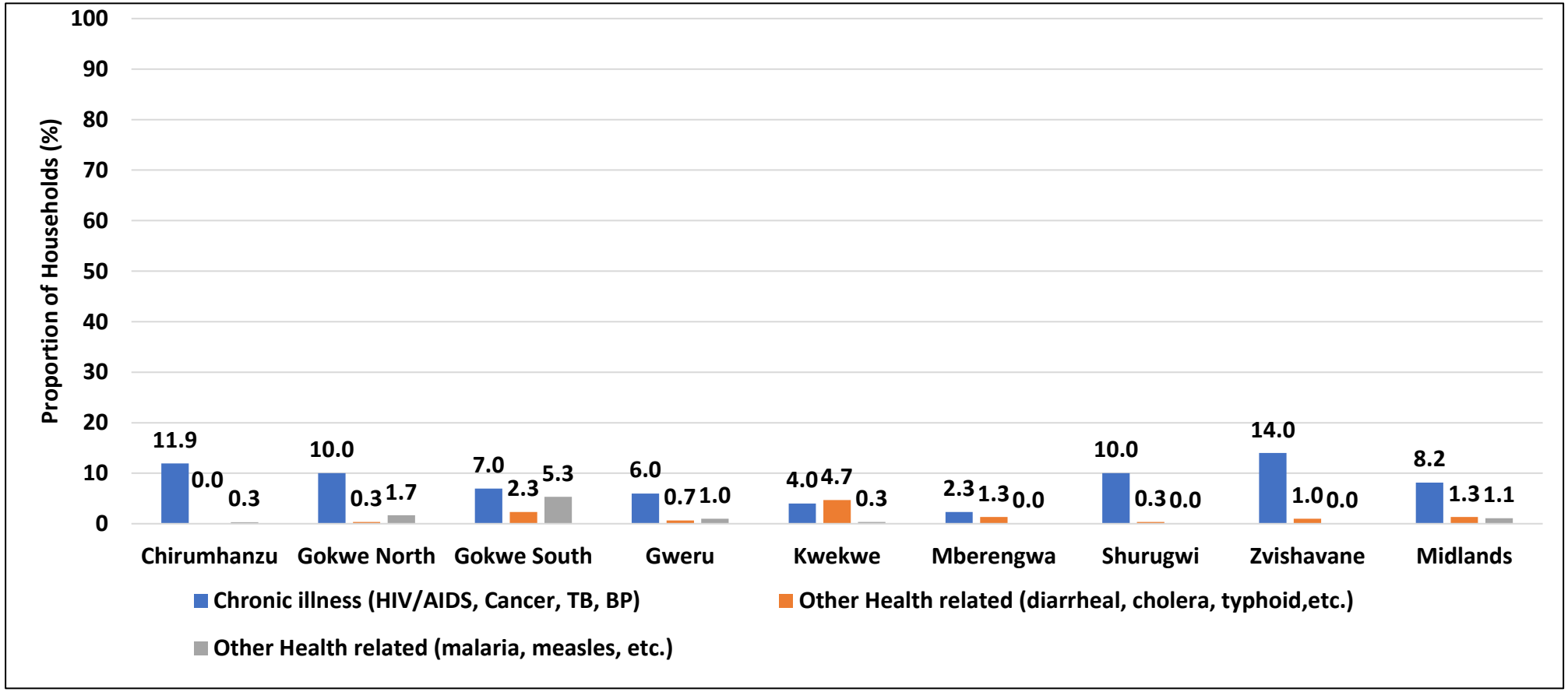
- The average number of shocks and stressors experienced by households increased from 3 in 2023 to 3.8 in 2025.

Households that Experienced Shocks and Stressors



- The major shocks and hazards reported in the province were drought/prolonged mid-season dry spell (71.8%) and cash shortages (67.1%).

Health Related Shocks and Stressors



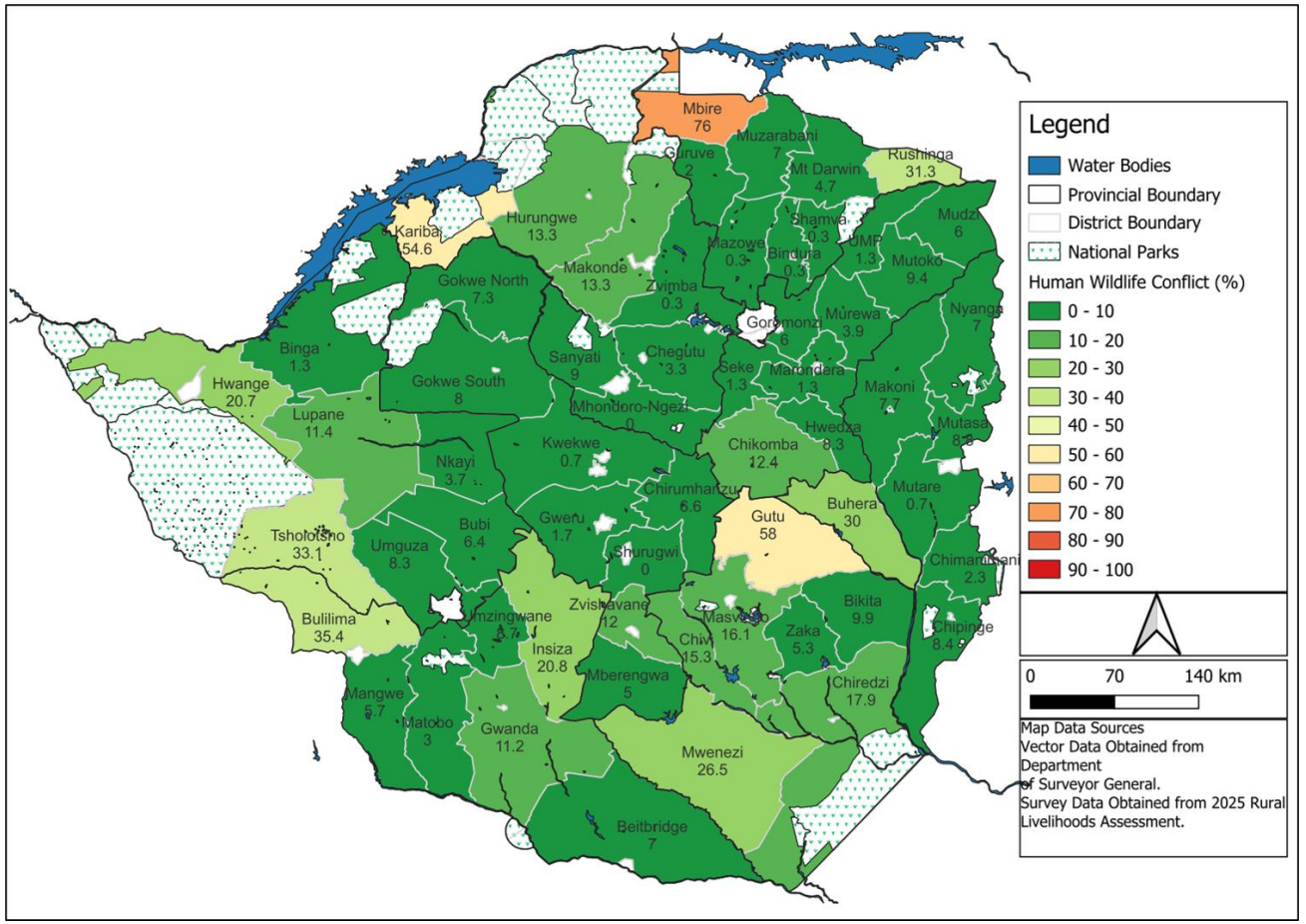
- The majority of the districts reported chronic illness as the major health related shock and hazard.
- Zvishavane (14%), Chirumhanzu (11.9%) had the highest proportion of households which reported chronic illness as a shock and stressor.

Economic and Social Shocks and Stressors

	Gender Based Violence (GBV) (%)	Divorce/separation (%)	Drug and substance abuse (%)	Death of main income earner in the household (%)	Loss of employment by key household member (%)	Cash shortage (%)	Being charged more for using mobile money or swipe (%)
Chirumhanzu	0.0	3.0	0.0	1.7	0.7	76.8	41.7
Gokwe North	5.3	4.3	1.7	2.3	1.3	82.3	26.0
Gokwe South	13.0	3.0	4.7	3.7	2.7	94.7	5.0
Gweru	2.7	2.7	0.7	4.3	33.7	74.3	3.3
Kwekwe	1.7	3.7	2.7	1.0	1.0	53.8	1.3
Mberengwa	16.7	3.0	2.3	1.3	1.3	94.7	10.3
Shurugwi	0.7	3.7	0.0	1.7	0.0	38.3	1.7
Zvishavane	2.0	3.3	0.3	0.7	0.7	21.3	1.7
Midlands	**5.2**	**3.3**	**1.5**	**2.1**	**5.2**	**67.1**	**11.4**

- Most households reported being charged more for using mobile money or swipe (11.4%) as a shock.

Human Wildlife Conflict



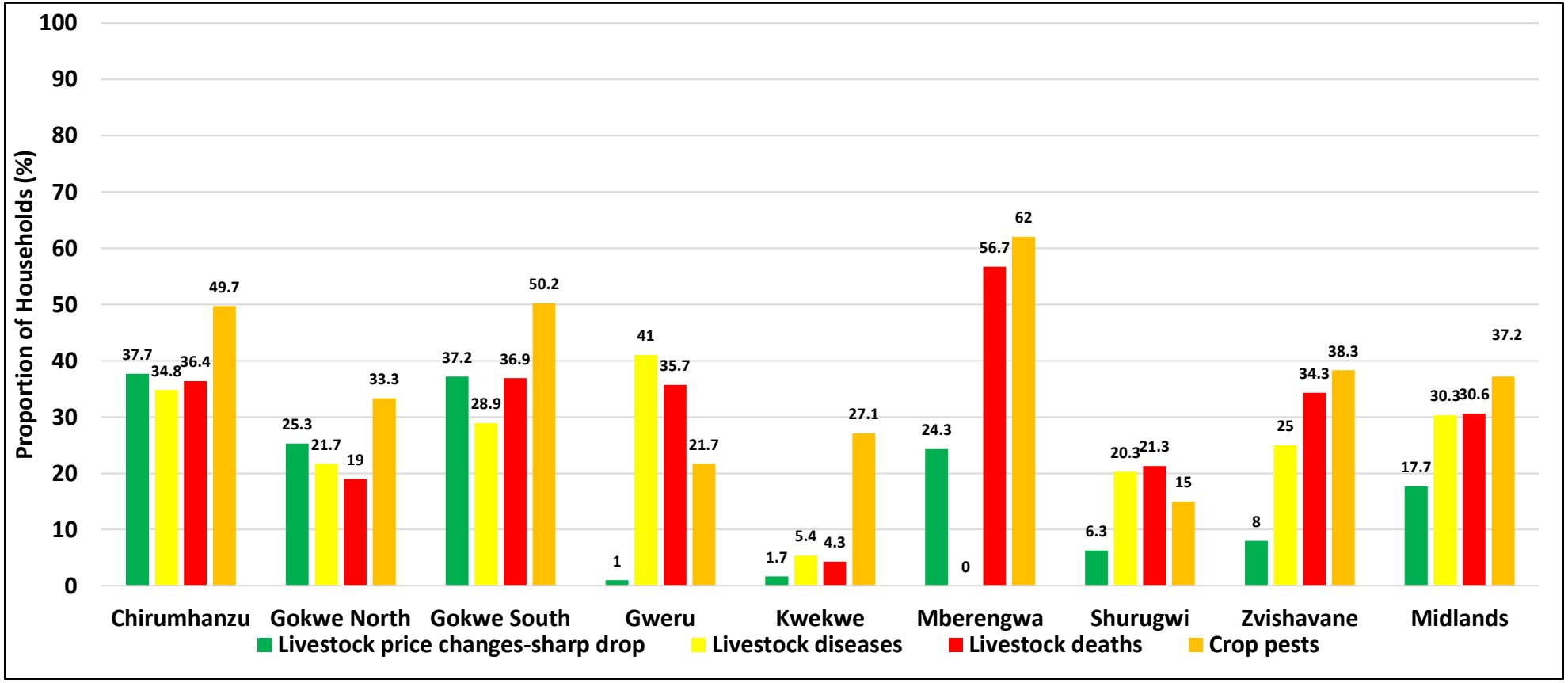
- Human wildlife conflict was reported to be high in Zvishavane (12%).

Climate Related Shocks and Stressors

	Prolonged mid-season dry spell (%)	Hailstorm (%)	Floods (%)	Waterlogging (%)	Veld fires (%)
Chirumhanzu	91.1	5.3	0.7	30.1	8.6
Gokwe North	90.7	1.7	3.0	3.0	0.7
Gokwe South	87.4	2.0	6.6	10.0	0.3
Gweru	90.7	4.7	0.3	3.7	3.3
Kwekwe	38.5	0.3	0.0	0.0	0.0
Mberengwa	89.0	2.7	33.3	62.3	0.7
Shurugwi	35.7	0.7	0.0	20.7	13.0
Zvishavane	51.0	7.3	0.3	50.7	0.0
Midlands	**71.8**	**3.1**	**5.5**	**22.6**	**3.3**

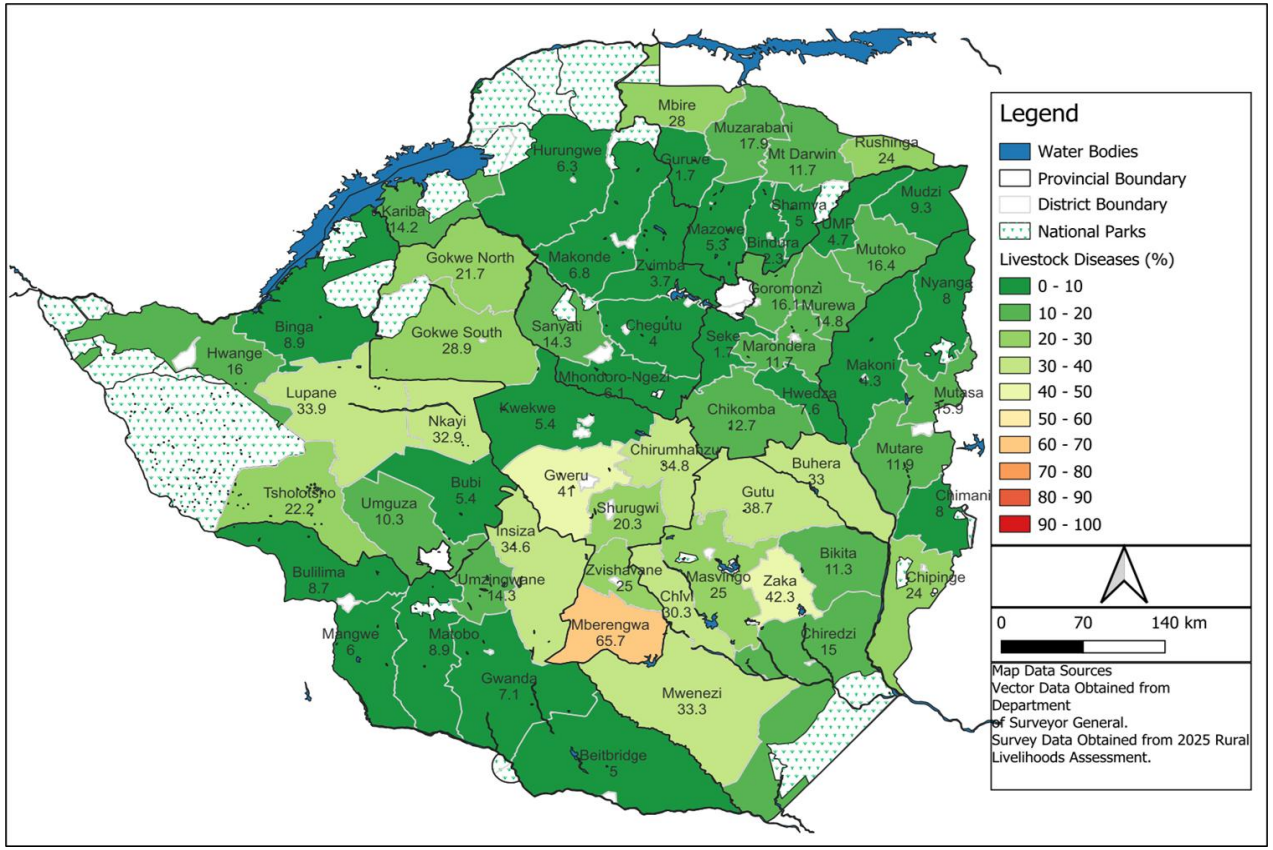
- The province reported prolonged mid-season dry spell (71.8%) to be the major climate related shock and stressor.

Agriculture Related Shocks and Stressors



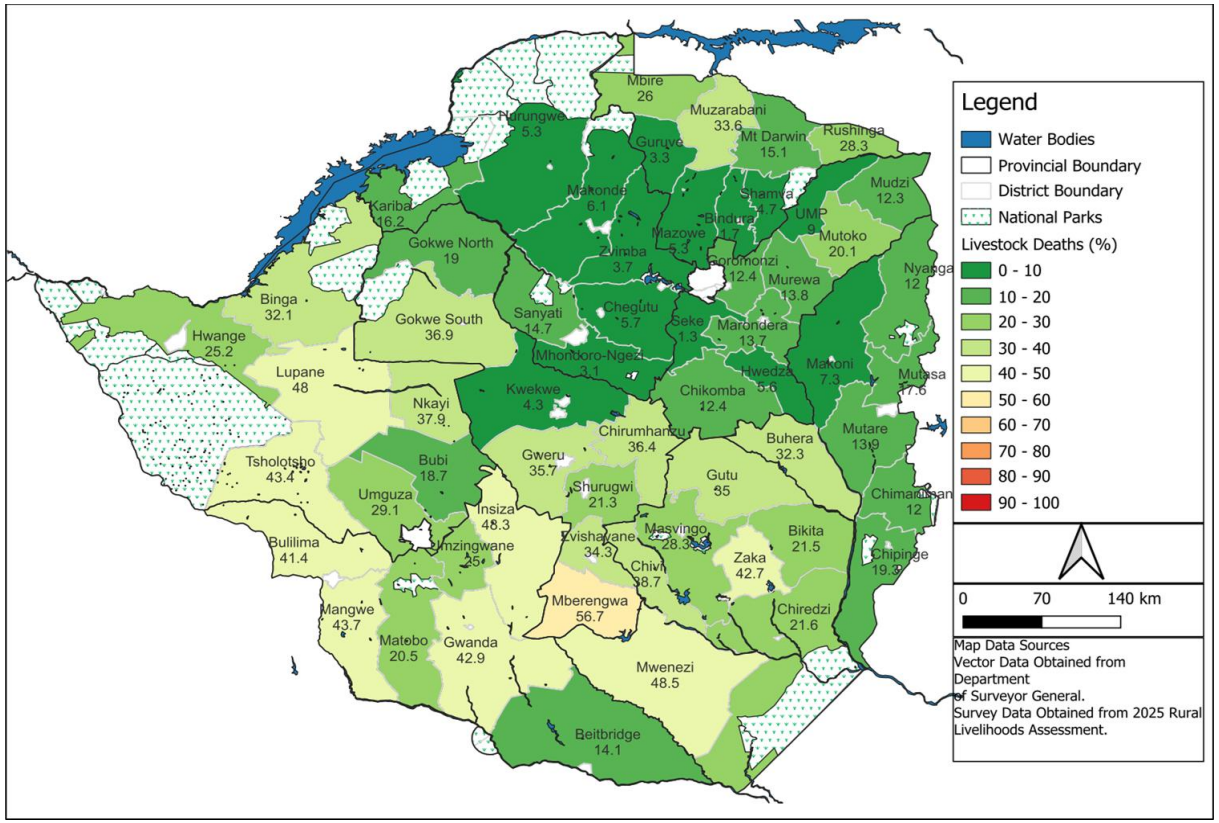
- The major agriculture related shocks and stressors reported were crop pests (37.2%), livestock deaths (30.6%) and livestock disease (30.3%).

Livestock Diseases



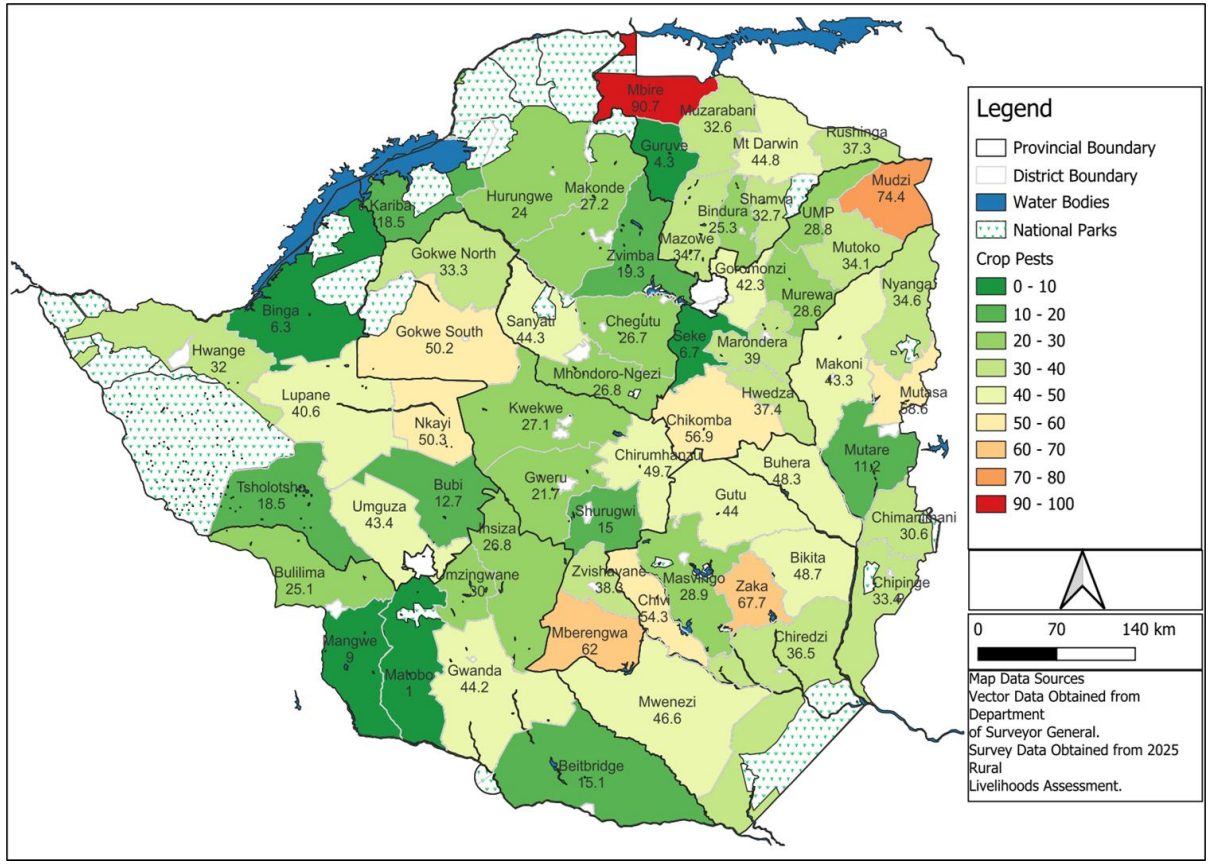
- Mberengwa (65.7%) had the highest proportion of households reporting livestock diseases as a shock and stressor.

Livestock Deaths



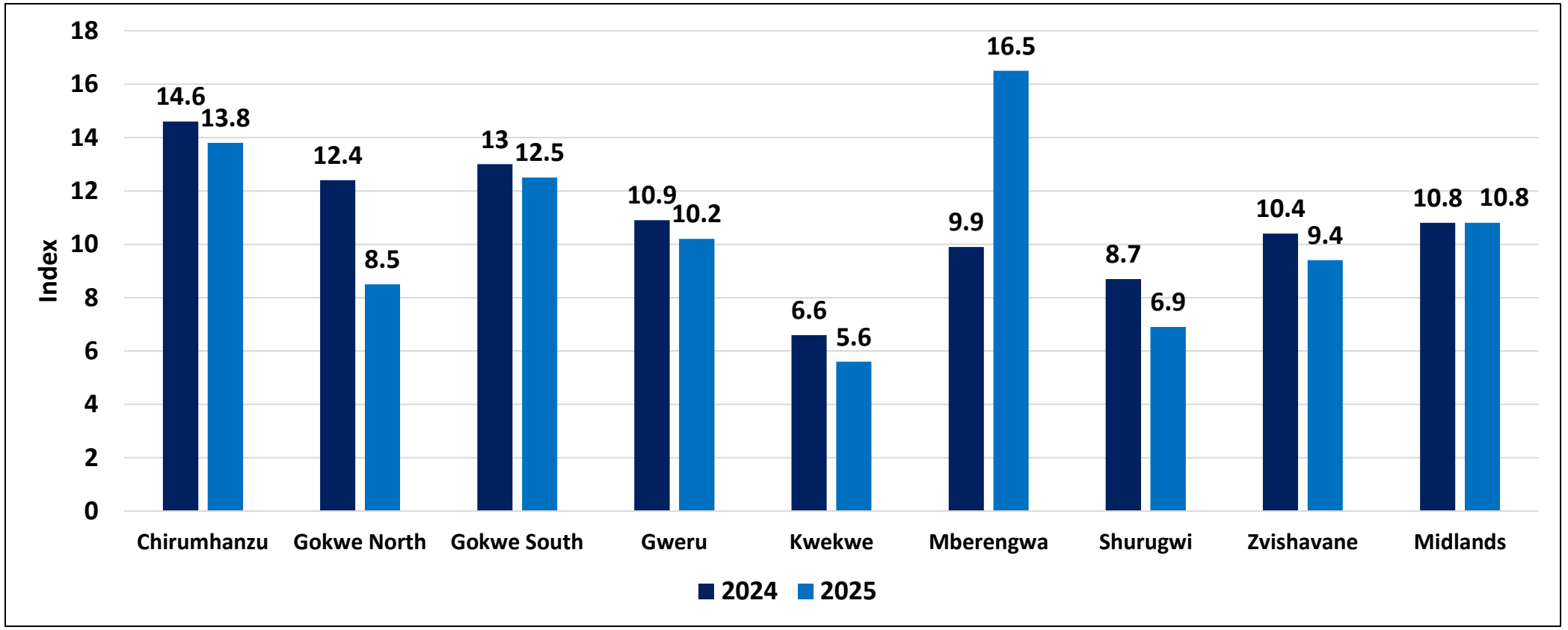
- Mberengwa (56.7%) had the highest proportion of households reporting livestock deaths as a shock and stressor.

Crop Pests



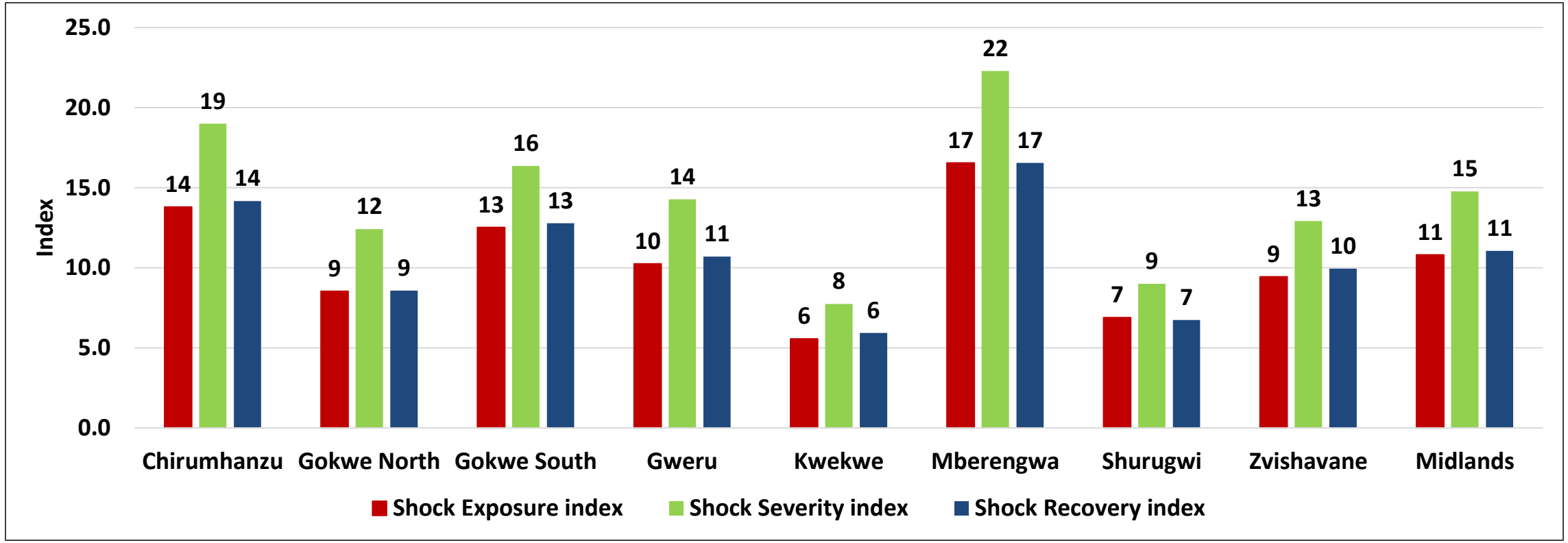
- Mberengwa (62%) had the highest proportion of households reporting crop pests as a shock.

Average Shock Exposure Index



- Shock exposure index was calculated by multiplying the number of shocks experienced with the impact severity of the shock on the household.
- The average shock exposure index remained the same between the two years.

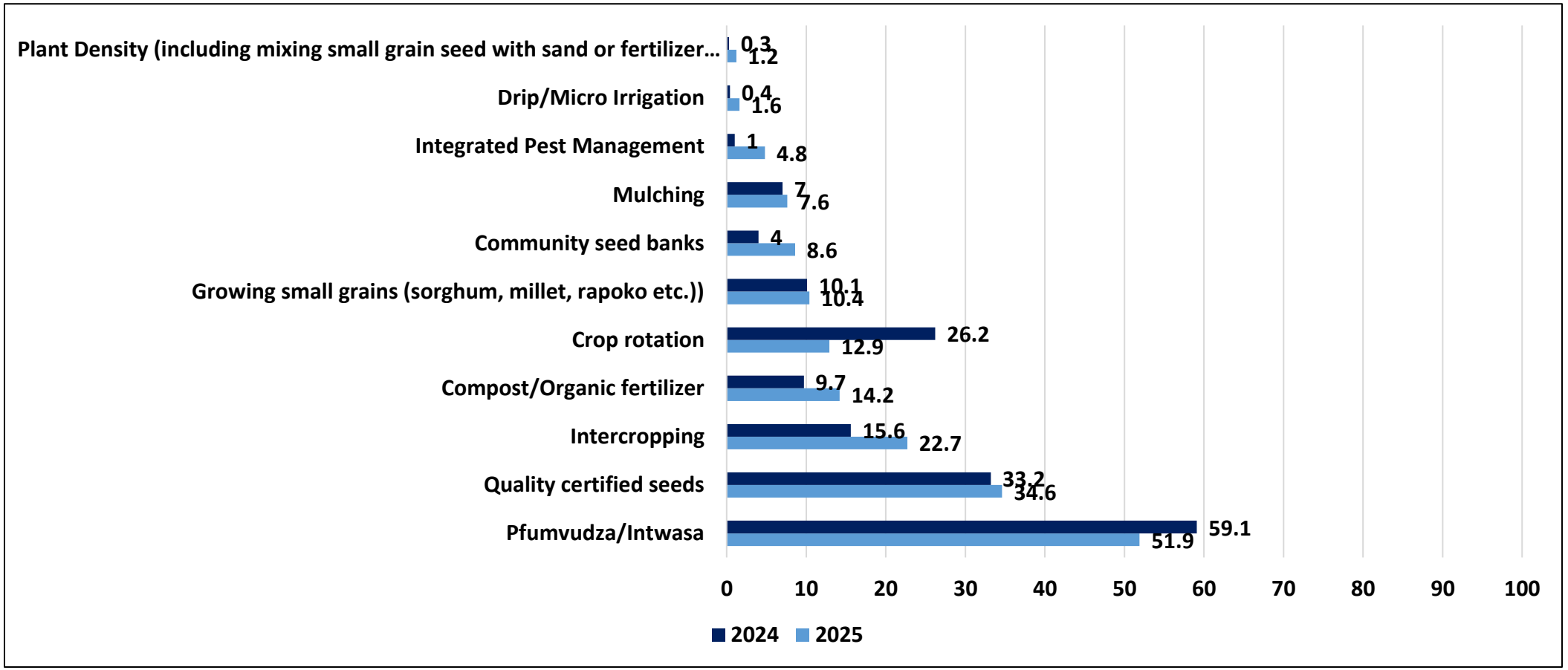
Comparison Between Shock Exposure and Ability to Cope Indices



- The average Shock Exposure Index was 11. Shock severity Index was 15. Average Shock Recovery Index was 11.
- The shock exposure index (17) shock severity index (22) and shock recovery index (17) was high in Mberengwa.

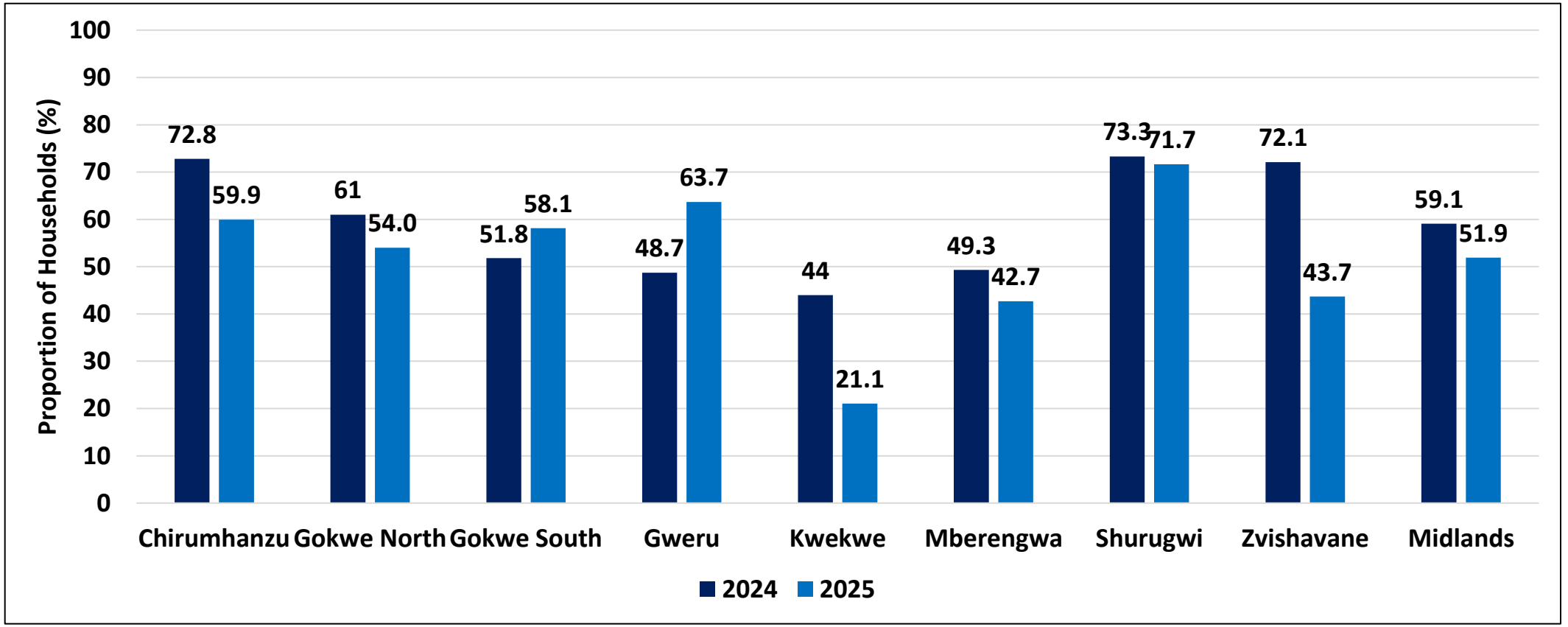
Agricultural Production Technologies

Climate Smart Technologies



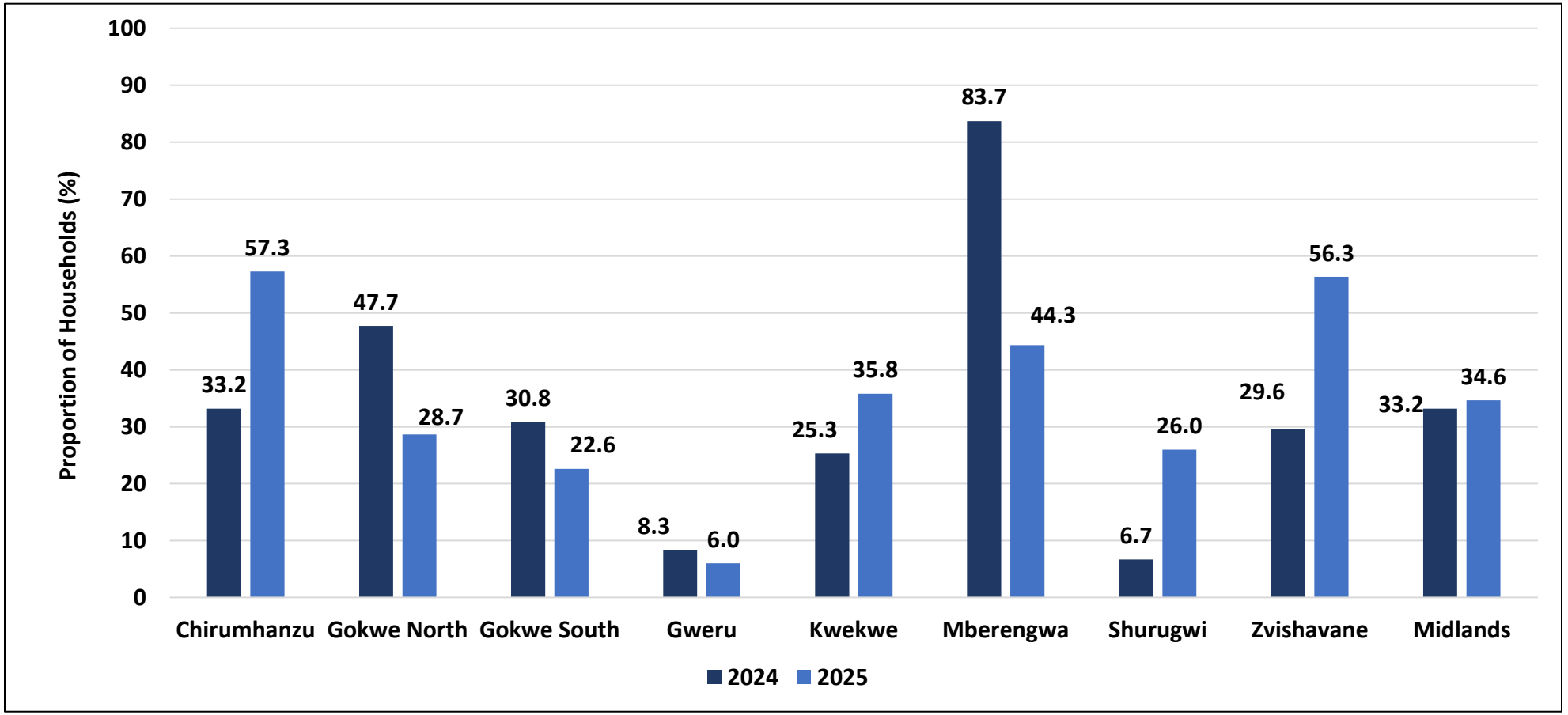
- Pfumvudza/Intwasa (51.9%) was reported by most households as the major climate smart technology.

Pfumvudza/ Intwasa



- There was a decrease in the proportion of households which practised Pfumvudza/Intwasa from 59.1% (2024) to 51.9 % (2025).

Use of Quality Certified Seed



- Certified seeds are crucial in crop production as they ensure high quality better yields and increased resistance to diseases and pests.
- Chirumhanzu (57.3%) had the highest proportion of households which used quality certified seeds.

Crop Production

Households which Grew Crops

	Maize (%)	Sorghum (%)	Finger Millet (%)	Pearl Millet (%)	Tubers (%)	Cowpeas (%)	Groundnuts (%)	Round nuts (%)	Sugar beans (%)	Soya beans (%)	Tobacco (%)	Cotton (%)
Chirumhanzu	91.7	12.6	11.6	6.0	12.3	18.2	54.6	28.1	10.3	0.3	0.0	0.0
Gokwe North	87.3	47.0	2.3	2.0	17.7	48.0	31.3	8.0	0.3	0.0	0.3	20.7
Gokwe South	93.7	42.5	2.0	11.0	29.6	55.1	26.6	3.3	0.0	0.0	0.0	8.0
Gweru	83.0	3.0	0.3	0.0	15.3	22.7	20.7	11.0	6.0	0.0	0.0	0.0
Kwekwe	82.3	5.0	0.3	2.3	8.7	18.7	36.1	9.0	0.7	0.0	0.7	0.0
Mberengwa	93.3	32.7	7.7	3.0	2.0	6.0	12.0	6.3	1.7	0.0	0.0	0.0
Shurugwi	93.7	4.0	6.0	0.0	31.7	15.3	27.0	11.0	18.0	0.3	0.0	0.0
Zvishavane	86.0	20.0	2.7	1.0	10.7	17.3	16.3	9.0	4.7	0.0	0.0	0.0
Midlands	**88.9**	**20.9**	**4.1**	**3.2**	**16.0**	**25.2**	**28.1**	**10.7**	**5.2**	**0.1**	**0.1**	**3.6**

- The proportion of households that grew maize was 88.9%.
- Gokwe South (93.7%), Shurugwi (93.7%) and Mberengwa (93.3%) had the highest proportion of households which grew maize.

Cereals from Casual Labour and Remittances

	Cereals from casual labour (kg)		Cereals from remittances (kg)	
	2024	**2025**	**2024**	**2025**
Chirumhanzu	20.3	75.0	0.2	27.2
Gokwe North	0.1	16.4	0.5	5.3
Gokwe South	3.1	16.5	0	14.2
Gweru	0	10.0	0	2.4
Kwekwe	0.2	13.1	0	1.2
Mberengwa	1.9	20.0	0	3.2
Shurugwi	0	10.6	0	30.5
Zvishavane	4.3	7.1	0	0.8
Midlands	**2.1**	**21.1**	**0**	**10.6**

- Generally, there was an increase in the amount of cereals accessed by households from casual labour and remittances compared to the previous consumption year.
- On average, households reported to have accessed 21.1 kg of maize and 10.6 kg from remittances from casual labour in the previous consumption year

Cereal Stocks as at 1 April 2025

	Maize (kg)	Sorghum (kg)	Finger Millet (kg)	Pearl Millet (kg)
Chirumhanzu	442	36	5	10
Gokwe North	25	11	1	0
Gokwe South	19	6	0	0
Gweru	97	0	0	0
Kwekwe	76	2	0	1
Mberengwa	18	3	2	1
Shurugwi	90	1	0	0
Zvishavane	14	0	0	0
Midlands	**98**	**7.4**	**0.9**	**1.5**

- On average, households had 98 kg of maize in stock on the 1st of April 2025.

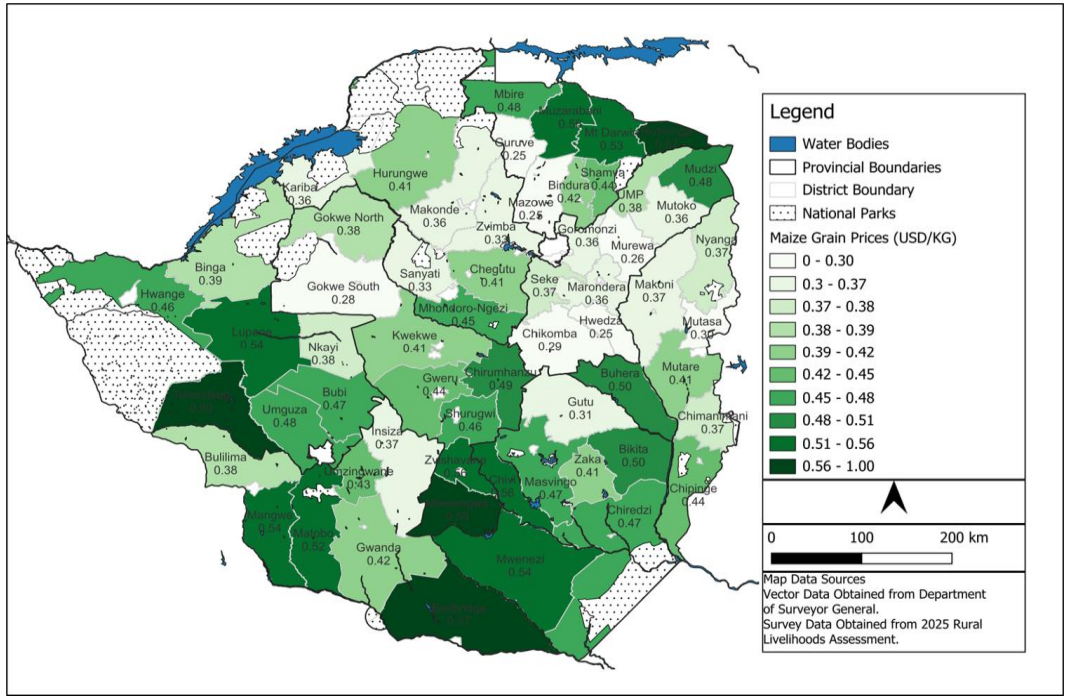
Season Harvest

	Harvested maize (kg)	Harvested sorghum (kg)	Harvested finger millet (kg)	Harvested pearl millet (kg)
Chirumhanzu	695.6	45.7	10.0	4.6
Gokwe North	334.5	140.5	2.0	1.3
Gokwe South	369.9	93.7	3.4	19.4
Gweru	282.1	1.8	0.0	0.0
Kwekwe	315.5	3.0	0.7	2.5
Mberengwa	65.7	16.7	1.2	0.5
Shurugwi	690.0	4.8	7.3	0.0
Zvishavane	131.6	20.0	2.4	0.7
Midlands	**360.9**	**40.8**	**3.4**	**3.6**

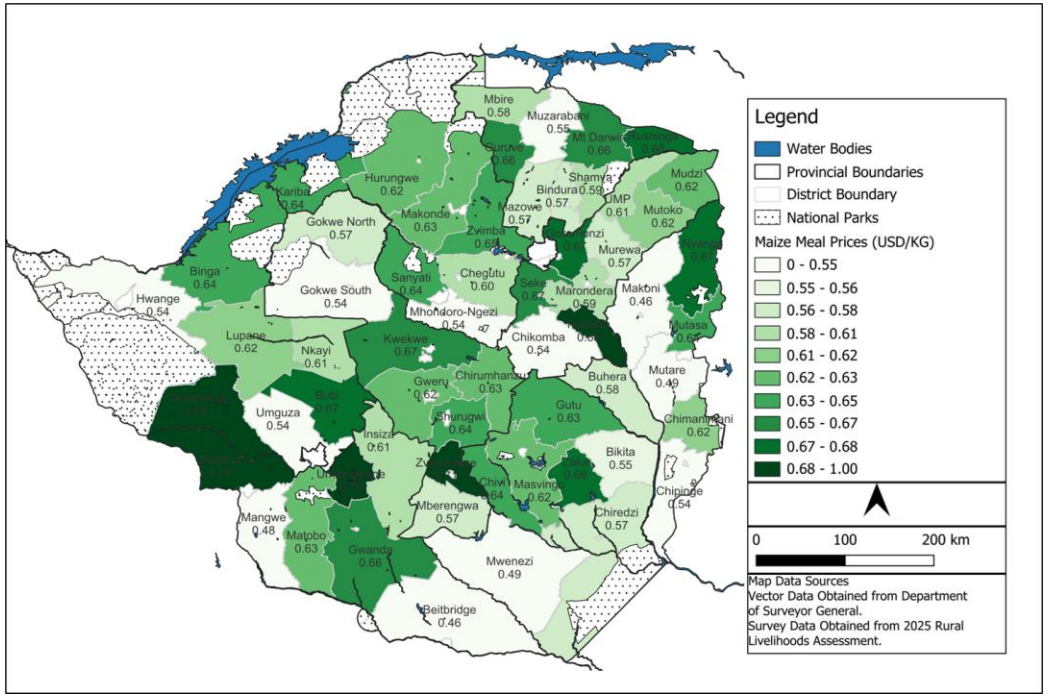
- On average, households harvested 360.9kgs of maize and 40.8kgs of sorghum.
- Chirumhanzu (695.6kgs) had the highest average harvest for maize.

Maize Grain and Maize Meal Prices

Maize Grain



Maize Meal



- Maize grain prices were high in Mberengwa (USD 0.59) and Zvishavane (USD 0.56).
- Maize meal prices were high Zvishavane (USD0.71).

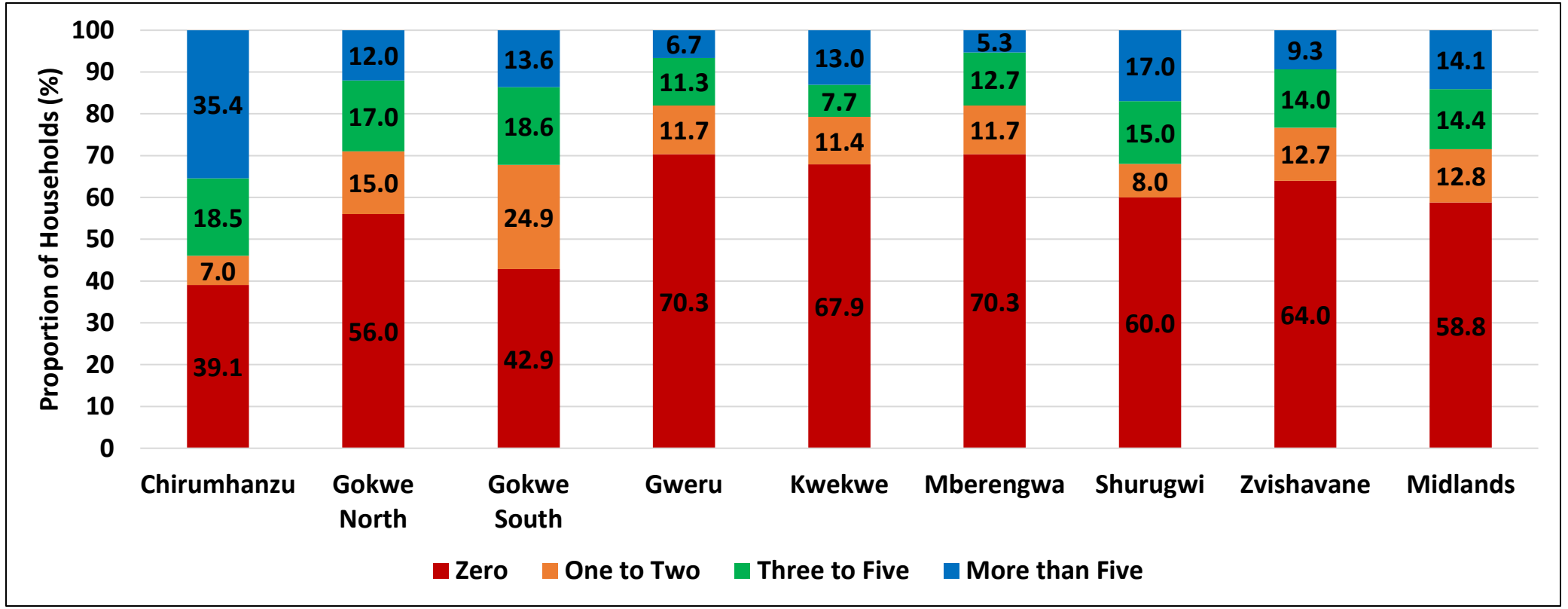
Livestock Production

Households which owned livestock

	Cattle (%)	Donkey (%)	Sheep (%)	Goats (%)	Pigs (%)	Poultry (%)	Rabbits (%)
Chirumhanzu	60.9	2.3	1.7	48.0	8.9	71.5	0.3
Gokwe North	44.0	3.7	0.0	52.7	1.3	55.0	0.3
Gokwe South	57.1	2.3	0.0	47.2	1.7	66.8	1.0
Gweru	29.7	3.7	0.7	25.7	1.0	47.0	1.0
Kwekwe	32.1	4.0	0.0	26.4	0.3	32.8	0.0
Mberengwa	29.7	4.0	1.0	32.0	0.3	56.3	0.7
Shurugwi	40.0	1.0	0.0	40.7	0.3	76.7	2.0
Zvishavane	36.0	9.7	0.7	30.3	0.0	60.7	0.7
Midlands	**41.2**	**3.8**	**0.5**	**37.9**	**1.7**	**58.4**	**0.7**

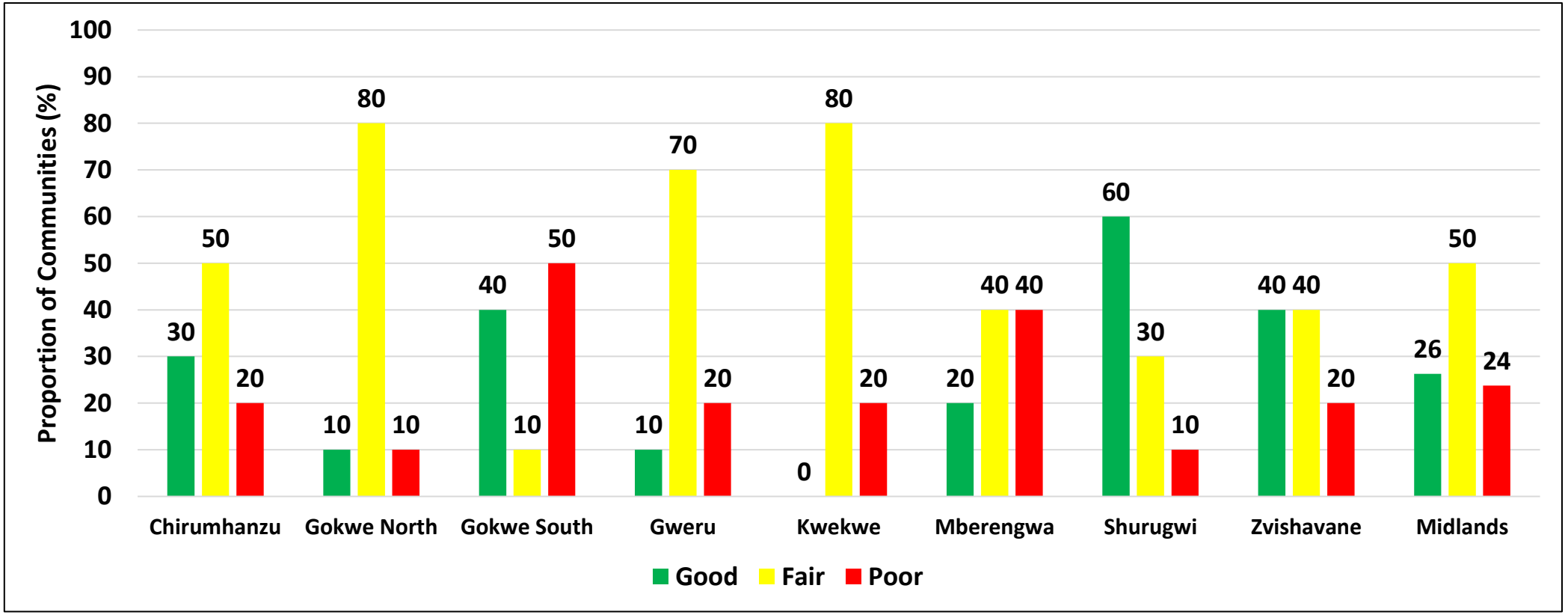
- Poultry (58.4%), cattle (41.2%) and goats (37.9%) were reported to be owned by most households.

Cattle Ownership



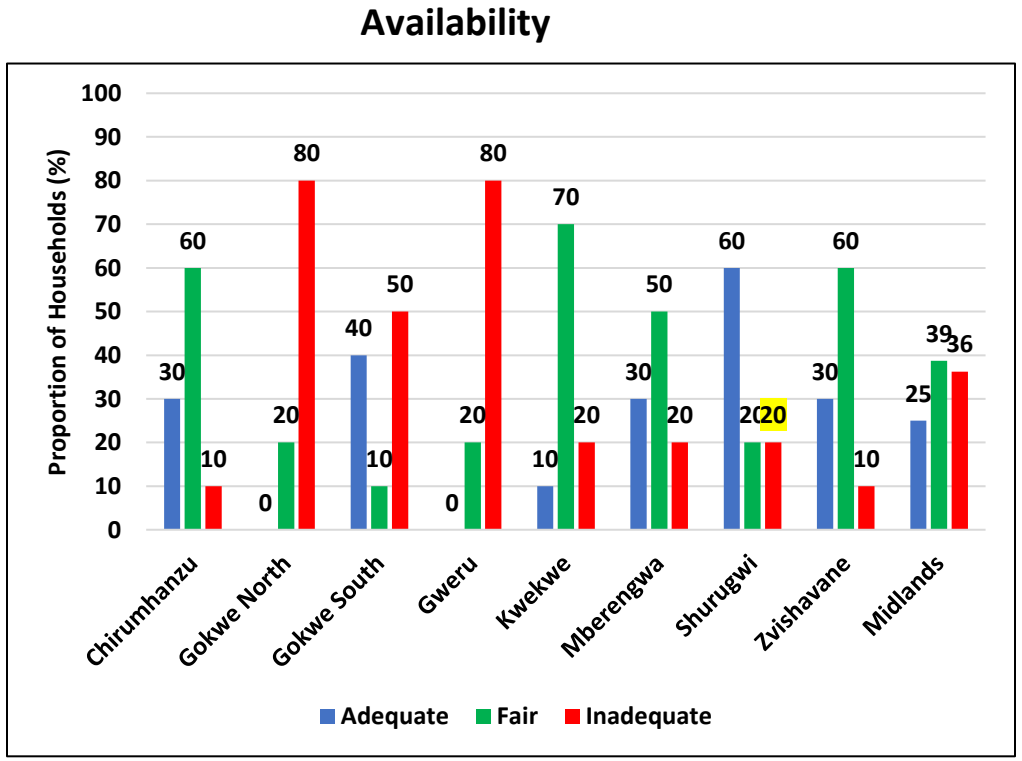
- The proportion of households that did not own cattle was 58.8%.
- Gweru (70.3%) and Mberengwa (70.3%) had the highest proportion households that did not own cattle while Chirumanzu (39%) had the lowest.

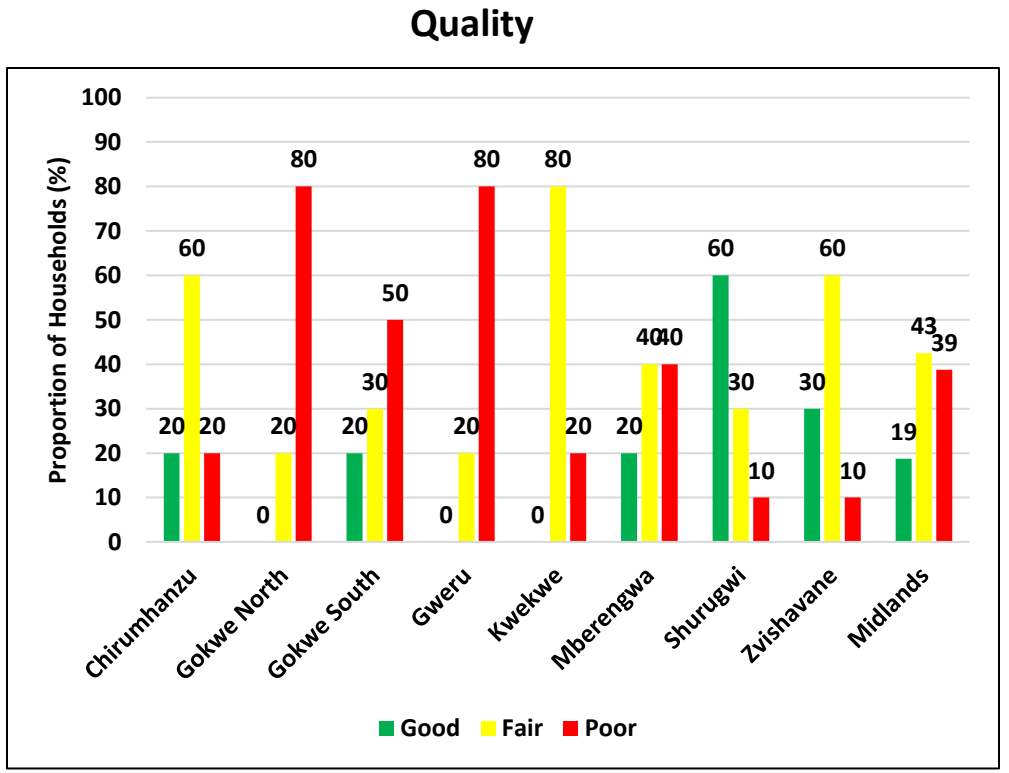
Livestock Condition



- About 24% of the communities indicated that their livestock were in a poor condition.

Pasture Availability and Quantity

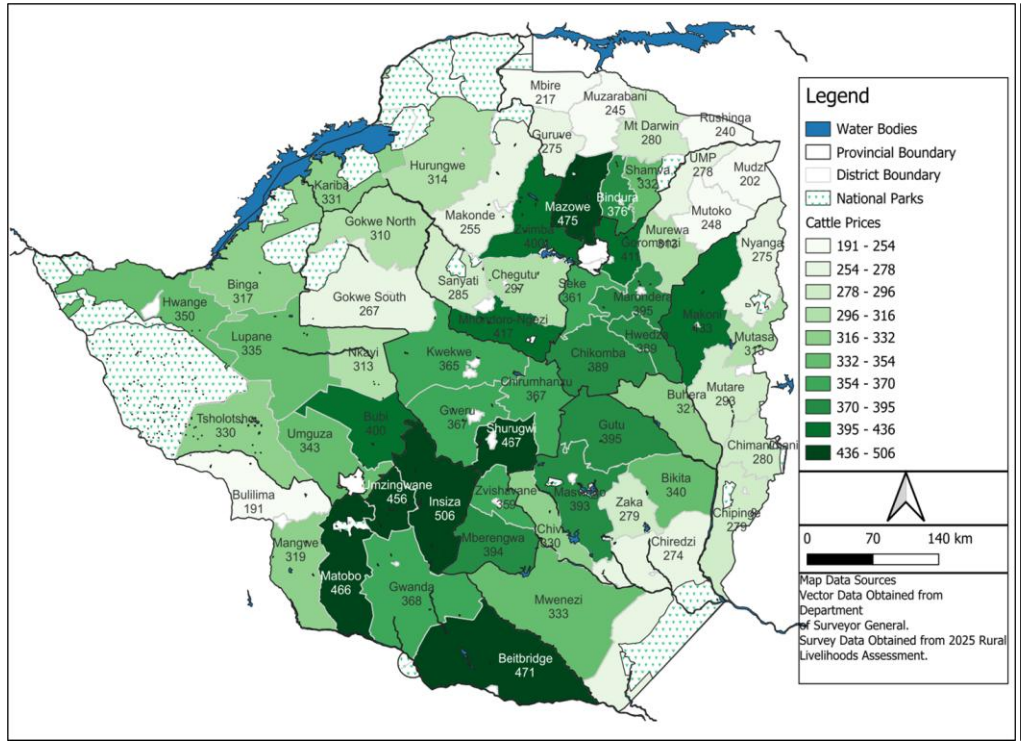




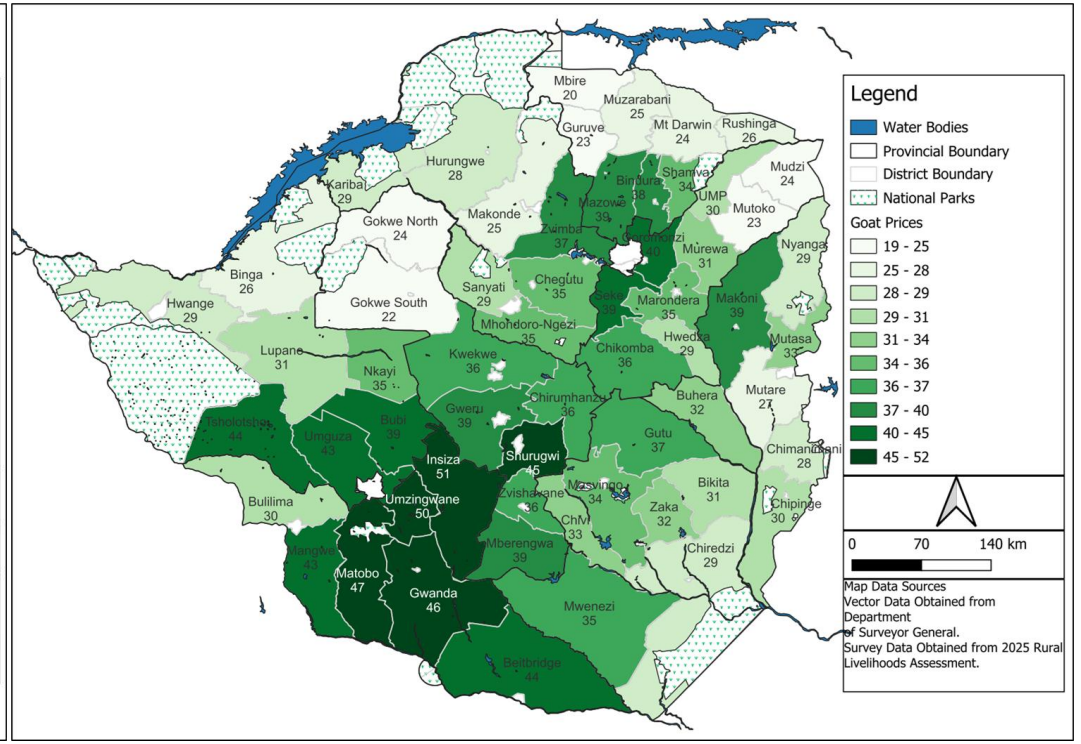
- Most communities indicated that pasture availability (25%) and pasture quality (43%) were fair at the time of the assessment.

Livestock Prices

Cattle Prices



Goat Prices



- The highest cattle prices were reported in Shurugwi (USD467) and the lowest were reported in Gokwe South (USD267).
- The highest goat prices were reported in Shurugwi (USD45) and the lowest were reported in Gokwe South (USD22).

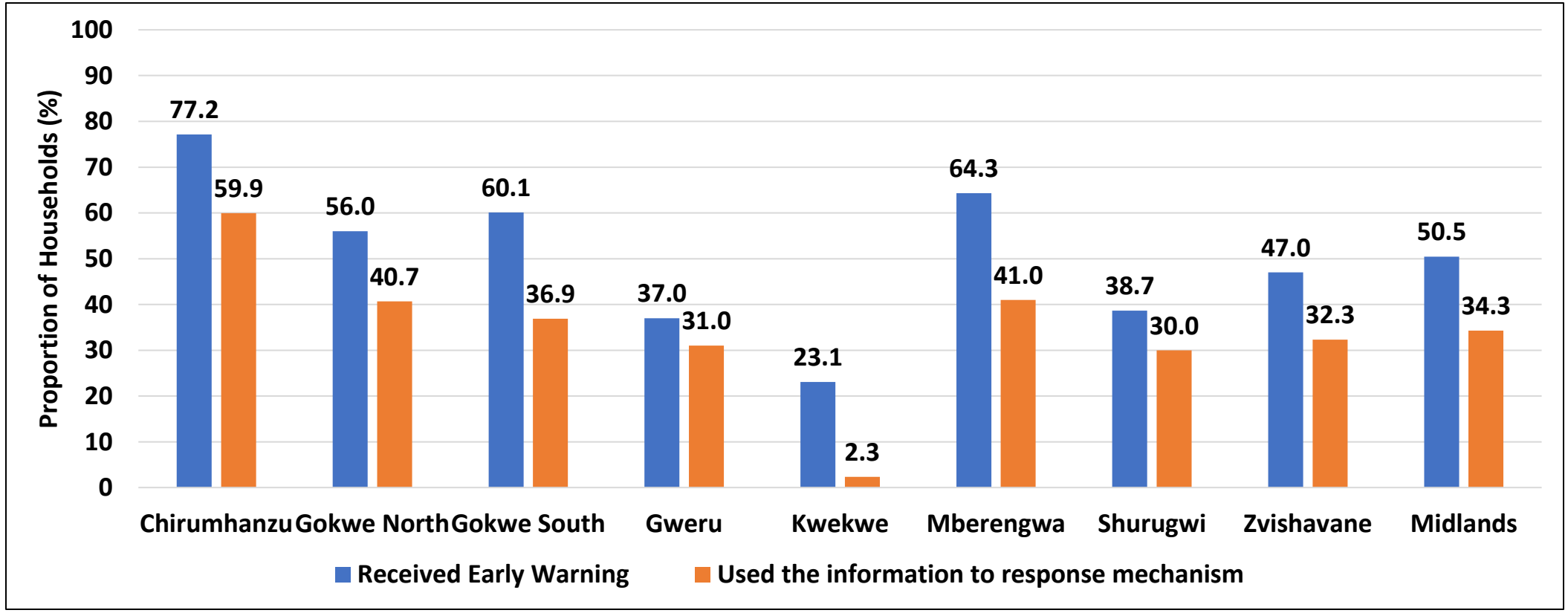
Access to Information and Critical Infrastructure

Access to Agricultural Extension

	Cropping advice (%)	Livestock services (%)	Weather and climate advice (%)	Extension Visit (%)	Other training (%)
Chirumhanzu	74	30	56	29	1
Gokwe North	40	20	16	33	0
Gokwe South	66	54	24	24	9
Gweru	16	5	2	12	0
Kwekwe	35	19	5	14	1
Mberengwa	49	40	42	30	1
Shurugwi	43	18	12	18	3
Zvishavane	48	20	10	12	0
Midlands	**46**	**26**	**21**	**21**	**2**

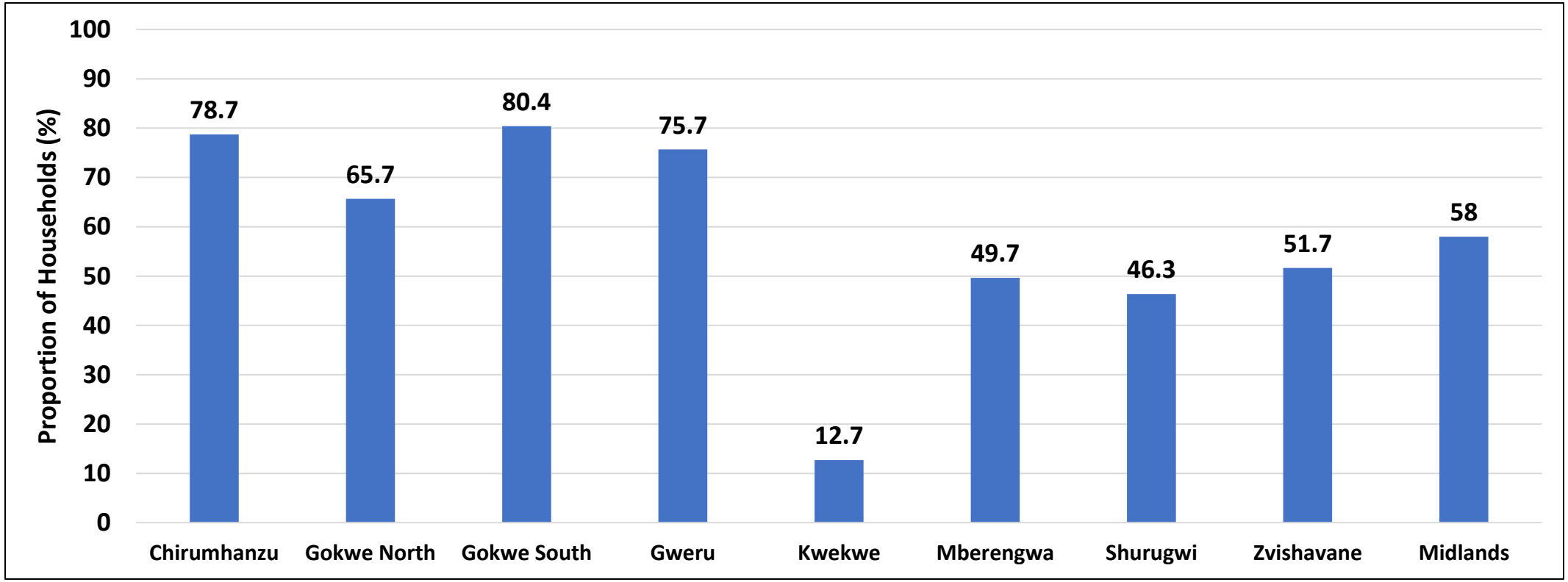
- About 46 % of the households had received cropping advice during the 2024/2025 agricultural season.

Access to and Use of Early Warning Information



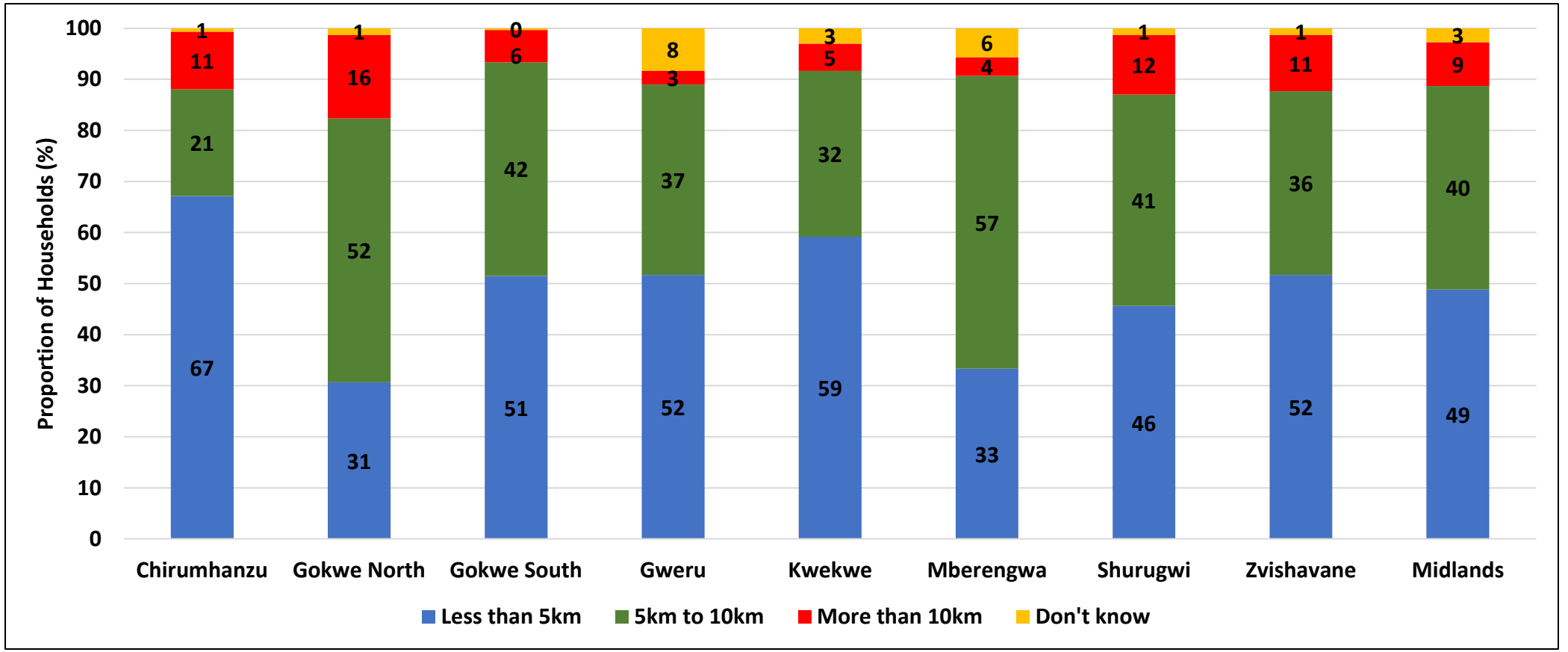
- About 50.5% of the households reported to have received early warning information.
- Only 34.3% of the households used the information to plan response mechanisms.

Households that Received Any Information on Health and Nutrition



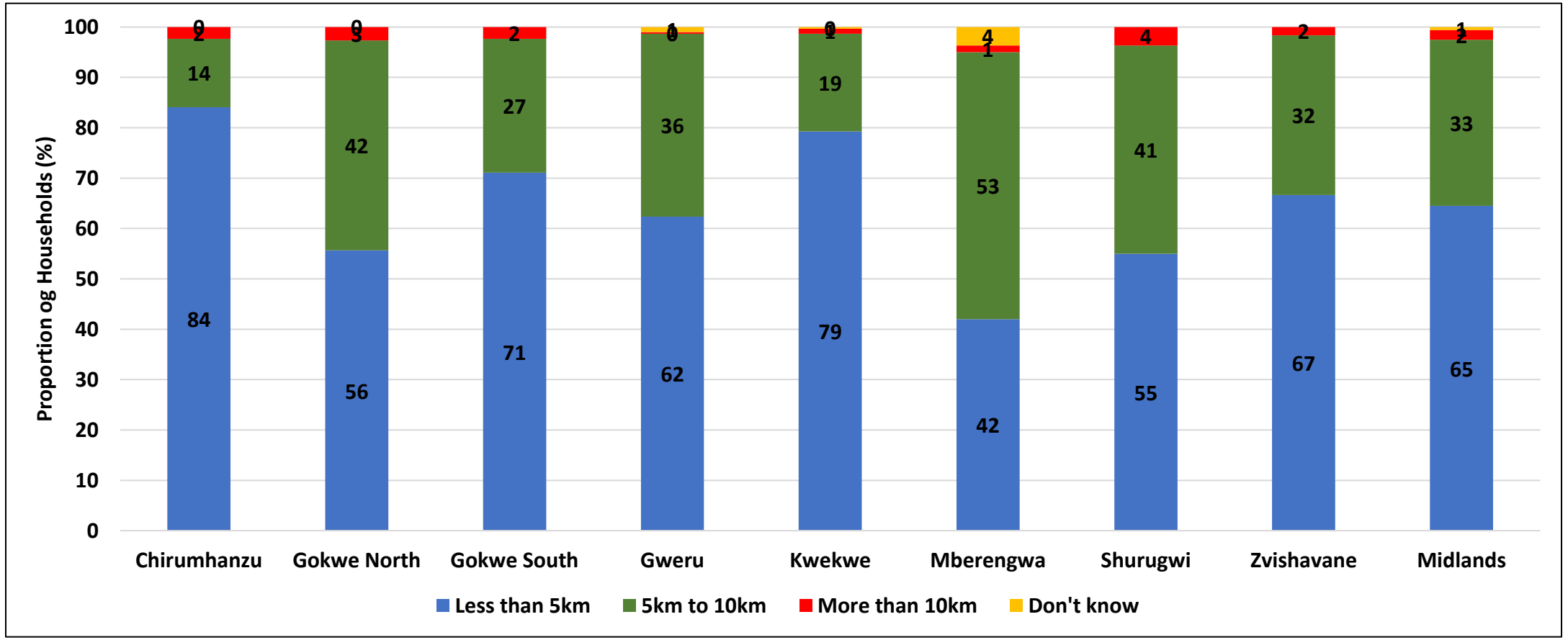
- Access to nutrition and health information empowers communities and influences consumer behavioral changes.
- About 58% …….reported to have received any information about health and nutrition.

Distance to the Nearest Health Facility/Clinic



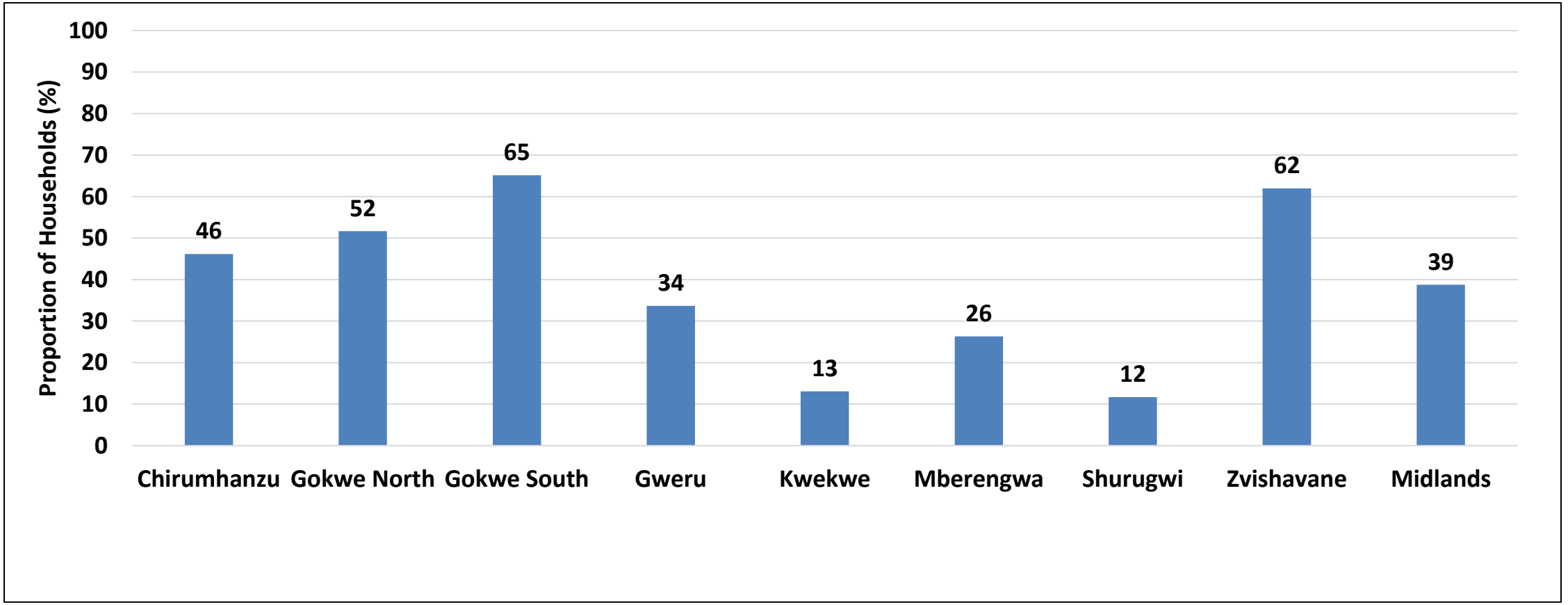
- About 49% of the households had their nearest health facility within the 5km radius.
- Mberengwa (57%) had the highest proportion of households that travelled between 5km to 10km to the nearest health facility.
- Gokwe North (16%) had the highest proportion of households that travelled more than 10km to the nearest health

Distance to the Nearest Primary School



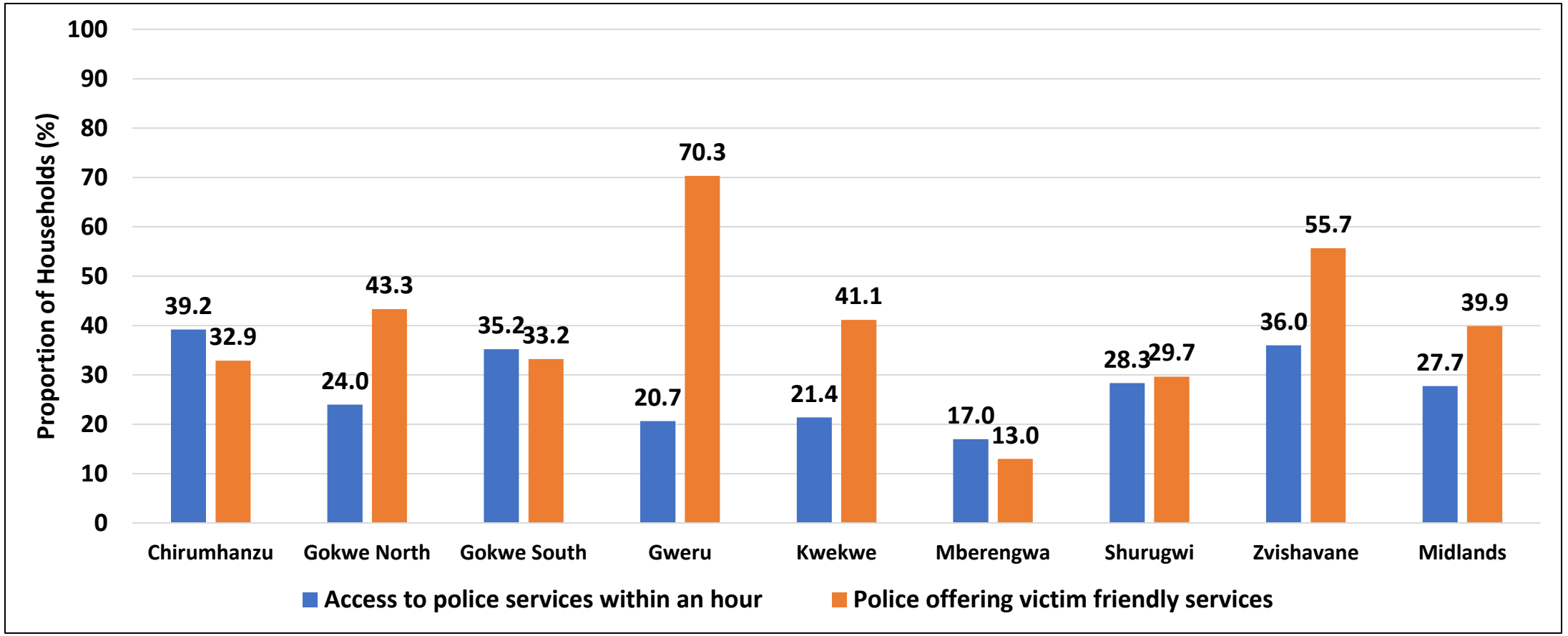
- About 65% of the households had access to a primary school within a radius of 5km, whilst 1% had their nearest primary school more than 10km away.

Access to Information on Services for Victims of Physical and Sexual violence



- About 39% on the households in Midlands had access to information on services for victims of physical and sexual violence.
- Gokwe South (65%) had the highest proportion of households with access to information on services for victims of physical and sexual violence.

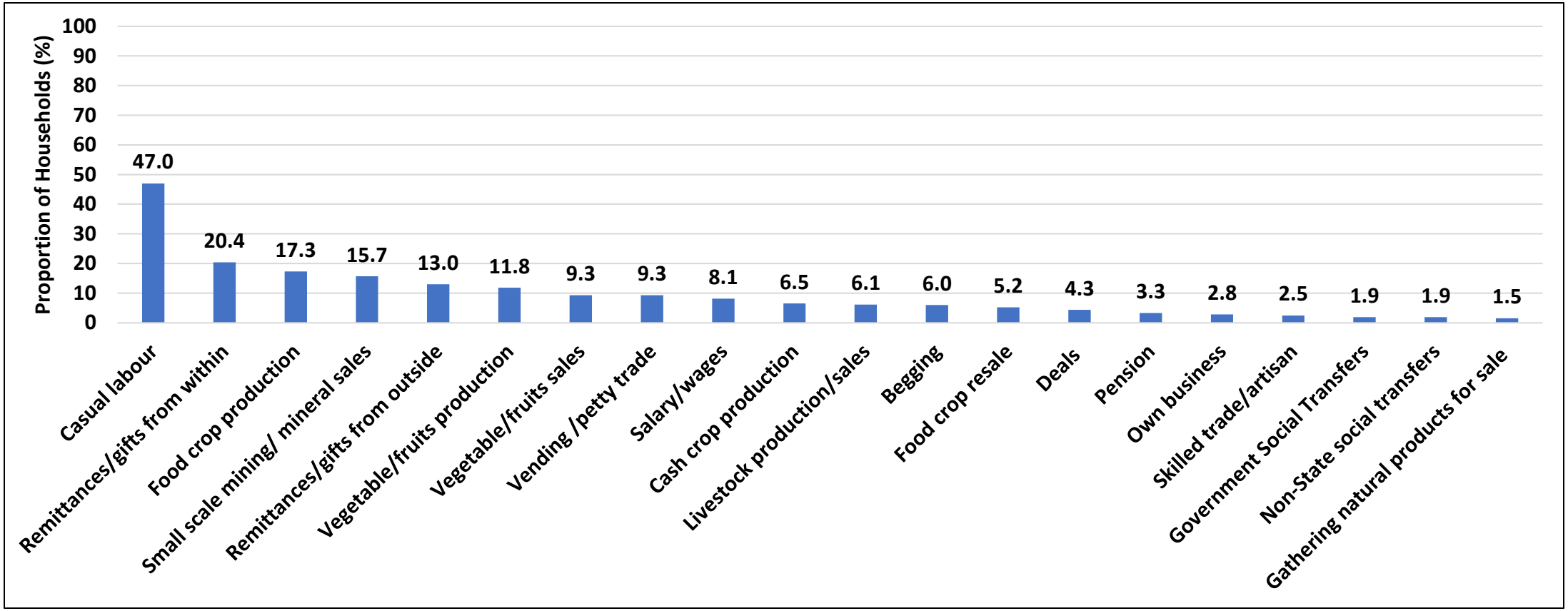
Access to Police Services



- About 27.7% of the households had access to police services within one hour.
- Chirumhanzu (39.2%) had the highest proportion of households accessing police services within an hour whilst Mberengwa (17%) had the lowest

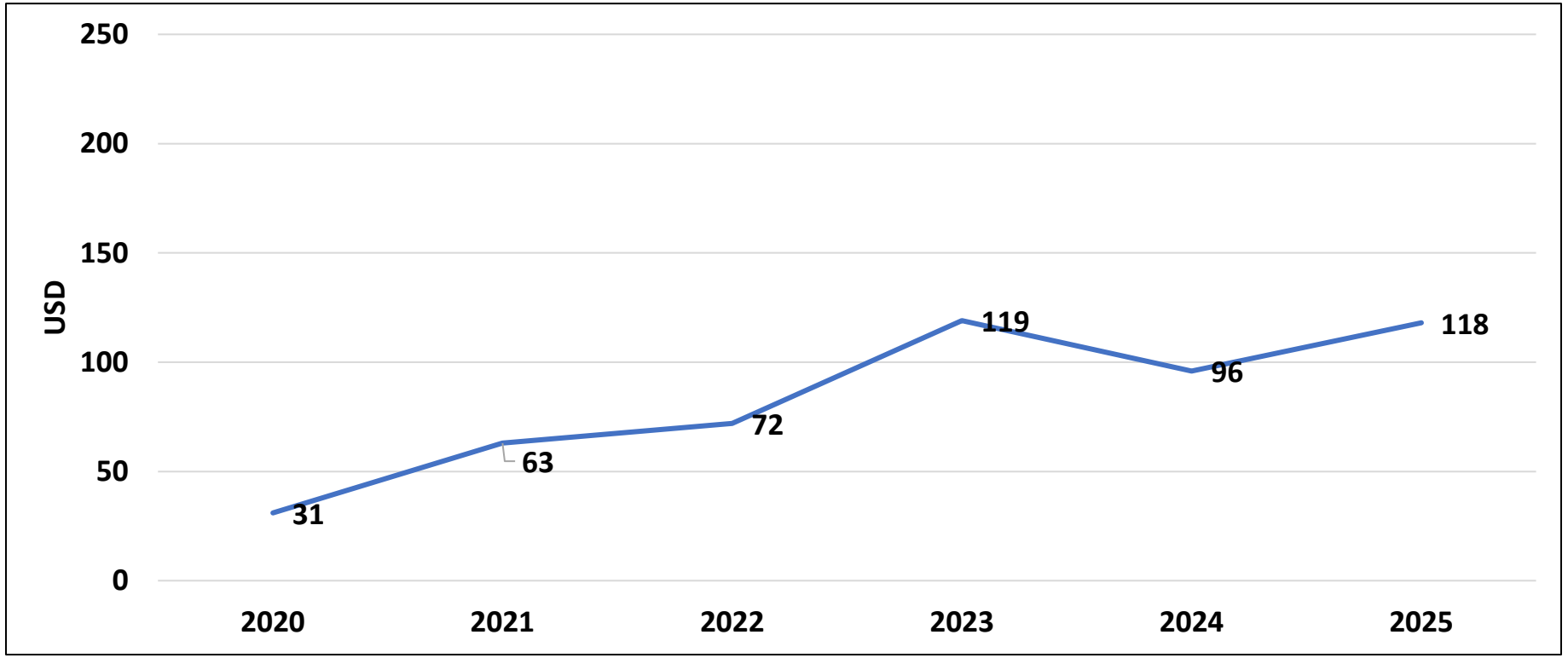
Income and Expenditure

Most Important Income Sources



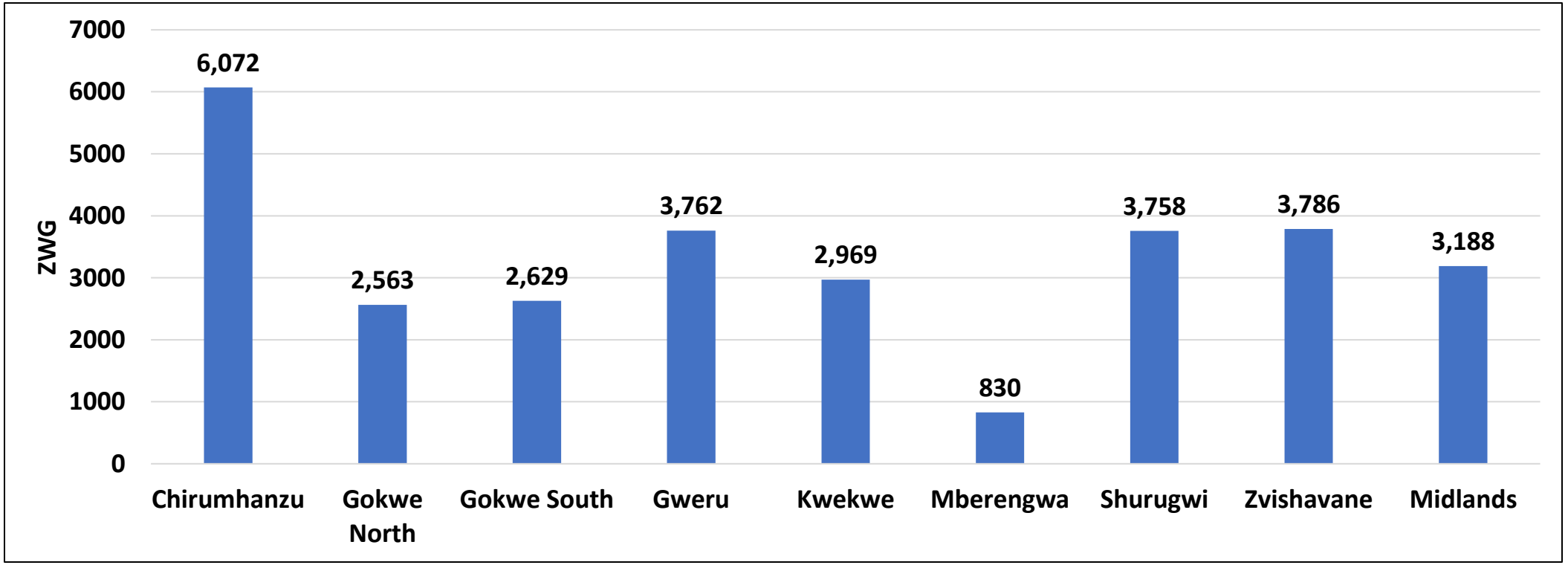
- Income is a proxy for economic status, living standards and wellbeing.
- Most households relied on casual labour (47%), remittances from within Zimbabwe (20,4%) and food crop production (17.3%) in 2025.

Income Trends (USD): 2020-2025



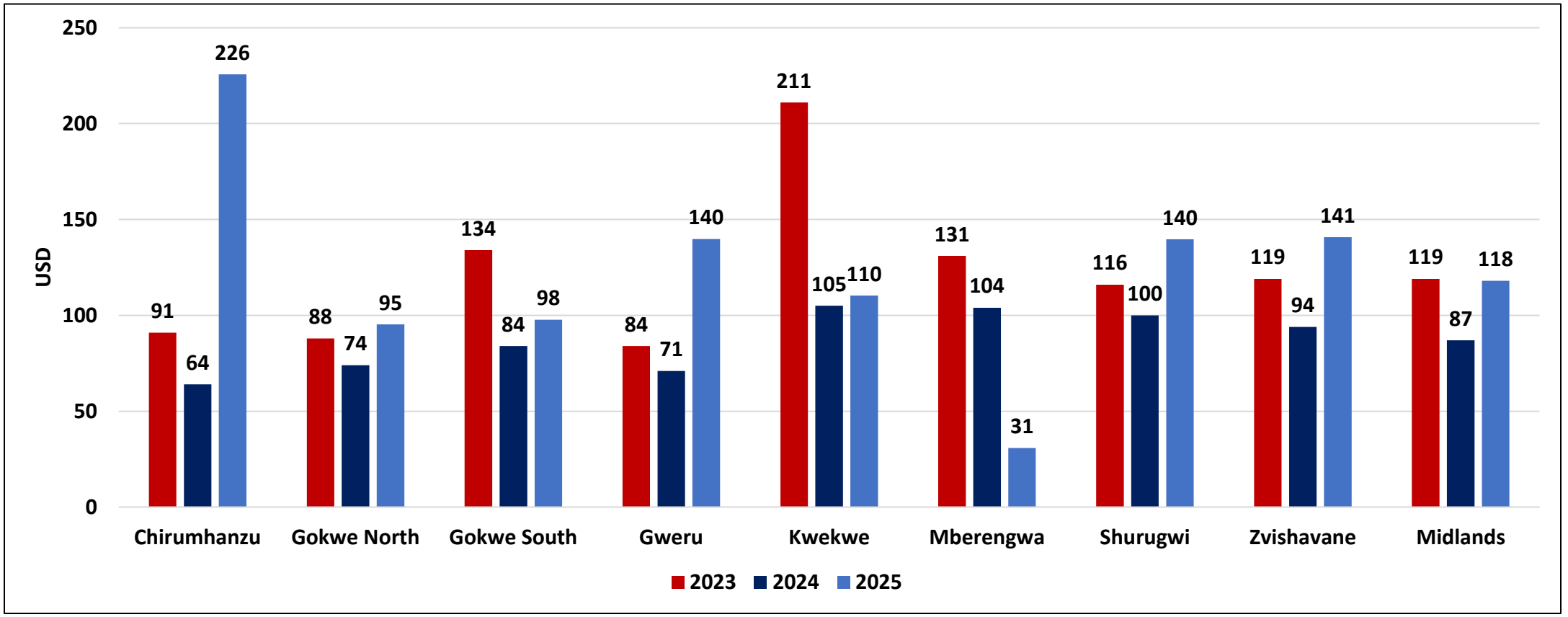
- Compared to base year 2020, rural incomes have been increasing.
- The average household income increased from USD 96 in 2024 to USD 118 in 2025.

Average Household Monthly Income (ZWG) for April 2025



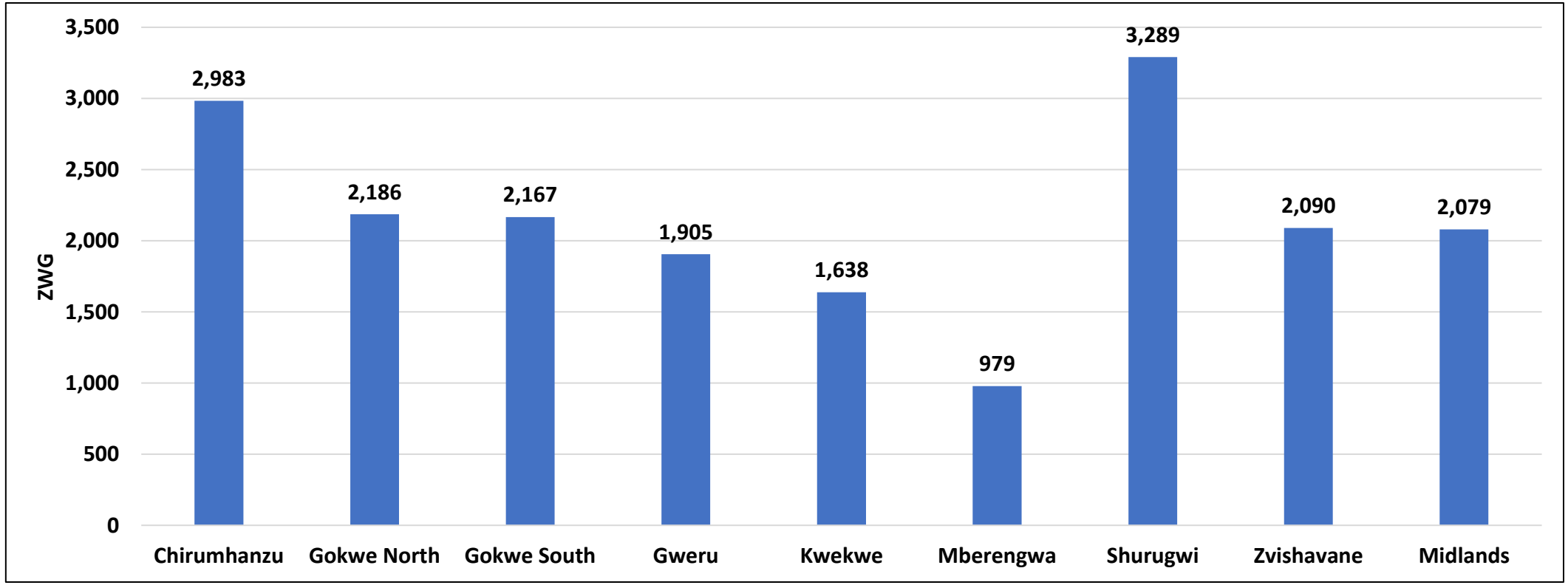
- The provincial average household monthly income was ZWG 3,188.
- The highest average household monthly income was high in Chirumhanzu (ZWG 6,072) while it was low in Mberengwa (ZWG 830).

Average Household Monthly Income (USD) for April 2025



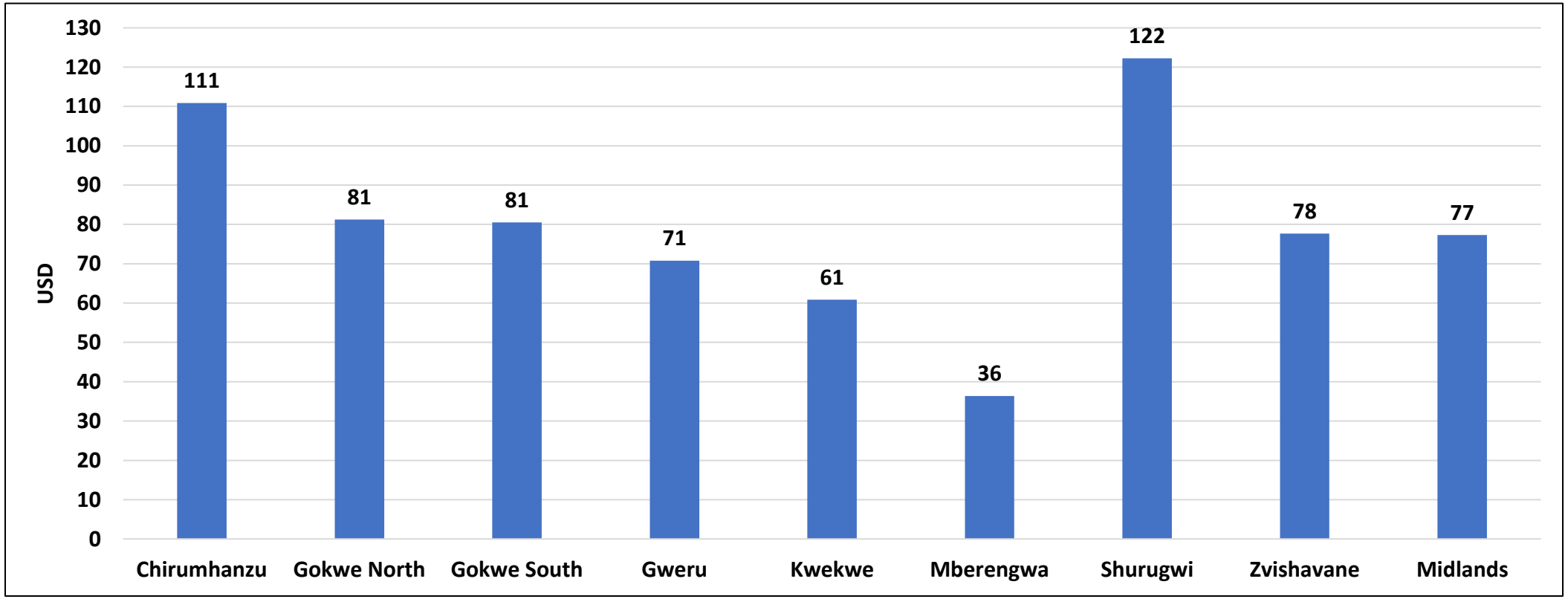
- The household average monthly income decreased from USD 119 in 2023 to USD 118 in 2025.
- The highest household average monthly income was reported in Chirumhanzu (USD 226) and the lowest was reported Mberengwa (USD 31).

Average Household Monthly Expenditure (ZWG) for April 2025



- Households in Shurugwi (ZWG 3,289) had the highest expenditure while households in Mberengwa (ZWG 979) had the lowest expenditure.

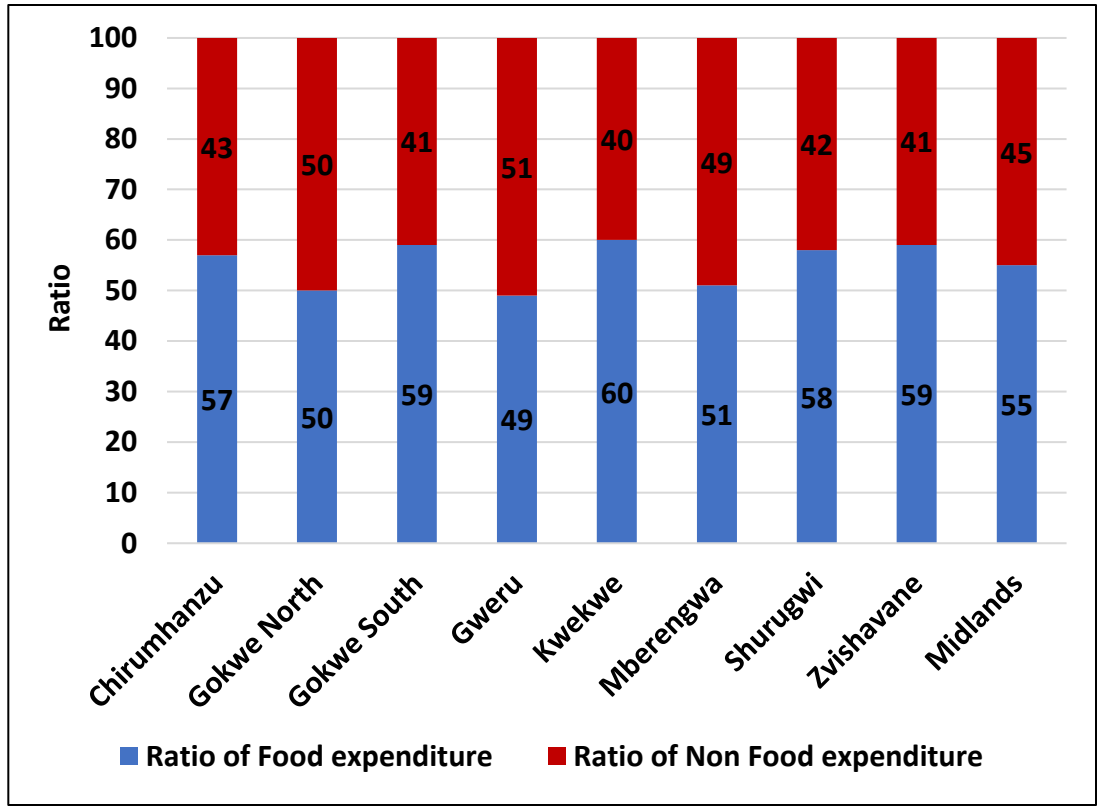
Average Household Monthly Expenditure (USD) for April 2025



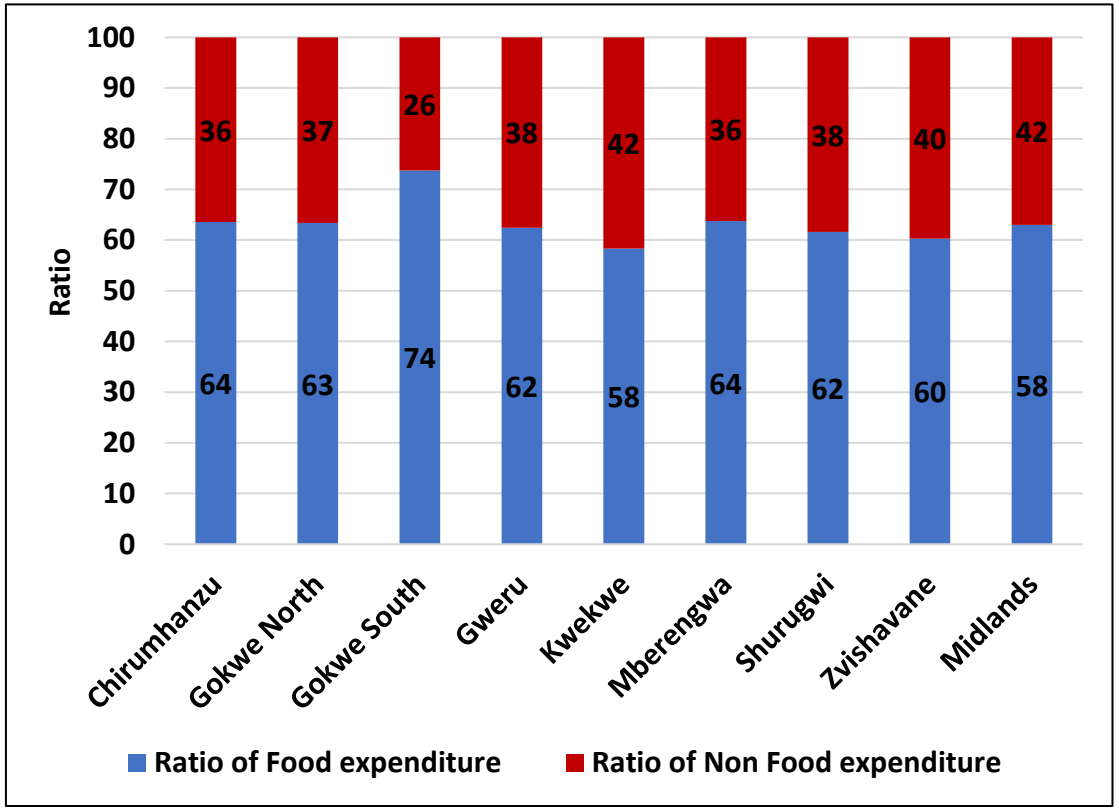
- Midlands average expenditure for the month of April 2025 was USD 77.
- Shurugwi (USD 122) had the highest monthly expenditure while Mberengwa (USD 36) had the lowest expenditure.

Food and Non-Food Expenditure Ratio

2024



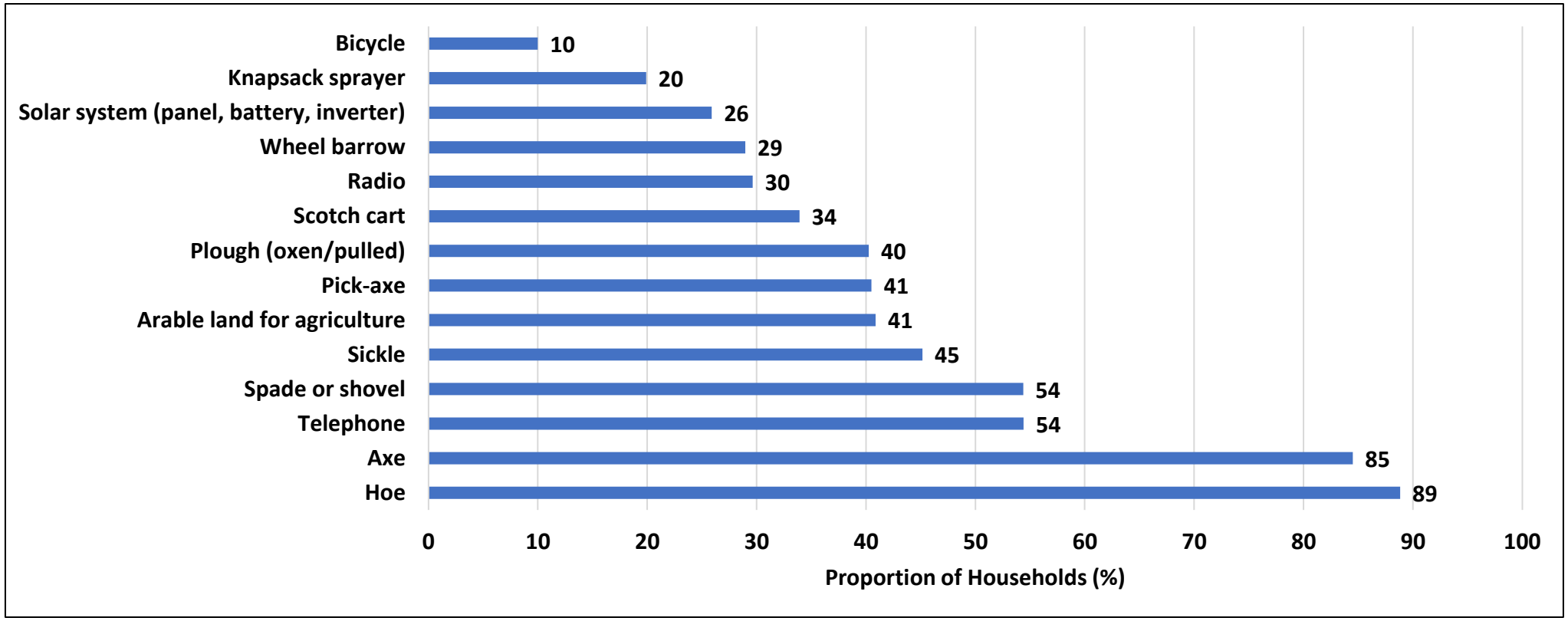
2025



- The food expenditure ratio was 63.

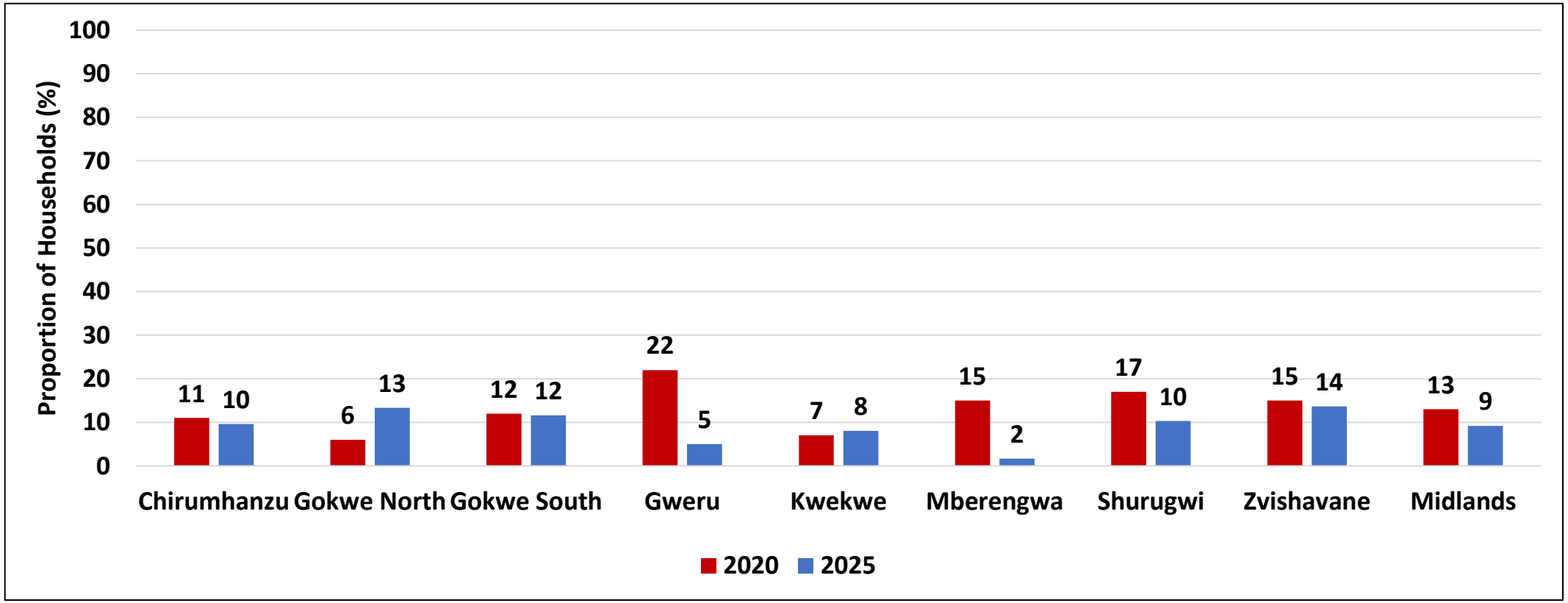
Assets, Loans and Remittances

Assets



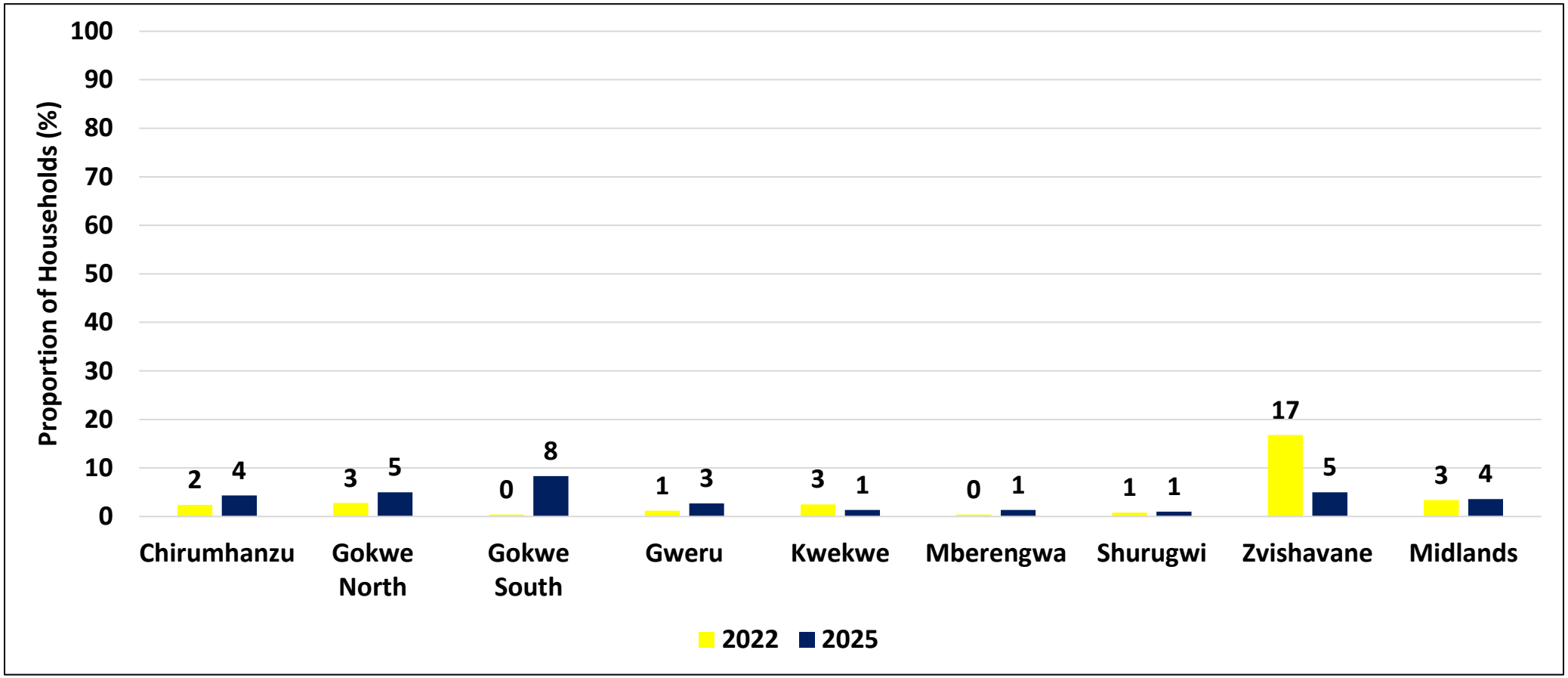
- The most commonly owned assets by households were hoes (88.8%), axes (84.5%) and mobile phones (54.4%).

Households Participating in ISALS/Mukando/Ukuqogelela



- There was a decrease in the proportion of households participating in ISALS/Mukando/Ukuqogelela from 13% in 2020 to 9.2% in 2025.

Households that Accessed loans



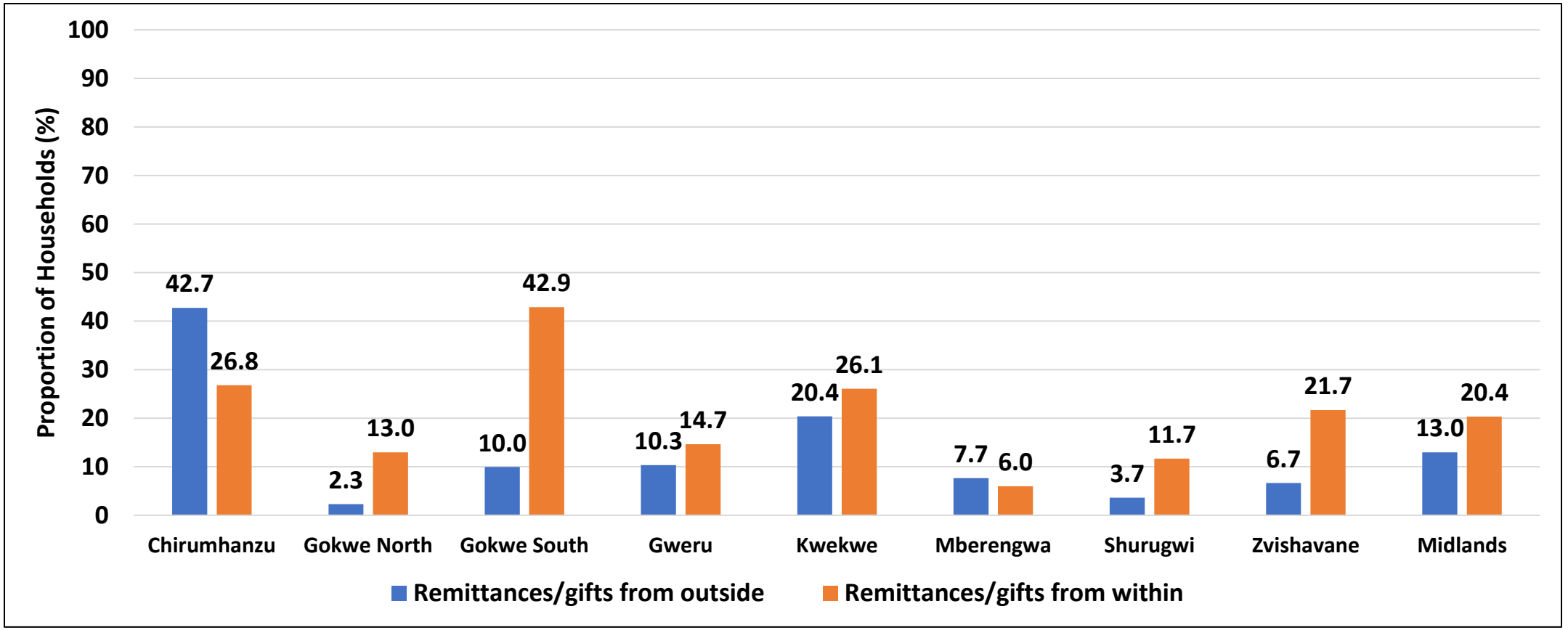
- About 4**%** of the households in Midlands had access to loans.

Sources of Loans

	Friend/relative (%)	Money Lender (%)	Banks (%)	Micro finance institutions (%)	Other Financial Services (%)	ISAL/Mukando /Ukuqogelela (%)	Farmer's organisation (%)	Local trader/shopkeeper (%)	Other (%)
Chirumhanzu	0.0	0.0	0.0	0.0	0.0	4.3	0.0	0.0	0.0
Gokwe North	0.3	0.0	0.7	0.7	0.0	3.3	0.0	0.3	0.0
Gokwe South	0.0	0.0	0.0	0.0	0.0	8.3	0.0	0.0	0.0
Gweru	1.0	0.3	0.3	0.3	0.3	0.7	0.0	0.0	0.0
Kwekwe	0.3	0.0	0.3	0.3	0.0	0.3	0.0	0.3	0.0
Mberengwa	0.0	0.0	0.0	0.0	0.0	1.3	0.0	0.0	0.0
Shurugwi	0.3	0.0	0.0	0.3	0.0	0.3	0.0	0.0	0.0
Zvishavane	0.3	0.3	0.0	0.0	0.0	4.0	0.0	0.0	0.0
Midlands	**0.3**	**0.1**	**0.2**	**0.2**	**0.0**	**2.8**	**0.0**	**0.1**	**0.0**

- The main source of loans for the households was ISAL/Mukando/Ukuqogelela (2.8%).

Households which Received Remittances/Gifts



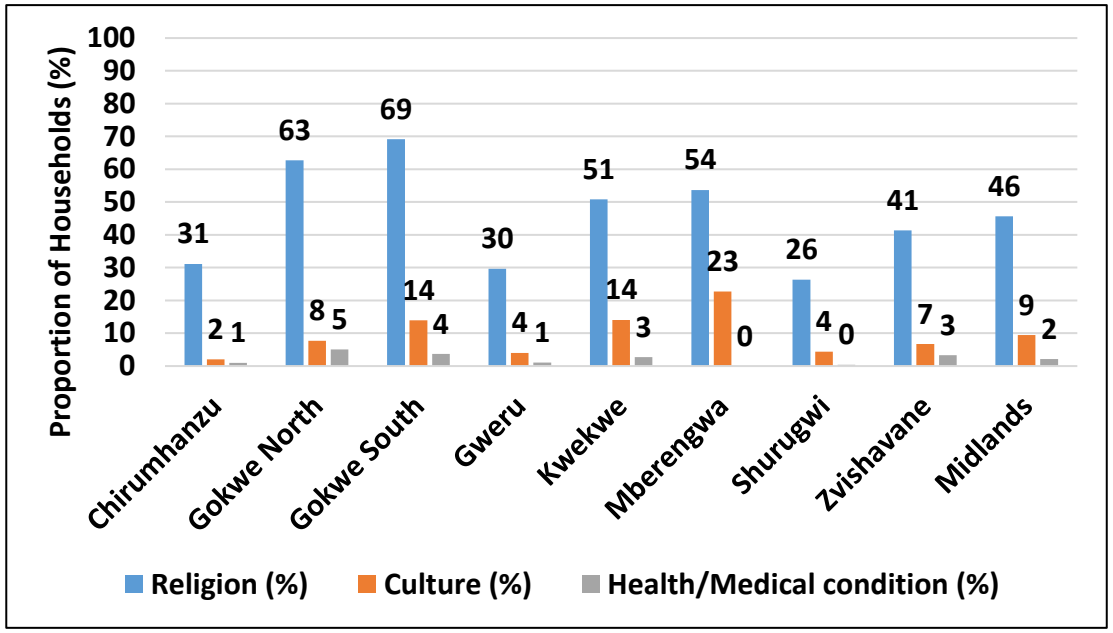
- Remittances/gifts received were mainly from within the country (20.4%).
- Gokwe South (42.9%) had the highest proportion of households that received remittances/gifts from within the country.
- Chirumhanzu (42.7%)had the highest proportion of households that received remittances from outside the country.

Taboos

Household Food Taboos

	Certain meat and meat products not consumed (%)	Certain fruits not consumed (%)	Traditional cereals not consumed (%)	Certain insects not consumed (%)	No taboos or restrictions (%)
Chirumhanzu	32.8	2.3	1.7	0.7	67.5
Gokwe North	68.7	0.7	1.3	1	30.3
Gokwe South	74.8	3	1.3	1.3	23.9
Gweru	30	0.3	0	11.3	68
Kwekwe	40.8	17.1	12.4	1.7	32.4
Mberengwa	50	0.3	0.3	9.3	46
Shurugwi	30.3	0	0	0.3	69
Zvishavane	44	0.7	0	1.7	56.3
Midlands	**46.4**	**3.1**	**2.1**	**3.4**	**49.1**

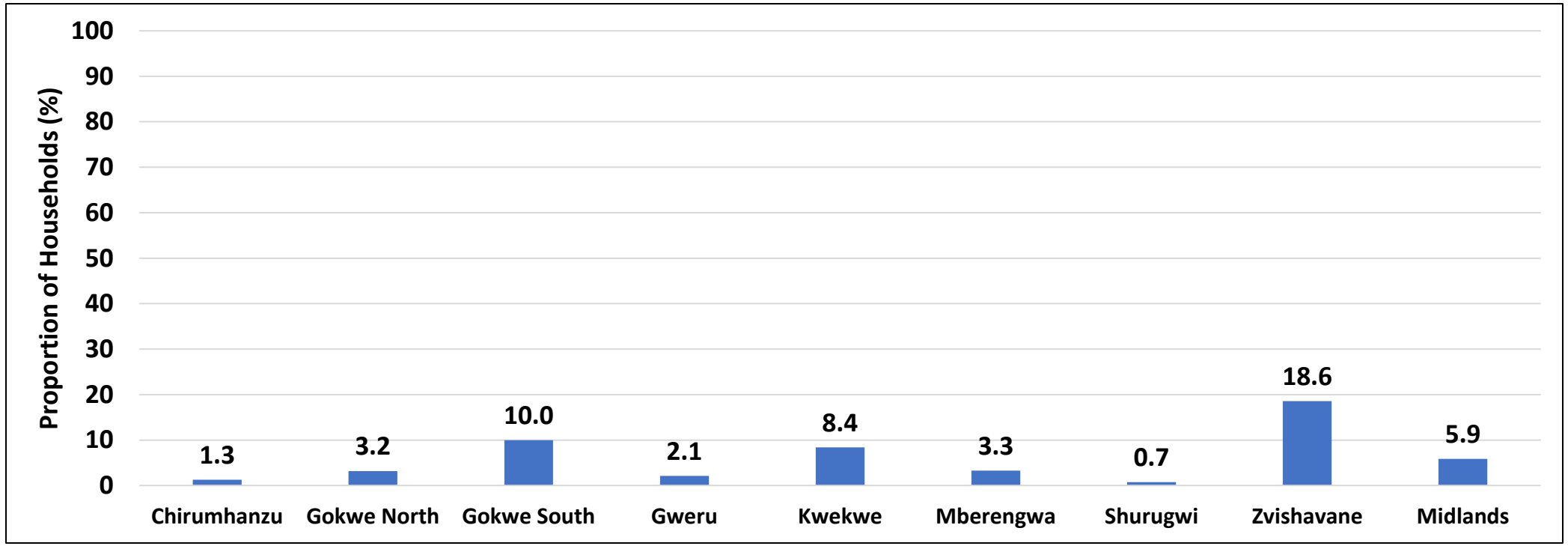
Reasons for Taboos



- At least 46.4 % of the households had taboos on consumption of certain meat and meat products which may have negative effect on individual dietary diversity options ultimately affecting the quality of diets.
- Religion (46%) was the most reported reason for dietary related taboos.

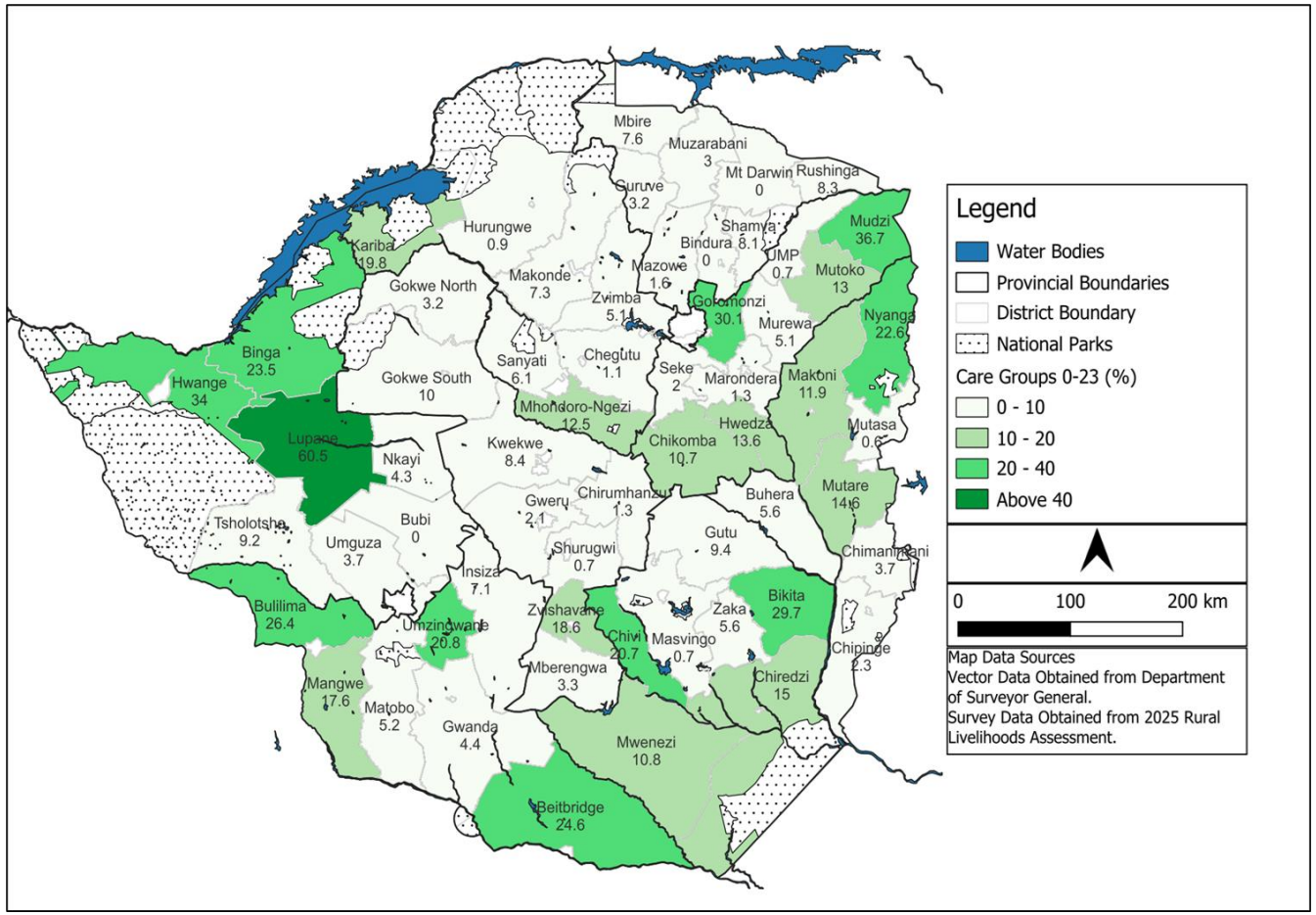
Care Groups

Membership of a Care Group or IYCF Support Groups (0-23 Months)



- At least 5.9% of the primary care givers for children 0-23 months were either enrolled in a care group or were part of an infant and young child feeding support group.

Membership of a Care Group or IYCF Support Groups (0-23 Months) by District



- Gokwe South (10%) had the highest proportion of caregivers who were members of a care group or IYCF support group.

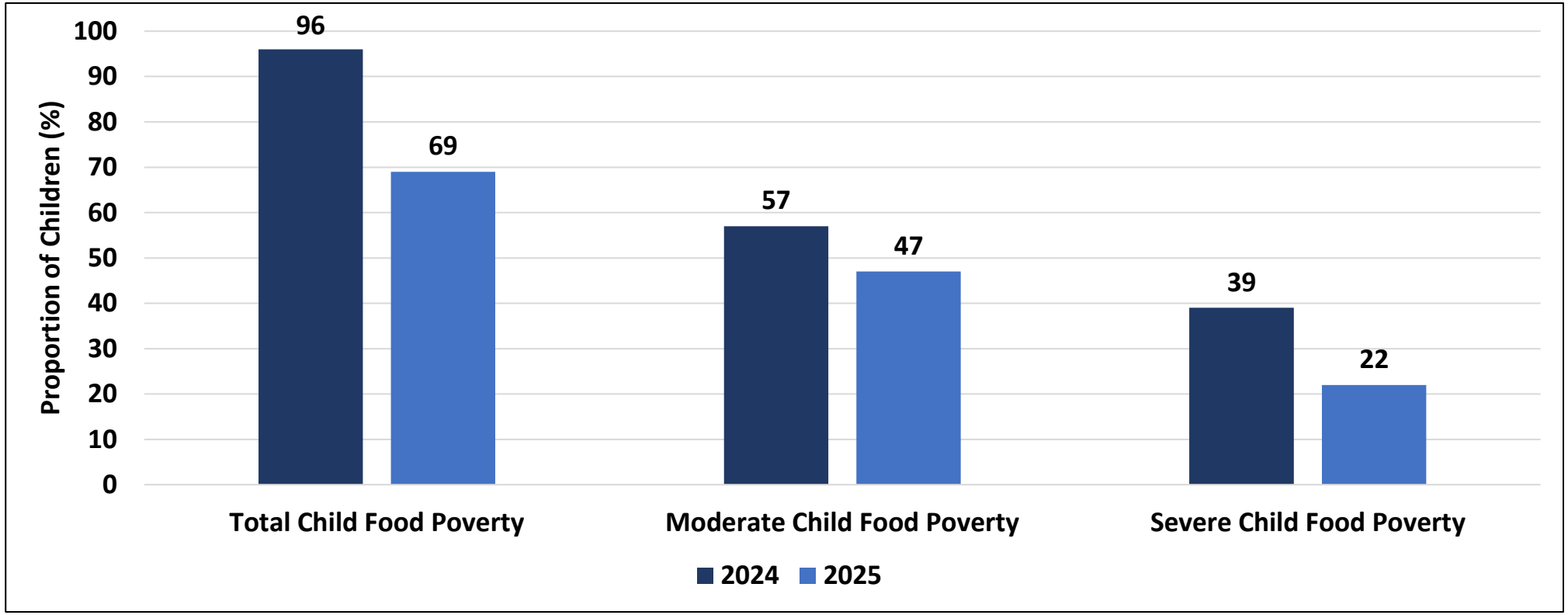
Child Food Poverty

- **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.

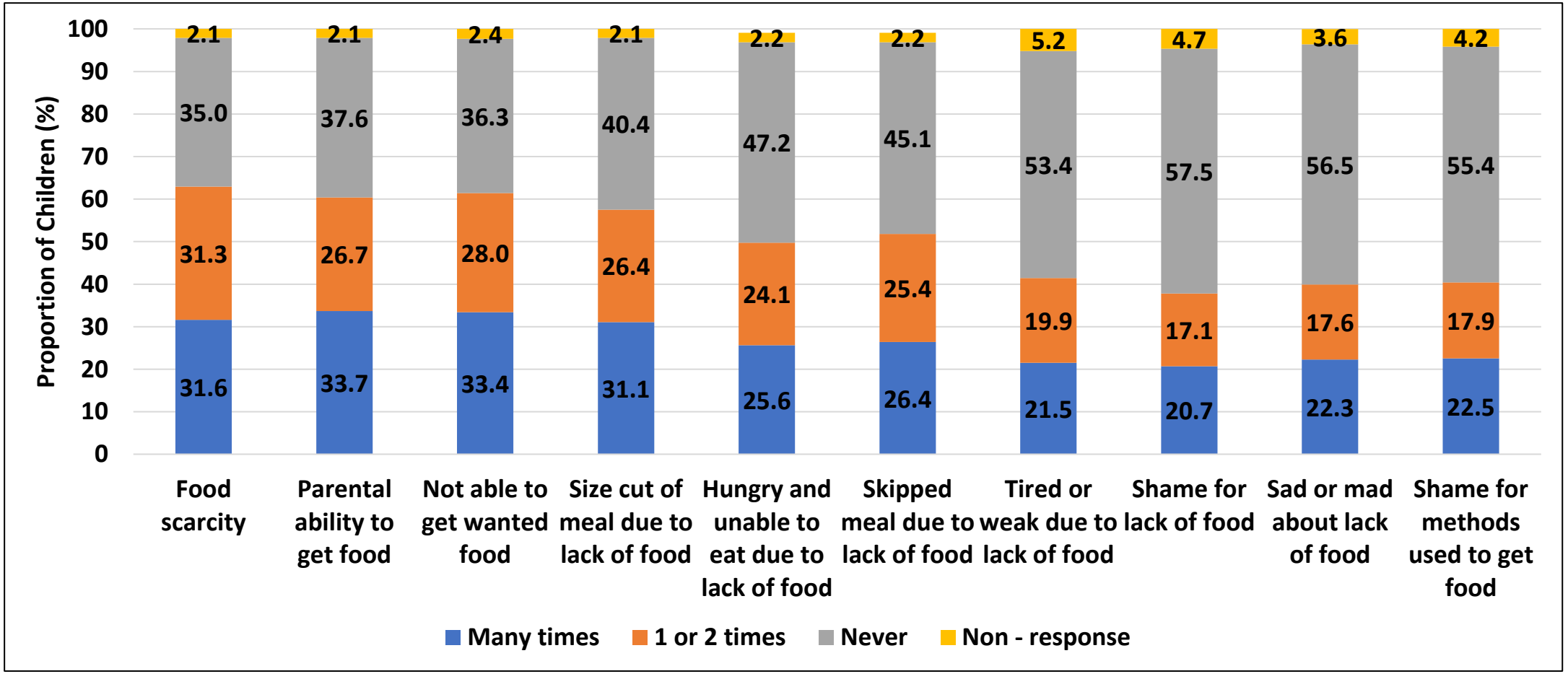
- **Moderate child food poverty** refers to the proportion of children under five 5 consuming foods and beverages from three or four out of eight defined food groups during the previous day.

Child Food Poverty



- Total child food poverty was 69% for the province.
- Attention needs to be given to the 22% of children who were in severe food poverty.

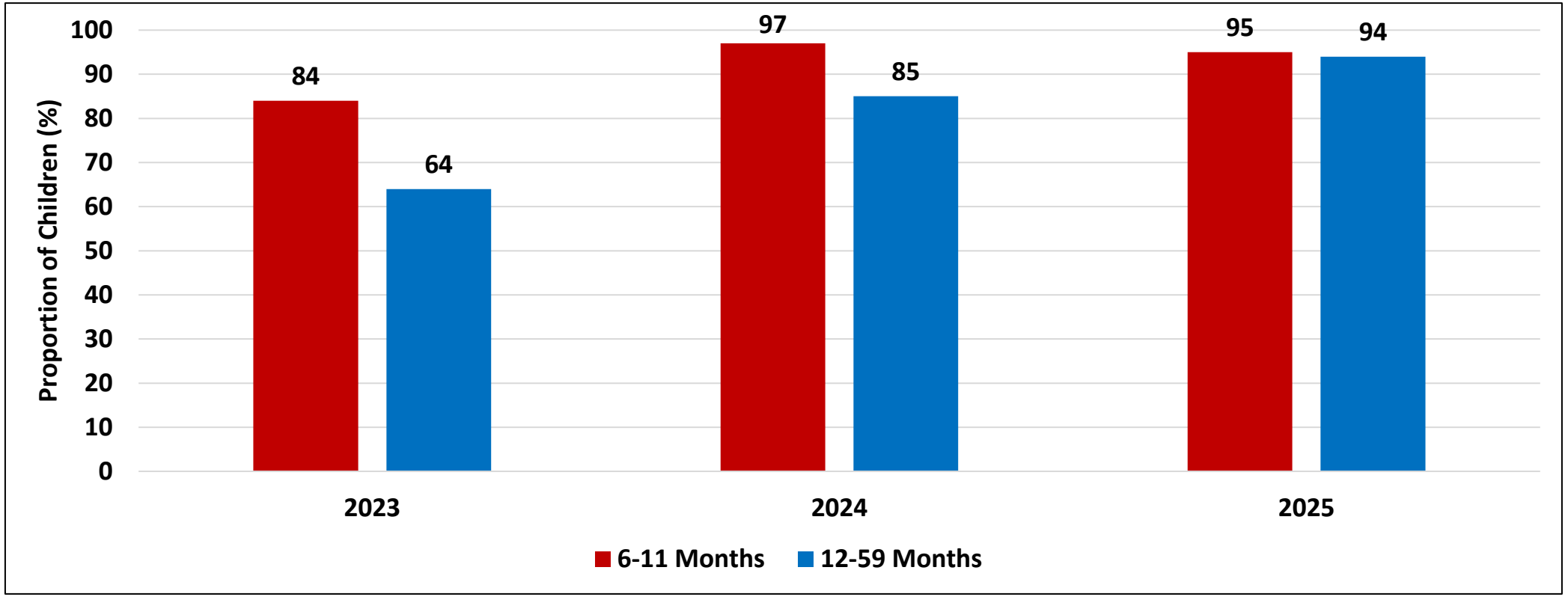
Child Food Insecurity Experience Scale



- The most reported child food insecurity experiences were worries for food scarcity, parental ability to get food and not being able to get wanted food.

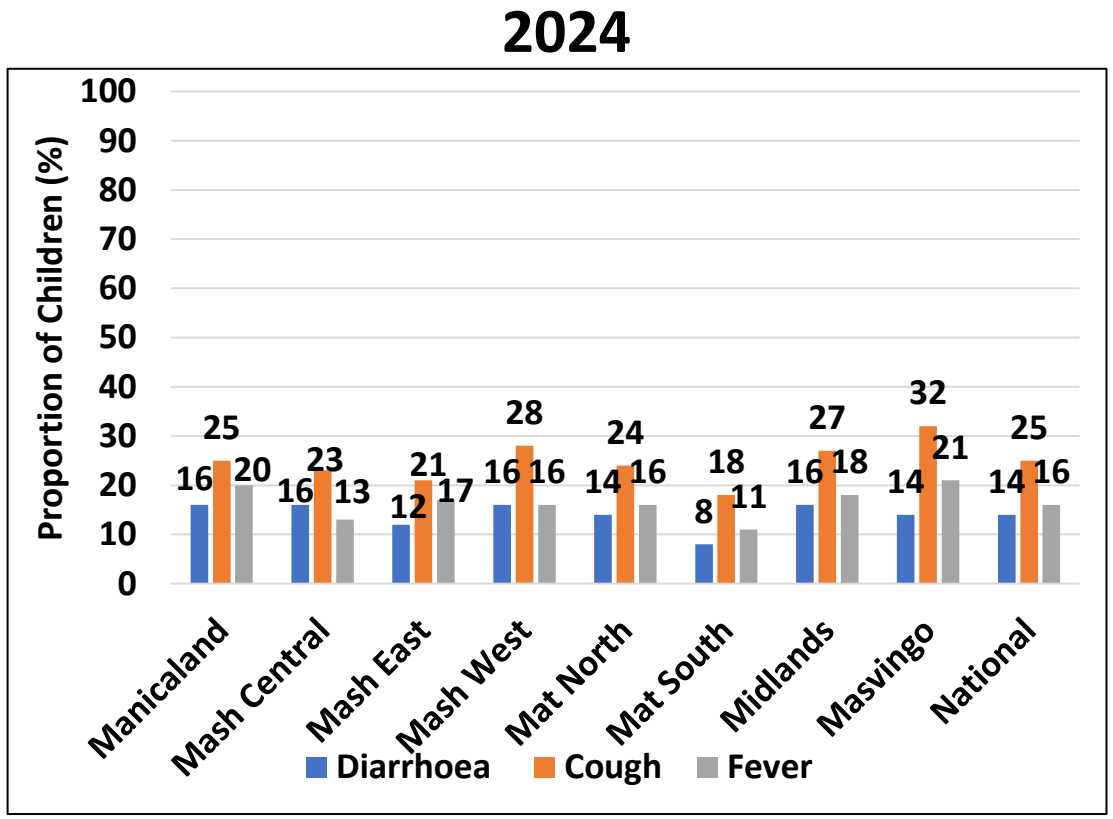
Child Health

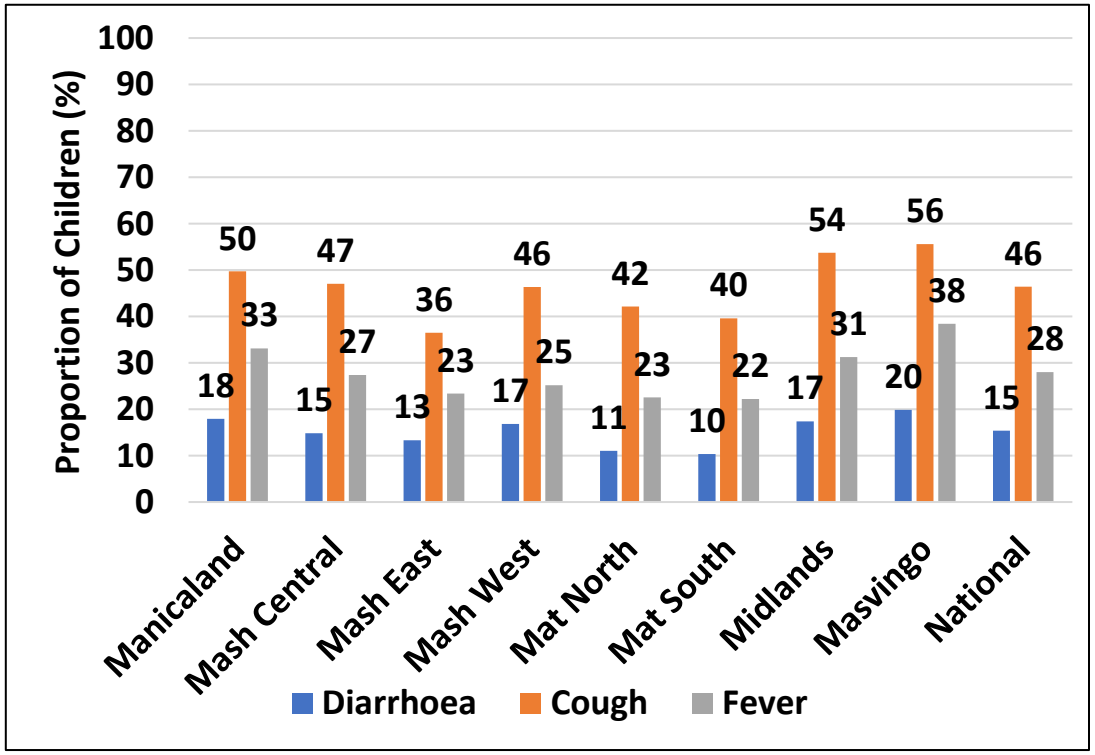
Vitamin A Supplementation for Children 6-59 Months



- Vitamin A is essential for the functioning of the immune system and the healthy growth and development of children. Provision of vitamin A supplements every six months is an inexpensive, quick, and effective way to improve vitamin A status and reduce child morbidity and mortality in the long term.
- About 95% of children 6-11 months and 94% of children 12-59 months received the required one dose of Vitamin A.

Child Illness 6-59 Months by District





- Prevalence of child illness was assessed as presence of illness during the two weeks preceding the survey.
- Midlands had 54% of children who had a cough in 2025, an increase from 27% in 2024

Infant and Young Child Feeding Practices

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 Organisation (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.
- Early initiation of breastfeeding, within one hour of birth, protects the newborn from acquiring infection; reduces newborn mortality and facilitates emotional bonding of the mother and the baby and has a positive impact on duration of exclusive breastfeeding.
- 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.

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.
- 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.
- 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.

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.

SWEET BEVERAGE CONSUMPTION 6–23 MONTHS (SwB)

- WHO guiding principles for complementary feeding advise against giving sweet drinks, such as soft drinks, as they contribute no nutrients other than energy and may displace more nutritious foods.
- Higher intakes of sugar-sweetened beverages (SSBs) have been associated with an increased obesity risk among children of all ages. Early introduction of SSBs (before 12 months of age) is associated with obesity at six years of age. SSB consumption during the complementary feeding period is associated with an increased risk of obesity in childhood.

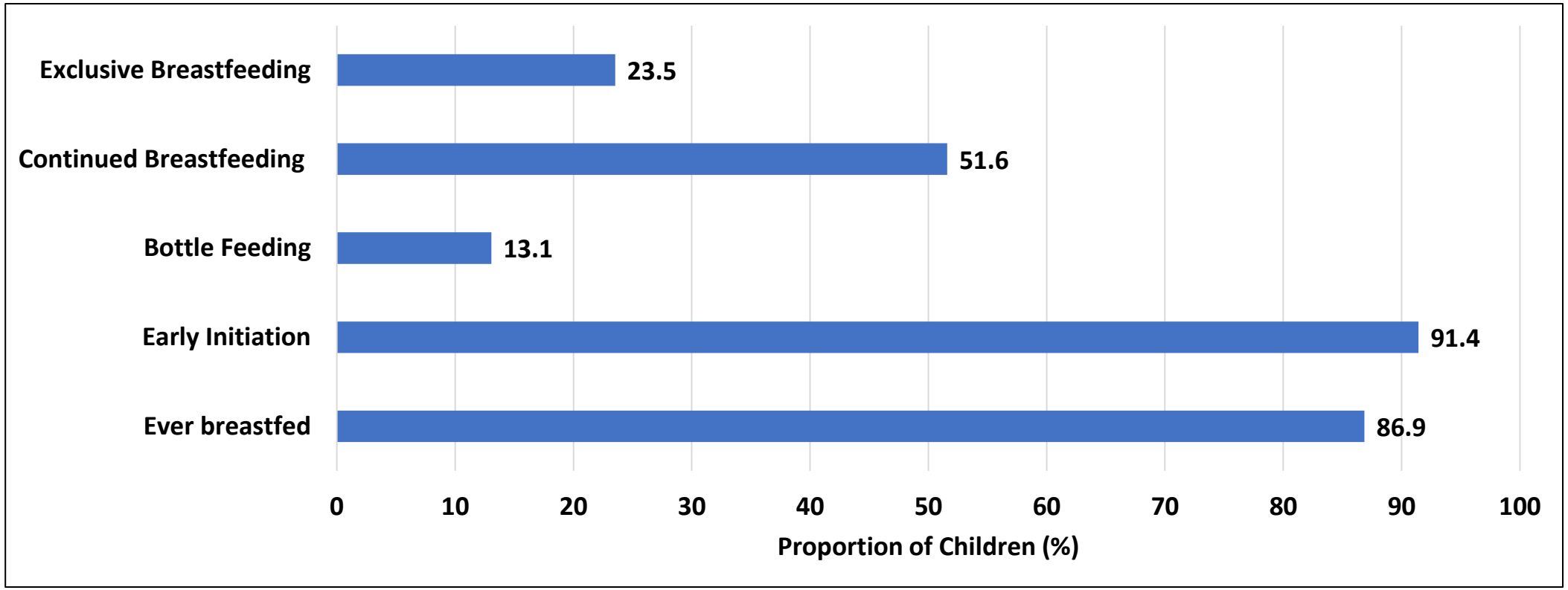
Notes

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

- WHO indicates that low vegetable and fruit consumption is associated with increased risk of non-communicable diseases (NCDs).
- Consumption of zero vegetables or fruits on the previous day represents an unhealthy practice.

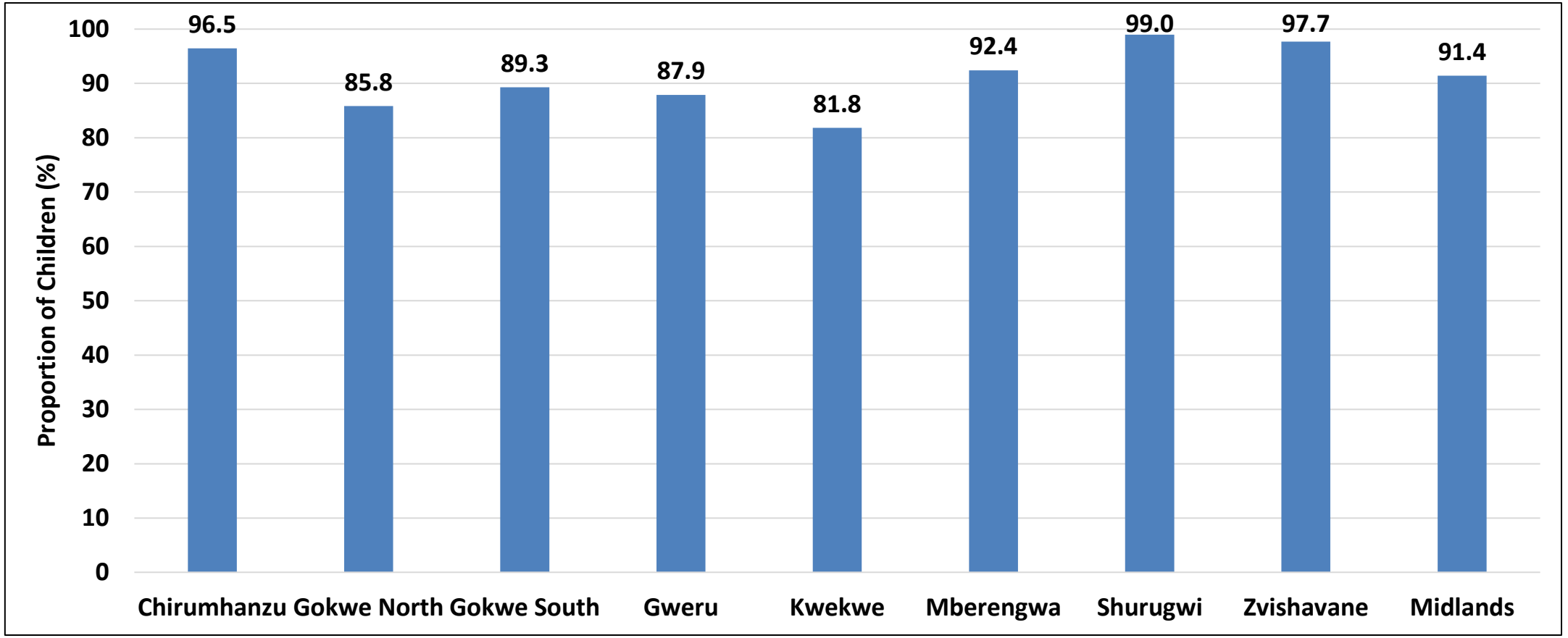
Indicator definition: percentage of children 6–23 months of age who did not consume any vegetables or fruits during the previous day.

Breastfeeding Practices



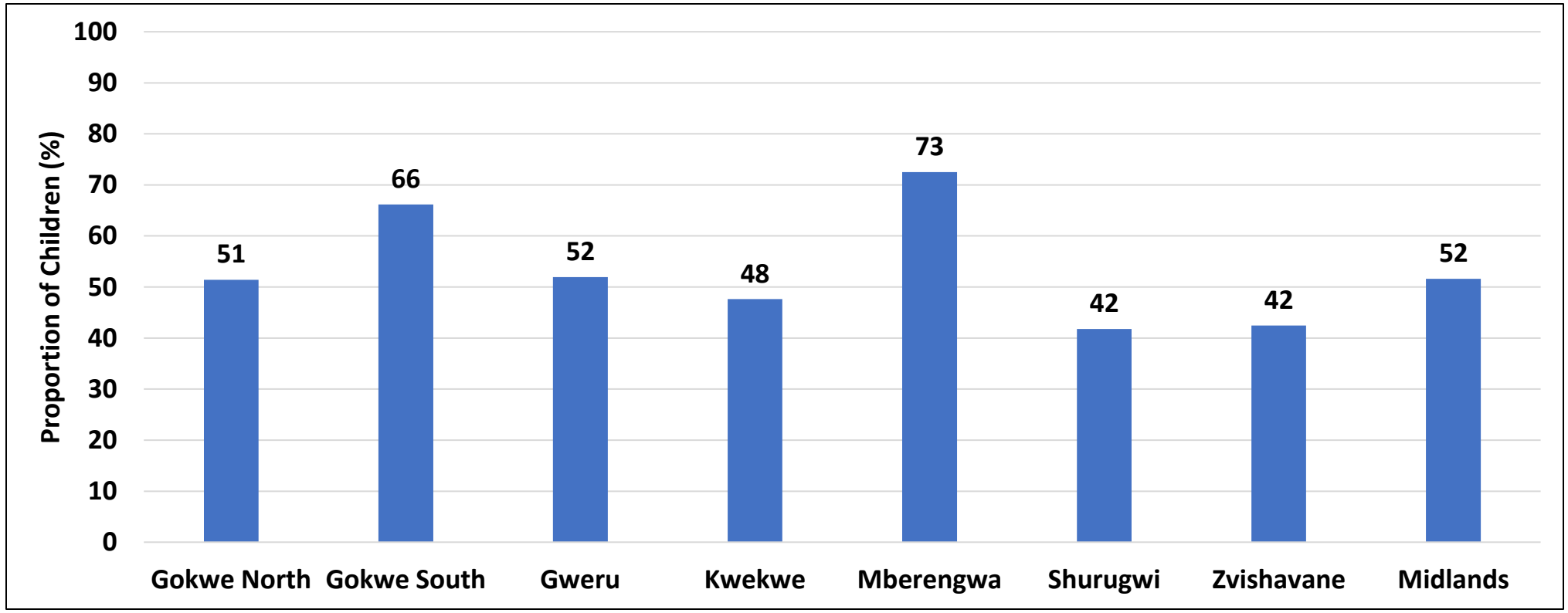
- Exclusive breastfeeding is a low cost, life-saving child survival intervention. The exclusive breastfeeding rate was reported to be 23.5%.
- The proportion of children who continued to be breastfed beyond one year was 51.6%
- At least 86.9% of the children were ever breastfed.

Early Initiation of Breastfeeding



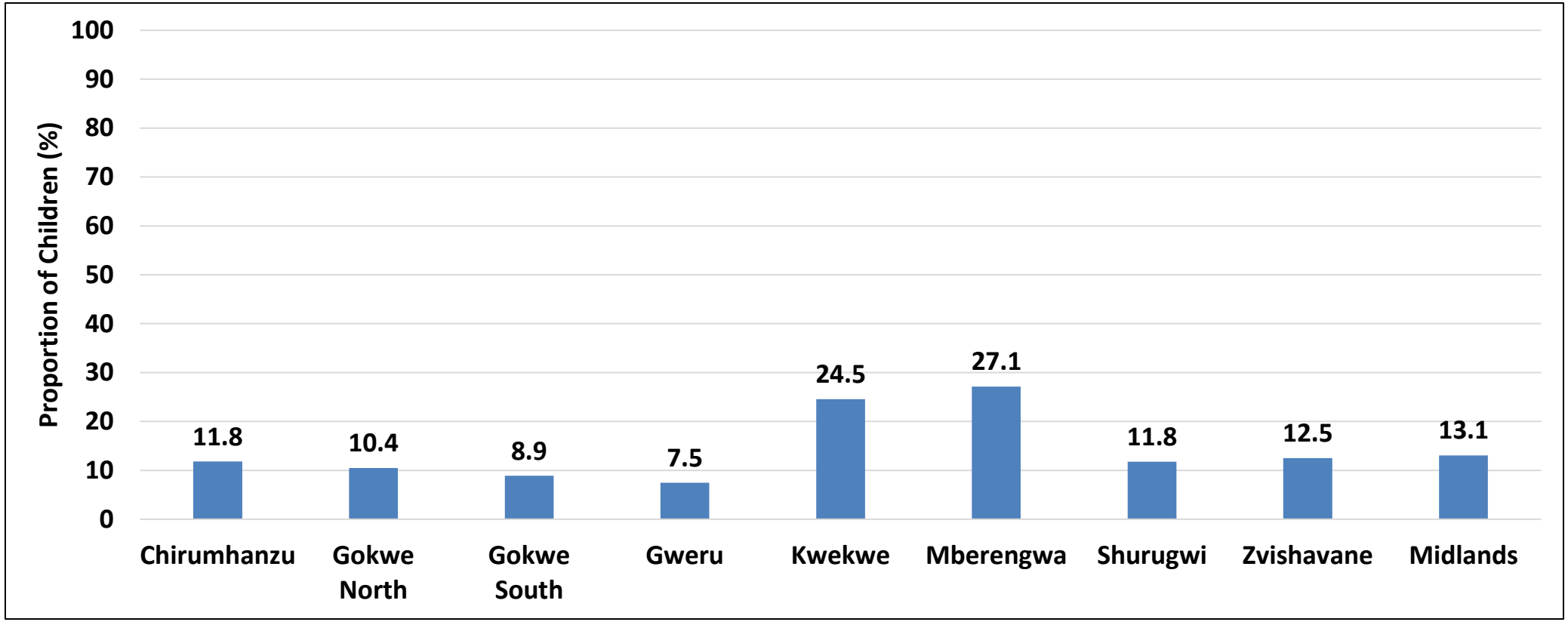
- The early initiation prevalence was below the national target of 90% in Gokwe North (85.8%), Gokwe South (89.3%), Gweru (87.9%) and Kwekwe (81.8%).

Continued Breastfeeding Beyond 1 year



- The proportion of children who continued to be breastfed beyond one year was 52% in Midlands
- Mberengwa (73%) had the highest proportion of children who continued to be breastfed beyond one year.

Bottle Feeding

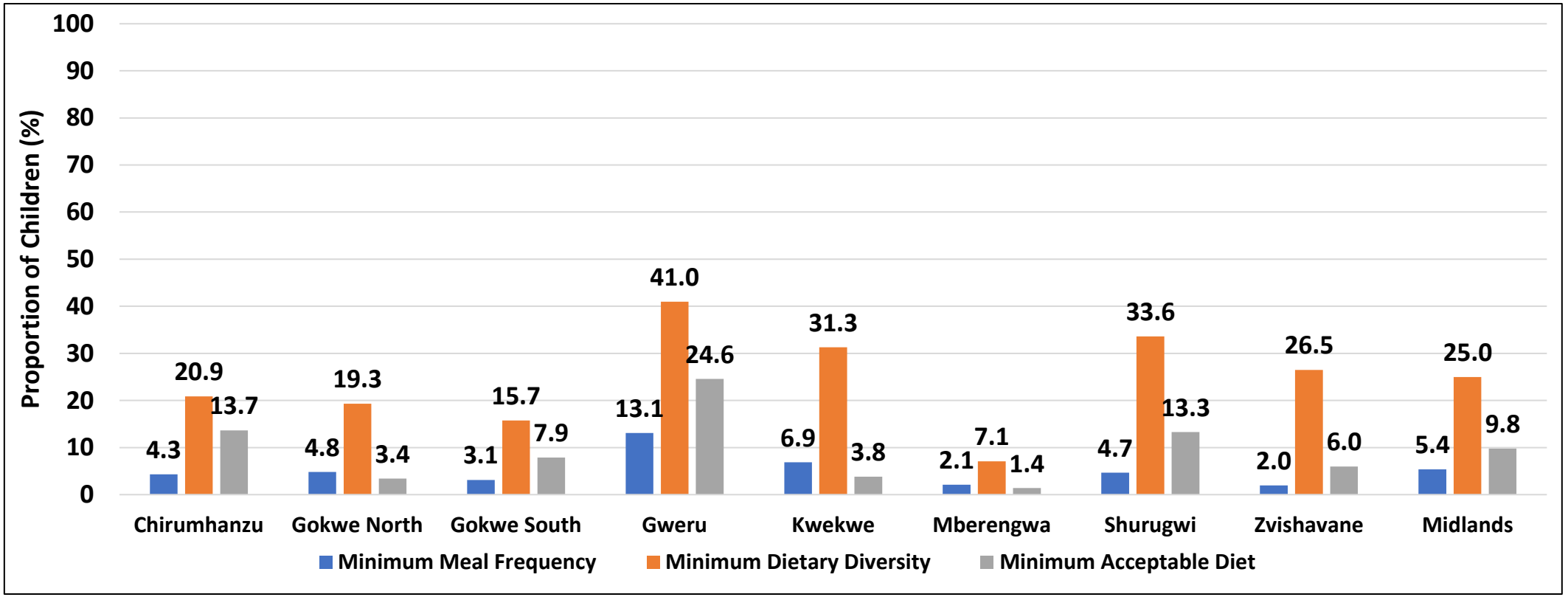


- Low bottle feeding rates were in Gweru (7.5%) and Gokwe South (8.9%) while high bottle feeding was in Kwekwe (24.5%)

Complementary Feeding

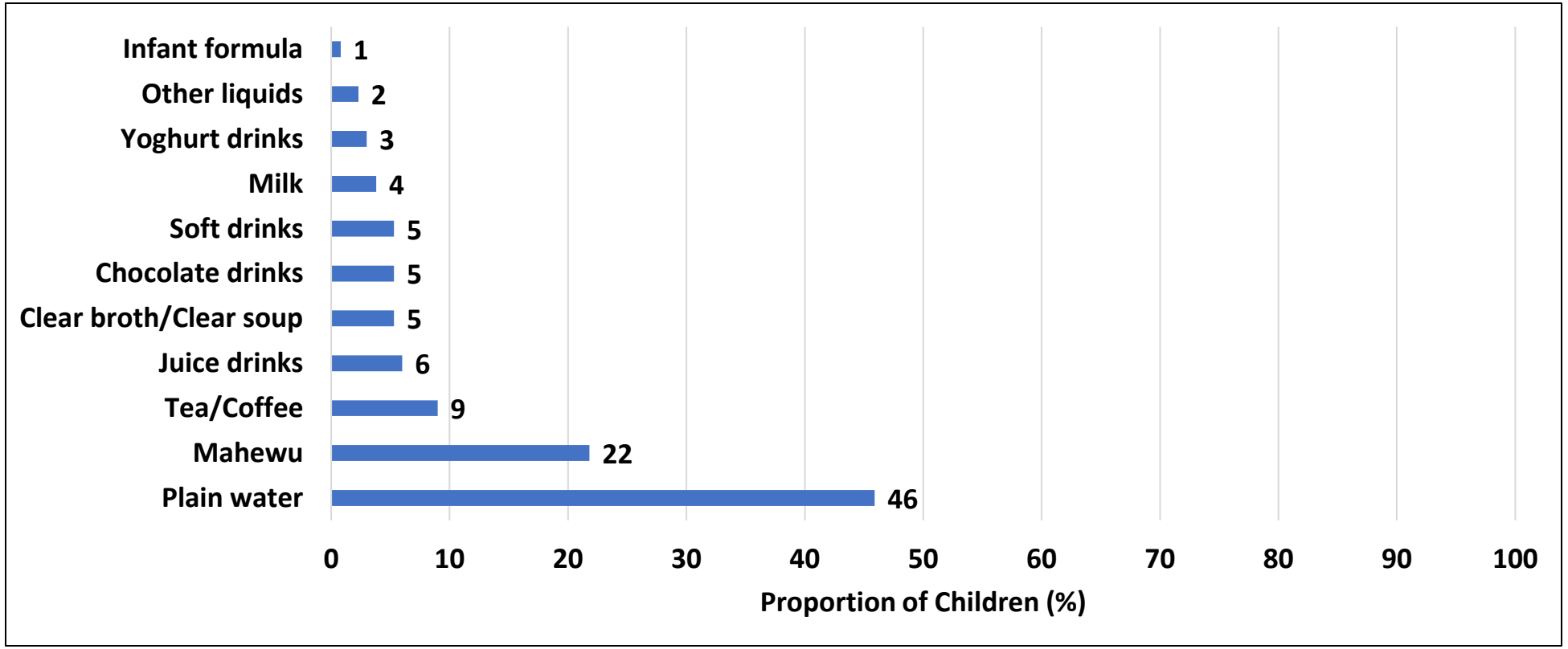
- Minimum Dietary Diversity (MDD) is a proxy indicator for adequate micronutrient density. Both breastfed and non-breastfed infants are expected to consume at least five of the seven food groups that are recommended by the World Health Organisation.
- Minimum Meal Frequency (MMF) is a proxy for a child's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



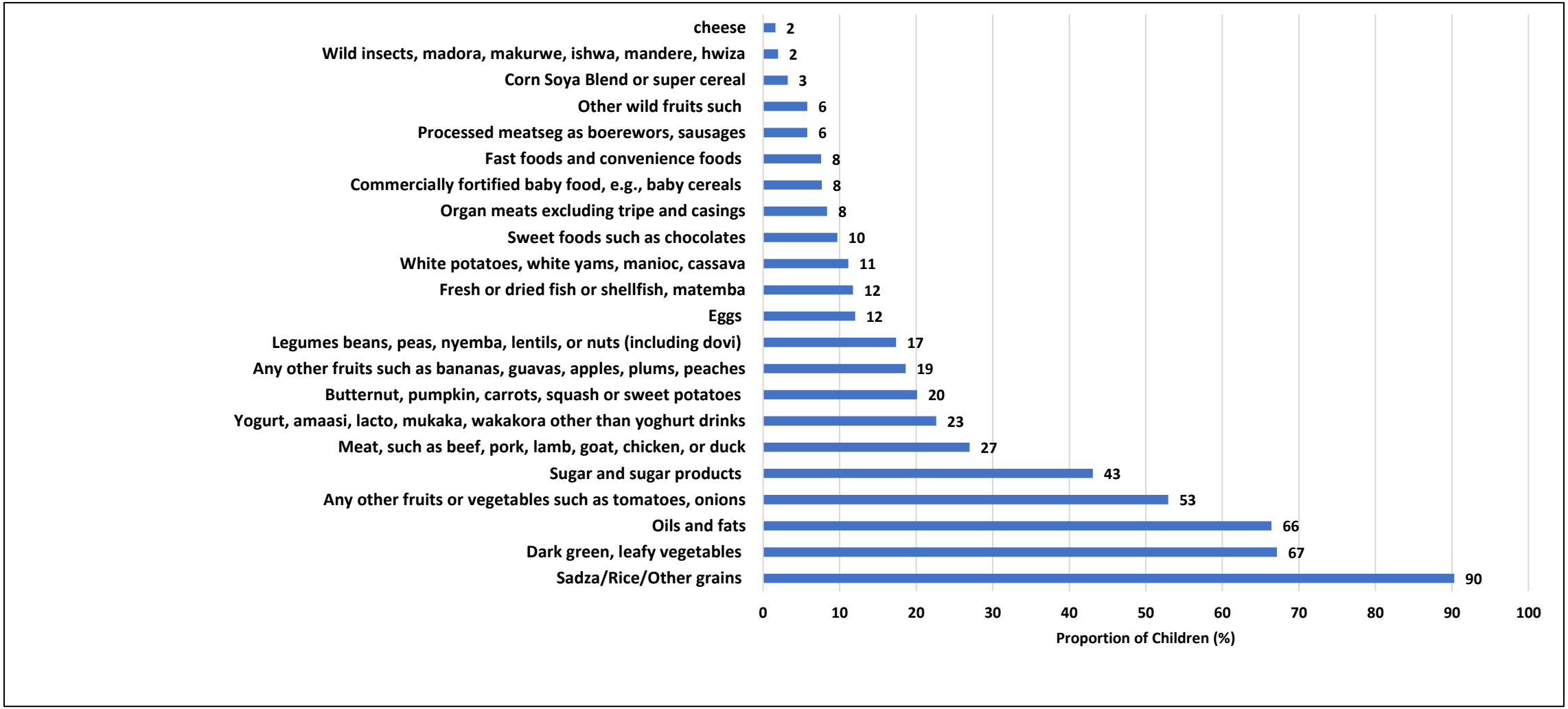
- The proportion of children who received a Minimum Acceptable Diet (MAD) in Midlands was 9.8%.
- The highest proportion of children who received a MAD was in Gweru (24.6%) while It was low in Mberengwa (1.4%).

Liquids Foods Given to Children (6-23)Months



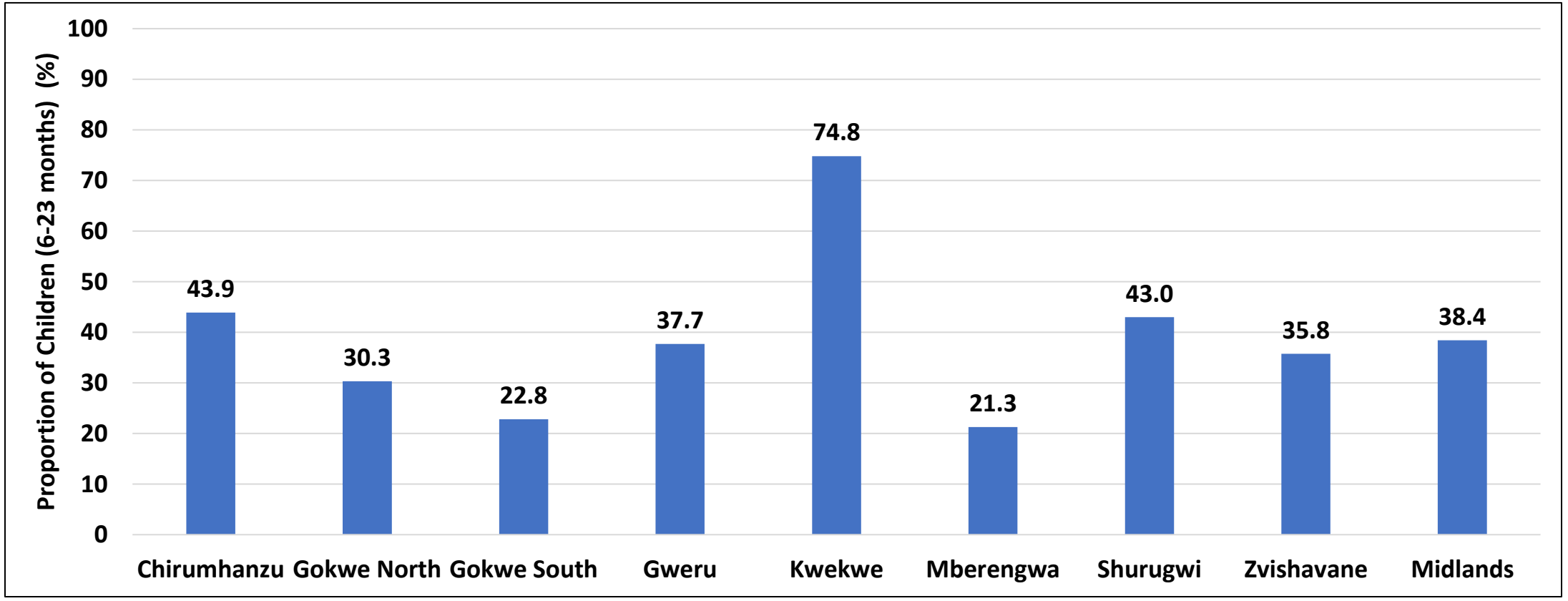
- Plain water (46%) and mahewu (22%) were the most common liquids given to children.

Solid Foods Given to Children (6-23)Months



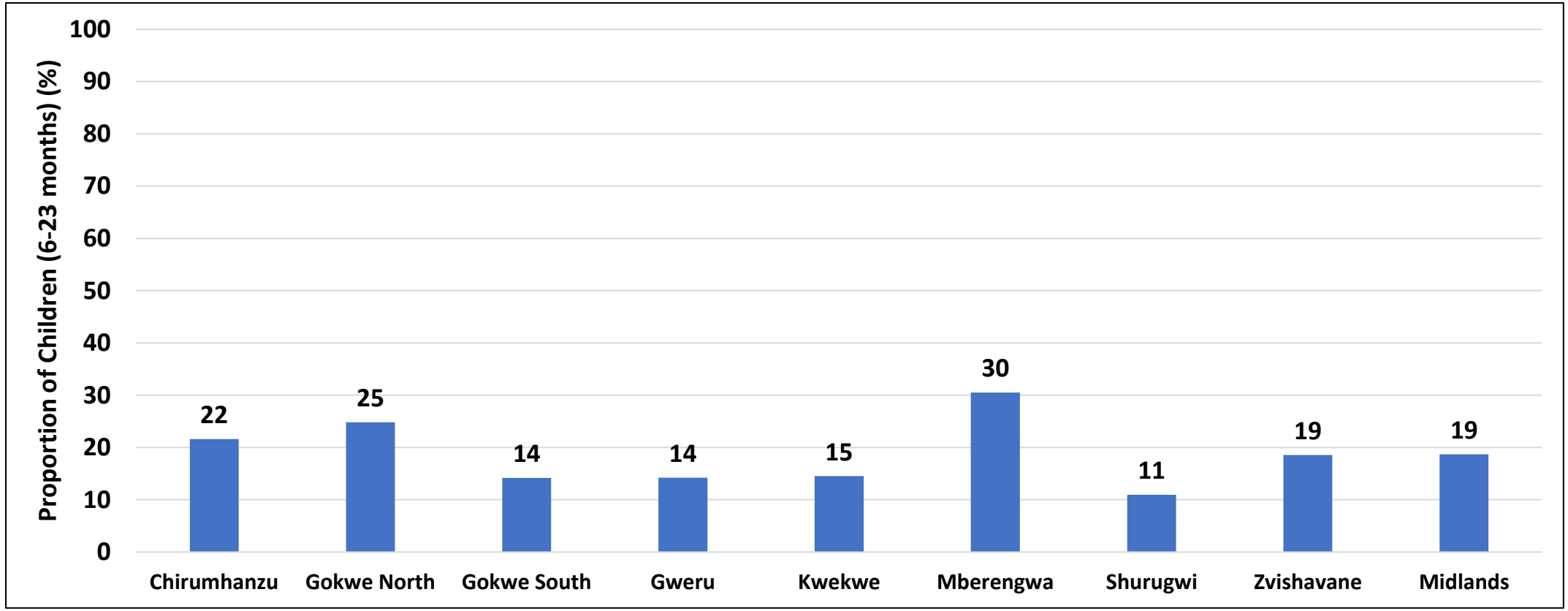
- Sadza (90%) and dark green leafy vegetables (67%) were the most common foods given to children.

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



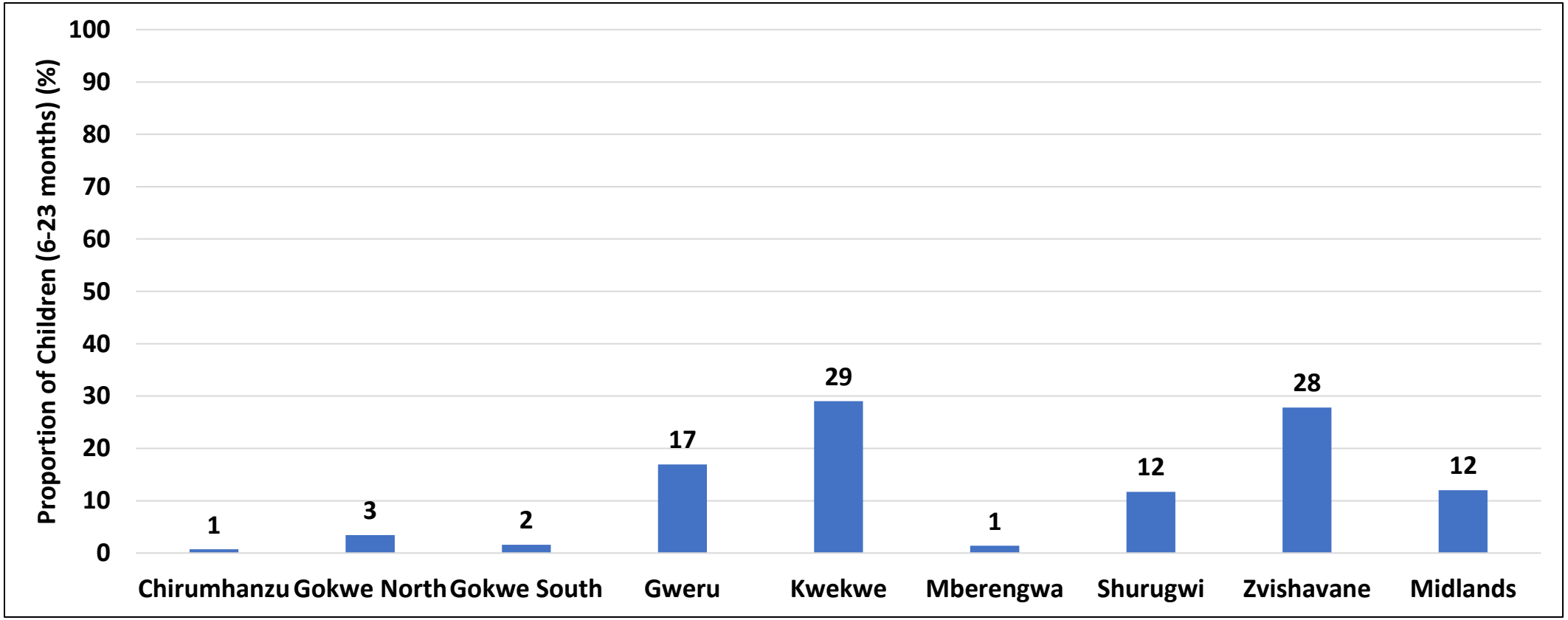
- About 38.4% of children 6 – 23 months consumed egg / flesh meat.

Non-Vegetable food Consumption 6-23 Months (ZVF)



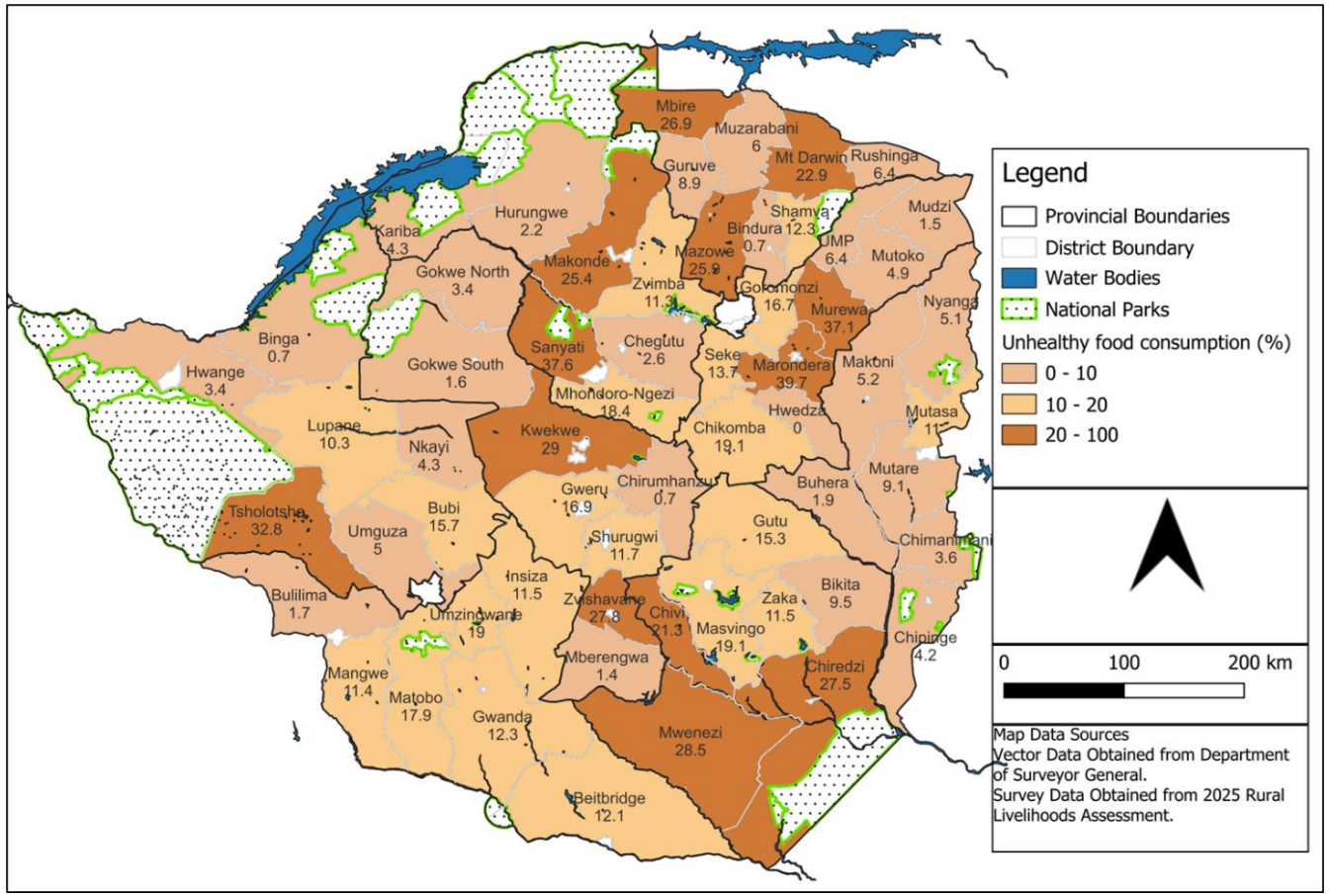
- About 19% of children 6 – 23 months were neither consuming vegetables nor fruits.

Unhealthy Food Consumption (6-23) Months



- About 12% of children 6-23 months were consuming unhealthy foods.
- Kwekwe (29%), Zvishavane (28%) and Gweru (17%) had the highest proportion of children (6-23) months who consumed unhealthy foods.

Unhealthy Food Consumption 6–23 Months



- Unhealthy food consumption was lowest in Chirumhanzu (0.7%).

Child and Adolescent Nutrition

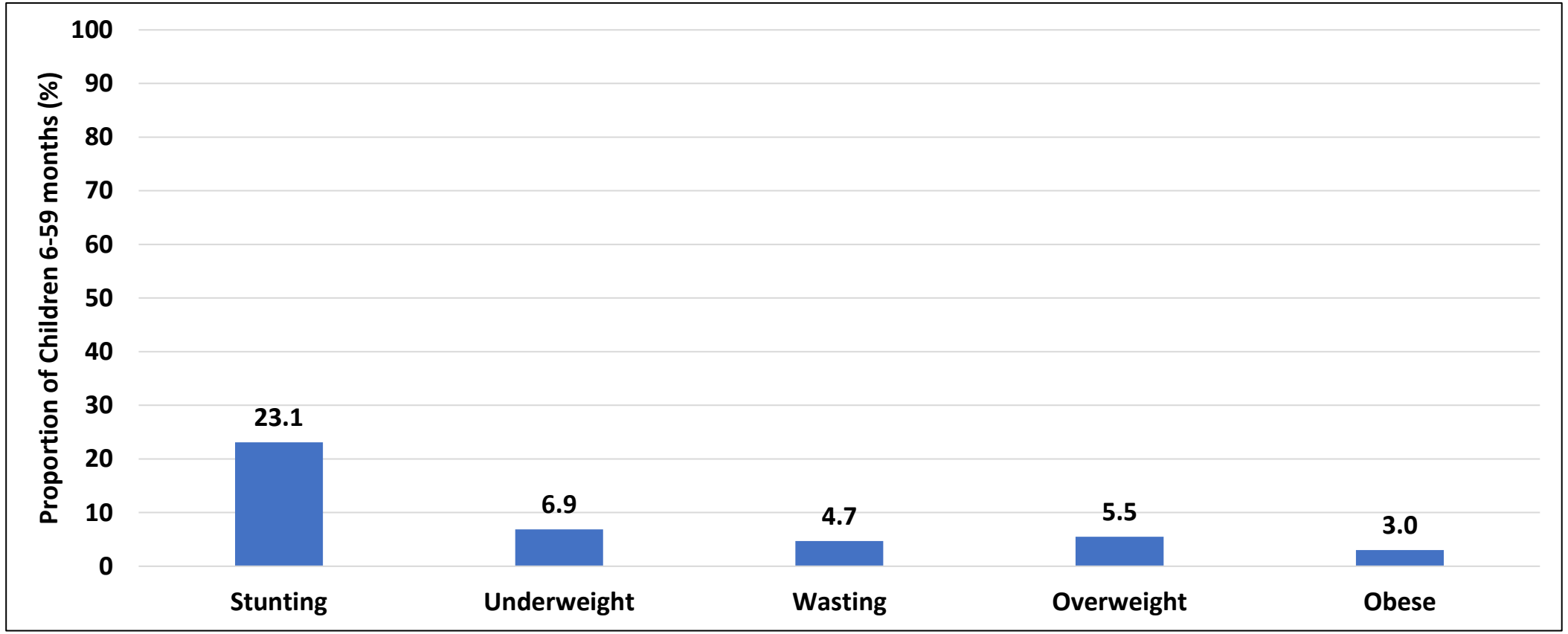
Child Nutrition Status

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).

Child Nutrition Status

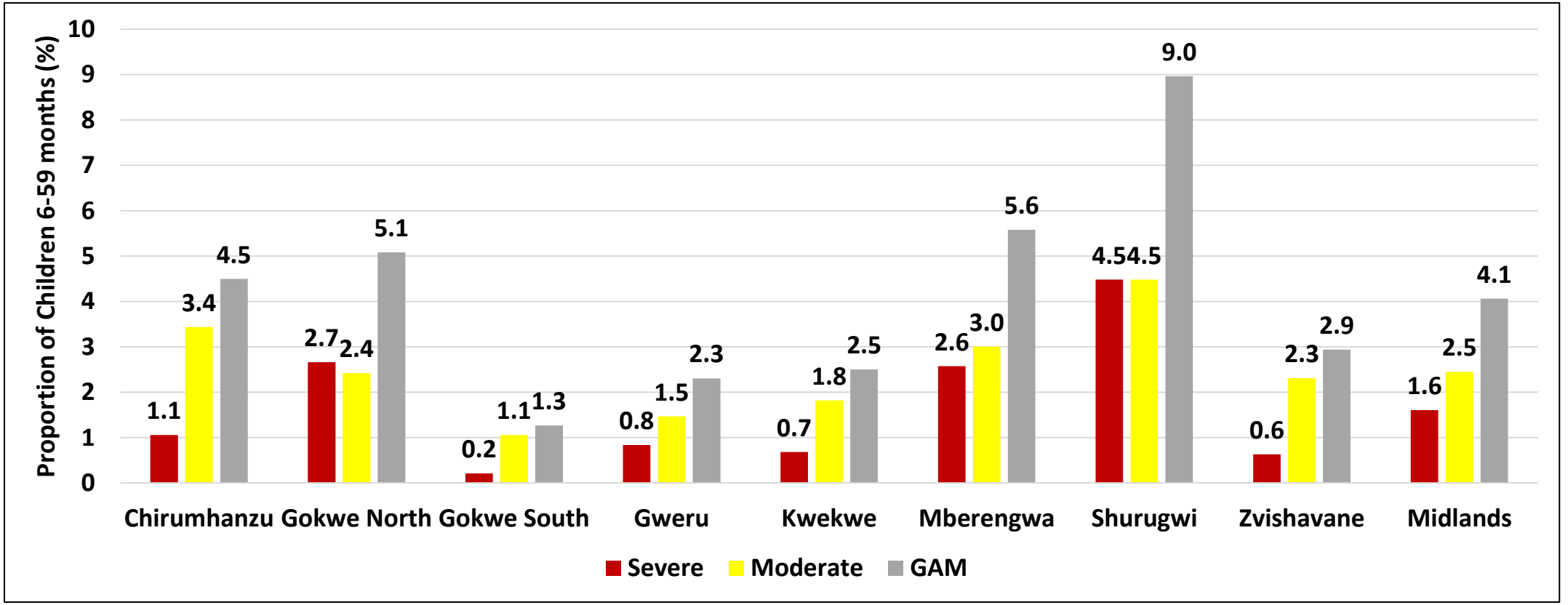
Indicator	Indicator definition (WHO standards, 2006)	National prevalence (%)	Prevalence cut-off values for public health significance
Stunting	Height/Length for age <–2 SD of the WHO Child Growth Standards median	17.3	<2.5%: Very Low 2.5-<10%: Low 10-<20%: Medium 20-<30%: High ≥30%: Very High (DeOniset al., 2019)
Global Acute Malnutrition	Weight for height <-2SD of the WHO Child Growth Standards median and/oedema	5	<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	2.5	0% = acceptable >0%: Unacceptable
Underweight	Weight for age <-2SD of the WHO Child Growth Standards median and/oedema	10	
Overweight	Weight for height >+2 SD of the WHO Child Growth Standards median	<3	<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		

Nutrition Status of Children 6-59 Months



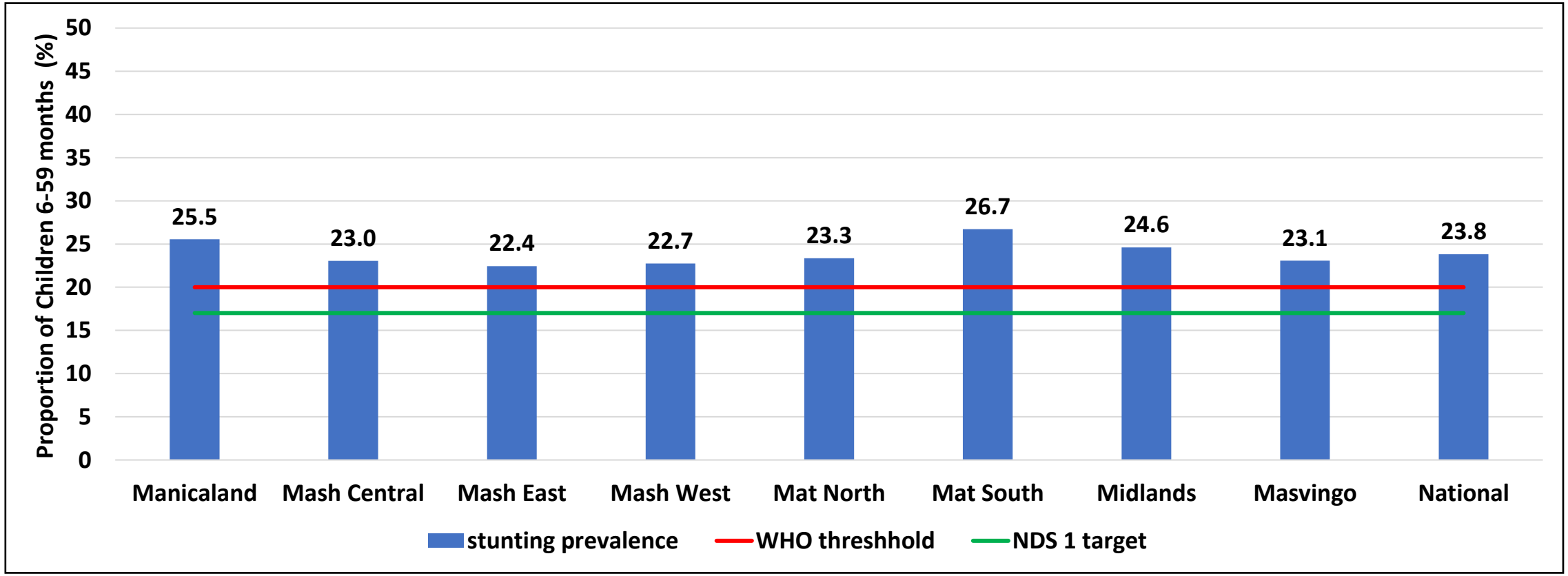
- In the province, the prevalence of GAM (wasting) was 4.7% which is acceptable and is below the WHO threshold of 5%.
- Stunting prevalence remains high (23.1%) according to the World Health Organization classification.

Prevalence of Wasting for Children Aged 6-59 Months



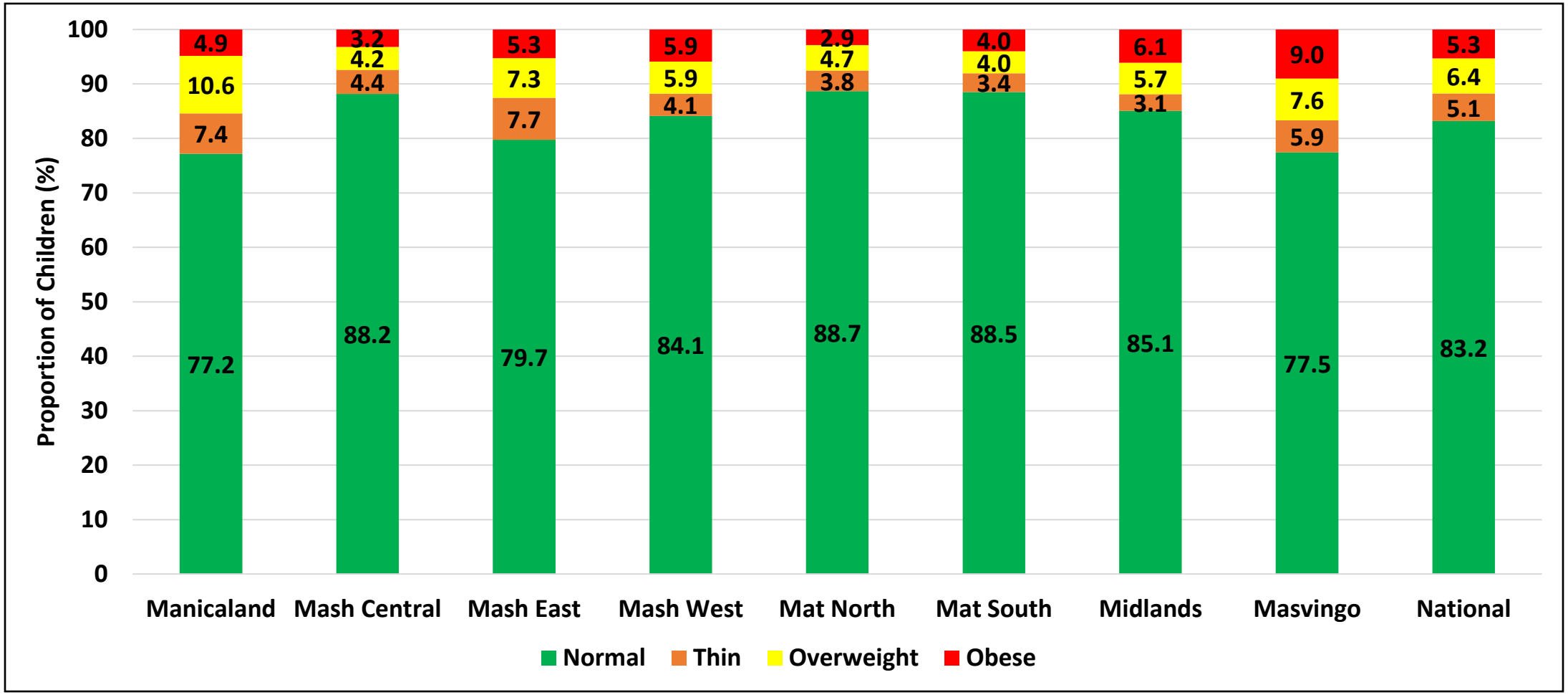
- The provincial prevalence for Global Acute Malnutrition (wasting) GAM was 4.1%.
- Shurugwi (9%) had the highest prevalence of GAM.

Prevalence of Stunting for Children 6-59 Months



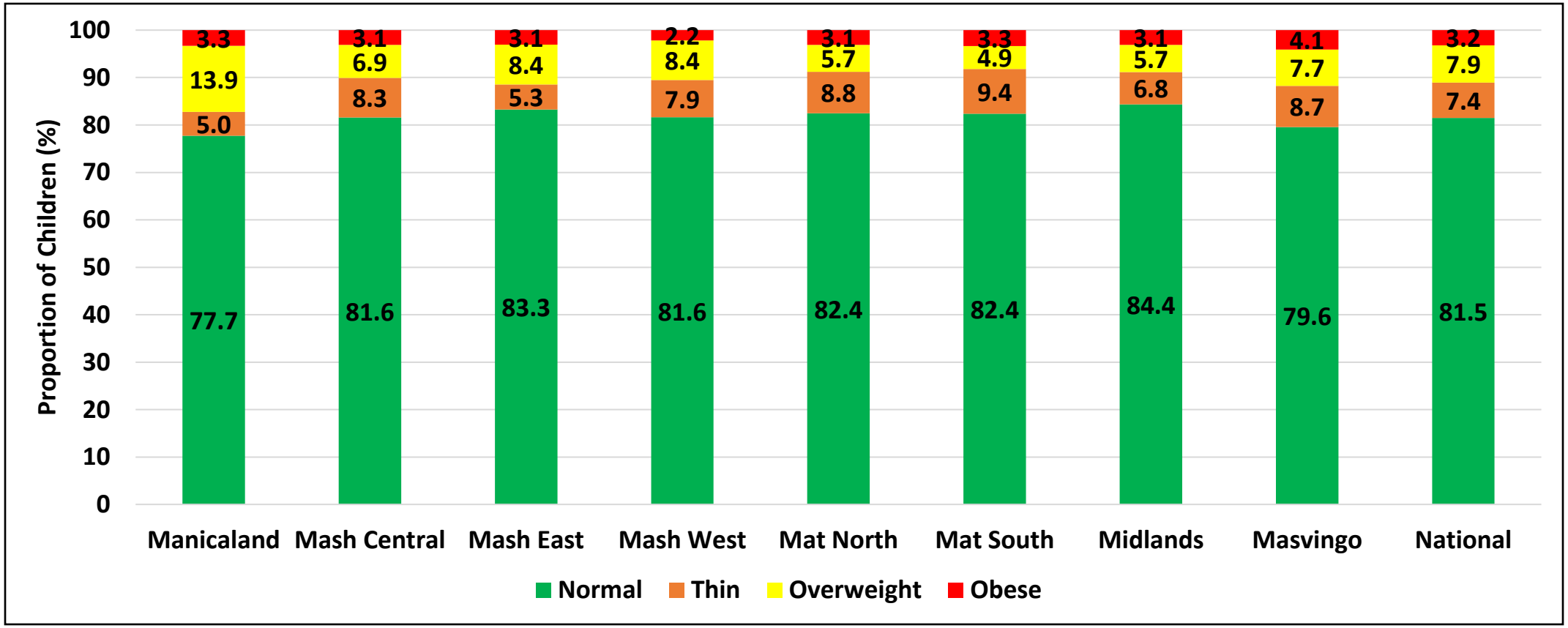
- The national proportion of children 6-59 months who were stunted was 23.8%, which is still higher than the NDS1 target of less than 17%.

Nutrition Status of Children 5-9 Years



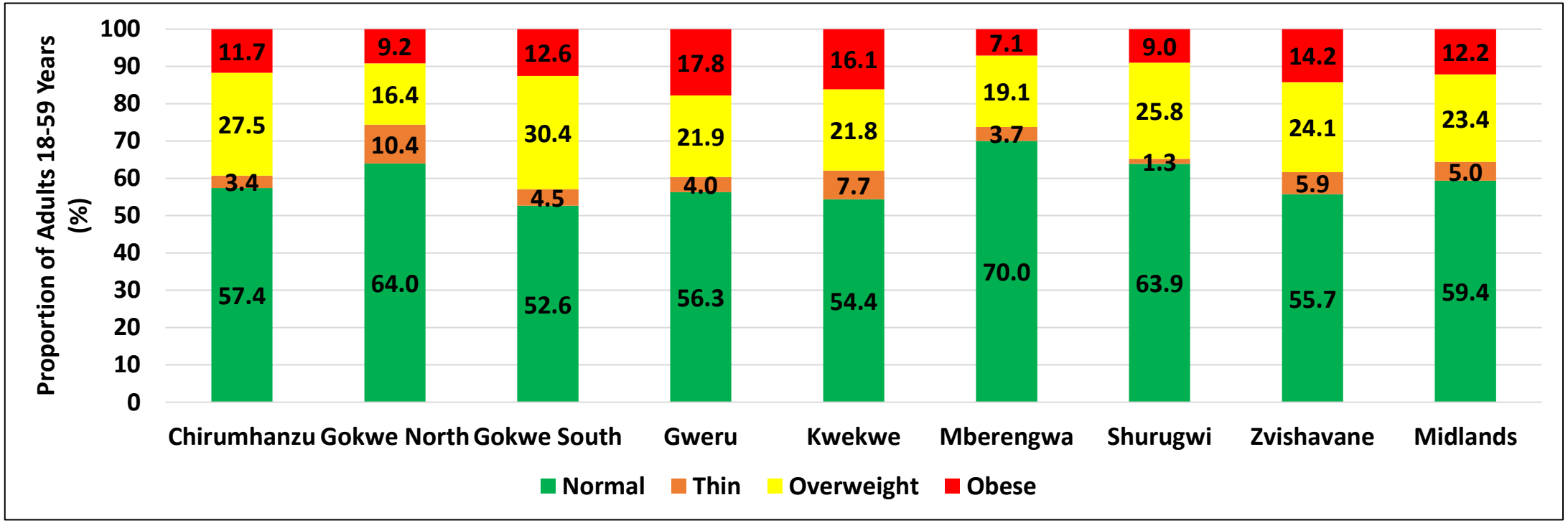
- About 6.1% of the children aged 5 to 9 years were obese, 5.7% were overweight and 85.1% were normal.

Nutrition Status of Adolescents 10-19 Years



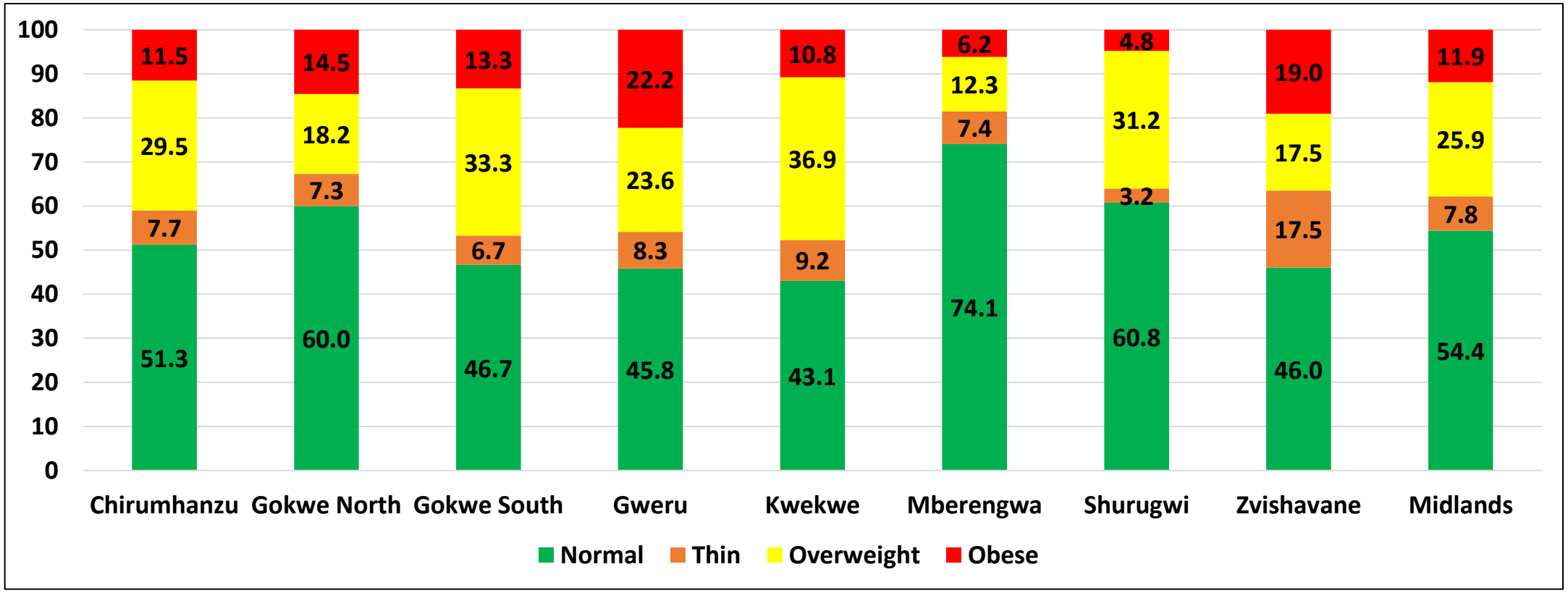
- At least 3.2% of the adolescents were obese while 7.9% were overweight in Midlands.

Nutrition Status for Adults 18-59 Years (BMI)



- Body mass index was used to classify adults aged 18 years and above. Having excess fat deposits in the body leads to serious health consequences such as cardiovascular disease (mainly heart disease and stroke), type 2 diabetes, musculoskeletal disorders like osteoarthritis and some cancers (endometrial, breast and colon).
- About (23.4 %) of the adults aged 18-59 years were overweight.

Nutrition Status for Adults 60 Years and above by Province (BMI)



- About 25.9% of adults above 60 were overweight and (11.9%) were obese.

Food Security

Food Security Dimensions

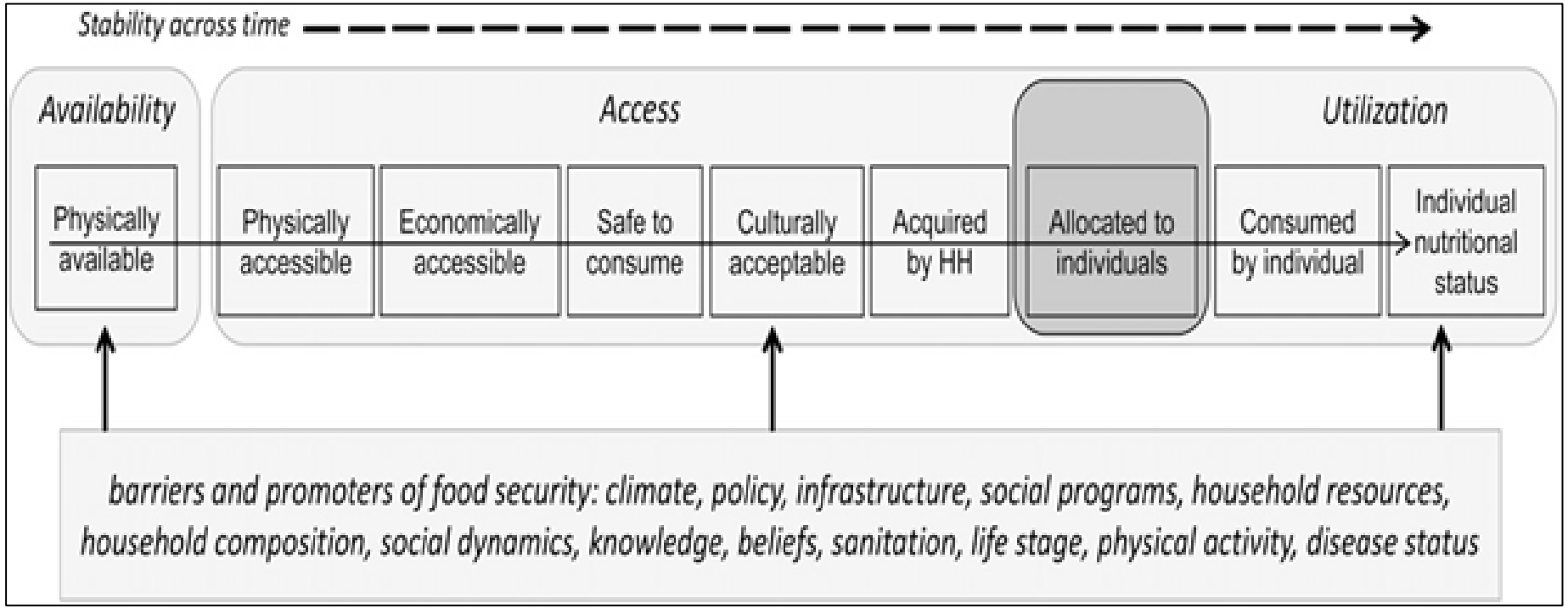


Figure 3: Dimensions of Food Security (Jones et al., 2013)

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 given 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

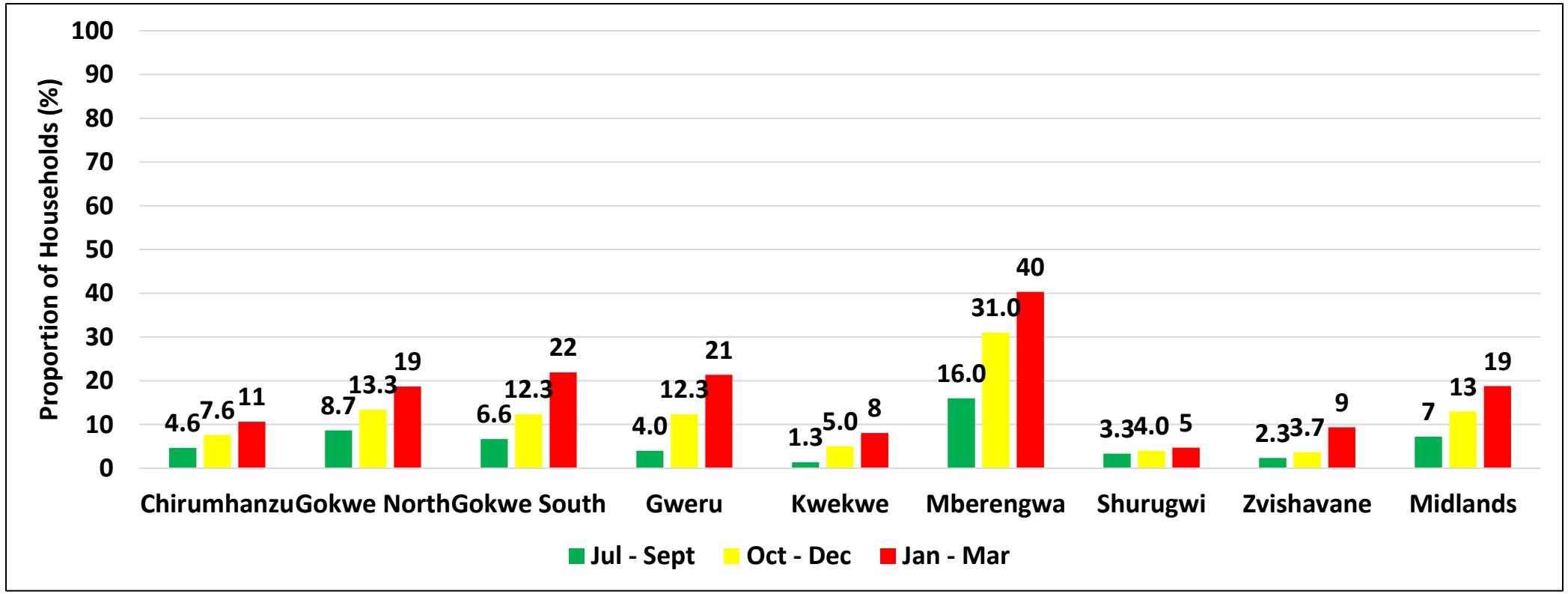
Food Security Analytical Framework

- 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 2025 to 31 March 2026.
- 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 2025/26 consumption year from the following possible income sources;
    - Cereal stocks from the previous season;
    - Own food crop production from the 2024/25 agricultural season;
    - Potential income from own cash crop production;
    - Potential income from livestock;
    - Potential income from casual labour and remittances; and
    - 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.

Cereal Insecurity Progression by Quarter



- About 7% of the rural households were projected to be facing cereal access challenges in the July to September quarter.
- Mberengwa (40%) had the highest proportion of cereal insecure households at peak.

Cereal Insecure Populations by Quarter

	Jul - Sept 2025	Oct - Dec 2025	Jan - Mar 2025
Chirumhanzu	4,417	7,256	10,095
Gokwe North	21,643	33,296	46,615
Gokwe South	21,100	39,035	69,630
Gweru	4,868	15,011	25,965
Kwekwe	2,636	9,886	15,818
Mberengwa	33,353	64,622	84,078
Shurugwi	3,277	3,933	4,588
Zvishavane	1,984	3,118	7,937
Midlands	**93,278**	**176,157**	**264,725**

- Mberengwa was projected to have 84. 078 people cereal insecure during the peak hunger period.

Cereal Requirements (MT) by Quarter

	Jul – Sept MT	Oct – Dec MT	Jan – Mar MT	July 2025 to March 2026 Total MT
Chirumhanzu	163	268	374	805
Gokwe North	801	1,232	1,725	3,757
Gokwe South	781	1,444	2,576	4,801
Gweru	180	555	961	1,696
Kwekwe	98	366	585	1,049
Mberengwa	1,234	2,391	3,111	6,736
Shurugwi	121	146	170	437
Zvishavane	73	115	294	482
Midlands	**3,451**	**6,518**	**9,795**	**19,764**

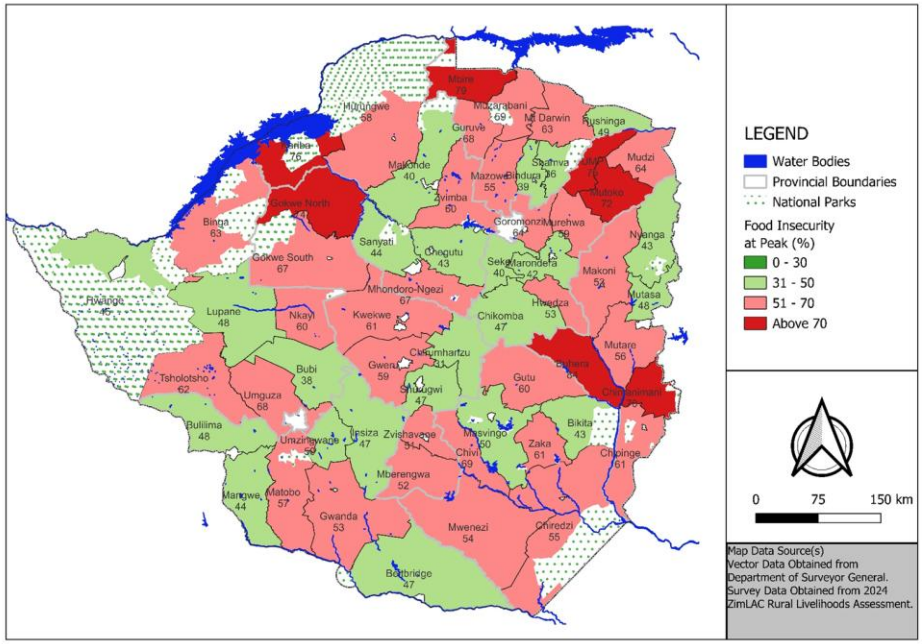
- Mberengwa was projected to require (6, 736 MT) of cereal during the peak hunger period.

Cereal Insecure Proportions By Quarter

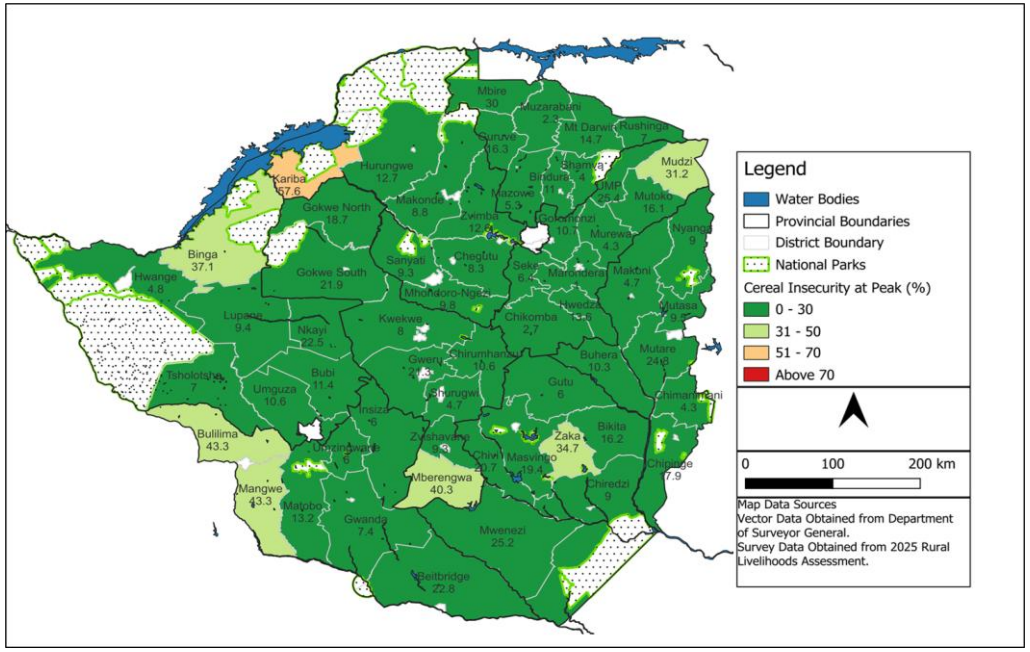
	Jul – Sept (%)	Oct – Dec (%)	Jan – Mar (%)
Chirumhanzu	5	8	11
Gokwe North	9	13	19
Gokwe South	7	12	22
Gweru	4	12	21
Kwekwe	1	5	8
Mberengwa	16	31	40
Shurugwi	3	4	5
Zvishavane	2	4	9
Midlands	**7**	**13**	**19**

Food Security Status: Peak Hunger Period January to March

2024

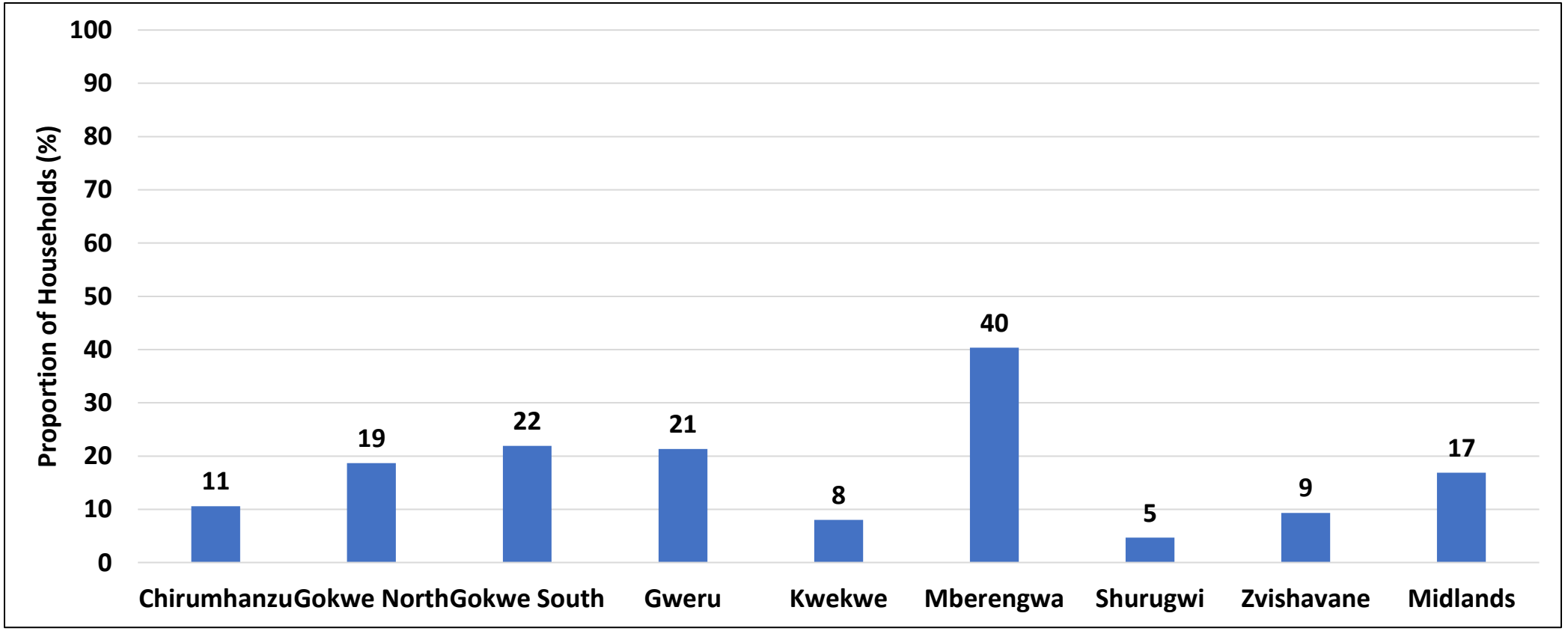


2025



- Mberengwa (40.3%) had the highest proportion of people that would be food insecure during the peak hunger period.

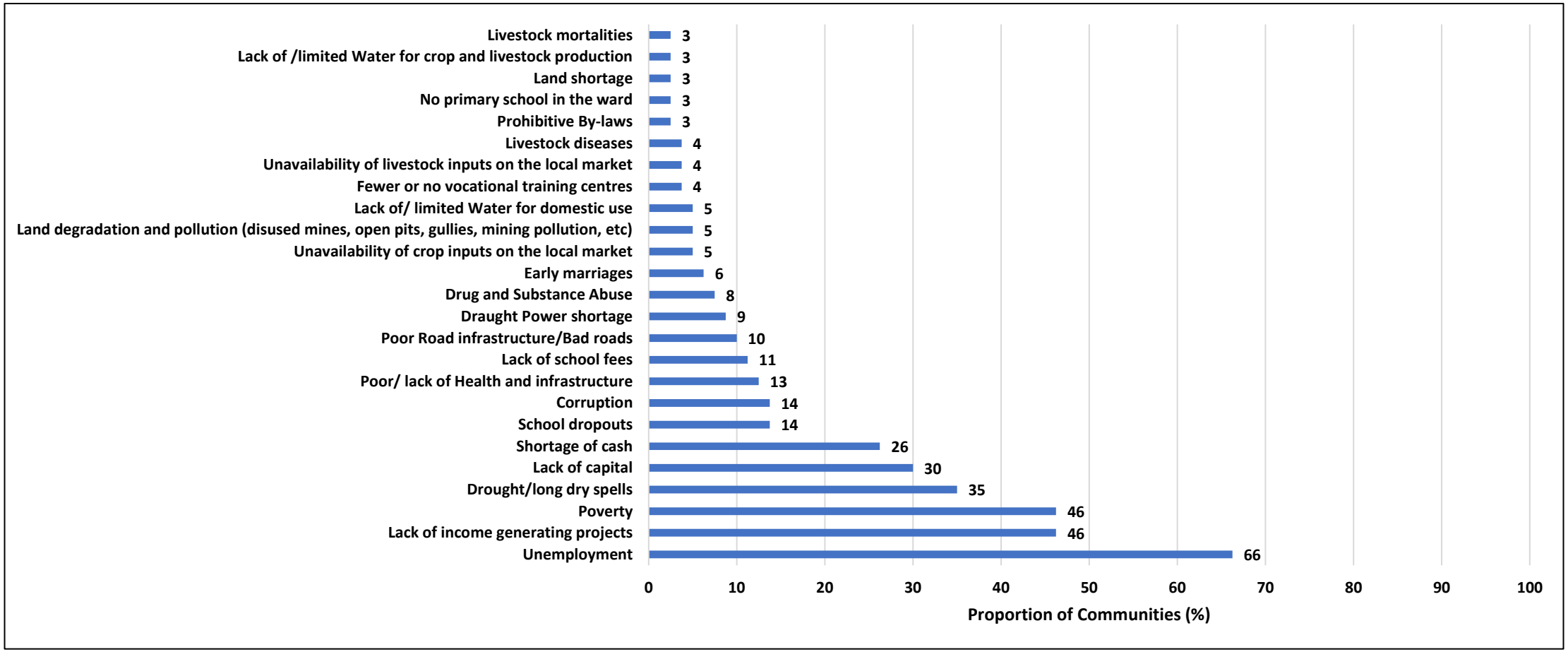
Cereal Insecurity (Jan- March 2026)



- At the peak of the hunger season, Mberengwa (40%) will have the most food insecure households.

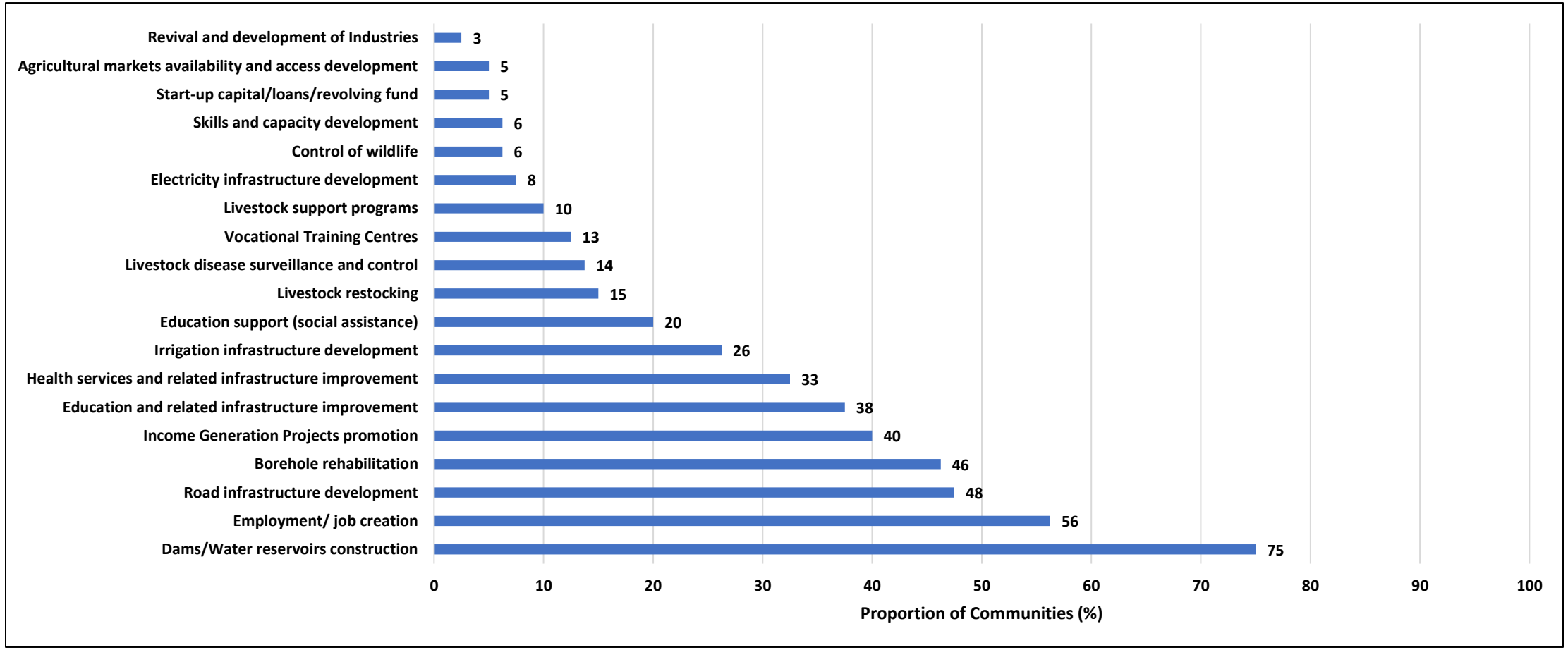
Community Development Challenges and Priorities

Community Development Challenges



- Unemployment (66%), lack of income generating projects (46%) and poverty (46%) were the most reported community development challenges.

Community Development Priorities



- Most communities prioritized construction of dam/water reservoirs (75%), employment or job creation (56%) and road infrastructure development (48%) as development priorities.

Conclusions and Recommendations

Conclusions and Recommendations

Education

- There was an improvement in the proportion of children who received a hot meal at school during the first term of the term of the year from 3.3% in 2024 to 56% in 2025. The Government is commended for scaling up support towards the school feeding programme.

Social Protection

- Of the 73% of households which reported to have received any form of support, the main source of support was the Government (64%). The Government efforts can be complimented by resilient livelihoods such as income-generating projects and climate-smart agricultural interventions to reduce dependency syndrome and high level of reliance on external aid, particularly government support which may indicate ongoing livelihood vulnerabilities and food insecurity among rural populations.

Conclusions and Recommendations

Food safety

- Low Awareness of Antimicrobial Resistance was reported in Midlands. There is need to organize community education programmes targeting rural households to raise awareness on antimicrobial resistance. its causes, risks, and prevention strategies, using radio, health workers, and local leaders.

WASH

- Gweru (90%) and Kwekwe (87.3%) reported high access to improved water services, reflecting better infrastructure and urban service provision. The prioritization of rural water infrastructure investment should continue through allocation of more resources toward expanding boreholes, protected wells and piped systems in areas like Gokwe North.
- 61% of households in Midlands Province were accessing improved sanitation, indicating that nearly 4 in 10 households still lack proper sanitation facilities. The overall sanitation gap across the province may contribute to disease outbreaks, environmental contamination, and poor hygiene, especially in vulnerable communities. This can be improved by setting up ward-level sanitation tracking mechanisms to monitor progress toward universal sanitation coverage and guide local planning.

Conclusions and Recommendations

Agricultural Production Technologies

- Many households were practising Pfumvudza/Intwasa (51.9%, reflecting its wide acceptance and promotion as a climate-smart technology for enhancing productivity under drought-prone conditions. There is need to scale up production of labour-saving machinery for climate smart agriculture and make them affordable as well as have an integrated approach to implementing Pfumvudza/Intwasa to improve upatake.

Child Health

- Midlands achieved a high vitamin A supplementation coverage of 95% in 2025, surpassing the national target of 90%. The Ministry responsible for Health should continue with strategies applied, that is task sharing with community health workers, integrating with campaign blitz and child health and nutrition support groups. However, there is need for the Ministry responsible for Health to strengthen routine surveillance and documentation of Vitamin A supplementation efforts at community level.

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