

Rebuilding human capital amidst the pandemic

The impacts of COVID-19 on school-aged children and youth in Zimbabwe

SAVING LIVES CHANGING LIVES

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Table 1:

Highlights

- In Zimbabwe, a total of 1,415 youth aged 15–24 years and 805 parents of schoolchildren aged 6–14 years were randomly surveyed online across the country between 7 June and 16 July 2021 to assess the impacts of the COVID-19 pandemic on youth and schoolchildren. Parents of schoolchildren reported on behalf of 1,130 young boys and girls.
- Survey responses indicate that COVID-19 has impacted access to education in Zimbabwe. The number of schoolchildren represented in the survey who were going to school in 2021 fell by 20 percent compared to before the pandemic, with the largest decline occurring among Zimbabwean girls. According to parents, the main reasons children did not return to school in 2021 were school closures (35 percent), which may have discouraged parents from re-enrolling their children and the inability to pay school fees/costs (29 percent).
- The livelihoods of Zimbabwean households with schoolchildren and Zimbabwean youth have been threatened by the pandemic. 66 percent of parents reported a decline in household income and 67 percent of youth reported either losing their job or having their salary or working hours reduced. 85 percent of families with schoolchildren and 66 percent of youth and their families reported using coping mechanisms to respond to stressors from the pandemic.
- One in five Zimbabwean schoolchildren (20 percent) were reported to be consuming one or no meal per day, and around 65 percent of parents were concerned about where their next meal would come from, which raises important food security concerns among this group. Around 12 percent of youth reported eating one meal or less the day prior to the survey, while 44 percent reported having felt worried about having enough food to eat in the past 30 days. Both children and youth living in rural areas were compromising their food consumption to a greater extent than those living in urban areas.

- Regarding the use of food-based coping strategies among children and youth, in the month before the survey, nearly half of parents said that their children were either forced to skip meals (34 percent) or go a whole day without eating (14 percent). Regarding youth, 22 percent reported to have skipped meals and 10 percent forced to have gone a whole day without eating.
- Thirty-eight percent of parents reported issues accessing medical services for their children. The most common challenge was a lack of money to pay for services (76 percent), which suggests that the reduction in household income that respondents experienced since the start of the COVID-19 pandemic may have broader implications for the health of Zimbabwean children. Households were often facing multiple, concurrent burdens, with 85 percent of households that worried about not having enough food also reporting challenges accessing medical services for their children.
- The health and wellbeing of children is a vital component of human capital. More than half of parents (52 percent) said access to education and learning materials was the top challenge for their children's wellbeing, which reflects the important impact of school closures during the pandemic on children's lives. This was followed by access to sufficient food (35 percent). For youth, the major issue also revolved around access to education (32 percent), followed by lack of work/unemployment (23 percent). Access education was found to be a particularly important challenge for young women.
- Responses indicate that the pandemic also impacted safety and security in Zimbabwe. 61 percent of parents responded that they perceived increased tensions and violence since the start of the pandemic and one in three youth reported that they did not feel fully safe in their current environments. For young women, violence within the family was the top security concern and for parents, increased crime rates and domestic violence represented

- the top concerns. Worryingly, around 86 percent of parents reported that these increases in violence have impacted their children.
- Young people are vital to countries' economies and can become meaningful agents of growth and change if they have the right resources to achieve their full potential. Young people in Zimbabwe were asked what they needed to achieve success in the future. Access to higher education (25 percent), access to job opportunities (16 percent), and access to technology and equipment (14 percent) were the most identified needs among youth who responded.



Background

Over the last decade, Zimbabwe has experienced several economic and environmental shocks that have contributed to high food insecurity and malnutrition. Widespread droughts in 2016-2017 and 2019-2020 drastically impacted the lives and livelihoods of Zimbabweans, 70 percent of whom make their living in the agricultural sector. The impacts of these droughts were compounded by the effects of the 2019 cyclone that severely affected the country's eastern provinces, causing flash floods and the displacement of 10,000 people.² In addition to natural hazards, the country's economy has been marred by instability, with hyperinflation reaching 838 percent in July 2020.3 These challenges have contributed to widespread poverty and economic contraction of around 8 percent in 2019 and 2020.4 The socioeconomic impacts of the COVID-19 pandemic have adversely affected livelihoods, triggering huge losses of income and increased

food insecurity. It was estimated that at least 49 percent of the population lived in extreme poverty⁵ in 2020 and that 3.38 million people were acutely food insecure and in need of urgent food assistance⁶ at the beginning of 2021– mainly because of climate shocks, protracted economic instability and the impacts of COVID-19.

The COVID-19 pandemic has also put at risk an entire generation of schoolchildren and youth who have suffered from learning losses due to massive school closures across the country. At the onset of the pandemic, schools in Zimbabwe closed their doors from March to mid-September 2020, before partially reopening in October 2020. Eventually schools re-opened in April 2021, despite other challenges and disruptions, including teacher strikes in response to low pay and the lack of COVID-19 protection equipment in schools.⁷⁸ UNICEF estimates that around 4.6 million children were affected by school closures

¹ WFP. 2021. Terms of Reference: Evaluation of R4 Rural Resilience Initiative in Masvingo and Rushing a Districts in Zimbabwe [2018-2021].

² WFP. 2020. Terms of Reference: REPUBLIC OF ZIMBABWE: AN EVALUATION OF WFP'S COUNTRY STRATEGIC PLAN (2017-2021).

³ Zimstat. 2021. Statistics at a glance: inflation rate.

⁴ World Bank. 2021. Zimbabwe.

⁵ World Bank. 2021. Zimbabwe Economic Update. Overcoming Economic Challenges, Natural Disasters, and the Pandemic: Social and Economic Impacts. June 2021, Issue 3. The World Bank Group.

⁶ FSIN. 2022. Global Report on Food Crises 2022.

⁷ Dzinamarira, T. & Musukab, G. 2021. <u>The paradox of re-opening schools in Zimbabwe in the COVID-19 era.</u>

⁸ VOA. 2021. Thousands of Zimbabwean Teachers Strike Over COVID-19 Concerns.

between 2020 and 2021 in Zimbabwe.⁹ Although there is limited quantifiable information, it is likely that many Zimbabwean children and youth will bear the weight of lost access to classrooms in the years to come, with literacy levels at risk of falling behind. Despite efforts made to make education accessible to all during the pandemic, children from poor rural areas had limited opportunities to access the necessary digital tools to pursue their education virtually.¹⁰ Many parents could not afford to arrange for digital education for their children or private lessons so they could continue their schooling at regular pace.¹¹

Young girls were found to have been particularly impacted by school closures. Even before COVID-19, it was estimated that one in three young girls was married before the age of 18, many with unplanned pregnancy, which forced them to drop out of school. The spread of the pandemic intensified the situation, and many young women and girls were left without access to medical services, while sexual abuse, marriage and pregnancy increased. In August 2020, the government changed the law that had long banned young women and girls to attend school while pregnant. Although this is a great achievement for the country, many girls still face stigma and drop out of school. Figures have indeed increased since the pandemic, from 3,000 girls dropping out due to pregnancy in 2018 and 2019 up to 5,000 girls in 2021.12 Overall, the impediments to learning caused by the pandemic are likely to have major implications for human capital in Zimbabwe in the long-term.

Zimbabwe is one of seven countries part of a global study conducted by WFP's Research, Assessment and Monitoring (RAM) Division and the School-based programmes (SBP) Service, which aimed to better understand the impacts of the COVID-19 pandemic on schoolchildren aged 6–14 years of age and youth aged 15–24 years. Other countries covered in this study include **Cambodia**, **Colombia**, **Ghana**, **Haiti**, **Iraq and Kenya**. These countries were selected to represent each of WFP's operational regions as well as all three school-based programme country contexts.¹³ An additional criterion used to select countries was their relatively good internet coverage, which ensured representation of youth and parents throughout the country with varying socioeconomic status.¹⁴ A global report and seven separate case studies were produced in the context of this initiative. This case study provides an overview of context-specific findings of the survey among youth and parents of schoolchildren in Zimbabwe.

⁹ UNICEF. 2021. Providing a learning solution for millions of in and out of school children in Zimbabwe.

¹⁰ AA. 2021. Lockdown turns millions of children illiterate in Zimbabwe

¹¹ AA. 2021. Continuous lockdowns to hit literacy rate in Zimbabwe

¹² ABC News. 2022. Zimbabwe encourages teenage girls to return to school after giving birth during COVID-19.

¹³ School-based programme contexts include Context 1: Providing operational support (Haiti); Context 2: Transitioning to national programmes (Cambodia, Iraq, and Kenya); Context 3: Consolidating and strengthening national programmes (Colombia, Ghana and Zimbabwe).

¹⁴ A minimum threshold of 30% of internet users within the total population. Data on internet users for 2020 was retrieved from: https://datareportal.com/.

Methodology and sample description

This study used innovative web surveys to collect information from random and anonymous respondents in near-real time. Internet users in Zimbabwe were directed to a survey after clicking on a broken link or entering an invalid URL instead of receiving a broken link notification, they received a survey form. The analysis draws upon responses from parents of schoolchildren aged 6-14 years and youth aged 15-24 years who were identified using specific filter questions and channelled to the appropriate survey form. Two customized but thematically similar surveys were designed for these two groups. The survey in Zimbabwe was translated and administered in Ndebele, Shona, Tonga and English to meet the linguistic requirements of the country.

The target sample size for the country was 960 completed surveys with the following disaggregation (Table 1) to ensure a representative sample of schoolchildren and youth from different age groups. In addition, the sample was distributed proportionally to population size by admin 1 level.

Data collection was conducted in Zimbabwe from 7 June to 16 July 2021. Overall, **2,200 surveys** were completed, far exceeding the national

target. This includes **1,415 youth** and **805 parents of schoolchildren.** The parent survey included a child roster where respondents were invited to provide information for each of their children (up to five children). Parents reported on behalf of 1,130 children aged 6–14 years.

Both quantitative and qualitative data were collected through the surveys. Topics included access to and quality of education, livelihoods and income sources, food security, livelihood coping, access to healthcare (children), main challenges faced, safety concerns, and aspirations for the future (youth). Because the web survey technology only reaches literate populations connected to the internet, the survey is not representative of the general population. Nonetheless, to correct the bias introduced by the technology, a three-variable weighting system was introduced during the analysis phase to ensure that both sexes, geography (populations by admin 1 level), and people with different education backgrounds were represented according to the prevailing national statistics. Moreover, when and where possible, data was triangulated with secondary sources to complement key findings.

TABLE 1: OVERVIEW OF SAMPLE AND DISTRIBUTION PER COUNTRY ¹⁵		
480 x Parents of school-aged children (6-14 years)	240 x school-aged children (6–9 years)	
	240 x school-aged children (10–14 years)	
480 x youth (15–24 years)	240 x youth (15–19 years)	
	240 x youth (20–24 years)	

¹⁵ The overall sample of 480 completed surveys per target group is based on a confidence level of 95 percent and a margin of error of 5 percent.

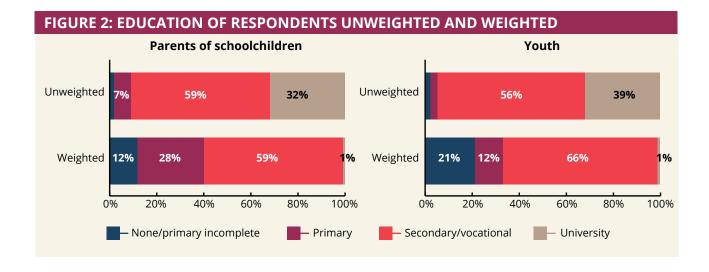
PROFILE OF SURVEY RESPONDENTS

Surveys across all seven countries targeted parents with children aged 6–14 years old as well as youth aged 15–24. Before weighting, the sample of parents of schoolchildren and youth showed an overrepresentation of male respondents, which is likely due to the greater internet usage among men.

Although not perfect, the weighting system helped correct this bias. Figure 1 illustrates the sex of respondents before and after weighting.

In terms of education, the samples for both parents and youth show an underrepresentation of less- educated respondents, which is to be expected with the use of the web survey. However, the weighting system helped correct this bias by recalibrating the sample based on education statistics for Zimbabwe. This method amplifies responses of those who have lower education levels, which is often a proxy of lower socioeconomic status.

FIGURE 1: SEX OF RESPONDENTS UNWEIGHTED AND WEIGHTED **Parents of schoolchildren Youth** 36% 41% **Unweighted** MALE **FEMALE FEMALE 50%** 46% Weighted FEMALE MALE MALE **FEMALE**



Access to and quality of education

Access to quality education is a key factor determining a country's human capital. When children and youth can attend school, they are able to learn skills that can improve their livelihoods and earning potential. Unfortunately, school closures and economic hardship experienced during COVID-19 have impacted youth and schoolchildren's ability to attend school and receive a quality education. During complete and partial closures in Zimbabwe, schools used alternative methods of learning such as broadcasting lessons on the radio. 16 While these alternative methods allowed education to continue in some capacity, virtual learning lacks the quality and interactions of in-person learning. Several studies have found that teachers perceive virtual learning to be less effective, particularly for schools reaching students in poverty.¹⁷ The following sections outline respondents' perceptions of the pandemic's impact on education for schoolchildren aged 6-14 years, as reported by their parents, and youth aged 15-24 years. It is worth noting that at the time of the survey in June 2021, schools in Zimbabwe had stalled in-person learning in response to a third pandemic wave.18

SCHOOLCHILDREN

Before the start of the COVID-19 pandemic, 90 percent of the children represented in the survey were reported to be enrolled in school. Parents were more likely to report that young girls (93 percent) were enrolled than boys (88 percent). Moreover, older children aged 10–14 (96 percent) were more likely to be enrolled than children aged 6–9 years (85 percent). Children in villages and rural areas (86 percent) were less likely to be enrolled in school than children living in small towns and urban areas (92 percent). The primary reason parents reported for children not attending school prior to the pandemic was the

inability to pay for school fees/costs (61 percent). These responses indicate that financial hardship prevented some Zimbabwean children from attending school even before COVID-19.

After the onset of the COVID-19 pandemic, 70 percent of children were reported to be going to school (either at school or at home) during the 2021 school year, 20-percentage points lower than pre-pandemic enrolment. Young girls (-24 percent) were more likely to have left school compared to young boys (-18 percent). Moreover, older children aged 10-14 years (-25 percent) were more likely to have left school than younger children aged 6-9 years (-16 percent). This potentially indicates that in times of hardship parents are more likely to continue sending young pupils to school than older children. The survey also found that more children living in urban areas (-23 percent) were reported no longer going to school compared to children in rural areas (-13 percent), which is likely due to the strong impact of the COVID-19 pandemic in urban areas.

The main reasons reported by parents for not sending their children to school during the pandemic were school closures (35 percent), the inability to pay for school fees/costs (29 percent), worry about COVID-19 (19 percent) and lack of access to equipment/internet (10 percent). The instability of schools' operability, including the availability and accessibility to remote learning was one of the leading causes of some children not attending school in 2021. Interestingly, parents of young girls cited inability to pay school fees/costs (38 percent) more often than for young boys (20 percent), which suggests the economic strain of COVID-19 may have an outsized impact on school participation for Zimbabwean girls. One Zimbabwean father elaborated on these issues:

"I am no longer able to get enough food for the children because my income is always low and paying for school is difficult because I am selfemployed."

¹⁶ UNICEF. 2021. Providing a learning solution for millions of in and out of school children in Zimbabwe.

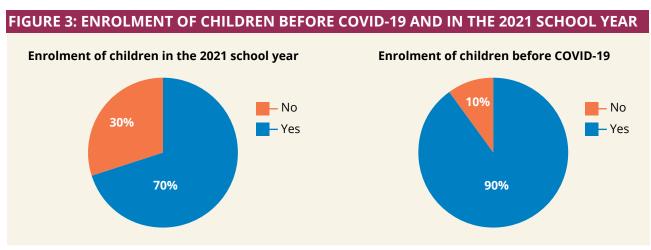
¹⁷ CNBC. 2021. Virtual school resulted in 'significant' academic learning loss, study finds.

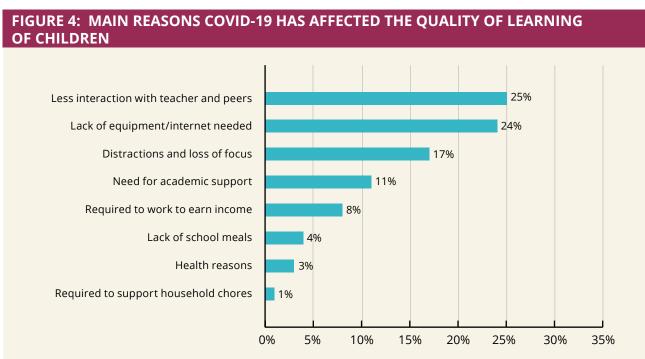
¹⁸ UNICEF. 2021. Education for children with disabilities during Covid-19 crisis in ESAR: observation and guidance

Out of the 70 percent of children who were still reported to be enrolled in school at the time of the survey, learning modalities varied. At the time of the survey, when in-person learning was stalled in most schools, only 32 percent of children were learning at school every day while 34 percent were able to physically attend classes on some days. Around 17 percent were studying from home, including 7 percent who reported not receiving any support from schoolteachers or tutors. Finally, 18 percent reported not receiving any education because schools were forcibly closed due to COVID-19 (16 percent) or for other reasons (2 percent).

In addition to the impacts of COVID-19 on school participation, 96 percent of parents who responded to the survey reported that COVID-19 had impacted the quality of their child(ren)'s education. The main reasons are listed in Figure 4, highlighting the challenges faced due to the lack of teacher presence and alternatives of online education. One Zimbabwean father shared:

"There must be free internet for pupils to continue their education during this COVID crisis. Without a continued student-teacher relationship, students will plateau academically. Scholarships also must be introduced to support poor families."



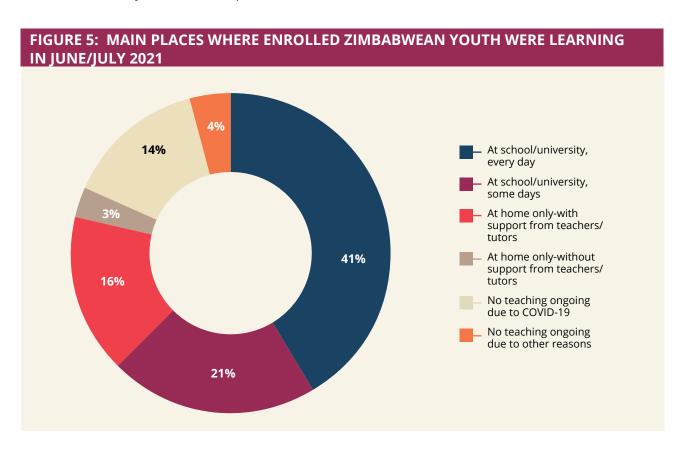


YOUTH

Overall, 17 percent of Zimbabwean youth reported leaving school/university during the COVID-19 pandemic, excluding those who graduated and those who never went to school. Out of those who left school, school closures (28 percent) were the main reason followed by the inability to cover tuition fees and/or related schooling costs (21 percent). The instability of schools' operability and lack of availability and/or access to online education are likely to have discouraged youth to continue their education in 2021. No significant differences were found between young women and men from different age groups.

Out of the 83 percent of youth still enrolled in school/university at the time of the survey, around 41 percent reported to be learning in person every day, while 21 percent were going to school on some days and about 19 percent were learning from home (figure 6). This indicates that universities, training centres and other learning institutions for youth were able to continue accommodating in-person learning to a greater extent than schools for children. However, there is still a considerable percentage of youth (18 percent) who were not able to receive an education at the time of the survey, despite being enrolled.

Furthermore, 78 percent of youth reported that COVID-19 has affected the quality of schooling. Similar to schoolchildren, the main reasons were fewer interactions with teachers and peers (33 percent). This was followed by distractions and loss of focus (18 percent), lack of equipment/internet needed (14 percent) and the need for academic support (13 percent).



Livelihood activities and income

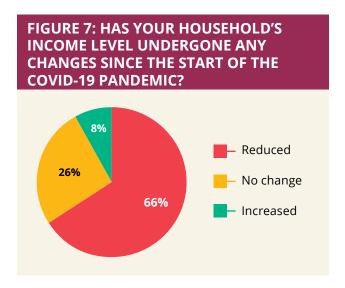
The impact of COVID-19 closures and reductions in tourism has had broad-reaching impacts on the Zimbabwean economy and the livelihoods and income of its people. According to the World Bank, the number of extremely poor citizens in the country expanded by 1.3 million people since the onset of the pandemic.¹⁹ Zimbabwe was not the only country in the Southern Africa region to face severe economic impacts from coronavirus closures. As job opportunities in neighbouring countries disappeared, more than 200 000 Zimbabweans migrated back to their home country.²⁰

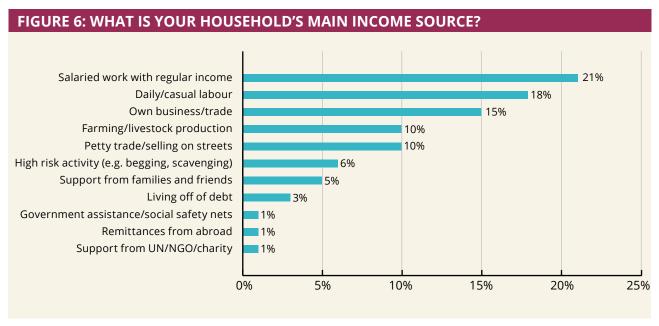
The pandemic strained already thin resources²¹ and forced many people to adopt coping strategies and expend their limited assets. The following section details survey participants' responses when asked about impacts on their income.

SCHOOLCHILDREN

About one in five parent respondents reported salaried work as their main income source.

which is likely a slight bias introduced by the web-survey methodology. Nonetheless, around 18 percent also reported daily/casual labour, followed by owning a small business/trade, farming and livestock production and petty trade, which are the most common livelihoods in Zimbabwe. The latter more unstable income sources were recognized as being the hardest hit by the COVID-19 pandemic. Indeed, the World Bank has reported that the majority of





¹⁹ World Bank. 2021. Zimbabwe economic update: COVID-19 further complicates Zimbabwe's economic and social conditions.

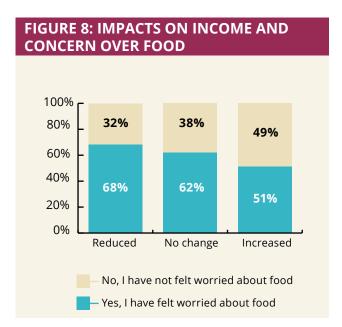
²⁰ IOM. 2021. More than 200,000 people return to Zimbabwe as COVID-19 impacts regional economies

 $^{{\}bf 21\ World\ Bank, 2021.}\ \underline{Zimbabwe\ economic\ update:\ COVID-19\ further\ complicates\ Zimbabwe's\ economic\ and\ social\ conditions.}$

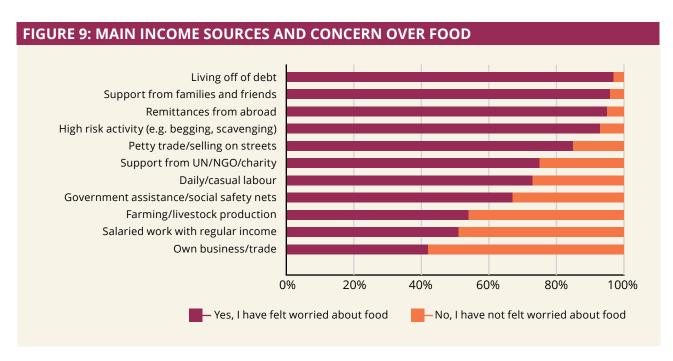
the COVID-19-induced poor were working in the service sector prior to the pandemic, which is often comprised of daily workers and was one of the most-affected sectors by the containment measures put in place to curb the spread of the virus.

When asked if household income had undergone any changes since the start of the COVID-19 pandemic, an overwhelming 66 percent of parent respondents reported a decrease in their income.

Reduced income has a direct impact on household food security. Overall, 68 percent of households who reported feeling worried about where their next meal would come from also reported a reduced income. Families who are mainly dependent on more unstable sources of income, including debt, support and high-risk activities, such as begging and scavenging, were also found to be more concerned about food than others with more stable livelihoods.







YOUTH

Prior to COVID-19, 21 percent of Zimbabwean youth who responded to the survey reported working. No significant differences were noted between young women and young men. Not surprisingly, a higher prevalence of older youth aged 20–24 years (27 percent) were working than younger youth aged 15–19 years (16 percent). Furthermore, youth living in rural areas (18 percent) reported working to a lesser extent than those living in urban areas (22 percent)

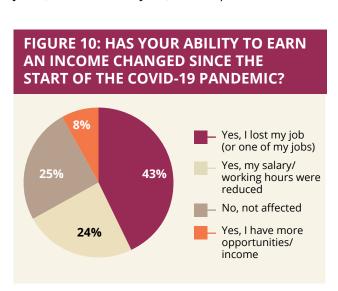
At the time of the survey, the percentage of Zimbabwean youth who reported to be working dropped to 17 indicating a decrease of around 4 percent of working youth. No significant differences were identified between young men and young women, age groups or living areas. However, sectors where youth were working before the COVID-19 pandemic and at the time of the survey have shifted. Interestingly, the survey found a clear increase in the percentage of youth working in the agricultural/forestry sector, from 7 percent prior to the pandemic to 11 percent at the time of the survey.

It was extremely challenging for youth to find a job and earn an income during the pandemic, and as work can be highly dynamic with periods of employment and unemployment, it is worth looking at the overall situation of youth since the start of the pandemic. In fact, 67 percent of youth respondents reported a negative impact on their earnings since the start of the pandemic. This includes 43 percent who reported losing their jobs (or one of their jobs) and 24 percent who

reported that their salary/working hours were reduced.

Overall, a higher proportion of young women (48 percent) reported losing their jobs (or one of their jobs) than young men (38 percent). And although youth across the country were affected by job losses, those living in rural areas (52 percent) reported losing their jobs (or one of their jobs) to a greater extent than youth living in urban areas (41 percent). These findings deserve further investigation to better understand how youth living in rural areas are being affected by the pandemic, and what type of interventions can be implemented to help rebuild their livelihoods. Furthermore, at the time of the survey, around

Furthermore, at the time of the survey, around 37 percent of youth reported they had been living away from home for work purposes, including 17 percent who were still living away from home at the time of survey and 20 percent who reported to have returned home. Asked why they had returned home, 35 percent of the Zimbabwean youth surveyed reported personal reasons, followed by losing their job (30 percent). Another 18 percent reported to have been pressured/ forced to leave the area where they were living.





Food security situation and livelihood coping

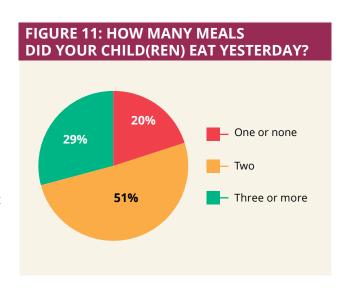
Food insecurity impacts the current and future nutritional outcomes and development of children. Children who are food insecure struggle more to acquire new school and job skills as adolescents and adults than children whose development was uninterrupted.²² This is due to the impact of early environment on brain architecture and neurochemistry in addition to the demonstrated effects of food insecurity on student engagement, grade repetition, and academic achievement. Prior to the COVID-19 pandemic, many Zimbabweans already faced food insecurity and the need to employ severe coping strategies in response to drought and external stressors. During the 2019/2020 lean season, the Zimbabwe Vulnerability Assessment Committee (ZimVAC) estimated that 5.5 million Zimbabweans in rural areas experienced acute food insecurity.²³ The ZimVAC 2019 report found that prior to the pandemic, over half (53 percent) of households were employing coping strategies, including 13 percent of households that were employing emergency coping strategies, such as selling their land, begging for food, and selling the last breeding stock to buy food.²⁴

The web survey asked youth and parents of schoolchildren about their food security since the onset of the COVID-19 pandemic. Three indicators were used to approximate food security – food consumption during the previous day, concern over having enough food, and the use of consumption-based coping strategies. Youth and parents were also asked about their use of livelihood coping strategies in response to COVID-19 stressors to further understand current levels of vulnerability among these groups.

SCHOOLCHILDREN

Overall, 65 percent of parents reported feeling worried about having enough food to eat in the month before the survey. When asked about their perceptions of their children's food security, one in five reported that their children had eaten one or no meals the day prior to the survey. Children living in rural areas (26 percent) were more likely to be eating just one meal a day than children living in urban areas (18 percent), which highlights the long-standing challenge of chronic food insecurity in rural areas.

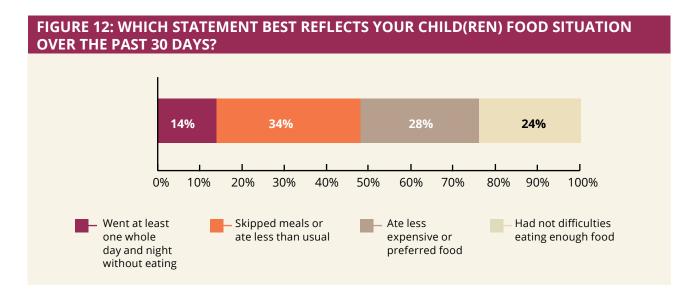
Figure 12 illustrates that around 48 percent of children were forced to adopt severe food-based coping strategies, including skipping meals or eating less than usual or going a whole day without eating. Similar to findings related to food consumption, a higher percentage of children living in rural areas (26 percent) were reported to have gone to bed hungry in the month prior to the survey than children living in urban areas (10 percent).



²² Children's Healthwatch. Feeding Our Human Capital: Food Insecurity and Tomorrow's.

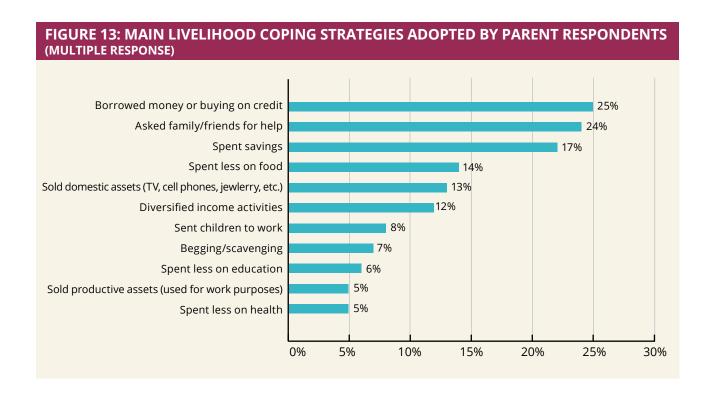
²³ USAID. 2021. Food Security.

²⁴ ZimVAC. 2019. 2019 Rural Livelihoods Assessment Report.



The use of livelihood-based coping strategies was found to be widespread among households with schoolchildren. Around 85 percent of parents reported to have adopted at least one livelihood-based coping strategy to meet their most essential needs, including food, health, education and rent in the month prior to the survey. An additional 6 percent of respondents reported they had no capacity to cope. Figure 13 illustrates the main coping strategies used, which include borrowing money or buying on credit for one in four parent respondents, followed by asking

family and friends for help. Around 14 percent also spent less on food to make ends meet, which could represent a key food security concern in the long run. More concerningly, however, is that 8 percent of parents reported sending children to work and 7 percent reported begging/scavenging in an attempt to meet their essential needs. This deserves further investigation to understand dynamics at play which are forcing families to adopt such severe strategies.

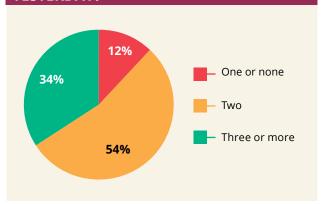


YOUTH

Food consumption among youth respondents was found to be less alarming compared to schoolchildren. Nonetheless, more than one in ten youth reported to have eaten only one meal the day before the survey. Although no significant differences were found between young men and women from different age groups, youth living in rural areas (17 percent) were found to be compromising their food intake to a greater extent than those living in urban areas (11 percent). Furthermore, youth that either lost their jobs or had their salary reduced during COVID-19 were more likely to be compromising their food consumption than youth whose income was not affected.

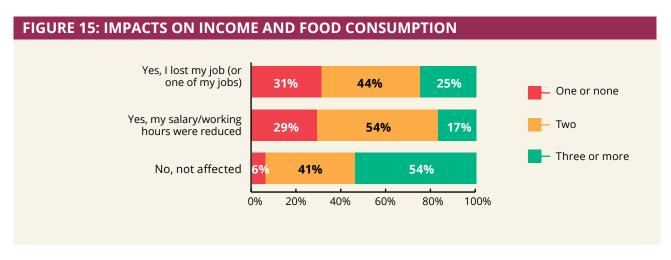
Overall, 44 percent of youth reported feeling worried about where their next meal would come from in the month before the survey. Concern over having enough food to eat was found to be higher among older youth aged 20-24 years (48 percent) and those living in rural areas (48 percent) compared to youth aged 15-19 years (40 percent) and those living in urban areas (43 percent). Food insecurity in Zimbabwe is indeed a continuous challenge in rural areas, despite the pandemic hitting urban areas hard. Youth whose mobility was affected at the time of the survey were also more worried about having enough food to eat. Indeed, concern over food consumption was higher among those who reported to be stranded away from home (58 percent) or with limited mobility in their home area (52 percent) than those who could move freely (32 percent).





Applying food-based coping strategies due to the lack of food or means to buy food over the past month was reported by 60 percent of youth respondents, including one in ten who reported going to bed hungry in the month before the survey. Young men were more likely to go a whole day without eating than young women (12 percent versus 8 percent). Furthermore, youth living in rural areas were more likely to skip meals than those living in urban areas (31 percent versus 19 percent).

Overall, 66 percent of youth reported that either themselves or someone in their households adopted at least one livelihood-based coping strategy in the month before the survey to be able to meet their most essential needs. Another 6 percent reported that they had no capacity to cope. The use of coping strategies was found to be slightly higher in urban areas than in rural areas



Borrowing money or buying on credit was the top strategy reported, closely followed by asking friends or family for help.

This quote from a young woman expresses this clearly:

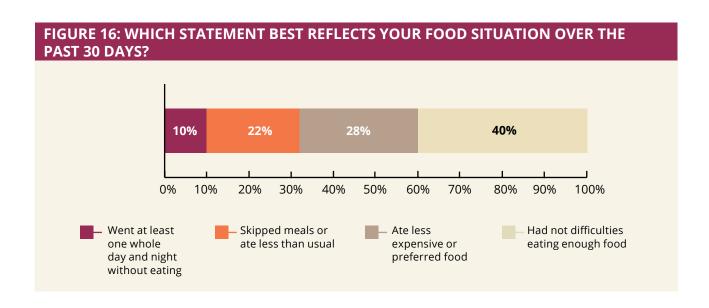
"I am asking for money from friends and family to complete my studies at university as I am in my final year. The money is never enough and I'm eating low-cost meals to get food twice a day." Although diversifying income activities was mentioned by only 5 percent of youth respondents, this coping strategy came out quite strongly in the qualitative data collected.

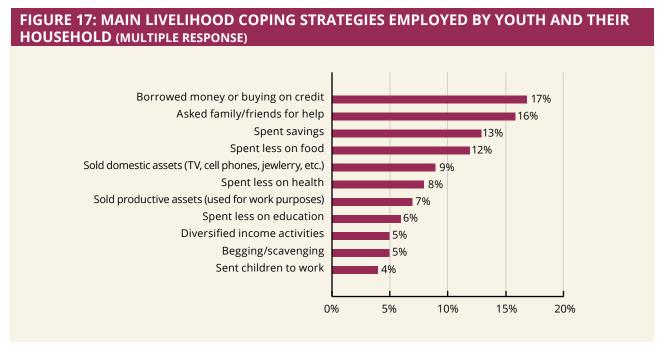
One young woman shared she was coping by:

"selling fizzy drinks and detergents just to put food on the table",

while another young man shared:

"I had to cut down my expenditures, such as food and transport, to cope with the current situation."





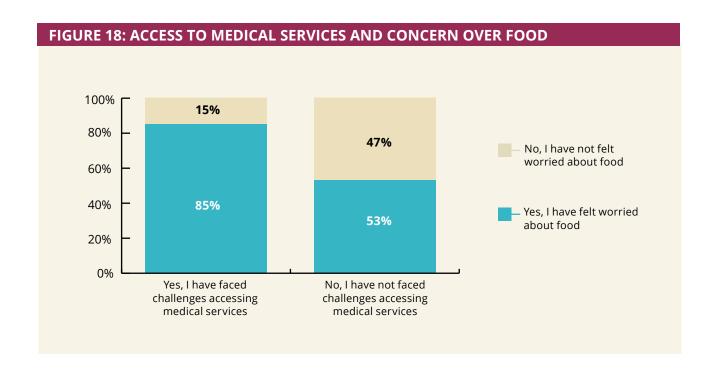
Access to medical services for children

Healthy and well-nourished children have better chances of growing and achieving their full potential. Even before COVID-19, access to medical services was a challenge for many in Zimbabwe. Economic challenges have led to staffing shortages and the deterioration of healthcare infrastructures. A 2019 study found that staff shortages, inconsistent supply of medication, long distances from rural communities to health facilities, and unaffordability were identified as the main barriers for healthcare users before the onset of the pandemic.²⁵

When parents of school-aged children in Zimbabwe were asked whether they had faced challenges in accessing medical services for their children over the past year, 38 percent reported having had issues. More than three quarters (76 percent) of parents who experienced challenges reported that the main reason was lack of money.

Challenges in accessing medical services and concern over having enough food to eat were found to be closely intertwined. Around 85 percent of parents who reported facing challenges in accessing medical services for their children also reported feeling concerned about where their next meal would come from. This highlights that most of the children who are at risk of food insecurity are also at risk of lacking access to medical services. Lack or loss of income is likely to be the central driver of these deprived needs. One Zimbabwean mother shared her story through her open response:

"I had to first downgrade my medical insurance to basic care then eventually I had to cancel it because it was costing 3/4 of my salary. We need better medical coverage so we can protect our children's health."



²⁵ Mangundu, M., Roets, L., and Janse van Rensberg, E. 2020. <u>Accessibility of healthcare in rural Zimbabwe: The perspectives of nurses and healthcare users.</u>
African Journal of Primary Health Care and Family Medicine. <u>Doi: 10.4102/phcfm.v12i1.2245</u>

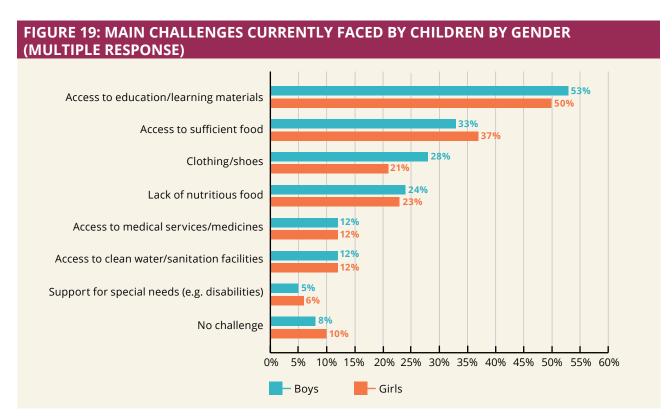
Main challenges faced

SCHOOLCHILDREN

The main challenges faced by schoolchildren in Zimbabwe were reported to be lack of access to education and learning materials (52 percent) and lack of access to sufficient food (35 percent). Figure 15 illustrates the differences in challenges faced by sex of children. It highlights that access



to sufficient food is a greater challenge for young girls than boys. Furthermore, age disaggregation revealed that access to education is a greater challenge for older children aged 10-14 years than those aged 6–9 years, which is line with findings highlighting that more older children left school in 2021 compared to younger pupils. Access to learning education/learning materials (55 percent), to sufficient food (38 percent) and to clothing/shoes (30 percent) were all found to be greater challenges among children living in rural areas compared to those living in urban areas (51 percent, 34 percent and 22 percent respectively). Lack of nutritious food was also found to be an important challenge for children, reported by more than one in five parents.



IN THE WORDS OF RESPONDENTS – PARENTS OF SCHOOLCHILDREN

Parents of schoolchildren responded to an open-ended question asking what they were most worried about when it came to raising their children. Education, healthcare, security, and concerns related to income and finances featured prominently among responses. Many parents expressed concerns about food and the ability to feed their families.

A Zimbabwean father said:

I am no longer able to get enough food for the children because my income is always low and paying for school is difficult because I am self-employed."

Similarly, another father shared:

"[We have] less food. Clothing and school fees are hard to come by." A Zimbabwean mother shared her biggest worry:

"that I should be able to provide them [her children] with good education and a stable home with a sufficient, balanced diet."

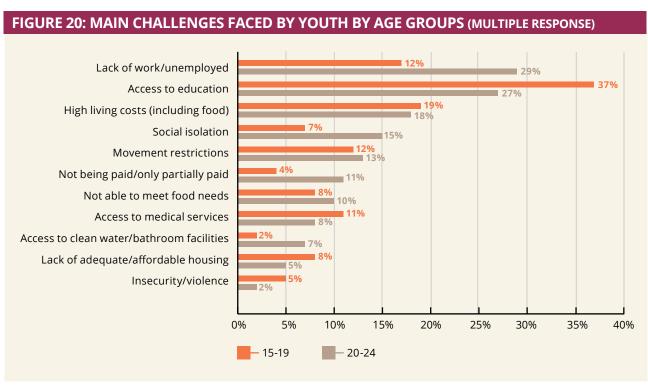


YOUTH

Challenges faced by youth are naturally different to those faced by children, mainly due to the differences in age and stages of their life. Overall, Zimbabwean youth were found to be mainly concerned about lack of access to education (32 percent) and lack of work/unemployment (23 percent), as they struggle to enter the labour market and maintain their job to make a decent living. High living costs, including the cost of food, was also found to be an important challenge for young Zimbabweans (18 percent).

When looking at results by gender, the survey found that young Zimbabwean women were more likely to face challenges in accessing education (35 percent) than young men (30 percent). Furthermore, Figure 20 illustrates that 20–24 year-olds were more likely to cite lack of work, while 15-19 year-olds were more likely to point to lack of access to education. Consistent with other findings in this report, access to education (45 percent), and lack of work (29 percent) were more likely to be reported as major challenges by youth living in rural areas than those living in urban areas (29 percent and 21 percent respectively).





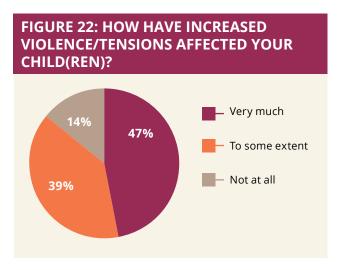
Safety concerns

SCHOOLCHILDREN

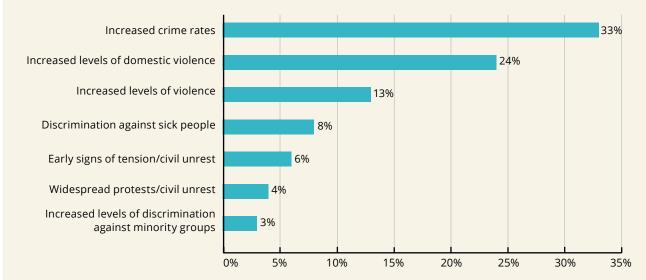
Even though Zimbabwe is a peaceful country, about 61 of parents of schoolchildren reported noticing an increase in tensions and violence in their communities over the past year. Figure 21 illustrates the main types of tensions and violence perceived, which includes increased crime rates, followed by increased levels of domestic violence. At the onset of the pandemic, the national GBV Hotline saw an increase of reports of over 40 per cent compared to the pre-lockdown trends.²⁶

Even before COVID-19, GBV was a pressing issue in Zimbabwe. According to a 2019 survey by the Zimbabwe National Statistics Agency (ZIMSTAT, 2019) 39.4 percent of women aged 15-49 had experienced violence since the age of 15 and 11.6 percent had experienced sexual violence in their lifetime. During the first 11 days of the lockdown, 764 cases of GBV were reported to the National GBV Hotline, compared to 500–600 cases a month prior to COVID-19.²⁷ Beyond the spike in cases, GBV service providers have also witnessed an increase in the severity of violence. The lockdown measures, including school closures,

forced women and girls to spend time enclosed and at heightened risk of abuse. The strain of the pandemic also increased manifestations of violence in public places. Women and girls with disabilities and those living in rural areas were found to be at heightened risk of violence.²⁸ In addition to these worrying trends, the web survey also found that 86 percent of parents reported that the increase in tensions and violence had affected their children.







²⁶ OCHA. 2021. Zimbabwe Situation Report.

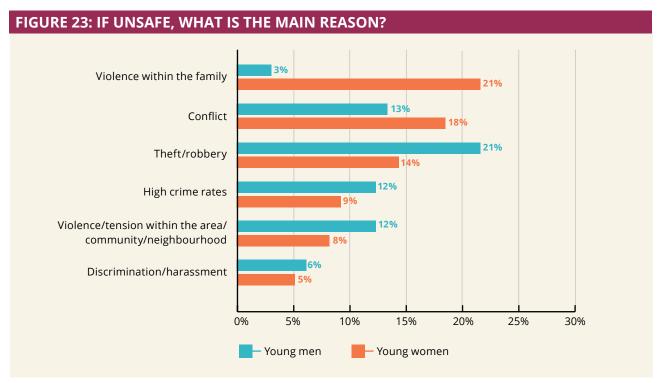
²⁷ Social Development Direct (2020). Stopping Abuse and Female Exploitation (SAFE) Zimbabwe Technical Assistance Facility.

²⁸ Social Development Direct (2020). Stopping Abuse and Female Exploitation (SAFE) Zimbabwe Technical Assistance Facility.

YOUTH

At the time of the survey, one in three youth respondents reported not feeling safe in their current environments. Safety concerns were found to be higher among older youth aged 20-24 years (40 percent) compared to youth aged 15-19 years (26 percent). Furthermore, geographic disaggregation of the data also showed that youth living in rural areas were more likely to report feeling unsafe (50 percent) than youth in urban areas (29 percent). Secondary data has indeed found that young women living in rural areas were at higher risk of violence and abuse, mainly due to the impacts of school closures, the inability to access education remotely and lower economic conditions.²⁹ Violence within the family as well as high crime rates in their community were the main reasons safety concerns cited among youth. Figure 23 illustrates the differences between young men and young women and highlights that violence within the family is a critical reason for young women feeling unsafe.





 $^{29\ \} Social\ Development\ Direct\ (2020).\ \underline{Stopping\ Abuse\ and\ Female\ Exploitation\ (SAFE)\ Zimbabwe\ Technical\ Assistance\ Facility.}$

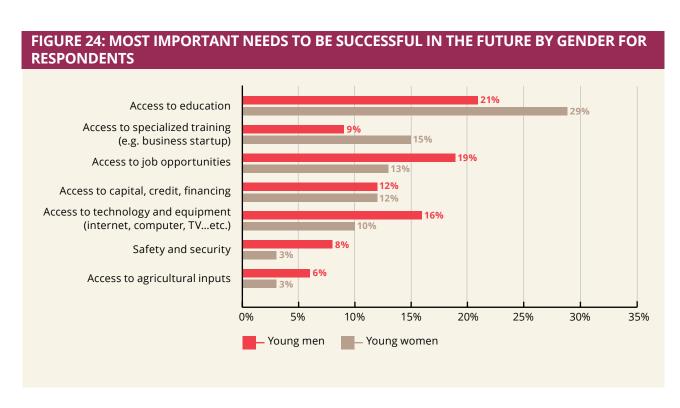
Aspirations for the future

When Zimbabwean youth were asked about what they would need to be successful in the future, access to education (25 percent) was the top factor for their success, followed by access to job opportunities (18 percent) and access to technology and equipment including internet and computers (17 percent). These needs are very much in line with findings related to education which indicated that many youths were forced to leave school due to forced closures and lack of access to equipment to pursue their education online during the pandemic. When disaggregating data by age groups, youth aged 15-19 were more likely to identify access to education (30 percent) as their most important need, while youth aged 20-24 years identified access technology as their most important need (16 percent). Figure 24 highlights the greater need for young women to access education

and specialized training. Young men identified access to job opportunities and technologies as their greatest needs. Youth living in rural areas were more likely to cite access to education (33 percent) and access to job opportunities (25 percent) as the top needs than those in urban areas (23 percent and 14 percent respectively). Impacts from the pandemic may have hampered these aspirations.

In the words of one Zimbabwean young man:

"As the eldest child I have to work to feed my family and take my little sisters to school. This has damaged my mental health. I constantly worry about my future, knowing I won't be able to go to university. This hurts."



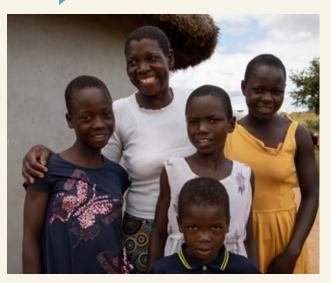
IN THE WORDS OF RESPONDENTS - YOUTH

Youth were asked what it would take to help get them through the current COVID-19 crisis. For youth, the most common needs related to education, opportunities to work and study, access to capital for business, internet access, and access to food.

In the words of one young woman:

"It would help to connect rural and remote areas to the internet - most people in these areas lack internet connection, which means that they have been missing school since the start of the pandemic." Another young man stated:

"I would suggest training young people in starting, managing and scaling up a business. Job opportunities are scarce, self-employment is the only route to success."





Conclusion

Zimbabweans represented in this report faced a variety of challenges after the COVID-19 pandemic. School closures, movement restrictions, and economic impacts greatly reduced youth and children's access to education and quality of education. Economic impacts also had vast effects on income, livelihood coping mechanisms, food security, medical access, and safety. The reduction in resources, education and healthcare may have broad implications for human capital in Zimbabwe long after COVID-19 restrictions are lifted. As the WFP and partners in Zimbabwe move forward with their strategic planning and operational response in the country, efforts should focus on the important impact of the pandemic on schoolchildren and youth to help build back livelihoods and restore education losses encountered over the past years.

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