2019 SNAPSHOTs OF KEY FINDINGS
The 2019 Multiple Indicator Cluster Survey (MICS) was carried out in 2019 by the Zimbabwe National Statistics Agency, as part of the Global MICS Programme with technical support from United Nations Children’s Fund (UNICEF). Financial support was provided by European Union (EU), Department for International Development (DFID), Embassy of Sweden, United Nations Population Fund (UNFPA) and UNICEF.

The Global MICS Programme was developed by UNICEF in the 1990s as an international multi-purpose household survey programme to support countries in collecting internationally comparable data on a wide range of indicators on the situation of children and women. MICS surveys measure key indicators that allow countries to generate data for use in policies, programmes, and national development plans, and to monitor progress towards the Sustainable Development Goals (SDGs) and other internationally agreed upon commitments.

The objective of this report with the Statistical snapshots is to facilitate the timely dissemination and use of results from the 2019 Zimbabwe MICS prior to the release of full tables and the final survey report that will contain detailed information on all survey findings by various demographic, social, economic and cultural characteristics.

Results presented in this report are not expected to change and are considered final. For more information on indicators and the analysis conducted please go to mics.unicef.org or zimstat.co.zw.

**Suggested citation:**
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**Response Rates**

<table>
<thead>
<tr>
<th>Category</th>
<th>Sampled</th>
<th>Occupied</th>
<th>Interviewed</th>
</tr>
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<tbody>
<tr>
<td>Household</td>
<td>12,012</td>
<td>11,313</td>
<td>11,091</td>
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**Women age 15-49**

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<th>Interviewed</th>
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<tbody>
<tr>
<td></td>
<td>10,703</td>
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**Men age 15-49**

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**Children under 5**

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<th>Mothers/Caretakers interviewed</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>6,223</td>
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</tbody>
</table>

**Children age 5-17**

<table>
<thead>
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<th>Category</th>
<th>Eligible for interview</th>
<th>Mothers/Caretakers interviewed</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>7,155</td>
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**Survey Implementation**

**Implementing Agency:**
Zimbabwe National Statistics Agency

**Sampling Frame:**
2012 Zimbabwe Population Census

**Listing & Mapping:**
October/November 2018

**Interviewer Training:**
November/December 2018

**Fieldwork:**
January - April 2019

**Questionnaires:**
- Household
- Women age 15-49
- Men age 15-49
- Children under 5
- Children age 5-17

**Water Quality**

**Key Messages**

- The response rates for households, eligible women, children 5-17 years and under 5 were outstanding (95% and above) while that for men was satisfactory at 89%
- The population pyramid is broad based indicating a high proportion of population was of age below 15 years (two in every five people)
- Two in every five the households were female headed
- Forty-six percent of households had a child under 5 years of age
- A majority of women, men, children under 5 and children 5-17 years were not covered by health insurance (all ranging between 90% and 94%)
- About a quarter of the children under 18 years were living with neither biological parent
- Two thirds of the women (63%) were married or in union compared with half of the men (50%)
Population Characteristics

Household Population Age & Sex Distribution

- Age distribution of males and females in the household population

Household Composition & Characteristics of Head of household

- Breakdown of households by selected characteristics

Women & Men’s Profile

- Distribution of women by background characteristics

Children’s Profile

- Distribution of children by background characteristics

Percent distribution of women and men age 15-49 by background characteristics

Percent distribution of children age 5-17 and under-five by background characteristics
Sample & Survey Characteristics

Children’s Living Arrangements*

- Lives with both parents
- Lives with neither biological parent
- Lives with mother only
- Lives with father only
- No data

Percent distribution of children age 0-17 years according to living arrangements
*Children age 0-17 years

Provincial Distribution of Population (percent)

<table>
<thead>
<tr>
<th>Province</th>
<th>Households</th>
<th>Women</th>
<th>Men</th>
<th>Children under 5</th>
<th>Children 5-17</th>
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<td>100</td>
<td>100</td>
<td>100</td>
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<td>100</td>
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<td>Bulawayo</td>
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<td>5.2</td>
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<tr>
<td>Manicaland</td>
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<td>12.3</td>
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<tr>
<td>Mashonaland Central</td>
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<td>8.8</td>
<td>9.3</td>
</tr>
<tr>
<td>Mashonaland East</td>
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<td>9.9</td>
<td>10.9</td>
<td>10.0</td>
<td>10.5</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>12.8</td>
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<td>14.8</td>
<td>13.9</td>
<td>13.0</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>4.9</td>
<td>4.8</td>
<td>4.5</td>
<td>5.5</td>
<td>5.9</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>5.2</td>
<td>4.6</td>
<td>5.0</td>
<td>5.1</td>
<td>6.2</td>
</tr>
<tr>
<td>Midlands</td>
<td>10.5</td>
<td>10.2</td>
<td>9.5</td>
<td>9.9</td>
<td>11.2</td>
</tr>
<tr>
<td>Masvingo</td>
<td>11.3</td>
<td>10.9</td>
<td>9.6</td>
<td>12.0</td>
<td>12.4</td>
</tr>
<tr>
<td>Harare</td>
<td>15.6</td>
<td>18.5</td>
<td>17.6</td>
<td>14.3</td>
<td>11.5</td>
</tr>
</tbody>
</table>

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Survey and Sample Characteristics. Data from this snapshot can be found in table SR. 1.1, SR3.1, SR.5.1W, SR.5.1M, SR.5.2, SR.5.3 and SR.2.3 in the Survey Findings Report.
Mass Media, Communications & Internet

Exposure to Mass Media

Percentage of women and men age 15-49 years who are exposed to specific mass media (newspaper, radio, television) on a weekly basis and percentage of women and men age 15-49 who are exposed to all three on a weekly basis.

Inequalities in Access to Mass Media

Percentage of women age 15-49 years who are exposed to newspaper, radio, and television on a weekly basis.

Percentage of men age 15-49 years who are exposed to newspaper, radio, and television on a weekly basis.

Key Messages

- Women and men in Zimbabwe had low access to various forms of mass media with men twice more likely to have access to all three forms of mass media (radio, television and newspaper) than women.
- Twenty-five percent of men read a newspaper weekly compared to 14% of women. 57% men and 44% women listened to a radio weekly, while 43% men and 38% women watched television weekly.
- Almost 9 in 10 households owned a mobile phone; while 2 in 5 owned a radio; 36% owned a television set, 15% owned a computer and a mere 2% owned a fixed telephone line.
- About 3 in 10 households had access to internet at home.
- Mobile phone usage was very high for both women (90%) and men (89%).
- More men (36%) used the internet compared to women (27%).
- Men were almost twice more likely to possess computer skills than women, 22% and 13%, respectively.
## Household Ownership of Information & Communication Technology (ICT) Equipment & Internet at Home

<table>
<thead>
<tr>
<th>Province</th>
<th>Radio</th>
<th>Television</th>
<th>Telephone - Fixed line</th>
<th>Telephone - Mobile</th>
<th>Computer</th>
<th>Internet at Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>40</td>
<td>36</td>
<td>2</td>
<td>89</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>44</td>
<td>79</td>
<td>12</td>
<td>99</td>
<td>28</td>
<td>40</td>
</tr>
<tr>
<td>Manicaland</td>
<td>37</td>
<td>23</td>
<td>1</td>
<td>89</td>
<td>10</td>
<td>33</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>47</td>
<td>21</td>
<td>0</td>
<td>82</td>
<td>6</td>
<td>16</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>44</td>
<td>25</td>
<td>1</td>
<td>87</td>
<td>11</td>
<td>40</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>40</td>
<td>31</td>
<td>1</td>
<td>88</td>
<td>13</td>
<td>21</td>
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<tr>
<td>Matabeleland North</td>
<td>40</td>
<td>16</td>
<td>1</td>
<td>81</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>40</td>
<td>28</td>
<td>1</td>
<td>91</td>
<td>13</td>
<td>36</td>
</tr>
<tr>
<td>Midlands</td>
<td>37</td>
<td>32</td>
<td>3</td>
<td>89</td>
<td>14</td>
<td>32</td>
</tr>
<tr>
<td>Masvingo</td>
<td>36</td>
<td>75</td>
<td>4</td>
<td>98</td>
<td>34</td>
<td>46</td>
</tr>
<tr>
<td>Harare</td>
<td>40</td>
<td>75</td>
<td>4</td>
<td>98</td>
<td>34</td>
<td>46</td>
</tr>
</tbody>
</table>

Percentage of households which own a radio, television-fixed line, telephone-mobile, computer and that have access to the internet at home.

### Inequalities in Household Ownership of ICT Equipment & Internet at Home

#### Household Ownership of a Radio

- **National**: 40%
- **Urban**: 40%
- **Rural**: 41%
- **Poorest**: 25%
- **Middle**: 49%

#### Household Ownership of a Computer

- **National**: 15%
- **Urban**: 31%
- **Rural**: 7%
- **Poorest**: 0%
- **Richest**: 49%

#### Household Ownership of a Mobile Telephone

- **National**: 100%
- **Urban**: 98%
- **Rural**: 85%
- **Poorest**: 69%
- **Richest**: 100%

#### Households with Internet

- **National**: 30%
- **Urban**: 50%
- **Rural**: 20%
- **Poorest**: 4%
- **Richest**: 65%
Use of Information & Communication Technology

**Computer Use**

- Women: 17% used computers
- Men: 24% used computers

**Mobile Phone Use**

- Women: 89% used mobile phones
- Men: 90% used mobile phones

**Internet Use: SDG17.8.1**

- Women: 27% used the internet
- Men: 36% used the internet

Disparities in Use of Information & Communication Technology

**Disparities in Mobile Phone Use among Women**

- National
  - Urban, 96%
  - Higher, 100%
  - Richest, 98%
  - Rural, 85%
  - None, 73%
  - Poorest, 74%

**Disparities in Mobile Phone Use among Men**

- National
  - Urban, 97%
  - Higher, 99%
  - Richest, 98%
  - Rural, 84%
  - None, 58%
  - Poorest, 74%

**Disparities in Internet Use among Women: SDG17.8.1**

- National
  - Urban, 47%
  - Higher, 82%
  - Richest, 60%
  - Rural, 15%
  - None, 3%
  - Poorest, 2%

**Disparities in Internet Use among Men: SDG17.8.1**

- National
  - Urban, 66%
  - Higher, 84%
  - Richest, 78%
  - Rural, 19%
  - None, 0%
  - Poorest, 4%
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Mass Media, Communications & Internet. Data from this snapshot can be found in table SR9.1W, SR9.1M, SR 9.2, SR9.3W, SR9.3M, SR9.4W and SR9.4M.
Key Messages

- Neonatal Mortality Rate was 32 deaths per 1,000 live births for the 5 years preceding the survey, and has remained unchanged over the past 15 years.
- Neonatal Mortality Rate ranged from 16 deaths per 1,000 live births in Matabeleland North to 47 deaths per 1,000 live births in Midlands for the 10 years preceding the survey.
- Infant Mortality Rate was 47 deaths per 1,000 live births for the 5 years preceding the survey while the under-5 mortality rate was 65.
- Under-5 mortality rate was highest among women with pre-primary or no education (121 deaths per 1,000 live births) and among women from the poorest wealth quintile.
- Notably, Under-5 mortality rate was also highest among children under a birth interval of less than 2 years.
- Under-5 mortality rate ranged from 40 deaths per 1,000 live births in Bulawayo to 83 deaths per 1,000 live births in Midlands and Mashonaland West, respectively, for the 10 years preceding the survey.

Neonatal mortality (NN): probability of dying within the first month of life
Post-neonatal mortality: calculated as difference between infant and neonatal mortality rates
Infant mortality (1q0): probability of dying between birth and first birthday
Child mortality (4q1): probability of dying between the first and fifth birthday
Under-5 mortality (5q0): probability of dying between birth and fifth birthday
Child Mortality

Child Mortality Disparities

Under-5 mortality rate by socio-economic characteristics & area

Under-5 mortality rate by demographic risk factors

Neonatal & under-5 mortality rates by Province

<table>
<thead>
<tr>
<th>Province</th>
<th>Neonatal mortality</th>
<th>Under-5 mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>31</td>
<td>73</td>
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<tr>
<td>Bulawayo</td>
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<td>40</td>
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<tr>
<td>Manicaland</td>
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<tr>
<td>Mashonaland Central</td>
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<td>Mashonaland West</td>
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<td>63</td>
</tr>
<tr>
<td>Harare</td>
<td>35</td>
<td>75</td>
</tr>
</tbody>
</table>

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Child Mortality. Data from this snapshot can be found in table CS.1, CS2, and CS3 in the Survey Findings Report.
**Fertility**

**Age Specific Fertility Rates**

![Graph showing age-specific fertility rates](image)

Age-specific fertility rates (ASFR) are the number of live births in the last 3 years, divided by the average number of women in that age group during the same period, expressed per 1,000 women.

**Total Fertility Rate**

![Graph showing total fertility rate by province and education level](image)

The total fertility rate (TFR) is calculated by summing the age-specific fertility rates (ASFRs) calculated for each of the five-year age groups of women, from age 15 through to age 49.

**Adolescent Birth Rate: SDG indicator 3.7.2**

![Graph showing adolescent birth rate](image)

Adolescent Birth Rate SDG 3.7.2 Indicator is under target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Reducing adolescent fertility and addressing the multiple factors underlying it are essential for improving sexual and reproductive health and the social and economic well-being of adolescents. Preventing births very early in a woman's life is an important measure to improve maternal health and reduce infant mortality.
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Fertility. Data from this snapshot can be found in tables TM1.1, TM2.1, TM2.2W, TM2.3W, TM3.1 and TM3.3.

**Key Messages**

- The Total Fertility Rate (TFR) per woman age 15-49 years is 3.9 children
- TFR ranges from a low of 2.6 children in Bulawayo to a high of 4.4 in Mashonaland West
- Women in the poorest wealth quintile have twice more children than those in the richest (5.3 vs 2.6)
- Age Specific Fertility Rate (ASFR) peaks at age 20-24 years for women in rural areas and peaks at age 25-29 years for women in urban
- Adolescent Birth Rate was 8 times higher in women with primary than those with higher education, and 4 times higher in women from the poorest than those from the richest households
- Adolescent Birth Rate ranged from 56 births per 1 000 women in Harare to 161 births per 1 000 women in Matabeleland North
- One in four women age 20-24 years had a live birth before age 18
The Adolescent Population: Age 10-19

Age & Sex Distribution of Household Population

This snapshot of adolescent well-being is organized around key priority areas for adolescents:
- Every adolescent survives and thrives
- Every adolescent learns
- Every adolescent is protected from violence and exploitation
- Every adolescent lives in a safe and clean environment
- Every adolescent has an equitable chance in life

Every Adolescent Survives & Thrives

Adolescence is by some measures the healthiest period in the life-course, yet it can also mark the first manifestations of issues which can have lifelong effects on health and wellbeing, such as unsafe sexual behavior, early childbearing and substance misuse. Nevertheless, health interventions during this period are shown to have long-lasting effects. Access to appropriate contraceptive methods is critical to prevent adolescent pregnancy and its related consequences, allowing adolescents to transition into adulthood with the ability to plan their pregnancies and live healthy and productive lives.

Adolescent Birth Rate: SDG 3.7.2

Age-specific fertility rate for girls age 15-19 years: the number of live births in the last 3 years, divided by the average number of women in that age group during the same period, expressed per 1,000 women.

National

Primary, 175
Rural, 135
Poorest, 175

Urban, 62
Richest, 39

Education
Area
Wealth Quintile
### Adolescents

**Every Adolescent Learns**

**Foundational Reading Skills**
*SDG 4.1.1.(a) (i: reading)*

- Percentage of children age 7-14 who can read 90% of words in a story correctly:
  - Girls: 44%
  - Boys: 25%

**Foundational Numeracy Skills**
*SDG 4.1.1.(a) (ii: numeracy)*

- Percentage of children age 7-14 who can successfully perform:
  - a number reading task: 92%
  - a number discrimination task: 90%
  - an addition task: 65%
  - a pattern recognition and completion task: 55%

**Quality education and experiences at school positively affect physical and mental health, safety, civic engagement and social development. Adolescents, however, can also face the risk of school drop-out, early marriage or pregnancy, or being pulled into the workforce prematurely.**

Data on reading and numeracy skills are collected in MICS through a direct assessment method. The Foundational Learning module captures information on children’s early learning in reading and mathematics at the level of Grade 2 in primary education.

**School Attendance Ratios**

- Primary: Girls 92%, Boys 90%
- Lower Secondary: Girls 65%, Boys 55%
- Upper Secondary: Girls 9%, Boys 9%

**Information & Communications Technology (ICT) Skills***

- Percentage of girls age 15-19 who can perform at least one of the nine listed computer related activities:
  - Girls: 13%
  - Boys: 22%

*Age disaggregate of SDG 4.4.1: Proportion of youth and adults with information and communications technology (ICT) skills*

**Key Messages**

- Males age 10-19 years constitute 25% of the male population and females 21% of the female population.
- There is a notable difference in birth rate between adolescents: those with primary education had a higher birth rate (175 births per 1 000 girls) while those with higher education had a lower birth rate (21 births per 1 000 girls).
- Differences in adolescents birth rate were also observed between urban areas (82 births per 1 000 girls) and rural areas (136 births per 1 000 girls).
- Adolescent birth rate was highest among children living in poorest households (175 births per 1 000 girls) and lowest among children from richest households (39 births per 1 000 girls).
Every Adolescent is Protected from Violence & Exploitation

**Child Marriage: SDG 5.3.1**

Adolescence is a period of heightened risk to certain forms of violence and exploitation. The onset of puberty marks an important transition in girls’ and boys’ lives whereby gender, sexuality and sexual identity begin to assume greater importance, increasing vulnerability to particular forms of violence, particularly for adolescent girls. Certain harmful traditional practices, such as female genital mutilation/cutting and child marriage, often take place at the onset of puberty. At the same time, as children enter adolescence, they begin to spend more time outside their homes and interact more intimately with a wider range of people, including peers and romantic partners. This change in social worlds is beneficial in many respects, but also exposes adolescents to new forms of violence.

**Child Discipline**

**Child Labour: SDG 8.7.1**

**Definition of Child Labour**

Age 5-11 years: At least 1 hour of economic work, 28 hours of unpaid household services per week or hazardous working conditions.

Age 12-14 years: At least 14 hours of economic work, 28 hours of unpaid household services per week or hazardous working conditions.

Age 15-17 years: At least 43 hours of economic or unpaid household services per week or hazardous working conditions.

**Economic activities include paid or unpaid work for someone who is not a member of the household, work for a family farm or business. Household chores include activities such as cooking, cleaning or caring for children, as well as collecting firewood or fetching water.**
Every Adolescent Lives in a Safe & Clean Environment

Water, Sanitation & Clean Fuel Use

The data presented here are at the household level. Evidence suggests that adolescent access to these services are comparable to household-level data.

Basic Drinking Water SDG 1.4: Drinking water from an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing. Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, and include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water

Basic Sanitation Services SDG 1.4.1/6.2.1: Use of improved facilities which are not shared with other households. Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush to piped sewer system, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs

Clean Fuels SDG 7.2.1: Primary reliance on clean fuels and technologies for cooking, space heating and lighting

Every Adolescent has an Equitable Chance in Life

Discrimination & Harassment

Percentage of adolescent girls and boys age 15-19 years who in the last 12 months have felt discriminated against or harassed on the basis of different grounds
Adolescents

Every Adolescent has an Equitable Chance in Life

Functioning Difficulties in Adolescents

- Depression
- Anxiety
- Making friends
- Controlling behavior
- Accepting Change
- Concentrating
- Remembering
- Learning
- Communication
- Self-care
- Walking
- Hearing
- Seeing

Achieving sustainable progress and results with regard to equity demands a human rights-based approach. At the core of international human rights legal framework is the principle of non-discrimination, with instruments to combat specific forms of discrimination, including against women, indigenous peoples, migrants, minorities, people with disabilities, and discrimination based on race and religion, or sexual orientation and gender identity. As adolescents begin to form more of an individual identity, discrimination can often become more pronounced, taking form in harassment, bullying, or exclusion from certain activities. At the same time, research has shown that discrimination during adolescence has a particularly strong effect on stress hormones, potentially leading to life-long mental or physical health side effects.

Children and adolescents with disabilities are one of the most marginalized groups in society. Facing daily discrimination in the form of negative attitudes, lack of adequate policies and legislation, adolescents with disabilities are effectively barred from realizing their rights to health, education, and even survival.

Key Messages

- Forty-four percent of children age 7-14 years demonstrated foundational reading skills while less than a quarter (24%) demonstrated foundational numeracy skills
- For age group 15-19 years, there were low ICT skills (22% among boys and 13% among girls)
- Adolescents girls in rural areas were more likely to be married before age 18 years as compared to their peers in urban areas (44% for rural and 21% for urban)
- Sixty-two percent of the adolescents 10-14 years were subjected to some form of violent discipline in the past month
- Adolescents in urban areas had better access to basic water services, basic sanitation and use of clean fuels than their rural counterparts
- One in four adolescents (age 15-19 years) experienced some form of discrimination in the last 12 months
- One in ten adolescent girls and 4% boys of age 15-19 years felt discriminated on grounds of marriage
- Seven percent girls and 4% among boys age 15-19 years reported having ever been discriminated against because of ethnicity or immigration origin while 4% among girls and 1% among boys reported having been discriminated against based on gender
- Depression and anxiety among adolescents age 15-17 years were 2% and 3%, respectively

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Adolescents. Data from this snapshot can be found in table SR4.1, SR9.4W/M, TM2.1, TM3.1, LN1.2, LN4.1, LN4.2, PR2.1, PR3.3, PR4.1W, WS3.6, TC4.1, EQ1.2 and EQ3.1W/M.
**HIV & Sexual Behaviour**

**HIV indicators**

**Stigma**

Percent of those who report discriminatory attitudes towards people living with HIV, including 1) would not buy fresh vegetables from a shopkeeper or vendor who is HIV-positive and 2) think children living with HIV should not be allowed to attend school with children who do not have HIV.

**Testing**

Percent who have been tested for HIV in the last 12 months and know the result.

**Testing during Antenatal Care**

Percent of women who during their antenatal care for their last pregnancy were offered an HIV test, accepted and received results, and received post-test health information or counselling related to HIV.

**Key Messages**

- A higher proportion of discriminatory attitudes towards people living with HIV was reported amongst the age groups of 15-24 years: among men (45%) and among women (40%).
- The proportion of individuals 15-49 years of age tested for HIV in the 12 months preceding the survey and knew their results was 61% in women and 47% in men.
- The pattern was similar among the 15-24 years of age with women being 53% and men at 36%.
- Two in every three women were tested for HIV and received post testing counselling during ANC.
- In the age group 15–24 years, the proportion of sexually active women was 52% and that of men was 40%.
**HIV Indicators by Key Characteristics**

**Tested for HIV in last 12 months and know the result**

**Provincial Data on HIV Testing**

<table>
<thead>
<tr>
<th>Province</th>
<th>Men tested in last 12 months and know the result</th>
<th>Women tested in last 12 months and know the result</th>
<th>Women testing at ANC</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>47</td>
<td>61</td>
<td>65</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>48</td>
<td>57</td>
<td>67</td>
</tr>
<tr>
<td>Manicaland</td>
<td>39</td>
<td>58</td>
<td>76</td>
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<td>Mashonaland Central</td>
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<td>63</td>
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<td>63</td>
<td>84</td>
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<td>63</td>
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<tr>
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<td>51</td>
<td>61</td>
<td>57</td>
</tr>
<tr>
<td>Masvingo</td>
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<td>62</td>
<td>57</td>
</tr>
<tr>
<td>Harare</td>
<td>49</td>
<td>60</td>
<td>62</td>
</tr>
</tbody>
</table>

Tested in last 12 months: percent age 15-49 who have been tested in the last 12 months and know the result. HIV testing during ANC: percent of women age 15-49 who during their last antenatal care for their last pregnancy were offered an HIV test, accepted and received results, and received post-test health information or counselling related to HIV.

**Sexual Behaviour by Key Characteristics**

**Sexually Active**

- **Young People who had Sex Before Age 15**
  - Adolescent boys & young men 15-24
  - Adolescent girls & young women 15-24

In many settings, sexual behavior can be considered a risk factor for health and social issues. These include reproductive health, HIV and other sexually transmitted infections, and gender equality and empowerment. An understanding of the population’s sexual behavior patterns can inform both disease prevention and health promotion programmes.

Sexually active: Percent of women and men age 15-24 and 15-49 who had sexual intercourse within the last 12 months.

Sex before age 15: Percent of women and men age 15-24 who had sex before age 15.
**HIV & Sexual Behaviour**

### Sexual Behavior by Key Characteristics

#### Provincial Data on Sexual Behaviour

<table>
<thead>
<tr>
<th>Province</th>
<th>Men 15-49</th>
<th>Women 15-49</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sex before 15</td>
<td>Sex before 15</td>
</tr>
<tr>
<td>National</td>
<td>3.8</td>
<td>4.6</td>
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<tr>
<td>Bulawayo</td>
<td>1.8</td>
<td>2.7</td>
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<td>Manicaland</td>
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<tr>
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</tr>
<tr>
<td>Mashonaland West</td>
<td>4.4</td>
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<td>6.9</td>
<td>6.4</td>
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<td>4.9</td>
</tr>
<tr>
<td>Masvingo</td>
<td>4.5</td>
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</tr>
<tr>
<td>Harare</td>
<td>2.2</td>
<td>1.4</td>
</tr>
</tbody>
</table>

#### Key Messages

- The proportion of adolescent boys and young men age 15-24 years who reported having had sex before the age of 15 years was 6% and for girls and young women of the same age group was 4%.
- The highest proportion of women and men who tested for HIV in the last 12 months was in the age group 25-29 years for both women (73%) and men (66%) and lowest in the age group 15-19 years.
- The proportion of men who tested for HIV in the last 12 months was highest in Masvingo (58%) and lowest in Matabeleland North (37%) whilst among the women, the proportion was highest in Matabeleland South (63%) and lowest in Bulawayo (57%).
- Nationally, two women in three with a live birth in the last 2 years were tested for HIV during ANC. Matabeleland North had the highest proportion of women who tested for HIV at ANC (84%) while Masvingo and Midlands had lowest with 57% each.

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to HIV & Sexual Behaviours. Data from this snapshot can be found in tables TM 10.1M, TM 10.1W, TM 10.2M, TM 10.2W, TM 11.1M, TM 11.1W, TM 11.3M, TM 11.3W, TM 11.4M, TM 11.4W, TM 11.5, TM 11.6M and TM 11.6W.
**Diarrhoea**

**Care-seeking for Diarrhoea**
- Public: 33%
- Private: 30%
- Mission: 10%
- Community: 4%
- Other provider: 5%

Percentage of children age 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought by source of provider.

**Disparities in Care-seeking for Diarrhoea**

Percentage of children age 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought at a health facility or provider.

**Feeding during Diarrhoea**

- Drinking: Much less = 12%, Somewhat less = 17%, About the same = 32%, More = 36%, Nothing = 5%
- Eating: Much less = 26%, Somewhat less = 30%, About the same = 30%, More = 5%, Nothing = 0%

Percent distribution of children age 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea.

**ORS Treatment for Diarrhoea**
- Percentage of children age 0-59 months with diarrhoea in the last two weeks treated with oral rehydration salt solution (ORS): 33%

**ORS + Zinc Treatment for Diarrhoea**
- Percentage of children age 0-59 months with diarrhoea in the last two weeks treated with oral rehydration salt solution (ORS) and zinc: 17%

**ORT + Continued Feeding for Diarrhoea**
- Percentage of children age 0-59 months with diarrhoea in the last two weeks who were given oral rehydration therapy (ORT) with continued feeding: 46%
**Malaria**

**Household Availability of Insecticide Treated Nets (ITNs)**
- Percentage of households with at least one insecticide-treated net (ITN)

**Children Under-Five who slept under an ITN**
- Percentage of children age 0-59 months who slept under an ITN last night

**Care-seeking during Fever**
- Percentage of children age 0-59 months with fever in the last two weeks for whom advice or treatment was sought, by source of advice or treatment

**Disparities in Care-seeking during Fever**
- Percentage of children age 0-59 months with fever in the last two weeks for whom advice or treatment was sought at a health facility or provider

**Malaria Diagnosis Usage**
- Percentage of children with fever who had blood taken from a finger or heel for testing
Symptoms of Acute Respiratory Infection (ARI)

**Care-seeking for Symptoms of ARI**

<table>
<thead>
<tr>
<th>A health facility or provider</th>
<th>Public</th>
<th>Private</th>
<th>Mission</th>
<th>Community</th>
<th>Other provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>48</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
</tbody>
</table>

Percentage of children age 0-59 months with symptoms of ARI in the last two weeks for whom advice or treatment was sought, by source of advice or treatment.

Community health providers includes both public (Community health worker and Mobile/Outreach clinic), mission and private (Non-Government community health worker and Mobile clinic) health facilities.

**Provincial Data on Care-Seeking for Childhood Illness**

<table>
<thead>
<tr>
<th>Province</th>
<th>Care-Seeking at a health facility or provider for:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Diarrhoea</td>
</tr>
<tr>
<td>National</td>
<td></td>
</tr>
<tr>
<td>Bulawayo</td>
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<td>Manicaland</td>
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<tr>
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<tr>
<td>Mashonaland East</td>
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</tr>
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<td>Masvingo</td>
<td>32</td>
</tr>
<tr>
<td>Harare</td>
<td>28</td>
</tr>
</tbody>
</table>

**Key Messages**

- Of children 0-59 months who had either diarrhoea or fever in the past two weeks, one third sought advice or treatment from a health facility or provider, nearly always a public health facility.
- Care seeking behaviour for diarrhoea increased with increase in level of education of the mother.
- Fifty-six percent of children age 0-59 months with diarrhoea were eating less food during episodes of diarrhoea.
- One third of children age 0-59 months were drinking more fluids than usual during episodes of diarrhoea.
- Only 1 in 3 children age 0-59 months with diarrhoea in the last 2 weeks was treated with ORS, and less than one in five with ORS and Zinc.
- Forty-six percent of children with diarrhoea in the last 2 weeks were treated with ORT with continued feeding.
- Care seeking behaviour for fever increased with increase in level of education of the mother.
- Of children age 0-59 months who had symptoms of ARI, advice or treatment was sought from a health facility or provider in nearly half of the cases (41% from a public health facility).

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Child health & Care of Illness. Data from this snapshot can be found in table TC3.1, TC3.2, TC3.3, TC5.1, TC6.1, TC6.10.
Key Elements of Maternal & Newborn Health

Maternal & Newborn Health Cascade by Area

Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four times by any provider, who were attended by skilled health personnel during their most recent live birth (SDG 3.1.2), whose most recent live birth was delivered in a health facility, who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery of their most recent live and percentage of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery, by area.

Timing of First Antenatal Care Visit

Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel, by the timing of first ANC visit.

Content & Coverage of Antenatal Care Services

Percentage of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples, were given at least two doses of tetanus toxoid vaccine within the appropriate interval, took three or more doses of SP/Fansidar to prevent malaria, reported that during an ANC visit they received information or counselling on HIV, and reported that they were offered and accepted an HIV test during antenatal care and received their results during the last pregnancy that led to a live birth.
Content & Coverage of Antenatal Care Services

Coverage of Skilled Attendance at Birth & Institutional Delivery by Area

Skilled Attendance at Birth

Institutional Delivery

Percentage of women age 15-49 years with a live birth in the last 2 years who were attended by skilled health personnel during their most recent live birth and percentage whose most recent live birth was delivered in a health facility (institutional delivery) by area.
Maternal & Newborn Health

Caesarian Section by Various Characteristics

Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered by caesarean section by various characteristics

Postnatal Care within 2 Days of Birth by Various Characteristics

Percentage of women age 15-49 years with a live birth in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery, by various characteristics

Coverage of Newborn Care

Among the last live-births in the last 2 years delivered outside a facility

2019 Zimbabwe MICS Snapshots of Key Findings
## Maternal & Newborn Health

### Provincial Data on Maternal and Newborn Cascade

<table>
<thead>
<tr>
<th>Provinces</th>
<th>ANC: At least 1 visit (skilled provider)</th>
<th>ANC: At least 4 visits (any provider)</th>
<th>Skilled Attendance at Birth</th>
<th>Institutional Delivery</th>
<th>Postnatal Care for Mother &lt;2 days</th>
<th>Postnatal Care for Newborn &lt;2 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>93</td>
<td>72</td>
<td>86</td>
<td>86</td>
<td>82</td>
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<td>Bulawayo</td>
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<td>94</td>
<td>94</td>
<td>87</td>
<td>91</td>
</tr>
</tbody>
</table>

For indicator definitions, see earlier charts

### Key Messages

- Above 9 in 10 women age 15-49 years with a live birth in the last two years received antenatal care at least once from a skilled provider.
- About 2 in 5 women had their first antenatal care visit before 4 months of pregnancy.
- Among women who received antenatal care, 65% received all 3 key services, i.e., blood pressure measurement (92%), blood sample (92%) and urine testing (65%).
- The proportion of pregnant women with at least 4 antenatal care visits was 72%.
- Eighty-six percent of live births took place in health facilities.
- Eighty-six percent of women age 15-49 years with a live birth two years preceding the survey were delivered by skilled personnel (94% in urban areas and 82% in rural areas).
- Almost 1 in 10 of live births were by caesarean section ranging from 4% among women in poorest households to 20% among those in richest households.
- Women with higher education were more likely to deliver by caesarean section (27%).
- Eighty-two percent of mothers and 91% of newborn babies received postnatal care within 2 days of delivery.
- Slightly above 8 in 10 of newborn babies received at least 2 postnatal signal care functions (temperature, cord care, weight measurement).

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Maternal and Newborn Health. Data from this snapshot can be found in table TM.4.1, TM.4.2, TM.4.3, TM.5.1, TM.6.1, TM.6.2, TM.8.2, TM.8.4, TM.8.5, TM.8.6, TM.8.7, TM.8.9 TM.11.5, TC.6.9 and TC.7.1.
Infant & Young Child Feeding (IYCF)

**Key Messages**

- Almost 3 in 5 newborn babies were put to breast within the first hour of birth.
- Early initiation of breastfeeding was lowest among children born through C-section (17%) compared to normal delivery (63%).
- Two in five infants under the age of six months were receiving only breastmilk (exclusive breastfeeding).
- For every 10 infants age 6-8 months, 9 were receiving solid/semi-solid food in a timely manner.
- Only 17% of children age 6-23 months were consuming foods from the recommended number of food groups per day.
- There were notable disparities in dietary diversity being lower amongst the rural (13%) compared to the urban (26%).
- Children from richest households are 5 times more likely to have the minimum dietary diversity than those from poorest household.
- For babies born to mothers with higher education, 45% of them received the minimum dietary diversity compared to none among babies of mothers with pre-primary or no education.
- Only 1 in 10 children age 6-23 months were receiving both the minimum recommended diversity of food and number of feeds.

**Early initiation:** percentage of newborns put to breast within 1 hour of birth; **Exclusive breastfeeding:** percentage of infants aged 0-5 months receiving only breastmilk; **Introduction to solids:** percentage of infants aged 6-8 months receiving solid or semi-solid food; **Minimum meal frequency:** percentage of children aged 6-23 months receiving the recommended minimum number of solid/liquid feeds as per the age of child; **Minimum acceptable diet:** percentage of children aged 6-23 months receiving the minimum diversity of foods and minimum number of feeds; **Continued breastfeeding at 1 year:** percentage of children aged 12-15 months who continue to receive breastmilk; **Continued breastfeeding at 2 years:** percentage of children aged 20-23 months who continue to receive breastmilk.
IYCF: Equity

Early Initiation of Breastfeeding

Minimum Diet Diversity

IYCF: What are the Youngest Infants Fed?

Provincial Data on Early Initiation of breastfeeding and Minimum Diet Diversity

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Infant & Young Child Feeding (IYCF). Data from this snapshot can be found in tables TC.7.1, TC.7.2, TC.7.3, TC.7.5, TC.7.6, TC.7.7.
Nutritional Status of Children

Anthropometric Malnutrition Indicators

**Stunting: SDG 2.2.1**

Stunting refers to a child who is too short for his or her age. Stunting is the failure to grow both physically and cognitively and is the result of chronic or recurrent malnutrition.

**Wasting: SDG 2.2.2**

Wasting refers to a child who is too thin for his or her height. Wasting, or acute malnutrition, is the result of recent rapid weight loss or the failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible.

**Overweight: SDG 2.2.2**

Overweight refers to a child who is too heavy for his or her height. This form of malnutrition results from expending too few calories for the amount consumed from food and drinks and increases the risk of noncommunicable diseases later in life.

**Underweight**

Underweight is a composite form of undernutrition that can include elements of stunting and wasting (i.e. an underweight child can have a reduced weight for their age due to being too short for their age and/or being too thin for their height).

Key Messages

- About 1 in 4 children under 5 were stunted and at risk of impaired physical and cognitive growth. This is still ranked ‘High’ according to the WHO thresholds for prevalence of stunting.
- There is a noteworthy increase in stunting from the age of 9 months, with a peak at 18 months (60%) and a gradual decrease to 18% at 59 months.
- The prevalence of stunting was higher in rural areas (26%) compared to urban (19%), children in poorest household (28%) are twice more likely to be stunted than those in richest (14%) and pre-primary or none educated mothers (25%) compared with those with higher education (12%).
- The highest prevalence of stunting was in Manicaland (31%) while the least was in Harare (19%).
- The prevalence of wasting among children 6-59 months was 3% with severe wasting at 0.3%.
- Wasting was highest (9%) in the age group 12-23 months reflecting poor quality complementary feeding.
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Nutritional Status of Children. Data from this snapshot can be found in table TC.8.1.
Support for Learning

Early Stimulation & Responsive Care

Early childhood, which spans the period up to 8 years of age, is critical for cognitive, social, emotional and physical development. During these years, a child's newly developing brain is highly plastic and responsive to change. Optimal early childhood development requires a stimulating and nurturing environment, access to books and learning materials, interactions with responsive and attentive caregivers, adequate nutrients, access to good quality early childhood education, and safety and protection. All these aspects of the environment contribute to developmental outcomes for children.

Children facing a broad range of risk factors including poverty; poor health; high levels of family and environmental stress and exposure to violence, abuse, neglect and exploitation; and inadequate care and learning opportunities face inequalities and may fail to reach their developmental potential. Investing in the early years is one of the most critical and cost-effective ways countries can reduce gaps that often place children with low social and economic status at a disadvantage.

Key Messages

- Very low support for learning from both fathers (3%) and mothers (18%)
- Attendance at early childhood education programmes was very low (28%) though with gender parity
- Only 3% of children had access to three or more children's books
- Twenty percent of children were left at home with inadequate supervision in the previous week, the worst being Midlands (27%), Mashonaland Central (27%) and Masvingo (26%) provinces
- Seventy-one percent of children age 3-4 years were developmentally on track in at least three of the four domains (literacy-numeracy, physical, social-emotional, and learning domains)
- Only 10% of children age 3-4 years were developmentally on track in literacy-numeracy

Note: Activities include: reading books to the child; telling stories to the child; singing songs to the child; taking the child outside the home; playing with the child; and naming, counting or drawing things with the child.
Learning Materials & Child Supervision

Access to Play & Learning Materials

<table>
<thead>
<tr>
<th>Access to Play &amp; Learning Materials</th>
<th>Percentage of Children Under Age Five</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 or more children's books</td>
<td>3%</td>
</tr>
<tr>
<td>2 or more types of playthings</td>
<td>69%</td>
</tr>
<tr>
<td>Toys from a shop/ manufactured toys</td>
<td>47%</td>
</tr>
<tr>
<td>Household objects/ objects found outside</td>
<td>87%</td>
</tr>
<tr>
<td>Homemade toys</td>
<td>53%</td>
</tr>
</tbody>
</table>

Percentage of children under age five according to their access to play and learning materials.

Inadequate supervision of children

<table>
<thead>
<tr>
<th>Province</th>
<th>Left in inadequate supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>20</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>5</td>
</tr>
<tr>
<td>Manicaland</td>
<td>22</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>27</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>15</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>19</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>17</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>15</td>
</tr>
<tr>
<td>Midlands</td>
<td>27</td>
</tr>
<tr>
<td>Masvingo</td>
<td>26</td>
</tr>
<tr>
<td>Harare</td>
<td>19</td>
</tr>
</tbody>
</table>

Percentage of children under age five left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once in the last week, by province.

Early Childhood Development Index (ECDI)

ECDI: Total Score & Domains, SDG 4.2.1

<table>
<thead>
<tr>
<th>ECDI</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>91</td>
</tr>
<tr>
<td>Learning</td>
<td>90</td>
</tr>
<tr>
<td>Social-emotional</td>
<td>77</td>
</tr>
<tr>
<td>Literacy-numeracy</td>
<td>71</td>
</tr>
</tbody>
</table>

ECDI: Early Childhood Development Index; percentage of children age 3-4 years who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains.

ECDI: Disaggregates

ECDI by various characteristics.

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Early Childhood Development. Data from this snapshot can be found in tables TC10.1, LN1.1, TC10.2, TC10.3 and TC11.1.
**Attendance Rates & Inequalities**

### School Net Attendance Rates (adjusted)

<table>
<thead>
<tr>
<th>Education (36-59 months)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Childhood Education</td>
<td>28</td>
</tr>
<tr>
<td>1 year prior to primary school entry age</td>
<td>81</td>
</tr>
<tr>
<td>Primary</td>
<td>91</td>
</tr>
<tr>
<td>Lower secondary</td>
<td>60</td>
</tr>
<tr>
<td>Upper secondary</td>
<td>9</td>
</tr>
</tbody>
</table>

### Inequalities in Attendance in Early Childhood Education & Participation in Organized Learning

#### Net Attendance Rate for Early Childhood Education

- **Female, 29**
- **Male, 28**
- **Urban, 40**
- **Rural, 24**
- **Poorest, 16**

#### Participation Rate in Organized Learning (1 Year Prior to Primary Entry Age): SDG 4.2.2

- **Male, 82**
- **Female, 80**
- **Urban, 83**
- **Rural, 80**
- **Richest, 91**
- **Poorest, 70**

Percentage of children attending an early childhood education programme, or primary education (adjusted net attendance ratio), who are one year younger than the official primary school entry age at the beginning of the school year.
Inequalities in Attendance Rates

Adjusted Primary School Net Attendance Rate

- National
- Sex
- Area
- Wealth Quintile

Percentage of children of primary school age (as of the beginning of school year) who are attending primary school.

Adjusted Primary School Net Attendance Rate

- National
- Sex
- Area
- Wealth Quintile

Percentage of children of lower secondary school age (as of the beginning of the current or most recent school year) who are attending lower secondary school or higher.

Adjusted Upper Secondary School Net Attendance Rate

- National
- Sex
- Area
- Wealth Quintile

Percentage of children of upper secondary school age (as of the beginning of the current or most recent school year) who are attending upper secondary school or higher.

Provincial Data for Net Attendance Rates (adjusted)

<table>
<thead>
<tr>
<th>Province</th>
<th>Early Childhood Education</th>
<th>Participation rate in organized learning</th>
<th>Primary</th>
<th>Lower Secondary</th>
<th>Upper Secondary</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>28</td>
<td>81</td>
<td>91</td>
<td>60</td>
<td>9</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>46</td>
<td>90</td>
<td>95</td>
<td>86</td>
<td>25</td>
</tr>
<tr>
<td>Manicaland</td>
<td>31</td>
<td>82</td>
<td>91</td>
<td>65</td>
<td>8</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>19</td>
<td>67</td>
<td>86</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>24</td>
<td>82</td>
<td>91</td>
<td>63</td>
<td>6</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>22</td>
<td>74</td>
<td>89</td>
<td>49</td>
<td>7</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>21</td>
<td>83</td>
<td>91</td>
<td>43</td>
<td>3</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>30</td>
<td>82</td>
<td>90</td>
<td>50</td>
<td>2</td>
</tr>
<tr>
<td>Midlands</td>
<td>22</td>
<td>80</td>
<td>92</td>
<td>56</td>
<td>10</td>
</tr>
<tr>
<td>Masvingo</td>
<td>36</td>
<td>94</td>
<td>89</td>
<td>57</td>
<td>10</td>
</tr>
<tr>
<td>Harare</td>
<td>35</td>
<td>81</td>
<td>94</td>
<td>82</td>
<td>15</td>
</tr>
</tbody>
</table>

Completion Rates

Primary: 89%
Lower secondary: 54%
Upper secondary: 15%
Inequalities in Completion Rates

Primary School

Percentage of children who age 3 to 5 years above the intended age for the last grade of primary school who have completed primary education

Lower Secondary

Percentage of children who age 3 to 5 years above the intended age for the last grade of lower secondary school who have completed lower secondary education

Upper Secondary

Percentage of children or youth who age 3 to 5 years above the intended age for the last grade of upper secondary school who have completed upper secondary education

Provincial Data in Completion Rates

<table>
<thead>
<tr>
<th>Province</th>
<th>Primary</th>
<th>Lower Secondary</th>
<th>Upper Secondary</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>89</td>
<td>54</td>
<td>15</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>98</td>
<td>73</td>
<td>34</td>
</tr>
<tr>
<td>Manicaland</td>
<td>91</td>
<td>52</td>
<td>15</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>83</td>
<td>37</td>
<td>3</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>89</td>
<td>58</td>
<td>9</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>86</td>
<td>43</td>
<td>10</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>87</td>
<td>36</td>
<td>7</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>91</td>
<td>35</td>
<td>10</td>
</tr>
<tr>
<td>Midlands</td>
<td>90</td>
<td>54</td>
<td>21</td>
</tr>
<tr>
<td>Masvingo</td>
<td>79</td>
<td>47</td>
<td>9</td>
</tr>
<tr>
<td>Harare</td>
<td>99</td>
<td>84</td>
<td>27</td>
</tr>
</tbody>
</table>
Out of School Rates

Out of School Dimensions for Levels of Education

- **Dimension 1:** Children not attending an early childhood education programme or primary education
- **Dimension 2:** Children of primary school age who are not in primary or secondary school
- **Dimension 3:** Children of lower secondary school age who are not in primary or secondary school
- **Dimension 4:** Children who are in primary school but at risk of dropping out (over-age by 2 or more years)
- **Dimension 5:** Children who are in lower secondary school but at risk of dropping out (over-age by 2 or more years)

### SDG Summary for Education

<table>
<thead>
<tr>
<th>SDG</th>
<th>MICS Indicator</th>
<th>Definition &amp; Notes</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.4</td>
<td>LN.8 a,b,c</td>
<td>Completion rate (primary education, lower and upper secondary education)</td>
<td>89%/54%/15%</td>
</tr>
<tr>
<td>4.1.5</td>
<td>LN.6 a,b,c</td>
<td>Out-of-school rate (primary education, lower and upper secondary education)</td>
<td>5%/24%/70%</td>
</tr>
<tr>
<td>4.1.6</td>
<td>LN.10 a,b</td>
<td>Percentage of children over-age for grade (primary education, lower secondary education)</td>
<td>3%/7%</td>
</tr>
<tr>
<td>4.2.2</td>
<td>LN.2</td>
<td>Participation rate in organized learning (one year before the official primary entry age), by sex</td>
<td>M:82%/F:80%</td>
</tr>
<tr>
<td>4.5.1</td>
<td>LN.5 a</td>
<td>Gender Parity Indices (female/male for primary, lower and upper secondary school adjusted net attendance rates)</td>
<td>1.02/1.19/1.00</td>
</tr>
<tr>
<td>4.5.1</td>
<td>LN.5 b</td>
<td>Wealth Parity Indices (bottom/top for primary, lower and upper secondary school adjusted net attendance rates)</td>
<td>0.88/0.43/0.01</td>
</tr>
<tr>
<td>4.5.1</td>
<td>LN.5,c</td>
<td>Area Parity Indices (rural/urban for primary, lower and upper secondary school adjusted net attendance rates)</td>
<td>0.95/0.67/0.14</td>
</tr>
</tbody>
</table>

### Key Messages

- School attendance to an Early Childhood Education programme or primary school (1 year prior to primary school entry age) was 81%.
- Upper secondary school net attendance was very low (9%).
- Primary school net attendance was very high (91%) compared to lower secondary school net attendance (60%).
- Lower secondary school net attendance was lowest in Matabeleland North province (43%).
- There is parity between male and female in net attendance and completion rates at early childhood, primary and upper secondary.
- There is a noticeable disparity between males and females in school attendance at lower secondary (55% for males and 65% for females).
- Children from richest households are four times more likely to attend lower secondary than those from the poorest households.
- Nationally, attendance to Early Childhood Education is very low (28%).
- Thirty – seven percent of children age 3 to 5 years above the intended age for the last grade of upper secondary school from richest households completed upper secondary.
- Completion rates for all levels are low for Mashonaland Central, Matabeleland North and Masvingo.
- One in five children of lower secondary school age is out of school, more so boys (26%) than girls (21%).

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Education. Data from this snapshot can be found in tables LN.1.1, LN.1.2, LN.2.3, LN.2.4, LN.2.5, LN.2.6, and LN.2.7.
Early Grade Learning: SDG 4.1.1(a) (age for grade 2/3)

Foundational Reading Skills: SDG 4.1.1.(a) (i: reading)

- Reads 90% of words correctly in story
- Answers literal comprehension questions correctly
- Answers inferential comprehension questions correctly

*Percentage of children of age for grade 2/3 who can 1) read 90% of words in a story correctly, 2) Answer three literal comprehension questions, 3) Answer two inferential comprehension questions.

Note: The reading assessment was administered in one of the following languages: Shona, Ndebele or English

Foundational Numeracy Skills: SDG 4.1.1.(a) (ii: numeracy)

- Number reading
- Number discrimination
- Addition
- Pattern recognition and completion

*Percentage of children of age for grade 2/3 who can successfully perform 1) a number reading task, 2) a number discrimination task, 3) an addition task and 4) a pattern recognition and completion task.

Reading & Numeracy Skills Data in MICS

- The Foundational Learning module adopts a direct assessment method for children’s early learning in reading and mathematics at the level of Grade 2 in primary education. This contributes to SDG4.1.1. (a) Global Indicator.
- As MICS also collects data on school attendance and numerous individual and household characteristics, such as location, household socio-economic status, and ethnicity, the most marginalized sub-populations of children can be identified for support to improve learning outcomes.
Early Grade Learning & Parental Involvement

Early Grade Learning: Disaggregates (age 7-14 years)

Disaggregates in Foundational Reading Skills

Regional Data on Foundational Reading Skills

<table>
<thead>
<tr>
<th>Province</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>41</td>
<td>48</td>
<td>44</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>59</td>
<td>80</td>
<td>69</td>
</tr>
<tr>
<td>Manicaland</td>
<td>41</td>
<td>48</td>
<td>44</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>29</td>
<td>37</td>
<td>33</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>35</td>
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</tr>
<tr>
<td>Mashonaland West</td>
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<tr>
<td>Matabeleland North</td>
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<td>32</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>32</td>
<td>41</td>
<td>37</td>
</tr>
<tr>
<td>Midlands</td>
<td>43</td>
<td>45</td>
<td>44</td>
</tr>
<tr>
<td>Masvingo</td>
<td>39</td>
<td>49</td>
<td>44</td>
</tr>
<tr>
<td>Harare</td>
<td>67</td>
<td>72</td>
<td>70</td>
</tr>
</tbody>
</table>

Disaggregates in Foundational Numeracy Skills

Provincial Data on Foundational Numeracy Skills

<table>
<thead>
<tr>
<th>Province</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>23</td>
<td>27</td>
<td>25</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>28</td>
<td>46</td>
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<td>Manicaland</td>
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<tr>
<td>Mashonaland Central</td>
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<td>16</td>
</tr>
<tr>
<td>Mashonaland East</td>
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<td>Matabeleland North</td>
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<tr>
<td>Matabeleland South</td>
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<tr>
<td>Midlands</td>
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<td>24</td>
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</tr>
<tr>
<td>Masvingo</td>
<td>21</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>Harare</td>
<td>41</td>
<td>47</td>
<td>44</td>
</tr>
</tbody>
</table>

Key Messages

- Less than half (44%) of children aged 7-14 years have foundational reading skills in either Shona, Ndebele or English. This means that they are able to correctly read a short story of Grade 2 level and answer five comprehension questions related to the story.
- While 6 in 10 children were able to read a short Grade 2 level story, only 5 in 10 were able to correctly answer literal comprehension questions related to the story, and over 4 in 10 were able to correctly answer inferential comprehension questions related to the story.
- One in four children aged 7-14 have foundational numeracy skills, which means that they could correctly perform all four listed numeracy tasks. The main issue was on pattern recognition and completion in which only slightly above 3 out of 10 children were able to respond correctly.
- For 77 percent of children, an adult household member in the last year received a report card for the child.
- For 7 in 10 children adults met with teachers to discuss the child’s progress, were involved in school management and attended meetings to discuss education and financial issues.
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Early Grade Learning & Parental Involvement. Data from this snapshot can be found in table LN.3.1, LN.3.3, LN.4.1 and LN.4.2.
Birth Registration Levels

Birth registration for Children Under-Five: SDG 16.9.1

- Total: 4
- Male: 45
- Female: 45

Birth registration by Age

- Percent: 30, 45, 52, 94, 61 for age groups 0-11 months, 12-23 months, 24-35 months, 36-47 months, 48-59 months

Birth Registration: Inequalities

- National
- Urban, 69
- Rural, 40
- Wealth Quintile: Poorest, 32; Richest, 80
- Maternal Education: None, 38; Higher, 84

Provincial Data on Birth Registration

<table>
<thead>
<tr>
<th>Province</th>
<th>Total registered</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>49</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>71</td>
</tr>
<tr>
<td>Manicaland</td>
<td>41</td>
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<td>Mashonaland Central</td>
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<tr>
<td>Matabeleland South</td>
<td>46</td>
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<tr>
<td>Midlands</td>
<td>46</td>
</tr>
<tr>
<td>Masvingo</td>
<td>41</td>
</tr>
<tr>
<td>Harare</td>
<td>70</td>
</tr>
</tbody>
</table>

Percentage of children under age 5 whose births are registered, by background characteristics

Percentage of children under age 5 whose births are registered, by province

Percentage of children under age 5 whose births are registered, by whether or not they have a birth certificate and by sex
Birth Registration

**Mother’s (or Caregiver’s) Knowledge of How to Register**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>0-20%</th>
<th>20-40%</th>
<th>40-60%</th>
<th>60-80%</th>
<th>80-100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother/caregiver has Pre-Primary or no education</td>
<td>34</td>
<td>21</td>
<td>15</td>
<td>20</td>
<td>21</td>
<td>34</td>
</tr>
<tr>
<td>Mother/caregiver has higher education</td>
<td>8</td>
<td>15</td>
<td>26</td>
<td>21</td>
<td>25</td>
<td>8</td>
</tr>
<tr>
<td>Poorest quintile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richest quintile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Unregistered children whose mothers/caregivers do not know how to register them

Unregistered children whose mothers/caregivers know how to register them

Percentage of children under age 5 whose births are not registered, by mother’s (or caregiver’s) knowledge of how to register a child

**Key Messages**

- About half (49%) of the children under 5 years had their birth registered
- Birth registration increased with the age of the children, indicating late birth registration
- There are notable disparities in birth registration between rural (40%) and urban (69%) areas
- One in three of children from the poorest households was likely to be registered compared to 4 in 5 from richest households
- Only 38% of children born to mothers/caregivers with pre-primary or no education were registered compared to those whose mothers had higher education (84%)
- At provincial level, birth registration was highest among children living in Bulawayo (71%) and lowest in Mashonaland West (39%)
- A large proportion (80%) of mothers/caregivers with unregistered children knew how to register their child’s birth

The objective of this snapshot is to disseminate selected findings from the *Zimbabwe MICS 2019* related to Birth Registration. Data from this snapshot can be found in table *PR1.1*. 
**Key Messages**

- Physical punishment on children peaked at the age cohort 3-4 years.
- Among children age 1-14 years who were disciplined, 2 in 3 children were subjected to at least some form of violent discipline.
- Forty-four percent of the respondents thought that physical punishment is necessary for disciplining children.
- There were no noticeable differences among mothers/caregivers who thought that physical punishment was necessary to raise or educate children in respect of their background characteristics (wealth, education, age group, area and sex).
- There were no notable disparities in exposure to violent discipline by background characteristics. In other words, children are equally likely to be disciplined violently regardless of their background (at least on the characteristics measured).
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Child Discipline. Data from this snapshot can be found in tables PR2.1 and PR2.2.
Child Labour: Levels & Disaggregates

Child Labour for Age 5-17 years: SDG 8.7.1

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total</th>
<th>Girls</th>
<th>Boys</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-11 years</td>
<td>4</td>
<td>22</td>
<td>33</td>
</tr>
<tr>
<td>12-14 years</td>
<td>36</td>
<td>25</td>
<td>5</td>
</tr>
<tr>
<td>15-17 years</td>
<td>8</td>
<td>35</td>
<td>28</td>
</tr>
<tr>
<td>Urban</td>
<td>22</td>
<td>35</td>
<td>28</td>
</tr>
<tr>
<td>Rural</td>
<td>12</td>
<td>25</td>
<td>10</td>
</tr>
<tr>
<td>Attending school</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Not attending school</td>
<td>40</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>Richest</td>
<td>7</td>
<td>40</td>
<td>33</td>
</tr>
<tr>
<td>Poorest</td>
<td>11</td>
<td>22</td>
<td>33</td>
</tr>
</tbody>
</table>

Percentage of children age 5 to 17 years engaged in child labour, by background characteristics

Types of Child Labour

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Hazardous working conditions</th>
<th>Economic activities</th>
<th>Household chores</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-17 years</td>
<td>4</td>
<td>25</td>
<td>11</td>
</tr>
<tr>
<td>12-14 years</td>
<td>10</td>
<td>17</td>
<td>8</td>
</tr>
<tr>
<td>11</td>
<td>4</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>15-17 years</td>
<td>4</td>
<td>13</td>
<td>26</td>
</tr>
</tbody>
</table>

Percentage of children age 5 to 17 years engaged in child labour, by type of activity and by age

Definition of Child Labour

- **Age 5 to 11 years:** At least 1 hour of economic activities or 21 hours of unpaid household services per week.
- **Age 12 to 14 years:** At least 14 hours of economic activities or 21 hours of unpaid household services per week.
- **Age 15 to 17 years:** At least 43 hours of economic activities. No threshold for number of hours of unpaid household services.

Economic activities include paid or unpaid work for someone who is not a member of the household, work for a family farm or business. Household chores include activities such as cooking, cleaning or caring for children.

Note that the child labour indicator definition has changed during the implementation of the sixth round of MICS. Changes include age-specific thresholds for household chores and exclusion of hazardous working conditions. While the overall concept of child labour includes hazardous working conditions, the definition of child labour used for SDG reporting does not.

Key Messages

- One in three of the boys age 5-17 years and one in five of girls in the same age group were in child labour.
- Thirteen percent of children age 5-17 years were working under hazardous conditions.
- Child labour was more prevalent in the following provinces: Masvingo (41%), Midlands (36%), Matabeleland South (36%) and Matabeleland North (35%).
- Two in five of children from poorest quintile and were in child labour (six times more than those in the richest quintile).
- Children in rural areas where five times more likely to be involved in child labour, (35% in rural areas and 7% in urban areas).
- More than a quarter of children in the age group 5-17 were in child labour related to economic activities.
**Inequalities in Child Labour & Hazardous Conditions**

**Child Labour Inequalities**

- **Hazardous working conditions**
  - National
  - Boys: 16
  - Girls: 10

- **Economic activities at or above age specific threshold**
  - National
  - Boys: 32
  - Girls: 19

- **Household chores at or above age specific threshold**
  - National
  - Girls: 6
  - Boys: 8

Percentage of children age 5 to 17 years engaged in child labour, by type of activity and by sex.

**Hazardous Conditions Inequalities**

- **Total**: 13
- **Poorest**: 16
- **Richest**: 3
- **Not attending school**: 21
- **Attending school**: 12
- **Rural**: 17
- **Urban**: 3
- **Boys**: 16
- **Girls**: 10

Percentage of children age 5 to 17 years working under hazardous conditions, by background characteristics.

**Provincial Data on Child Labour**

<table>
<thead>
<tr>
<th>Province</th>
<th>Total Child Labour</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>28</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>8</td>
</tr>
<tr>
<td>Manicaland</td>
<td>27</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>33</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>27</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>24</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>35</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>36</td>
</tr>
<tr>
<td>Midlands</td>
<td>36</td>
</tr>
<tr>
<td>Masvingo</td>
<td>41</td>
</tr>
<tr>
<td>Harare</td>
<td>8</td>
</tr>
</tbody>
</table>

Percentage of children age 5 to 17 years engaged in child labour, by province.

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Child Labour. Data from this snapshot can be found in tables PR3.1, PR 3.2, PR3.3 and PR3.4.
**Key Messages**

- About 1 in 3 (34%) of women age 20-24 were first married or in union before age 18
- Rural urban disparities exist in Zimbabwe. Two in five women age 20-24 got married before age 18 in rural areas compared to one in five urban areas
- Education and socio-economic status are key determinants of child marriage. Women age 20-49 years with pre-primary or no education were 13 times more likely to get married by age 18 compared to those with higher education while women in poor households were almost four times more likely to get married by age 18 compared to those from rich households
- Prevalence of child marriages differs across provinces. The percentage of women age 20-49 married before age 18 was highest (50%) in Mashonaland Central and lowest in Bulawayo (14%)
- The percentage of women age 20-49 years who were first married or in union before age 15 and before age 18 has remained generally constant across all age cohorts over time (ranging between 5% and 7% for before age 15 and between 30% and 34% for before age 18)

---

**Child Marriage: Levels & Disaggregates**

**Marriage before Age 15 & Age 18: SDG 5.3.1**

- **Marriage by 18**
  - 34%
- **Marriage by 15**
  - 5%

Percentage of women age 20-24 years who were first married or in union before age 15 and before age 18, by residence

**Note:** The above chart refers to women aged 20 to 24 years, as this youngest cohort most recently completed exposure to the risk of marrying in childhood, thus giving a closer approximation of the current prevalence of child marriage. The following charts, which show disaggregation by background characteristics, refer to the full cohort of women aged 20 to 49 years.

**Disaggregates in Marriage before Age 18**

<table>
<thead>
<tr>
<th>Wealth Quintile</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richest</td>
<td>41</td>
</tr>
<tr>
<td>Fourth</td>
<td>30</td>
</tr>
<tr>
<td>Middle</td>
<td>27</td>
</tr>
<tr>
<td>Second</td>
<td>37</td>
</tr>
<tr>
<td>Poorest</td>
<td>57</td>
</tr>
</tbody>
</table>

Percentage of women age 20-49 years who were first married or in union before age 18, by wealth quintile and education.
Marriage before the age of 18 is a reality for many young girls. In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty. The right to ‘free and full’ consent to a marriage is recognized in the Universal Declaration of Human Rights - with the recognition that consent cannot be ‘free and full’ when one of the parties involved is not sufficiently mature to make an informed decision about a life partner.
Key Messages

- About 1 in 10 of children age 2-17 years were reported to have at least one functional difficulty.
- Among children age 2-4 years, 2.5% were reported to have difficulties controlling their behaviours, compared with children of the same age.
- Among children age 5-17, anxiety and learning were reported as top two domains of functional difficulties at 2.6% and 2.3%, respectively.
- Provincial disparities exist with the prevalence of functional difficulty being highest in Mashonaland West (11.1%) and lowest in Bulawayo (5%).
- The use of assistive devices for seeing, hearing and walking was very low (0.5% and below) for all three domains of functional difficulties.

Children with disabilities are among the most marginalized groups in society. Facing daily discrimination in the form of negative attitudes, and lack of adequate policies and legislation, children with disabilities are effectively barred from realizing their rights to health, education, and even survival. Children with disabilities are often likely to be among the poorest members of the population and are less likely to attend school, access medical services, or have their voices heard in society. Discrimination against and exclusion of children with disabilities also puts them at a higher risk of physical and emotional abuse or other forms of neglect, violence and exploitation.

The Convention on the Rights of the Child (UNICEF, 1989) and the more recent Convention on the Rights of Persons with Disabilities (UN, 2006) explicitly state the rights of children with disabilities on an equal basis with other children. These Conventions focus on the disparities faced by children with disabilities and call for improvements in their access to services, and in their participation in all aspects of life. In order to achieve these goals, there is a need for cross-nationally comparable, reliable data.
Child Functioning: Inequalities

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Child Functioning. Data from this snapshot can be found in tables EQ1.1, EQ1.2, and EQ1.3.
Drinking Water, Sanitation & Hygiene (WASH)

Basic Drinking Water, Sanitation & Hygiene Services

In Zimbabwe, approximately 6 in 10 of the population had basic drinking water services: slightly above 7 in 10 in urban areas and 6 in 10 in rural areas. Only 37% of the population used basic sanitation facilities; urban was 43% compared to 34% in rural areas. Slightly above 6 in 10 of the population had basic hygiene services: slightly above 7 in 10 in urban and 6 in 10 in rural areas. The proportion of the urban population using limited sanitation services was 56%. Of the households without water on premises, 87% in urban areas, on average, spent up to 30 minutes fetching water per day while in rural 54% spent between 31 minutes to 3 hours. Sixty-four percent of the population had basic hygiene services: slightly above 7 in 10 in rural areas.

Drinking water ladder:
At least basic drinking water services (SDG 1.4.1) refer to an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing. Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, and include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water.

Limited refers to an improved source more than 30 minutes roundtrip.

Unimproved sources include unprotected dug wells and unprotected springs.

No service refers to the direct collection of water from surface waters such as rivers, lakes or irrigation channels.

Sanitation ladder:
At least basic sanitation services (SDG 1.4.1) refer to the use of improved facilities which are not shared with other households. Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush to piped sewer system, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs.

Limited sanitation service refers to an improved facility shared with other households.

Unimproved sanitation facilities include flush/pour flush to an open drain, pit latrines without a slab, hanging latrines and bucket latrines.

No service refers to the practice of open defecation.

Hygiene ladder:
A basic hygiene service (SDG 1.4.1 & SDG 6.2.1) refers to the availability of a handwashing facility on premises with soap and water. 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 handwashing. Soap includes bar soap, liquid soap, powder detergent, and soapy water but does not include ash, soil, sand or other handwashing agents.

Limited hygiene service refers to a facility lacking water and/or soap.

No facility means there is no handwashing facility on the household’s premises.
WASH: Inequalities in Basic Services

### Basic Drinking Water

<table>
<thead>
<tr>
<th>Province</th>
<th>Urban</th>
<th>Bulawayo</th>
<th>Richest</th>
<th>Higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural, 51</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Matabeleland North, 51</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>92</td>
<td>98</td>
<td>94</td>
<td>89</td>
</tr>
</tbody>
</table>

### Basic Sanitation

<table>
<thead>
<tr>
<th>Province</th>
<th>Urban</th>
<th>Bulawayo</th>
<th>Richest</th>
<th>Higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural, 34</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Matabeleland North, 24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>43</td>
<td>56</td>
<td>55</td>
<td>58</td>
</tr>
</tbody>
</table>

### Basic Hygiene

<table>
<thead>
<tr>
<th>Province</th>
<th>Urban</th>
<th>Bulawayo</th>
<th>Richest</th>
<th>Higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural, 60</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mashonaland West, 51</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>73</td>
<td>82</td>
<td>78</td>
<td>82</td>
</tr>
</tbody>
</table>

### Provincial Data on Basic Services

<table>
<thead>
<tr>
<th>Province</th>
<th>Basic Drinking Water</th>
<th>Basic Sanitation</th>
<th>Basic Hygiene</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>64</td>
<td>37</td>
<td>64</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>98</td>
<td>56</td>
<td>82</td>
</tr>
<tr>
<td>Manicaland</td>
<td>59</td>
<td>37</td>
<td>61</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>59</td>
<td>31</td>
<td>68</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>64</td>
<td>41</td>
<td>75</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>60</td>
<td>34</td>
<td>51</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>51</td>
<td>24</td>
<td>58</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>51</td>
<td>42</td>
<td>60</td>
</tr>
<tr>
<td>Midlands</td>
<td>52</td>
<td>40</td>
<td>55</td>
</tr>
<tr>
<td>Masvingo</td>
<td>53</td>
<td>28</td>
<td>64</td>
</tr>
<tr>
<td>Harare</td>
<td>88</td>
<td>40</td>
<td>71</td>
</tr>
</tbody>
</table>

### Key Messages

- Notable disparities in basic hygiene were observed between households heads with no education (47%) and those with higher education (82%)
- Matabeleland North had the lowest percentage of the population using both basic drinking water (51%) and sanitation services (24%)
- Water collection is primarily the responsibility of women 15+ years (79%)
- Twenty-two percent of the population were practicing open defecation with Matabeleland North having the highest proportion at 60%
- Only 1 in 10 individuals were using safely managed drinking water services (27% in urban areas and 3% in rural areas)
- About 6 in 10 individuals were using drinking water sources contaminated by E.coli
- E.coli contamination for drinking water stored in the households was higher (84%) compared to contamination at source (59%)
**Accessibility of Drinking Water & Sanitation Facilities**

**Time Spent Each Day Collecting Drinking Water**

- **National**: 4% up to 30 minutes, 23% over 1 hour to 3 hours, 9% 31 minutes to 1 hour, 5% over 3 hours, 4% DK/Missing
- **Urban**: 4% up to 30 minutes, 23% over 1 hour to 3 hours, 87% 31 minutes to 1 hour, 27% over 3 hours, 27% DK/Missing
- **Rural**: 42% up to 30 minutes, 40% over 1 hour to 3 hours, 14% 31 minutes to 1 hour, 4% over 3 hours, 0% DK/Missing

Percent of population by mean time person primarily responsible for water collection spends collecting water each day in households without water on premises.

**Who Primarily Collects Drinking Water for the Household**

- **Women 15+ years**: 79% girls <15 years, 14% boys <15 years, 4% members do not collect, 1% DK/Missing
- **Men 15+ years**: 42% girls <15 years, 27% boys <15 years, 27% members do not collect, 43% DK/Missing

Percent of population by gender and age of person primarily responsible for collecting drinking water in households without water on premises.

**Sanitation Accessibility & Privacy**

- **Improved facilities**: 3% improved in dwelling, 44% improved in plot/yard, 27% improved, elsewhere, 27% improved, 5 households or less, 43% improved, >5 households, 8% public facility

Percent of the population sharing improved sanitation facilities, by location of sanitation facility.

**Open Defecation**

- **National**: 3% open defecation
- **Rural, 31**: 27% open defecation
- **Urban, 1**: 7% open defecation
- **Matabeleland North, 0**: 1% open defecation
- **Poorest, 65**: 2% open defecation
- **Richest, 0**: 0% open defecation
- **None, 43**: 0% open defecation

Percent of the population practising open defecation, by background characteristics.

---

**Key Messages**

- Population in rural areas were more likely to have sufficient drinking water in the last month (85%) compared to the urban population (70%).
- Slightly above 4 in 10 of the population used sanitation facilities with safe onsite sanitation while 27% used sewer connection.
- Sixteen percent of women did not participate in social activities, school or work due to last menstruation, with girls age 15-19 more affected (22%) than older women.
- The proportion of women who did not participate in social activities was highest in Matabeleland North (39%) and from households where the head had no education (26%).
**Safely Managed Drinking Water Services: SDG 6.1.1**

**Improved, basic & safely managed drinking water**

- **Safely managed (SDG 6.1)** are improved sources: accessible on premises, available when needed, free from contamination.

**Drinking water coverage: National, urban & rural**

- **Percent of population by drinking water coverage**

**Drinking Water Quality at Source & Home**

- **Percent of population using drinking water sources with E. coli (orange) and proportion with E. coli in glass of drinking water in household drinking water (teal)**

**Availability of Drinking Water**

- **Percent of population using drinking water sources with sufficient drinking water in the last month**

**Source Low High Household Low High**

- **Percent of population using drinking water sources with E. coli (orange) and proportion with E. coli in glass of drinking water in household drinking water (teal)**

**Water Quality Testing response rates for Household and Source testing are 99.3% and 95.6% respectively.**
SAFE MANAGED SANITATION SERVICES: SDG 6.2.1

**Types of Sanitation Facility**

<table>
<thead>
<tr>
<th>Sewer connection</th>
<th>Onsite sanitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>41</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No sanitation facility</th>
<th>Unimproved</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>10</td>
</tr>
</tbody>
</table>

Percent of population using drinking water sources with sufficient drinking water in the last month

**Sewer connections** include “Flush/pour flush to piped sewer system” and “Flush to KK where”.

**Onsite sanitation facilities** include “Flush/pour flush to septic”, “Flush/pour flush to latrine”, “Ventilated improved pit latrine”, “Pit latrine with slab” and “Composting toilet”.

**Types of Sanitation Facility by Province**

<table>
<thead>
<tr>
<th>Province</th>
<th>Sewer connection</th>
<th>Onsite sanitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>27</td>
<td>41</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>93</td>
<td>5</td>
</tr>
<tr>
<td>Manicaland</td>
<td>12</td>
<td>51</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>5</td>
<td>51</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>9</td>
<td>62</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>17</td>
<td>48</td>
</tr>
<tr>
<td>Manzaleland North</td>
<td>7</td>
<td>29</td>
</tr>
<tr>
<td>Manzaleland South</td>
<td>10</td>
<td>53</td>
</tr>
<tr>
<td>Midlands</td>
<td>26</td>
<td>43</td>
</tr>
<tr>
<td>Masvingo</td>
<td>15</td>
<td>41</td>
</tr>
<tr>
<td>Harare</td>
<td>82</td>
<td>17</td>
</tr>
</tbody>
</table>

Percent of population using sewer connections and onsite sanitation, by province

**Management of excreta from household sanitation facilities**

<table>
<thead>
<tr>
<th>Percent</th>
<th>Safe disposal in situ of excreta from on-site sanitation facilities</th>
<th>Removal of excreta for treatment from on-site sanitation facilities</th>
<th>Connected to sewer</th>
<th>Unsafe disposal of excreta from on-site sanitation facilities</th>
<th>Using unimproved sanitation facilities</th>
<th>Practising open defecation</th>
</tr>
</thead>
<tbody>
<tr>
<td>40.3</td>
<td></td>
<td>0.7</td>
<td>27.5</td>
<td>0.3</td>
<td>9.5</td>
<td>21.7</td>
</tr>
</tbody>
</table>

Percent of population by management of excreta from household sanitation facilities

*Additional information required to determine whether faecal sludge and wastewater is safely treated.

**Safely managed sanitation services** represents an ambitious new level of service during the SDGs and is the indicator for target 6.2. Safely managed sanitation services are improved facilities that are not shared with other households and where excreta are safely disposed of in situ or transported and treated offsite. The MICS survey collected information on the management of excreta from onsite facilities. For households where excreta are transported offsite (sewer connection, removal for treatment), further information is needed on the transport and treatment of excreta to calculate the proportion that are safely managed.
The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Drinking Water, Sanitation & Hygiene - WASH. Data from this snapshot can be found in tables WS1.1 to WS4.2.
Domestic Violence

Domestic violence is a health, legal, economic, educational, and developmental and, above all, human rights issue. The term “domestic” includes violence perpetrated by an intimate partner, as well as by other family members, wherever and in any form. Violence against women and girls is one of the most widespread, persistent and devastating human rights violations in the world.

The global dimensions of this violence remain alarming, despite the fact that the right of women and girls to live free from violence is protected by international agreements, such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the International Convention on the Rights of the Child (CRC) and the 1993 United Nations Declaration on the Elimination of Violence against Women.

Note: Physical violence includes abuse, such as pushing, shaking or throwing an object at the woman, slapping, twisting or pulling her arm or hair, punching, kicking, dragging, beating, strangling, burning, threatening or attacking with a knife, firearm or other weapon. Sexual violence includes sexual abuse, such as sexual intercourse forced by threat, intimidation, or physical force. Psychological or emotional abuse, which consists of behaviour intended to intimidate or persecute, in the form of threats, verbal aggression, and constant humiliation.

Physical and sexual violence

<table>
<thead>
<tr>
<th>Physical Violence</th>
<th>Sexual Violence</th>
<th>Both forms of Violence (at any time)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Since age 15</td>
<td>At any time</td>
<td>Physical or sexual</td>
</tr>
<tr>
<td>Last 12 months</td>
<td>Last 12 months</td>
<td>Percentage of women age 15-49 who have experienced physical or sexual violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>43%</td>
</tr>
</tbody>
</table>

Key Messages

- Thirty-nine percent of women age 15-49 years reported that they had experienced physical violence since the age of 15 while 11% experienced the violence in the last 12 months.
- Twelve percent of women reported ever having experienced sexual violence whilst 5% reported having experienced it in the last 12 months.
- About 1 in 2 women age 15-49 years had experienced emotional, physical or sexual abuse committed by the current or last husband/partner in their lifetime. In the last 12 months, the most prevalent form of abuse was emotional (22%).
- Physical violence was high amongst women with primary education (41%) and those in the poorest quintile (41%).
- Among the married persons, physical violence is more likely to be committed by current husband/partner (72%) and former husband/partner (21%).
- Slightly above six in ten case of sexual violence experienced by married persons were committed by current husband/partner.
- About 1 in 10 divorced/separated/widowed woman ever experienced physical violence during pregnancy.

Note: The illustrations show the percentage of women age 15-49 who have experienced physical or sexual abuse since the age of 15 and in the 12 months preceding the survey.
Intimate Partner Violence (IPV)

Forms of Intimate Partner violence

<table>
<thead>
<tr>
<th>Form of Abuse</th>
<th>In the last 12 months</th>
<th>At any time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional or physical or sexual abuse</td>
<td>28.3%</td>
<td>49.4%</td>
</tr>
<tr>
<td>Physical or sexual violence*</td>
<td>18.7%</td>
<td>39.6%</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>22.0%</td>
<td>34.2%</td>
</tr>
<tr>
<td>Sexual violence</td>
<td>6.0%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Physical violence</td>
<td>16.3%</td>
<td>37.1%</td>
</tr>
</tbody>
</table>

Percentage of women in or out of union age 15-49 who have experienced various forms of violence committed by the current or last husband/partner at any time or in the 12 months preceding the survey.

* SDG Indicator 5.2.1

Physical violence according to different characteristics

Provincial data on spousal violence

<table>
<thead>
<tr>
<th>Province</th>
<th>Emotional Violence</th>
<th>Physical Violence</th>
<th>Sexual Violence</th>
<th>Physical or Sexual Violence</th>
<th>Emotional or physical or sexual violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>34</td>
<td>37</td>
<td>10</td>
<td>40</td>
<td>49</td>
</tr>
<tr>
<td>Bulawayo</td>
<td>38</td>
<td>33</td>
<td>7</td>
<td>34</td>
<td>48</td>
</tr>
<tr>
<td>Manicaland</td>
<td>36</td>
<td>40</td>
<td>11</td>
<td>43</td>
<td>53</td>
</tr>
<tr>
<td>Mashonaland Central</td>
<td>33</td>
<td>41</td>
<td>11</td>
<td>44</td>
<td>51</td>
</tr>
<tr>
<td>Mashonaland East</td>
<td>40</td>
<td>40</td>
<td>12</td>
<td>43</td>
<td>55</td>
</tr>
<tr>
<td>Mashonaland West</td>
<td>36</td>
<td>42</td>
<td>10</td>
<td>43</td>
<td>52</td>
</tr>
<tr>
<td>Matabeleland North</td>
<td>25</td>
<td>27</td>
<td>5</td>
<td>27</td>
<td>38</td>
</tr>
<tr>
<td>Matabeleland South</td>
<td>36</td>
<td>36</td>
<td>6</td>
<td>37</td>
<td>50</td>
</tr>
<tr>
<td>Midlands</td>
<td>30</td>
<td>37</td>
<td>10</td>
<td>41</td>
<td>49</td>
</tr>
<tr>
<td>Masvingo</td>
<td>40</td>
<td>39</td>
<td>11</td>
<td>42</td>
<td>54</td>
</tr>
<tr>
<td>Harare</td>
<td>28</td>
<td>30</td>
<td>10</td>
<td>32</td>
<td>41</td>
</tr>
</tbody>
</table>

Percentage of women age 15-49 currently in or out of union who have experienced emotional, physical, or sexual abuse by their current or last husband/partner at any time, by province.
Domestic Violence

**Persons Committing Sexual Violence**

Among women age 15-49 who have experienced sexual violence, percentage who report specific persons who committed the violence according to the respondent’s current marital status.

**Persons Committing Physical Violence**

Among women age 15-49 who have experienced physical violence since age 15, percentage who report specific persons who committed the violence according to the respondent’s current marital status.

**Experience of Violence During Pregnancy**

Among women age 15-49 who have ever been pregnant, percent who have ever experienced physical violence during pregnancy, according to marital status and functional difficulties.

The objective of this snapshot is to disseminate selected findings from the *Zimbabwe MICS 2019* related to Domestic Violence. Data from this snapshot can be found in tables **DV.1** to **DV.16** in the Survey Findings Report.
Gender equality means that girls and boys, women and men, enjoy the same rights, resources, opportunities and protections. Investments in gender equality contribute to lifelong positive outcomes for children and their communities and have considerable inter-generational payoffs because children’s rights and well-being often depend on women’s rights and well-being. This snapshot shows key dimensions of gender equality during the lifecycle. It is organized around: 1) the first decade of life (0-9 years of age) when gender disparities are often small, particularly in early childhood; 2) the second decade of childhood (10-19 years of age) when gender disparities become more pronounced with the onset of puberty and the consolidation of gender norms; and 3) adulthood, when gender disparities impacts both the wellbeing of women and girls and boys.

Every Girl & Boy Survives & Thrives: The First Decade of Life

Nutrition and a supportive environment in early childhood are among the key determinants of the health and survival of children and their physical and cognitive development. Generally, girls tend to have better biological endowments than boys for survival to age five, and thus higher survival chances under natural circumstances. However, gender discrimination against girls can affect survival, resulting in higher than expected female mortality. Similarly, stunting rates are typically lower among girls than boys, potentially due to the higher risk for preterm birth among boys, which is inextricably linked with lower birth weight. However, children with mothers who gave birth at a young age or who have no education may be more likely to be malnourished. Children with restricted cognitive development during early life are at risk for later neuropsychological problems, poor school achievement, early school drop-out, low-skilled employment, and poor care of their own children. Stimulation and interaction with parents and caregivers can jumpstart brain development and promote well-being in early childhood. This is also the period of development when gender socialization, or the process of learning cultural roles according to one’s sex, manifests. Caregivers, particularly fathers, may respond to, and interact with, sons and daughters differently.

Key Messages
- Boys were more likely to die in childhood than girls
- Stunting was higher in boys (27%) than girls (20%); in children with mothers with primary education (29%) compared to mothers with higher education (12%)
- Fathers were about five times less likely to be involved in early stimulation and responsive care activities than mothers
- For age 3-4 years, 74% of girls were developmentally on track compared to 68% of boys
- One in two children under age 5 had their births registered. Birth registration increased with mother’s level of education
- About two children in three are subjected to some form of violent discipline
- Eighty percent of girls and 82% of boys age 5 years were attending an ECD or primary education programme
- Five percent of children (without sex differential) of primary school age were not attending school
- Primary completion for girls was higher (92%) in comparison to that of boys (86%)

Mortality Rates among Children Under-5, SDG 3.2.1
Sex Disaggregate

<table>
<thead>
<tr>
<th></th>
<th>Infant Mortality Rate</th>
<th>Under-five Mortality Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>39</td>
<td>56</td>
</tr>
<tr>
<td>Boys</td>
<td>54</td>
<td>73</td>
</tr>
</tbody>
</table>

Infant mortality: probability of dying between birth and the first birthday
Under-five mortality: the probability of dying between birth and the fifth birthday
Gender Equality

Malnutrition: Stunting (Moderate & Severe) among Children Under-5, SDG 2.2.1

Malnutrition: Wasting (Moderate & Severe) among Children Under-5, SDG 2.2.2

Malnutrition: Overweight (Moderate & Severe) among Children Under-5, SDG 2.2.2

Stunting refers to a child too short for his or her age
Wasting refers to a child who is too thin for his or her height
Overweight refers to a child who is too heavy for his or her height

Early Stimulation & Responsive Care by Adults

Early Childhood Development Index, SDG 4.2.1

Percentage of children age 2-4 years with whom adult household members engaged in activities that promote learning and school readiness during the last three days, by person interacting with child and sex of child.

Note: Activities include: reading books to the child; telling stories to the child; singing songs to the child; taking the child outside the home; playing with the child; and naming, counting or drawing things with the child.

Key Messages

- One in four women age 20-24 years had a live birth by age 18 with a higher proportion in rural areas (31%) compared to urban areas (16%)
- Thirty-four percent of women age 20-24 years were married/ in a union before age 18 with 5% before age 15
- Women are twice more likely to marry before the age of 18 in rural (44%) than in urban (21%) area; for marriages before the age of 15, the disproportion is even larger (4 times)
- One in five of adolescent girls age 15-19 years were either married or in a union with a partner 10 or more years older
- Twenty-eight percent of children age 5-17 years were engaged in child labour (33% for boys and 23% for girls)

2019 Zimbabwe MICS Snapshots of Key Findings
Gender Equality

Every Girl & Boy Is Protected From Violence & Exploitation: The First Decade of Life

Registering children at birth is the first step in securing their recognition before the law, safeguarding their rights, and ensuring that any violation of these rights does not go unnoticed. While vitally important for both girls and boys, the implications of low birth registration rates for girls are significant, rendering them more vulnerable to certain forms of exploitation they are at greater risk of, including child marriage and international trafficking. Although average birth registration rates are similar for girls and boys, children with mothers who have no education may be less likely to have their births registered. While girls and boys face similar risks of experiencing violent discipline—which includes physical punishment and psychological aggression—by caregivers in the home, gender inequality and domestic violence are among the factors associated with an elevated risk of violence against both girls and boys.

Birth Registration, SDG 16.9.1 Sex Disaggregate

Violent Discipline, SDG 16.2.1 Sex Disaggregate

Every Girl & Boy Learns: The First Decade of Life

Investment in good quality early childhood education services prior to entering school improves learning outcomes for children. It also enhances the efficiency of the school system by reducing repetition and drop-out and improving achievement, especially among girls and marginalized groups. Primary education provides the foundation for a lifetime of learning. Considerable progress has been made in achieving universal education and closing the gender gap but gender disparities to the disadvantage of girls still exist in some countries. Further, girls still comprise the majority of the world’s out-of-school population.

Note: Because children of primary school age range from 6-14 years, these indicators include some children in their second decade of life.

Participation Rate in Organized Learning, SDG 4.2.2

Primary School Attendance

Note:

- The age group 1-14 spans the first and second decades of life.
Gender Equality

Every Adolescent Girl & Boy Survives & Thrives: The Second Decade of Life

While adolescence carries new health risks for both girls and boys, girls often face gender-specific vulnerabilities, with lifelong consequences. Complications related to pregnancy and childbirth are among the leading causes of death worldwide for adolescent girls age 15 to 19. Preventing adolescent pregnancy not only improves the health of adolescent girls, but also provides them with opportunities to continue their education, preparing them for jobs and livelihoods, increasing their self-esteem and giving them more say in decisions that affect their lives. Yet, too often, adolescent girls lack access to appropriate sexual and reproductive health services, including modern methods of contraception. Additionally, despite having a higher risk of contracting HIV due to both greater physiological vulnerabilities and gender inequalities, adolescent girls are often less knowledgeable than adolescent boys about how HIV is transmitted. However, gender norms adversely impact adolescent boys as well. For example, norms around masculinity that encourage risk taking may heighten adolescent boys’ use of alcohol and tobacco, increasing their likelihood of developing noncommunicable diseases later in life.

Early Childbearing - by Age 18

Percentage of women age 20-24 years who had a live birth by age 18, by urban/rural residence

Percentage of children age 3 to 5 years above the intended age for the last grade of primary school who have completed primary education, by sex
Gender Equality

Every Adolescent Girl & Boy is Protected from Violence & Exploitation: The Second Decade of Life

Adolescence presents unique vulnerabilities to violence and exploitation for girls. In many countries, marriage before the age of 18 is a reality for girls due to the interaction of several factors that place a girl at risk, including poverty, social norms, customary or religious laws that condone the practice, an inadequate legislative framework and the state of a country’s civil registration system. Child marriage often compromises a girl’s development by resulting in early pregnancy and social isolation, interrupting her schooling, and limiting her opportunities for career and vocational advancement. It also often involves a substantial age difference between the girl and her partner, thus further disempowering her and putting her at greater risk of partner violence, sexually transmitted diseases and lack of agency. Attitudes about wife beating serve as a marker for the social acceptability of intimate partner violence. Acceptance of wife beating among adolescent girls and boys suggests that it can be difficult for married girls who experience violence to seek assistance and for unmarried girls to identify and negotiate healthy and equitable relationships. Female genital mutilation is a human rights issue that also affects girls and women. Adolescence, in particular, is a vulnerable period for girls who have undergone FGM because they may experience heightened consequences of the procedure as they become sexually active and begin childbearing. Gender-based discrimination may be one of the most ubiquitous forms of discrimination adolescent girls face, and it has long-lasting and far-reaching effects on their personal trajectories as well as on all aspects of social and economic development. While in most regions, girls and boys are equally likely to be involved in child labour, gender is a determinant of the types of activities boys and girls engage in, with girls more likely to be involved in domestic work.

Child Marriage, SDG 5.3.1

Spousal Age Difference

Percentage of women aged 20-24 years who were first married or in union before age 15 and before age 18*, by residence

Feelings of Safety, SDG 16.1.4 Age & Sex Disaggregate

Percentage distribution of adolescent girls age 15-19 currently married or in union by age difference with their partner, education level and wealth quintile

Child Labour, SDG 8.7.1

Percentage of children age 5 to 17 years engaged in child labour, by sex, age group and type of activity

* Note: Indicator includes children in the first & second decade of life
**Estimates from MICS of child labour are different from those in the SDG database for indicator 8.7.1, as the database excludes the hazardous work component and applies a threshold of 21 hours for household chores for children aged 5-14 and no threshold for household chores for children aged 15-17
Gender Equality

Every Adolescent Girl & Boy has an Equitable Chance in Life: The Second Decade of Life

To become empowered, adolescent girls and boys need to be engaged as civic participants in the decisions affecting their lives and communities. People’s sense of security and freedom from the fear of crime influences how they move about those communities, access services and economic opportunities and participate in public life. Adolescent girls and boys are likely to have different perceptions of personal safety due to different gender-based vulnerabilities to sexual violence and other crimes. Life satisfaction measures an individual’s perceived level of well-being or how an individual feels about their life as a whole. Measuring adolescent girls and boy’s satisfaction with their lives can provide important insights into their mental health during a stage of life when gender norms consolidate and girls and boys experience different risk factors for mental health disorders.

Discrimination & Harassment

Life Satisfaction

Among adolescents age 15-19, average life satisfaction score on a scale of 0 to 10, by sex and age group

Girls
Boys

Every Adolescent Girl & Boy Learns: The Second Decade of Life

While participation in secondary education is expanding, progress lags behind primary education. Gender disparities disadvantaging girls are also wider and occur in more countries at the secondary level than at the primary level. Yet, advancing girls’ secondary education is one of the most transformative development strategies countries can invest in. Completion of secondary education brings significant positive benefits to girls and societies – from increased lifetime earnings and national growth rates, to reductions in child marriage, stunting, and child and maternal mortality.

Lower Secondary Attendance
Net Attendance Rate

Upper Secondary Attendance
Net Attendance Rate

Percentage of children of lower secondary school age attending lower secondary school or higher (adjusted net attendance ratio), by sex, wealth quintile and area

Percentage of children of upper secondary school age attending upper secondary school or higher (adjusted net attendance ratio), by sex, wealth quintile and area

2019 Zimbabwe MICS Snapshots of Key Findings
**Gender Equality**

**Lower Secondary Completion**

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>55</td>
</tr>
<tr>
<td>Boys</td>
<td>54</td>
</tr>
</tbody>
</table>

Percentage of children who age 3 to 5 years above the intended age for the last grade of lower secondary school who have completed lower secondary education, by sex.

**Upper Secondary Completion**

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>14</td>
</tr>
<tr>
<td>Boys</td>
<td>17</td>
</tr>
</tbody>
</table>

Percentage of children or youth who age 3 to 5 years above the intended age for the last grade of upper secondary school who have completed upper secondary education, by sex.

**Children of Lower Secondary School Age Out of School**

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls, Poorest</td>
<td></td>
</tr>
<tr>
<td>Boys, Poorest</td>
<td></td>
</tr>
<tr>
<td>Girls, Rural</td>
<td></td>
</tr>
<tr>
<td>Boys, Rural</td>
<td></td>
</tr>
<tr>
<td>Girls, Urban</td>
<td></td>
</tr>
<tr>
<td>Boys, Urban</td>
<td></td>
</tr>
</tbody>
</table>

Percentage of children of lower secondary age not attending either primary or secondary school, by wealth quintile and area.

**Key Messages**

- Thirteen percent of children age 5-17 years in child labour were working under hazardous conditions: 41% boys and 21% girls
- Boys have a higher attendance rate in rural areas than girls whilst girls attendance is (slightly) higher than that of boys in the urban areas
- Twenty-two percent of adolescent girls age 15-19 years reported having been excluded from activities (social activities, school or work) due to their last menstruation in the last 12 months
- Sex differentials between women and men age 15-49 years were observed in access to mass media and internet use
- Women and girls compared to men and boys bore the burden of water collection
- Women and girls felt unsafe walking alone in their neighbourhood after dark, as well as when at home alone, as compared to men and boys in the same circumstances
- During the 12 months prior to the survey 11% men and 6% women were victimised (experienced physical violence of robbery or assault)
Every Adolescent Girl & Boy Learns: The Second Decade of Life

Upper Secondary Completion

Menstrual Hygiene Management: Among adolescent girls age 15-19 who reported menstruating in the last 12 months, percentage using appropriate menstrual hygiene materials with a private place to wash and change while at home.

Exclusion from Activities during Menstruation: Among adolescent girls age 15-19 who reported menstruating in the last 12 months, percentage of women who did not participate in social activities, school or work due to their last menstruation in the last 12 months.

Gender Equality in Adolescence and Adulthood

To survive and thrive, all children require care and support from women and men. Care and support can be substantively improved by fostering gender equality, an important goal in its own right, and by reducing the gender-related barriers. Gender-related barriers include women’s and girls’ disproportionate lack of information, knowledge and technology, resources, and safety and mobility, as well as the gender division of labour and gender norms. For example, a mother’s lack of mobility, due to prohibitive norms or lack of transportation, may impede birth registration, nutrition, and other child outcomes. The internalization of gender norms around masculine and feminine expectations and behaviours may influence women’s and men’s attitudes toward intimate partner violence and physical punishment of children as well as self-perceptions of well-being, including life satisfaction and expectations for the future.

Key Messages

- Forty-one percent of men and 38% of women reported their last incident of victimisation to the police.
- Women and girls in both urban and rural areas felt discriminated or harassed compared to their male counterparts.
- More women and girls (44%) believed that physical punishment is needed to bring up, raise or educate a child properly compared to 36% of men and boys.
- On a scale of 0-10, there were no differences between women and men in terms of their perception towards life satisfaction.
- More women age 15-49 years expected their lives to get better in one year following the study than men.
Gender Equality in Adolescence and Adulthood

Access to Knowledge, Information & Technology

**Literacy**

- Percentage of adolescents and adults age 15-49 who are literate, by sex

**Media Access**

- Percentage of adolescents and adults age 15-49 who read a newspaper, listen to the radio, or watch television at least once a week

**Internet Use: SDG 17.8.1**

- Percentage of adolescents and adults age 15-49 using the internet at least once a week in the past 3 months, by sex

Access to Resources

**Mobile Phone Ownership, SDG 5.b.1**

- Percentage of adolescents and adults age 15-49 who own a mobile phone, by sex, wealth quintile and area

Time on Household Chores: Water Collection

**Who collects water?**

- Percentage of adolescents and adults age 15-49 who own a mobile phone, by sex, wealth quintile and area

**Time spent on water collection**

- Percent distribution of average amount of time spent collecting water per day by sex of person primarily responsible for water collection in households without drinking water on premises

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*2019 Zimbabwe MICS Snapshots of Key Findings*
**Gender Equality**

**Safety & Security**

**Feeling safe while walking alone, SDG 16.1.4 sex disaggregate**

![Bar chart showing the percentage of adolescents and adults who feel safe walking alone in their neighbourhood after dark, by sex and area.]

**Feeling safe while being at home alone**

![Bar chart showing the percentage of adolescents and adults who feel safe being home alone after dark, by sex and area.]

**Victimisation**

**Feeling safe while walking alone, SDG 16.1.4 sex disaggregate**

![Bar chart showing the percentage of adolescents and adults who experienced physical violence of robbery or assault in the last year, by sex, wealth quintile and area.]

**Feeling safe while being at home alone**

![Bar chart showing the percentage of adolescents and adults who have ever personally felt discriminated or harassed based on their gender, by sex and area.]

**Reporting of victimisation to police, SDG 16.3.1**

![Bar chart showing the percentage of adolescents and adults who have ever personally felt discriminated or harassed based on their gender, by sex and area.]

**Feminine & masculine attitudes & expectations**

**Attitudes toward physical punishment**

![Pie chart showing the percentage of caretakers who believe that physical punishment is needed to bring up, raise, or educate a child properly, by sex of caretaker.]

Percentage of adolescents and adults who feel safe walking alone in their neighbourhood after dark, by sex and area.

Percentage of adolescents and adults who feel safe being home alone after dark, by sex.

Percentage of adolescents and adults who experienced physical violence of robbery or assault in the last year, by sex, wealth quintile and area.

Percentage of adolescents and adults who have ever personally felt discriminated or harassed based on their gender, by sex and area.

Percentage of caretakers who believe that physical punishment is needed to bring up, raise, or educate a child properly, by sex of caretaker.
Some textual content extracted from the document:

### Feminine & masculine attitudes & expectations

#### Life satisfaction

[Bar chart showing average life satisfaction scores among adolescents and adults age 15-49, by sex, wealth quintile, and marital status. Higher scores indicate higher satisfaction levels.]

Among adolescents and adults age 15-49, average life satisfaction score on a scale of 0 to 10, by sex, wealth quintile, and marital status. Higher scores indicate higher satisfaction levels.

#### Perceptions of a better life

[Bar chart showing percentage of adolescents and adults age 15-49 who expect that their lives will get better in one year, by sex, wealth quintile, and marital status.]

Percentage of adolescents and adults age 15-49 who expect that their lives will get better in one year, by sex, wealth quintile, and marital status.

The objective of this snapshot is to disseminate selected findings from the Zimbabwe MICS 2019 related to Gender Equality. Data from this snapshot can be found in table CS.3, TC.8.1, TC.10.1, TC.11.1, PR.1.1., PR.2.1., LN.1.2, LN.2.3, LN.2.4, LN.2.6, LN.2.7, TM.2.3W, SR.6.1W, SR.6.1M, PR.2.2, EQ.3.1W, EQ.3.1M, PR.7.1W, PR.7.1M, EQ.5.1W, EQ.5.1M, SR.9.3W, SR.9.3M, EQ.2.1W, EQ.2.1M, WS.4.1, WS.4.2, WS.1.3 and WS.1.4.