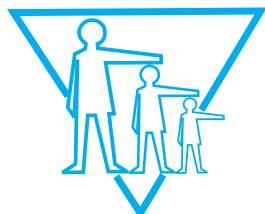


ZIMBABWE NATIONAL  
FAMILY PLANNING COUNCIL



Family Planning: It's Your Choice



# 2022 ANNUAL REPORT

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## 2022 ANNUAL REPORT

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## Preamble

Zimbabwe National Family Planning Council (ZNFPC) is a non-profit making parastatal under the Ministry of Health and Child Care (MoHCC). ZNFPC has a mandate to coordinate, take leadership and support implementation of integrated Family Planning and related Sexual Reproductive Health services in Zimbabwe. The organisation operates in all the 10 provinces of Zimbabwe. Programme implementation is through the four channels which are Static Clinics, Community Based Distributers (CBDs), Youth centers (including peer education) and outreaches. All Service providers are trained to offer Youth Friendly Health Services (YFHS). ZNFPC operates 11 static clinics (1 clinic in each province except for Harare and Matabeleland North with 2 clinics each). The organisation runs 24 youth centers across the country and a total of 270 CBDs who focuses on the distribution of oral contraceptives at community level and referring clients to health facilities for any other service they cannot provide within their scope of practice.

The organisation consists of two main divisions, the Technical Services and the Administration and Finance. The Technical Services division consists of the following departments/units; Service Delivery and Training, Adolescent Sexual and Reproductive Health (ASRH), Marketing and Communications as well as the Evaluation and Research. The second and supportive division of Administration and Finance comprises of the Human Resources and Administration, Finance, Internal Audit and Logistics department. The service delivery and training co-ordinates the integrated FP service provision in the public and private sector including the coordination of trainings on integrated Family Planning/Reproductive Health, HIV and AIDS and ASRH as well as certifying internal and external service providers on Family Planning (FP) courses. The department conducts quality assurance assessments together with all FP implementers in the country. The ASRH department coordinates the youth programme in the country while the Marketing and Communications is responsible for public relations, advocacy, social mobilization, marketing, localised campaigns, exhibitions and publicity. It is also responsible for the designing, packaging and dissemination of demand creation and promotional materials for organisations. The Evaluation and Research is mandated to coordinate and implement the planning, operations research, monitoring and evaluation of integrated FP programmes by providing technical expertise, guidance and support to all implementing partners.

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## Acronyms

AFHOZ	Association of Health Funders of Zimbabwe
AGYW	Adolescent girls and young women
AIDS	Acquired Immune Deficiency Syndrome
ART	Anti-retroviral Therapy
ASRH	Adolescent and Sexual Reproductive Health
CBD	Community Based Distributor
COC	Combined Oral Contraceptives
CPR	Contraceptive Prevalence Rate
CSE	Comprehensive Sexuality Education
CYPs	Couple Years of Protection
EHR	Electronic Health Record
FP	Family Planning
GBV	Gender Based Violence
GBV	Gender Based Violence
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GoZ	Government of Zimbabwe
HAS	Harare Agricultural Show
HIV	Human Immunodeficiency Virus
HTS	HIV Testing Services
ICFP	International Conference on family Planning
ICPD	International Conference on Population development
ICT	Information Communication Technology
IEC	Information, Education and Communication
IPPF	International Planned Parenthood Federation
IUCD	Intra-Uterine Contraceptive Device
LARCs	Long Acting Reversible Contraceptives
MHM	Menstrual Health management
MIS	Management Information System
MISO	Management Information System Officer
MoHCC	Ministry of Health and Child Care
MoPSE	Ministry of Primary and Secondary Education
MSU	Midlands State University
NAC	National AIDS Council
NSSA	National Social Security Authority
PCC	Parent to Child Communication
PeP	Post Exposure Prophylaxis
PPD	Partners in Population and Development
PrEP	Pre-Exposure Prophylaxis (PrEP)
PSH	Population Solutions for Health
PSZ	Population Services Zimbabwe
PTFU	Post-Training Follow-Up
QA	Quality Assurance

SADC	Southern Africa Development Community project
SAYWHAT	Students and Youth Working on Reproductive Health Action Team
SDG	Sustainable Development Goals
SGBV	Sexual Gender Based Violence
SP	Service Provider
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Infections
UNESCO	United Nations Educational, Scientific and cultural Organisation
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
VIAC	Visual Inspection with Acetic Acid
VMMC	Voluntary Medical Male Circumcision
WAAD	Women Against All Forms of Discrimination
WAD	World Aids Day
WCD	World Contraception day
WHO	World Health Organisation
WPD	World Population day
YCs	Youth Centres
YFHSP	Youth Friendly Health Service Provision
ZAPS	Zimbabwe Assisted Pull System
ZAPSO	Zimbabwe AIDS Prevention and Support Organisation
ZITF	Zimbabwe International Trade Fair
ZNFPB	Zimbabwe National Family Planning Board
ZNFPC	Zimbabwe National Family Planning Council
ZNFPS	Zimbabwe National Family Planning Strategy

## Executive Summary

This report outlines the achievements and financial status of the organisation during 2022. Overall, the Zimbabwe National Family Planning Council (ZNFPC) has made significant progress towards achieving its goals of increasing modern Contraceptive Prevalence Rate (CPR) from 66% to 68% by 2022 and to reduce teenage pregnancy rate from 22% to 12% by 2022 in the country. ZNFPC made significant strides in achieving its set goals and targets. However, it continues to face challenges regarding funding and staff attrition. The organisation has successfully launched the Zimbabwe National Family Planning Strategy (2022 – 2026) and the Family Planning 2030 Commitments towards the end of the year. The launch was officiated by the Honourable Vice President of Zimbabwe who is the Minister of Health and Child Care General (RETD) Dr C.G.D.N Chiwenga. During the year under review, ZNFPC reached out to diverse population groups in urban and rural areas with a total of 262,887 Family Planning (FP) clients and other Sexual and reproductive health (SRH) services.

In 2022, ZNFPC continued to work closely with government agencies, partners and stakeholders to promote FP and related healthcare services. The FP coordination meetings conducted at all levels played a vital role in fostering collaboration and information sharing among stakeholders. Various challenges and opportunities were identified and some enabled the development of effective strategies for addressing the gaps and promoting progress. The new service delivery model “One Stop Shop” for the integration of FP and HIV services has been successful in serving and increasing the number of services clients’ access at once during a visit to the clinic. Advocacy work has increased community engagement and demand for FP and ASRH services through community mobilisation, social media campaigns, engaging champions at all levels as well as partnering with civil society organisations at all levels.

Looking towards the future, the organisation aims to expand its outreach activities and accelerate efforts to increase awareness among the population. Furthermore, ZNFPC aims to improve male engagement and male involvement in FP as well as resource mobilisation activities so as to shift from over reliance on donor support. With the sustained commitment of the Government of Zimbabwe, noticed by the procurement of contraceptives worth USD1.5 million, the Council will continue to promote accessible, affordable and sustainable family planning programmes in Zimbabwe under the following values; universal access, rights and choice based, efficiency and accountability.





## 1. Technical Services Division

### 1.1 Service Delivery and Training

The unit consists of three departments which are Service Delivery, Training and Adolescent Sexual and Reproductive Health (ASRH). The unit works tirelessly towards the achievement of the national goals which are; to increase modern Contraceptive Prevalence Rate (CPR) from 66% to 68% by 2023 and to reduce teenage pregnancy rate from 22% to 12% by 2023. As such, the Service Delivery and Training Unit is mandated to coordinate and monitor the provision of integrated family planning (FP) services and other Sexual and reproductive health (SRH) services which includes screening of cancers of the reproductive system, fertility, diagnoses and treatment of sexually transmitted infections (STIs), Voluntary Medical Male Circumcision (VMMC) and pregnancy testing in Zimbabwe.

#### **Service Delivery**

In 2022, the department continued to offer integrated FP and other SRH services through static clinics, Community Based Distributors (CBDs), Youth centres and outreaches. Services offered include Family Planning, HIV Testing Services, VIAC, Pap smear, VMMC, PrEP and PEP. CBD support visits were conducted in all provinces. Joint Quality Assurance (QA) visits with Population Services Zimbabwe (PSZ), Population Solutions for Health (PSH) and Family Health International (FHI 360) for clinical service provision were conducted in all the provinces. Outreaches in hard to reach areas were conducted in all provinces. Basic sundries in line with COVID 19 protocols were in place with support received from Nat pharm. These include face masks, gloves, gowns and aprons. Spilhaus clinic managed to get donations of sundries from Parirenyatwa group of hospitals. A national skills audit for the family planning service providers from family planning partners and ZNFPC clinics was conducted. A total of 190 service providers were audited and these were from PSZ (52) with 138 working in Public Sector Support Sites, PSH (77), ZNFPC (52) and FHI360 (9). There are still gaps to be addressed in service providers to acquire all the relevant FP courses and ASRH from all partners. The one stop shop integration project with support from Ministry of Health and Child Care and World Health Organisation (WHO) was successfully implemented in four selected ZNFPC static clinics (Spilhaus, Fife Avenue, Lister and Mpilo). ZNFPC managed to roll out the integration program to the remaining 7 provinces and all the facilities are now offering Anti-retroviral Therapy (ART) and both Post Exposure Prophylaxis (PEP) and Pre-Exposure Prophylaxis (PrEP) services.

## Training

The department coordinates all FP and ASRH trainings. The courses include the Integrated FP Clinical, ASRH, Implants and IUCD insertion and removal courses. A total of 16 service providers (SPs) from all the 11 ZNFPC static clinics were trained in ART provision as well as Monitoring and Evaluation tools under the integration project. Three (3) service providers from Harare and Manicaland were trained in VIAC while a total of 58 service providers were trained in Rights Based Approach to Family Planning provision which was funded by UNFPA. A refresher course for CBDs was done in all provinces. Continuous staff sensitizations were conducted with the mantra ‘COVID 19 is here to stay’ and all staff members were encouraged to get all the three jabs as recommended by the World Health Organisation (WHO).

**Table 1: Service providers’ trainings conducted**

<b>Staff sensitisation on Health Issues</b>	<b>Comprehensive Sexuality Education</b>	<b>Infection prevention and Control</b>	<b>SGBV</b>	<b>PTFU</b>	<b>Rights Based FP</b>
102	138	468	493	133	58

All trained health service providers received their certificates during the year under review backlog on certification on service providers was cleared in 2022 following a long spell of non-certification stretching from 2013. A total of 589 clinicians and non-clinicians were trained in family planning and reproductive health courses in 2022. One hundred and twenty nine (129) service providers (SPs) were trained in Integrated FP Clinical Course while 192 were trained in implants insertion and removal. For IUCD insertion and removal, a total of 71 service providers were trained across all provinces. Fifty nurses and nurse aides were trained in CSE with support from UNESCO, 30 teachers from Mashonaland Central and Manicaland were trained in CSE with support from IPPF and 50 teachers from Masvingo province were sponsored by Ministry of Primary and Secondary Education (MOPSE) through Masvingo District Schools psychological services.

## 1.2 Adolescent Sexual and Reproductive Health (ASRH)

While the country is experiencing such a youth bulge, there still remains a myriad of challenges which might hamper the country’s efforts to tap into the youthful demographic dividend to achieve an upper middle income status by 2030. These challenges include drug and substance abuse, high teenage pregnancies, early child marriages, STIs including HIV inter alia. ZNFPC realised the need to assist this precious group by setting up the ASRH department which takes

a leading role in coordinating, planning, implementation, monitoring and evaluation of the ASRH program across all provinces of operation. The department focused on training of peer educators on youth friendly health service provision (YFHSP). Provision of quality integrated family planning services to adolescence and young people in tertiary institutions, Menstrual Health Management (MHM) information dissemination and provision of sexual and reproductive health and rights (SRHR) services to young people was conducted. ASRH coordination meetings at provincial level were conducted. Comprehensive Sexuality Education (CSE), Parent Child Communication (PCC) sessions with parents and young people exercises were conducted. Adolescent boys and girls in tertiary institutions were engaged through various media channels.

### **Key Achievements**

- Reached 237,785 young women with MHM information, while 5,190 sanitary wear were procured and distributed. Through resource mobilisation, a total of 27,870 sanitary wear were received from stakeholders and partners targeting young girls in need.
- Trained 810 peer educators on Youth Friendly Health Service (YFHS) provision.
- A total of 3,655 young people were offered FP services in static clinics and 79,380 young people were reached through CBDs.
- A total of 39,108 clients were reached with FP/SRH services while 7,703 clients reached with HTS services during campaigns in tertiary institutions.
- A total of 28 provincial ASRH coordination meetings were conducted
- Initiated livelihood and life skills projects (gardening and poultry keeping) at Empandeni and Nyanyadzi youth centers.
- Implemented the Southern Africa Development Community project (SADC) - Combination prevention towards adolescent girls and young women (AGYW) in Beitbridge district, Matabeleland South province.
- Implemented the South-South Cooperation (technical cooperation) project under the Partners in Population and Development (PPD) funded by UNFPA in Hopley area, Harare South.

## **1.3 Marketing and Communications**

The Marketing and Communications Unit is mandated to generate demand for Family Planning and Sexual Reproductive Health services and products by promoting health seeking behaviour through behaviour change strategies. For the year 2022, the target audiences were reached through advocacy, social mobilisation, mass media campaigns, localised campaigns,

exhibitions, and periodic commemorations, review of information, education and communication (IEC) materials and branding of all ZNFPC facilities.

### **Key Achievements**

***Development and distribution of branded promotional and IEC materials:*** A total of 18 displays and billboards were developed and erected at the main entrances at provincial offices and some youth centres. Forty thousand (40,000) posters and pamphlets were printed and distributed, 1,637 T-shirts were printed and distributed while 7 provinces managed to procure a sets of exhibition equipment during the year.

***Document FP/Reproductive Health human interest stories and best practices:*** Eighty two (82) Human interest stories were packaged in the straight-talk online newsletter and produced as videos. Issues under discussion were to do with family planning and contraception issues and youth-related issues such as teen pregnancy, child marriages, drug and alcohol abuse as well as menstrual hygiene management.

***Conduct social mobilization by community leaders:*** Community members were engaged through youth centre activities, community dialogues and social mobilizations. Parents and youths were engaged during the Comprehensive Sexuality Educations sessions and Parent-Child Communications sessions in communities (traditional, faith based, political and youths) for increased demand and support of YFSP through YCs and CBDs. Six hundred and sixty (660) Political leaders, 1,778 Community leaders, 13 364 parents and 145,703 Youth were reached.

***Advocate with the MoHCC, parliamentarians; and the ZNFPC Board to mobilize FP resources:*** One hundred and eighty one (181) Senior Parliamentarians were engaged at various platforms including national events, budget consultation meetings, community dialogues and public hearings. On the other hand, 163 Junior parliamentarians were encountered during school-based programs, sports galas and provincial events.

***Develop champions within the business community to mobilise resources from the private sector:***

All the provinces managed to engage some community members as provincial influencers or FP Champions) as shown in Table 2 below

**Table 2: FP and ASRH Champions**

Province	Title	Name
Head office	Brand Ambassador	Adiona Chidzonga
Head office	Male Motivator	Albert Nyati
Midlands	FP Champion	Mrs Patai
Midlands	ASRH Champion	DJ Vasco
Mash West	ASRH Champion	Tapiwa Gutu
Manicaland	FP Champion	Blessing Shumba
Manicaland	FP Champion	Madzibaba Andby
Mash Central	FP Champion	Reverend Abedinigo Ndogo
Mash Central	ASRH Champion	Praise Pasipamire (Junior Minister of State for Provincial Affairs)
Masvingo	FP Champion	Abel Mauchi
Masvingo	ASRH Champion	Tavita Mpala
Mash East	FP Champion	Aunty Selanje
Mash East	ASRH Champion	Original Major
Mat North	FP Champion	Bambelela Arts Ensemble

**Private Sector Engagement:** Edgars Stores Limited donated 6,000 reusable sanitary pads while New Avakash International provided 5,000 disposable sanitary pads monthly towards the national Pad Bank campaign. Mashonaland East province continues to engage Spar Marondera and National Aids Council (NAC), while Matabeleland North made follow ups with Ingwebu, Portland cement and Delta Beverages. Manicaland partnered with Nzeve on Sign Language and ASRH Trainings and ASRH Forum. Matabeleland South engaged mining companies with Masvingo working with Solidarmed.

**Periodic FP campaigns and commemorations: (ZITF, HAS, World Contraception Day, World Population Day, World Female Condom, Family open Day):** The organisation participated in 85 Family Planning campaigns, 123 exhibitions and commemorations including International Condom Day, Valentine's Day and International Women's Day, Easter, Independence Day, Africa Day, Menstrual Hygiene Day, Mother's Day, Father's Day and Day of the African Child, World Population Day, Heroes and Defence Forces Day, World Contraception Day, International Day of the Girl Child, Rural Women's Day, World Aids Day and sixteen days of activism against Gender Based Violence.

**World Contraception Day (WCD):** Commemorations were held in Mashonaland Central province in Rushinga District at Chimhanda Business Centre and officiated by Her Excellency, The First Lady of the Republic of Zimbabwe Dr Auxillia Mnangagwa. ZNFPC managed to exhibit at the Zimbabwe Agricultural Show from 29<sup>th</sup> August to 3<sup>rd</sup> September 2022 as well as in all provincial agricultural shows.

***Setting up of a call centre:*** A call centre facility has been successfully set and is now operational with two toll free lines (Econet – 08080560 and NetOne - 08011584) with support from Plan International.

***Review existing materials and messages, package and disseminate messages for different media:*** Twenty six (26) posters and pamphlets were reviewed and all provinces participated in the review of the IEC materials. The reviewed print materials were translated into vernacular languages. One hundred and forty eight (148) newspaper articles and adverts were published, 147 radio spots and programs were broadcasted. Improved media relations resulted in radio stations extending free slots for health programs. Three hundred and ninety one (391) social media posts were posted on website and social media platforms which include Facebook, Twitter, Instagram, YouTube and WhatsApp.

***Capacity build editors/journalists to properly represent Family Planning issues in their reporting:*** a total of 219 journalists were trained through physical meetings, online interactions and disseminating information on WhatsApp groups.

***Engage Media houses to promote FP services:*** the organisation managed to engage 210 media houses and reached over three million people through national and provincial radio stations.

## 1.4 Research, Monitoring and Evaluation

The unit is mandated to coordinate and implement the planning, research, monitoring and evaluation of the FP program through provision of technical expertise and support to all ZNFPC units and implementing partners. The unit is responsible for spearheading the development and review of ZNFPC strategic plans, development of funding proposals, FP coordination meetings and conducting research work.

### Key Achievements

***Development of the National FP Strategic Plan (2022-2027) and the FP 2030 Commitments:***

The two (2) documents were launched in December 2022 by the Vice President and Honourable Minister of Health and Child care Dr C.D.G.N Chiwenga.

***Abstracts development:*** Two of the abstracts (‘Assessment of access to and uptake of quality integrated maternal health and hygiene management services by women residing in urban areas of Zimbabwe’ and ‘FP and HIV Integration, A one stop shop model at Spilhaus Harare, Zimbabwe’ were accepted for presentation at International Conference on Family Planning (ICFP 2022) while ‘Menstrual Health Management: A Reproductive Health Nightmare’ was accepted for presentation at the International Conference on Heritage, The future of Africa and the Global Community 2022 held in September 2022 in Masvingo, Zimbabwe.)

**ICPD@25:** National taskforce meeting was conducted and progress has been made towards achieving the country commitments following the development of an M and E framework

**International Conference on Family Planning (ICFP 2022):** ZNFPC participated at the conference from the 14<sup>th</sup> to 17<sup>th</sup> November 2022 in Pattaya City, Thailand.

**Data Quality Assessment:** Two (2) provinces were supported (Mashonaland West and Matabeleland South) on CSE and PCC program

**Evaluation of Sayana Press:** An assessment exercise was conducted in conjunction with the Ministry of Health and Child Care and implementing partners (PSZ, PSH and FHI360) in the three piloting provinces (Mashonaland East, Bulawayo and Matabeleland South).

**Research Publications:** ZNFPC had two research papers published in the African Journal of Reproductive Health (AJRH) titled **a)** Barriers and Facilitators influencing utilization of intrauterine contraceptive device (IUCD) in Zimbabwe (<https://ajrh.info/index.php/ajrh/article/view/3550>) and **b)** Knowledge, attitudes and practices on contraceptive use among young people in selected universities in Zimbabwe (<https://ajrh.info/index.php/ajrh/issue/view/132>)

**National Annual Planning and Review meeting:** A hybrid meeting (both virtual and physical) was conducted with all key implementing partners in March 2022

**National and provincial FP coordination meetings:** Forum meetings were conducted at both national and provincial levels. ZNFPC, Ministry of Health and Child Care, implementing partners and other stakeholders converged and discussed their plans, achievements and recommendations in FP programming for the year 2022.

**Integration project:** An Annual Planning and review meeting was conducted for the project. A data analysis meeting was also conducted for the two year period before the project and after implementation. Notable successes led to the roll out of the project to all the remaining seven (7) static clinics.

## 2. Programme Performance (2022)

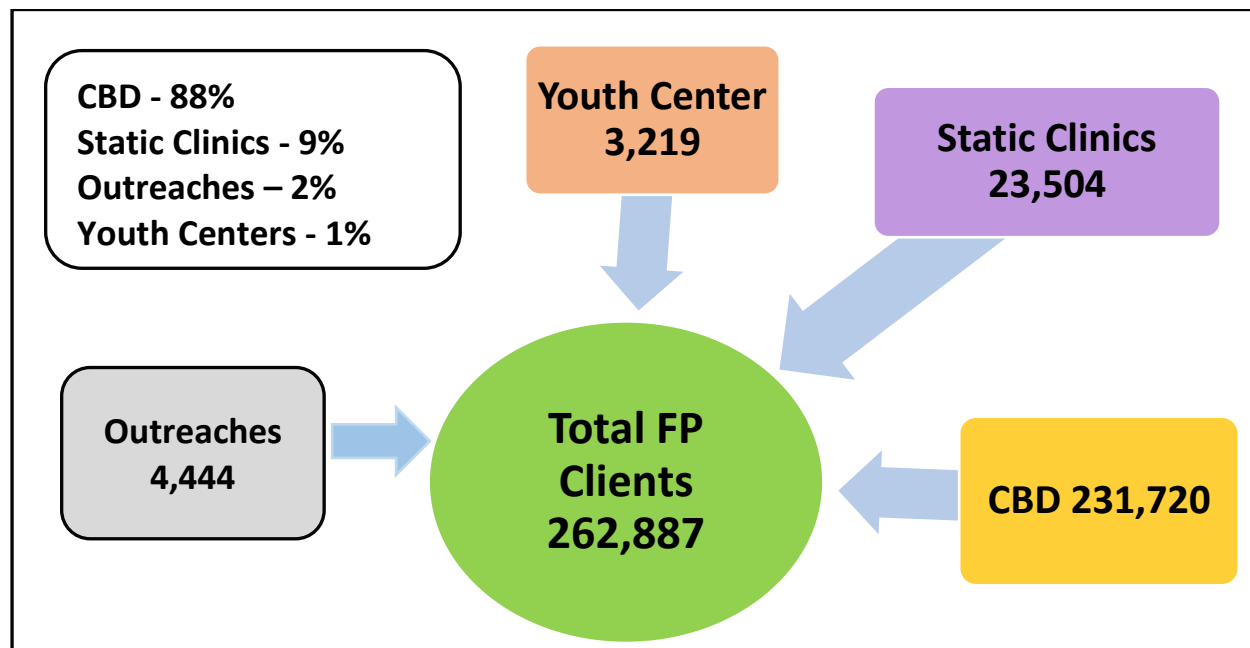
The two goals of the FP programme from the FP Strategy 2016 – 2020 were to increase modern Contraceptive Prevalence Rate (CPR) from 66% to 68% by 2020 and to reduce teenage pregnancy rate from 22% to 12% by 2020. The four channels of service delivery were the main pillars to achieve the two strategic goals which are static clinics, youth centres, CBDs and outreaches.

### 2.1 Total Family Planning Clients

The total number of FP clients reached in 2022 through all the service delivery channels was 262,887. CBDs reached the majority of the clients with 231,720 (88%) followed by static

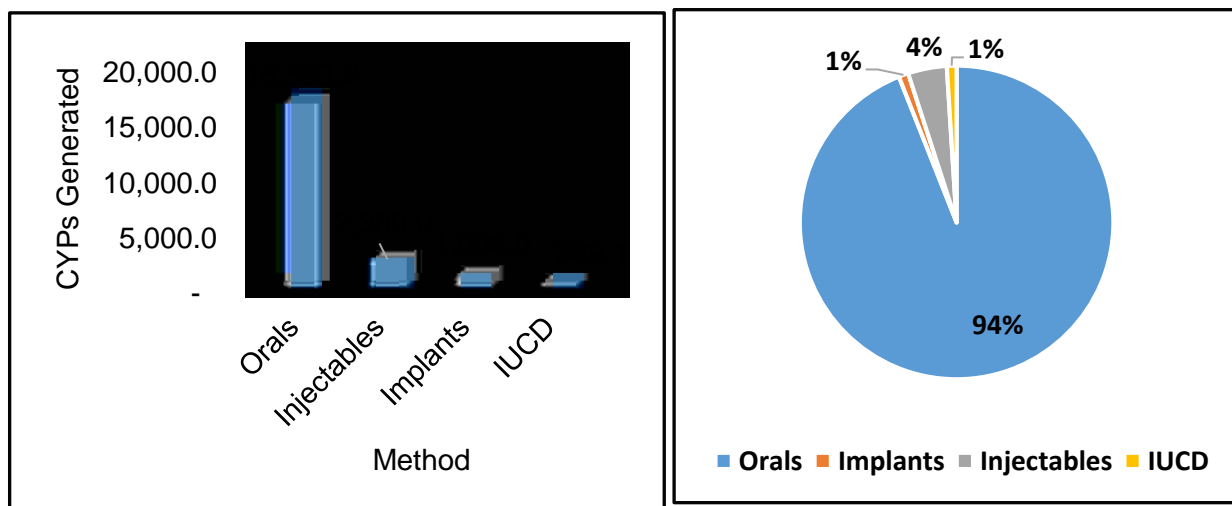


clinics with 23,504 (9%). The proportion of clients reached through youth centres was 1% of all the total FP clients while 2% were reached through outreaches



**Figure 1: Total clients reached and proportion of FP clients by channel**

The uptake of short term methods in 2022 was significantly higher than LARCs. Oral contraceptives contributed the largest proportion (94%) followed by injectable with 4%. LARCs uptake (Implants and IUCD) contributed 1% each (Figure 3). In terms of CYPs

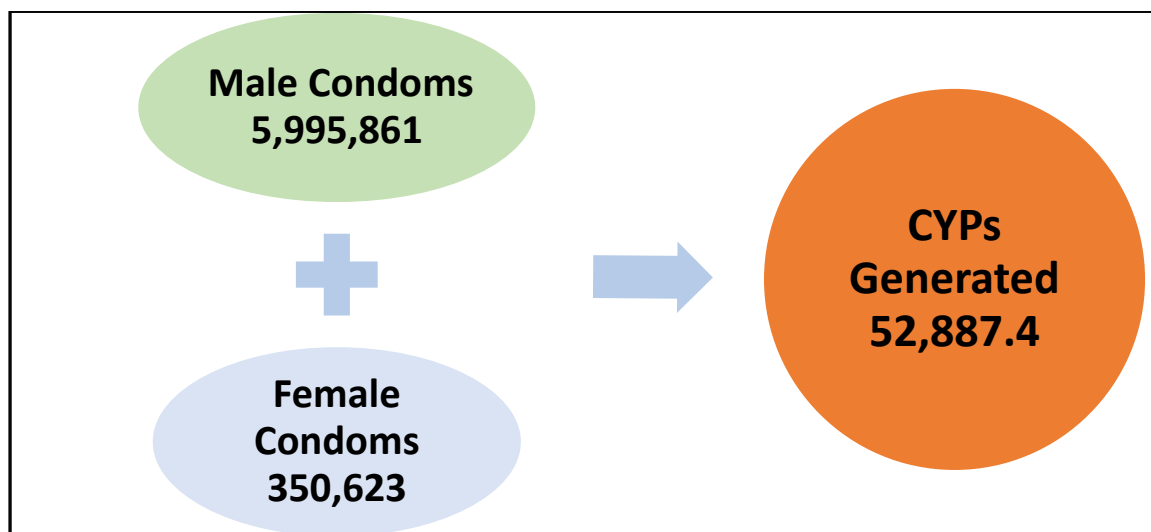


**Figure 2: CYPs Generated by Method**

**Figure 3: Proportion of FP Clients by method**

generated by method, orals generated 16,563.2 CYPs while injectable generated 2,389 CYPs. Implants and IUCDs generated 1,006.0 and 389.1 CYPs respectively (Figure 2).

## 2.2 Condoms Distributed in 2022

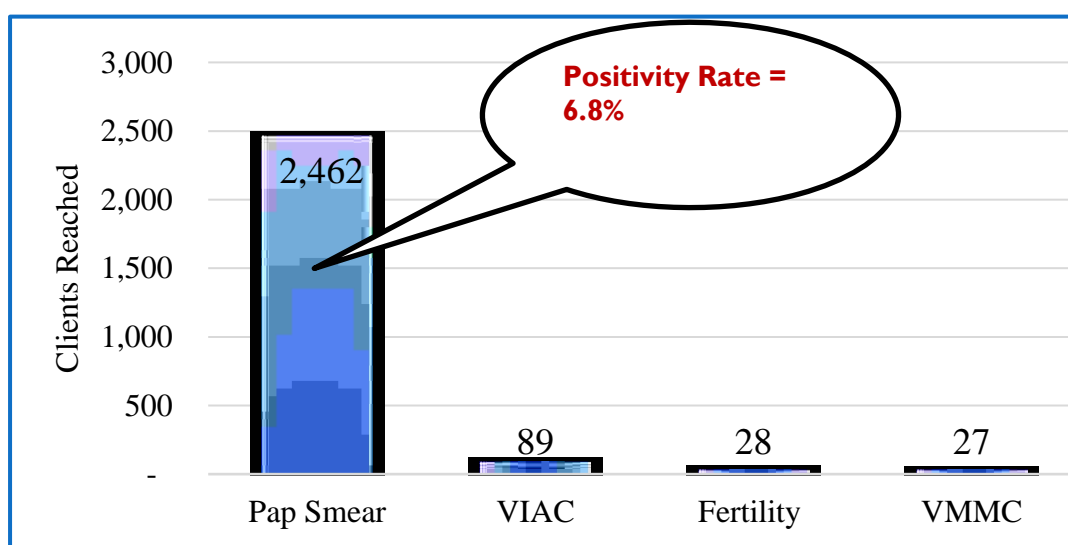


**Figure 4: Total Condoms Distributed**

ZNFPC continue to value dual protection in FP/SRH issues. Condom distribution (both male and female) was done through the 4 channels distributing a total of 6,346,484 pieces and generating 52,887.4 CYPs.

## 2.3 Other SRH services offered

ZNFPC facilities also offer other SRH services like cervical cancer screening (through both VIAC and Pap smear, VMMC and Fertility). A total of 2,551 women accessed cervical cancer screening services at ZNFPC (2,462 Pap smear and 89 VIAC). Of these women, 2,462 women were screened through Pap smear while 89 were screened through VIAC. About 7% of the clients screened through Pap smear were positive. Twenty seven (27) and 28 clients accessed VMMC and Fertility services respectively



**Figure 5: Other SRH Services Offered**

## 2.4 HIV Testing Services (HTS) and STI

A total of 3,115 clients accessed HTS across all provinces with Mashonaland Central recording the highest reach (818) while Manicaland province recorded the least with 115 clients. A total of 1,524 clients were diagnosed with various STIs. Harare and Matabeleland North Provinces recorded 519 and 268 respectively. Matabeleland North Province conducted the highest number of pregnancy tests (438) while Mashonaland West recorded the least (31).

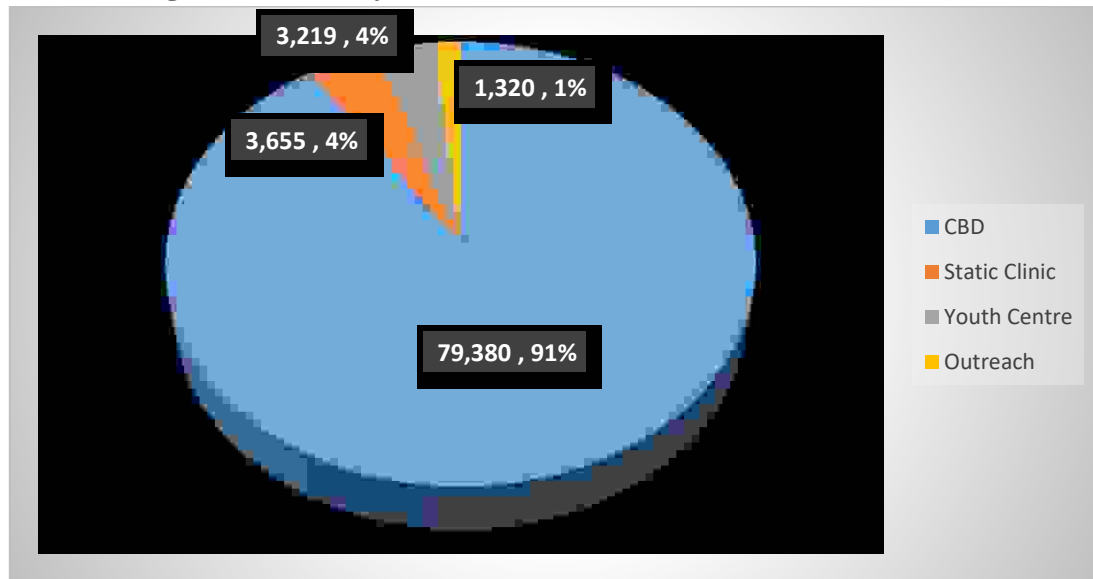
**Table 3: Total Clients offered HTS and STI**

Province	HTS	STIs Diagnosed Syndromically	Pregnancy Tests
<b>Mashonaland Central</b>	818	107	219
<b>Midlands</b>	402	107	80
<b>Matabeleland South</b>	385	155	59
<b>Mashonaland West</b>	378	77	31
<b>Matabeleland North</b>	342	268	438
<b>Harare</b>	276	519	187
<b>Mashonaland East</b>	220	133	49
<b>Masvingo</b>	179	117	61
<b>Manicaland</b>	115	41	315
<b>Total</b>	<b>3,115</b>	<b>1,524</b>	<b>1,439</b>

## 2.5 ASRH Program

CBDs across the country had the highest number youth who accessed FP services compared to all the other channels. They reached a total of 79,380 (91%) young people with orals. Manicaland province CBDs recorded the highest (22,302), followed by Mashonaland East province with 15,302. A total of 3,655 (4%) youth accessed FP services through static clinics. Matabeleland North recorded the highest number (810) while Manicaland recorded the least with 162. A total of 3,219 (4%) youths were reached with FP services through the youth centres across all the provinces. The majority of the youths (610) were reached in Matabeleland South followed by Mashonaland West with 588. One (1%) of the youths were reached through outreaches with FP services

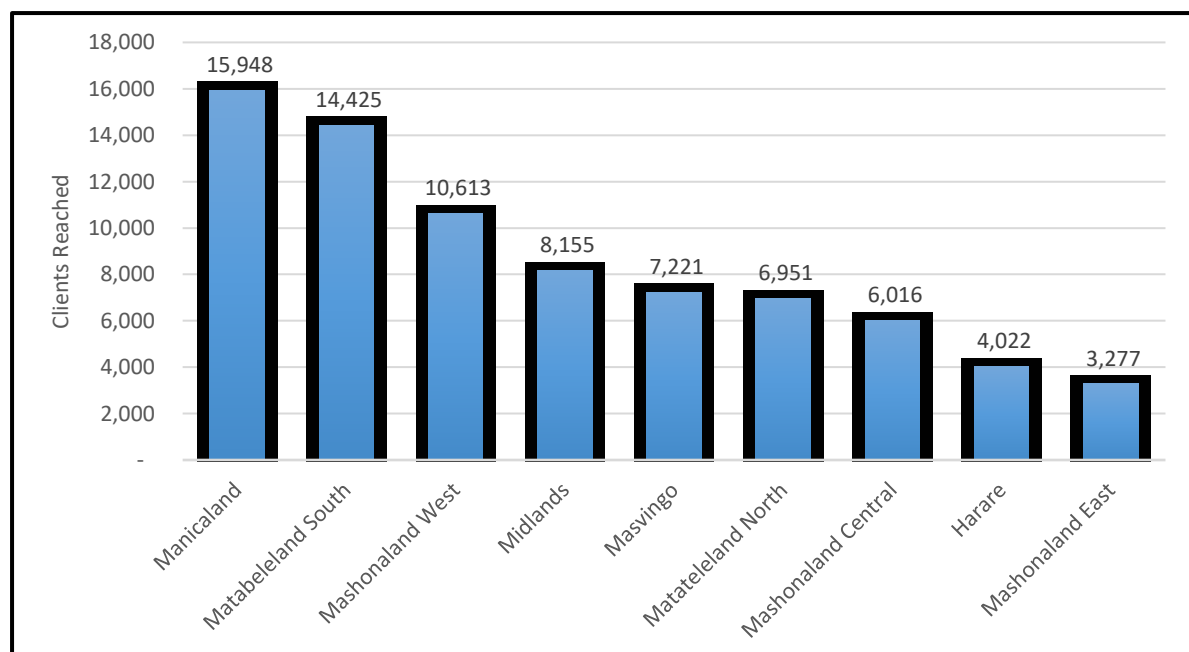
## Youth Receiving FP Services by channel



**Figure 6: Proportion of youth reached with FP services by channel**

### 2.5.1 Peer Educators

Peer Educators continue to play a significant role in reaching out to their peers. A total of 76,628 youths were reached by peer educators across all provinces (both in school and out of school). Manicaland province had the highest number of youths reached by peer educators (15,948) followed by Matabeleland South with 14,425 youths reached. Harare and Mashonaland East had the least numbers of youths reached with 4,022 and 3,277 respectively.



**Figure 7: Youth reached with Information by Peer Educators**

## 2.5.2 CSE and PCC Program

**Table 4: Total youth reached with CSE sessions**

Province	CSE Sessions		
	Single	Partial	Complete
Mashonaland East	293	900	848
Mashonaland West	1,810	1,850	141
Matabeleland South	1,672	2,468	831
Mashonaland Central	951	1,334	136
Matabeleland North	378	357	99
Midlands	368	1,139	84
Manicaland	332	480	209
Masvingo	260	524	250
Harare	8	88	0
<b>Total</b>	<b>6,072</b>	<b>9,140</b>	<b>2,598</b>

The CSE programme reached a total of 6,072 young people with a single session while 9,140 had partial sessions and 2,598 had completed all their session. For PCC, about 4,884 children were reached while 924 fathers and 2,521 mothers were reached respectively.

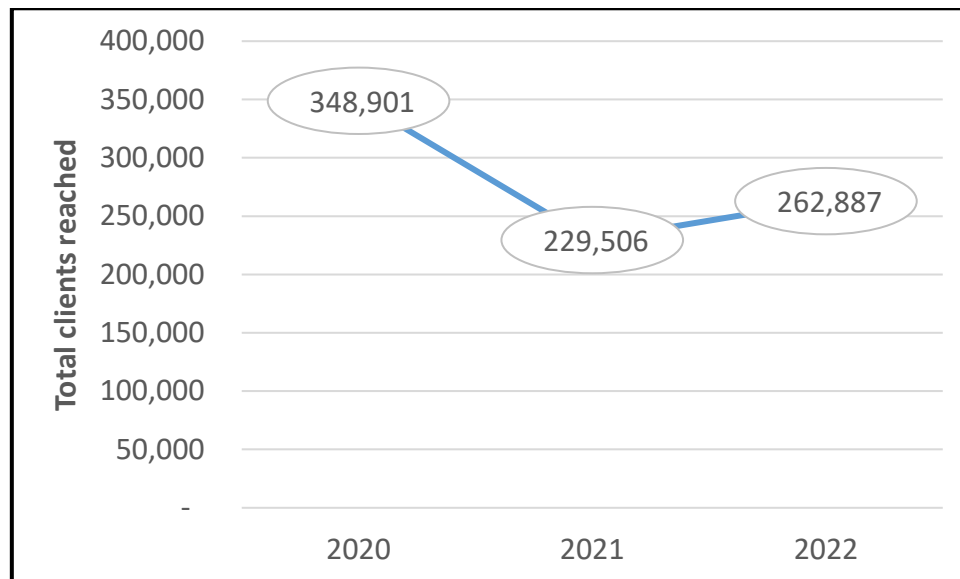
## PCC Program

**Table 5: Total parents and Children reached during the PCC sessions**

Province	PCC		
	Fathers	Mothers	Children
Matabeleland North	64	134	606
Matabeleland South	246	645	1668
Mashonaland West	209	599	645
Manicaland	174	477	782
Midlands	92	253	178
Mashonaland East	59	221	411
Masvingo	46	99	257
Mashonaland Central	34	79	321
Harare	0	14	16
<b>Total</b>	<b>924</b>	<b>2,521</b>	<b>4,884</b>

## 2.6 Trend Analysis on total FP Clients reached (2020 - 2022)

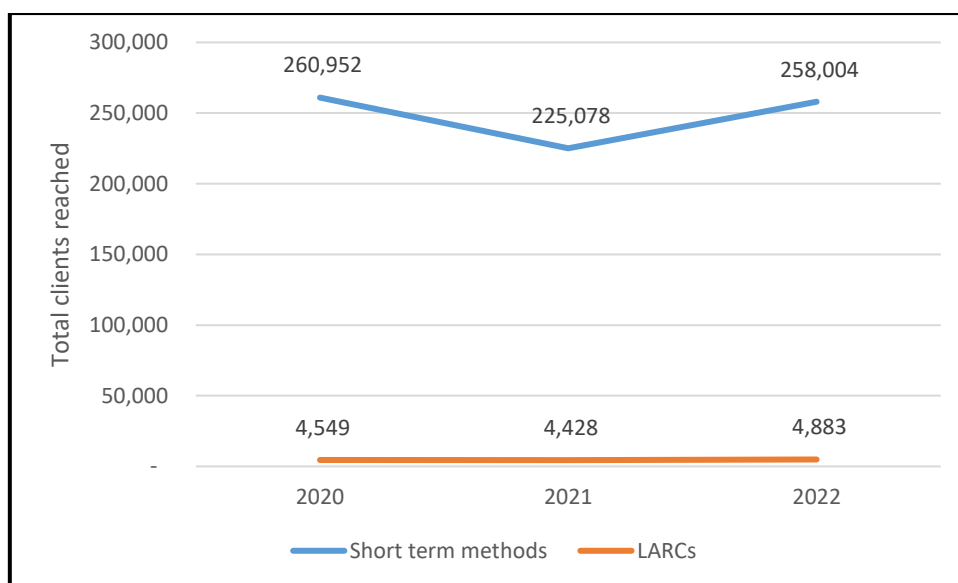
Total FP clients declined by 34% in 2021 from 2020. A slight increase of 15% in the number of FP clients was recorded in 2022 from 2021 (from 229,506 to 262,887). (Figure 8)



**Figure 8: Total FP Clients reached by year (2020-2022)**

### **Total FP clients reached by method**

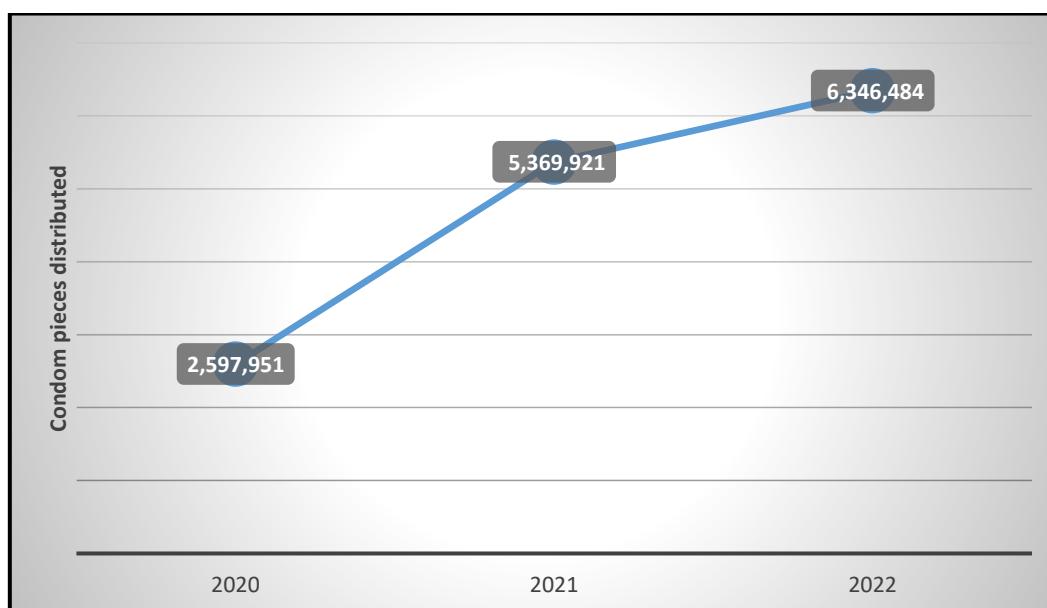
Oral contraceptives remain the most preferred contraception methods by FP clients compared to LARCs. The uptake of short term methods is expressively higher than LARCs uptake. There was a slight decline by 15% between 2020 and 2021 while an increase by 15% in oral contraceptive uptake was recorded in 2022 from 2021 (from 225,078 in 2021 to 258,004 in 2022). A 4% decline in the total number of clients who accessed LARCs was recorded between 2020 and 2021 and an increase by 10% in the number of clients was recorded in 2022 from 2021. (Figure 9)



**Figure 9: Total FP clients reached by method (2020-2022)**

### **Condom pieces distributed (2020 - 2022)**

Condom distributions were on an increase from 2020. There was a 107% increase from condoms distributed in 2020 to those distributed in 2021 (from 2.5 million to above 5.3 million). Between 2021 and 2022, an 18% increase in the number of condom pieces distributed was recorded. (Figure 10)



**Figure 10: Condom pieces distributed (2020 - 2022)**

### 3. Administration and Finance Division

#### 3.1 Supply Chain and Commodity Security (Logistics Department)

The logistics department is mandated to strengthen the supply chain management and security of all FP commodities, procurement, storage and their distribution. The department also is determined to share comprehensive findings, requirements and gaps within the FP commodity distribution. It is obliged to ensure that the procurement, storage and distribution of FP commodities is efficient and effective. Furthermore, the department also manages the organisation's vehicle fleet.

##### Key Achievements

##### 3.1.1 2022 Commodity Summary

Contraceptive stock outs were experienced in all the provinces in control pills (COC) during the second quarter of the year 2022. ZNFPC central stores had stock of all the other commodities except for the condoms and Sayana Press as at 31 December 2022. Provinces had stock of all commodities including both male and female condoms.

**Table 6: Commodity stock status for the year ending 31 December 2022**

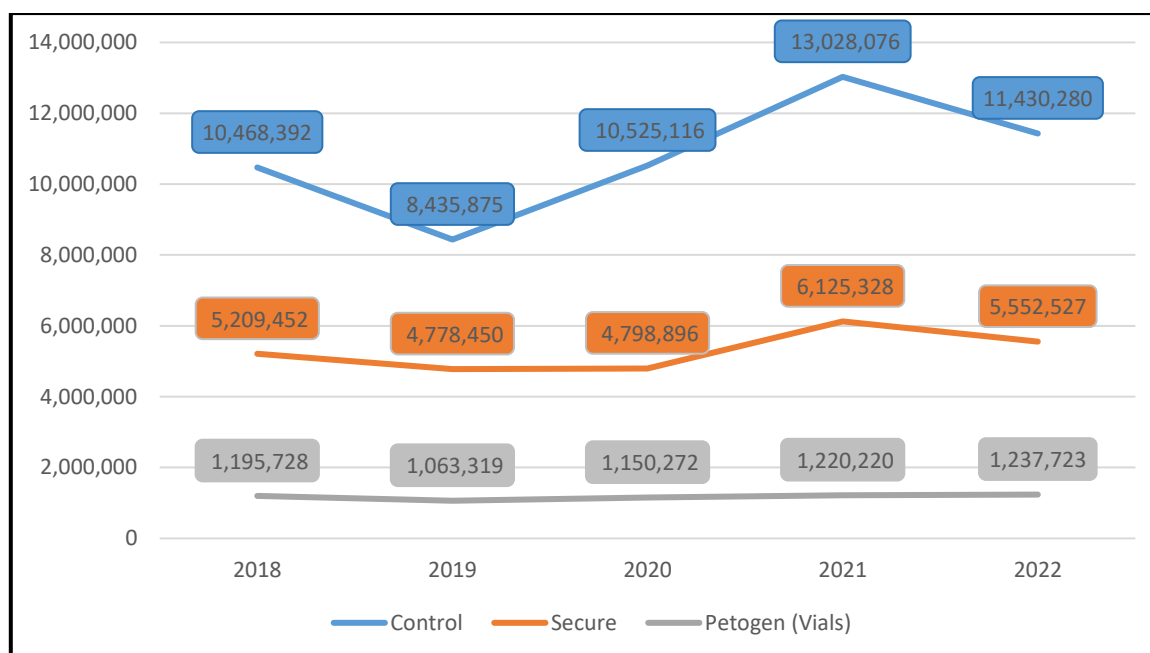
Description	SOH (National level)	MOS	Comment
Male Condoms	77,778,985	8.0	Sub-optimum level.
Female Condoms	5,067,346	25.3	Overstocked level. The program targets to increase demand creation activities.
Petogen	468,895	5.2	Sub-optimum level
Control Pill	11,302,331	11.9	Adequate levels subject pending commitments
Secure	6,256,316	14.9	Adequate levels subject pending commitments
Emergency Contraceptives	486,476	42.6	Overstocked level. Program to review the access issues
Jadelle	120,557	9.1	Adequate levels subject pending commitment
Implanon	45,117	12.1	Adequate levels.
IUCD	72,898	32.7	Overstocked level. Enhance demand creation and training and certification of service providers.
Sayana Press	119,515	5.6	Adequate levels

##### 3.1.2 ZAPS Contraceptive distribution Trend Analysis (2018-2022)

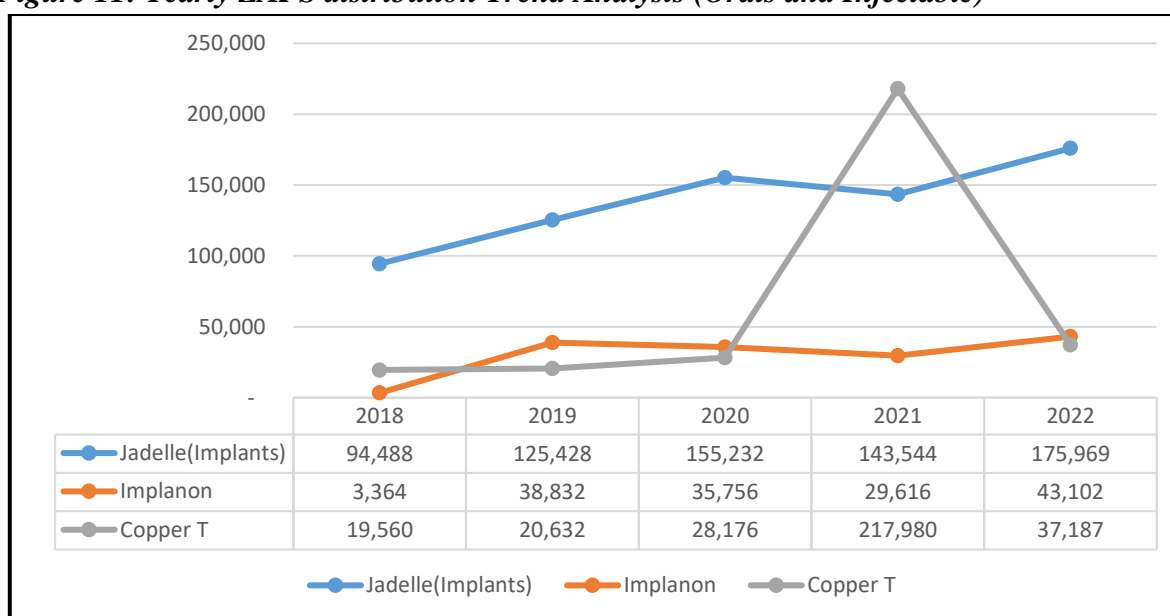
In 2021, orals and injectable contraceptives distributed were higher during the five year period under review compared to the other years. (Figure 11). IUCD distributed in 2021 was a 674%



increase compared to what was distributed in 2020. Jadelle and Implanon distributed in 2022 increased by 22.6% and 45.5% respectively from 2021. (Figure 12)



**Figure 11: Yearly ZAPS distribution Trend Analysis (Orals and Injectable)**



**Figure 12: Yearly ZAPS distribution Trend Analysis (LARCs)**

### 3.1.3 Commodities Procured and Received in 2022

Both male and female condom shipments were received in 2022 and were funded by USAID and GFATM. The Government of Zimbabwe (GoZ) procured oral contraceptives (Control and Secure) while UNFPA procured control pills and Implanon in 2022.

Funding Partner	Product	Quantity Received
GFATM	Male Condoms	4,191,600
USAID	Male Condoms	45,000,000
USAID	Female Condoms	804,060
UNFPA	Control	2,767,204
GoZ	Control	4,127,755
GoZ	Secure	1,108,689
UNFPA	Implanon	60,024

### 3.2 Human Resources and Administration

The role of the Human Resources Unit is to ensure effective and efficient management of human resources and administration functions of the Council. This involves initiating research and developing human resources policies, procedures and systems for attracting, motivating, retaining and effectively utilizing qualified personnel. The Department also oversees the support operations by linking all other Units and Departments and ensuring a smooth flow of information from one part to the other. This is done through coordinating meetings.

**Organizational Restructuring:** Job matching in line with the new structure was done and the recommendations from the meeting were share with the council board and approved for implementation. However, the implementation of the organisational restructuring was put on hold pending the appointment of a substantive Executive Director.

**Staff Establishment:** As at 31 December 2022 the overall staff vacancy rate stood at 49.5% which is considered very high by International Labour Organization. On the other hand, vacancy rates for Office and field based staff stood at 27.1% and 64% respectively.

**Filling in of vacant posts:** the management wrote a letter to the Permanent Secretary Ministry of Health and Child Care seeking Ministry Approval and Treasury Concurrence to fill vacant posts in line with previous Board resolution in conformity with Salary Service Bureau requirements.

**Integration of ZNFPC on salary service bureau (SSB) payroll platform:** Salaries payment transition to SSB was a success following the request by the treasury through the Ministry of Health and Child Care to integrate all independent Commissions and Grant Aided institutions on the Salary Service Bureau Payroll Platform.

**Licensing of ZNFPC Facilities:** Catering and accommodation facilities for both Head Office and Matabeleland North were licensed and all Clinics were licenced with Health Professions Authority and City Authorities and AFHOZ.

**Development and Review of Policy Documents:** The following policy documents were approved and implemented in the year 2022,

- a. Risk Management policy
- b. Employee Wellness policy
- c. Safeguarding Children and Vulnerable Adults policy
- d. Warehouse Standard Operating Procedure
- e. Gender Policy.
- f. Vehicle and Fleet Management
- g. Accounting Procedures Manual
- h. Human Resources Policies and Procedures Manual

***Disposal of Assets:*** The following centres conducted Disposal of their Assets during 2022; Head Office, Matabeleland North, Matabeleland South, Manicaland and Mashonaland Central.

### 3.3 Information Technology (IT)

The key roles of the IT department is to provide an effective and developmental ICT service to all users, meeting all ICT requirements of the council through effective use of service providers, facilitate acquisition and utilization of hardware and software, maintain and service ICT equipment on a regular basis and manage provision and maintenance of ICT infrastructure.

#### **Key Achievements**

- Video conferencing equipment was successfully installed in the main boardroom at head office. All provinces managed to replace old machines. These old and obsolete machines were dispatched through auction.
- Following the plight of medical aid user in making payments for services, the department managed to install NH263 claims system for Medical Aid at Spilhaus clinic.
- A solar system was installed at HQ. This system has proved to be robust and efficient by ensuring that our critical systems are up and running hence key personnel have no down time.

### 3.4 Catering and Accommodation

The department is mandated to provide quality and affordable catering and accommodation services in line with acceptable international standards and norms. Delicious food is prepared in a clean and hygienic environment and later served professionally by trained friendly waiters/waitresses. The year 2022 has not been particularly good in terms of turnover especially during the first and second quarters. Business activity picked up in the third and fourth quarter where we hosted considerable number of workshops. Economic activity remain constrained

due to shortage of hard currency, the tight liquidity and shortage of consumer goods which dampened our accommodation bookings.

### **Accommodation**

The Accommodation section remains key in our rebuilding effort as seen by an improved occupancy rate from the second quarter of 2022. The emphasis was on attracting new business away from our traditional market. The department hosted workshops and accommodated clients from NSSA, MoHCC, WAAD Sisters, PSZ and MSU. The unit also hosted two Rural District Councils from Matabeleland.

## **3.5 Internal Audit**

The Internal Audit Unit's mandate is to support all levels of management by objectively and independently assessing the existing Internal Control Systems and other accounting procedures to ensure that they remain applicable, sound, and effective. It provides objective assurance and consulting services with the goal of adding value and improving an organization's operations. It assists an organization in achieving its goals by implementing a systematic, disciplined approach to evaluating and improving the efficacy of risk management, internal control, and governance systems.

### **Key Achievements**

The Internal Audit Unit provided management and the Board with consulting and advisory services. This included attending council meetings, divisional meetings, audit and risk committee meetings, and senior management meetings. This improved compliance, internal controls, and adherence to corporate governance principles.

### **Key Observations**

- In the year 2022, the Council's internal control systems were adequate.
- While risk assessments have always been a part of the Risk management policy framework, they were added in 2020. The year 2022 saw the Covid-19 epidemic significantly reducing the audit space.
- Commercialization strategies were lagging at strategic business units. This had an impact on resource mobilization in addition to the grants and efforts of donors.

## 4. Challenges affecting Council Operations in 2022

Challenges	Recommendations
<ul style="list-style-type: none"> <li>• Stock outs of control pills during quarters 1 and 2.</li> <li>• Critical staff shortages with a high vacancy rate at 49.5% due to non-recruitment or replacement of staff</li> <li>• Shortage of packs in health facilities</li> <li>• Inadequate recreational &amp; edutainment equipment for the young people.</li> <li>• Limited promotional materials including branding (ASRH, Static clinics IEC materials &amp; job aids).</li> <li>• High attrition among peer educators due to late or nonpayment.</li> <li>• Old Mutual Pension Fund issue is resulting in a lot of uneasiness among staff members as it has not been completed on time.</li> <li>• The restructuring exercise affected the morale of staff members.</li> <li>• Disrupted internet connectivity and non-functional and damaged solar geysers, laundry equipment in the canteen and accommodation unit</li> </ul>	<ul style="list-style-type: none"> <li>• Resource Mobilisation in all sectors of the organisation to fund activities</li> <li>• Lobby the Government (treasury) to release the capital and operational grants on time</li> <li>• Staff recruitment</li> <li>• Include a post training follow up on the annual budget.</li> <li>• Procurement of equipment, materials, job aids for all departments</li> <li>• Prioritize the completion of the restructuring exercise.</li> <li>• Resume the Pharmacy Program to increase administration fees for contraceptives.</li> <li>• Review and maintain competitive administration fees for contraceptives.</li> </ul>

## 5. Conclusion

In summary, the Zimbabwe National Family Planning Council has made remarkable progress in fulfilling its mandate. Significant achievements were made in increasing modern Contraceptive Prevalence Rate (mCPR) from 66% to 68% while little was done towards the reduction of teenage pregnancy rate from 22% to 12% as planned in 2022. The organization's programs and services have reached diverse population groups in both urban and rural areas, and significant strides were made improving access to affordable family planning services, counseling, and educational programs. However, there is still more work to be done to ensure that reproductive health services remain a top priority in Zimbabwe's health agenda. ZNFPC is committed to continuing its efforts to improve the quality of life of Zimbabweans by promoting healthy reproductive choices and reducing the burden of disease associated with unplanned pregnancies. The ZNFP board of directors always provided advisory guidance while the MoHCC, funding partners, implementing partners and relevant stakeholders provided technical and financial support for the organisation to achieve its set goals under the most difficult times.

# 2022 Highlights



First Lady of the Republic of Zimbabwe, Dr Auxillia Mnangagwa touring the Zimbabwe National Family Planning Council stand at the 2022 World Contraception Day celebrations held in Rushinga, Mashonaland Central on the 11th of October 2022.



Vice President and Minister of Health and Child Care, Hon. Gen. (Rtd) (center) Dr. C.G.D.N Chiwenga launched the National Family Planning Strategy 2022-2026



Vice President and Minister of Health and Child Care, Hon. Gen. (Rtd) (center) Dr. C.G.D.N Chiwenga with Znfpc delegates at the International Conference on Family Planning (ICFP 2022) held in Pattaya City, Thailand

## 7. ANNEXURE 1: AUDITED 2022 FINANCIAL REPORT

# Rockstone

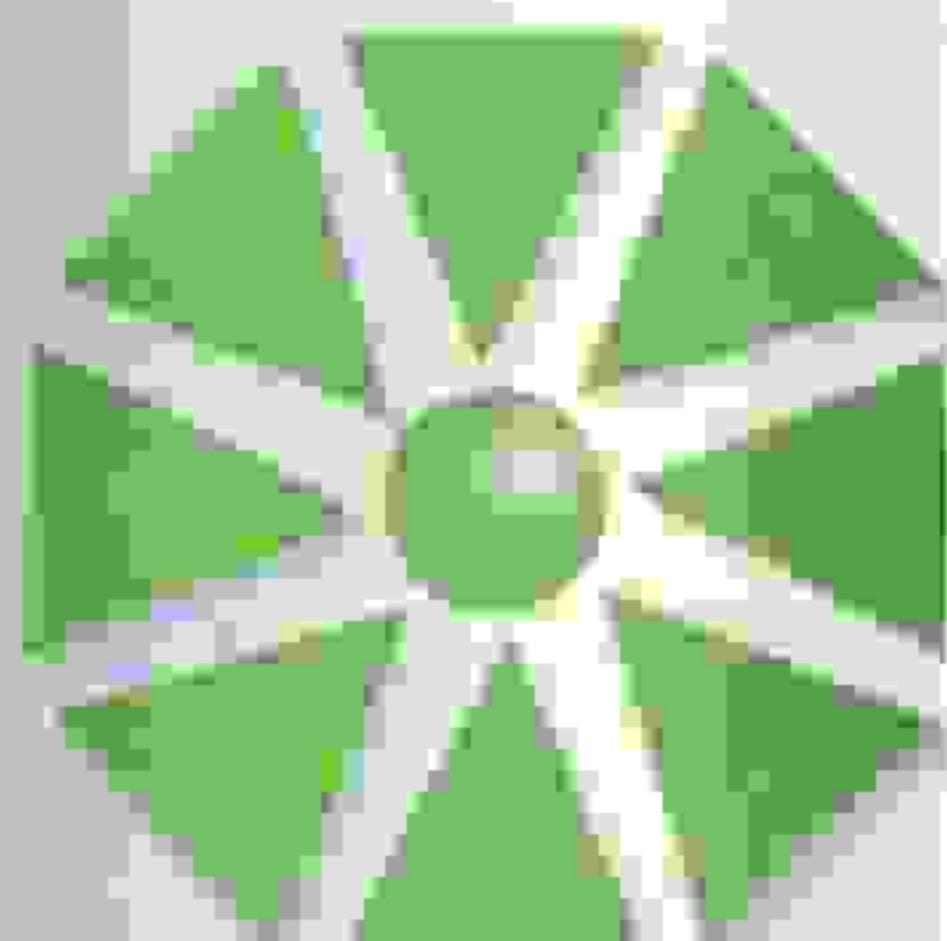
THE HIGHEST ACCOUNTING STANDARDS



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# **Zimbabwe National Energy Planning Council**

**Financial Statements for the period to 31 December 2022**

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<b>Statement of Financial Movements</b>	<b>IV</b>
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### Therapeutic Responsibility: Successes and Aspirations

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## INDUCTION



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1. The first step in the process of identifying a problem is to define the problem. This involves identifying the symptoms of the problem and determining the scope of the problem. Once the problem has been defined, the next step is to identify the causes of the problem. This involves identifying the factors that are contributing to the problem and determining the underlying causes. Once the causes have been identified, the next step is to develop a plan of action. This involves identifying the steps that need to be taken to solve the problem and determining the resources that will be needed to implement the plan. Finally, the last step is to implement the plan and monitor the results. This involves putting the plan into action and tracking the progress of the solution.

2311 *Journal of Interpersonal Violence* 28(11)[illegible][illegible]

Heruntergeladen von: Stefan Müller und Thomas Grottel am 04. November 2016 um 17:56 Uhr  
Seite 1 von 1

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# SHARPOV NATIONAL FAMILY PLANNING FUND

## STATEMENT OF CHANGES IN RESERVES

For the year ended December 31, 2022

	INFLATION ADJUSTED			
	Capital Reserve ZWL	Revaluation Reserve ZWL	Accumulated Reserve ZWL	Total ZWL
Balance at January 1, 2021	880 222 800	1 002 254 888	1 221 342 470	3 103 820 158
Transfer to Special Reserve			35 998 370	35 998 370
Balance at December 31, 2021	880 222 800	1 002 254 888	1 257 340 840	3 139 818 528
Revaluation of 2022			12 825 138	12 825 138
Balance at December 31, 2022	880 222 800	1 002 254 888	1 270 165 978	3 152 643 666
	IN RMB			
	Capital Reserve RMB	Revaluation Reserve RMB	Accumulated Reserve RMB	Total RMB
Balance at January 1, 2021	11 841 825	88 981 003	1 551 342 470	16 573 150
Transfer to Special Reserve			4 636 837	4 636 837
Balance at December 31, 2021	11 841 825	88 981 003	1 556 000 840	16 573 150
Revaluation of 2022			1 665 138	1 665 138
Balance at December 31, 2022	11 841 825	88 981 003	1 557 665 978	16 573 150

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## Zimbabwe National Energy Planning Council

### Financial Statements for the year ended 31 December 2022

#### Summary Policies

#### 1. Nature of business

The Council is a Statutory Body established by the Zimbabwe Energy Regulatory Authority (ZERA) under the Energy Regulatory Authority Act, Chapter 16:01.

It is a non-profit-making organisation.

It is a public body established by the Zimbabwean Government.

It is a public body established by the Zimbabwean Government.

It is a public body established by the Zimbabwean Government.

#### 2. Financial presentation

#### 2.1. Statement of Operations

The Council's financial statements are prepared on an accrual basis and are presented in the Zimbabwean dollar (Z\$).

#### 2.2. Basis of preparation

The Council's financial statements are prepared on an accrual basis and are presented in the Zimbabwean dollar (Z\$).

The Council's financial statements are prepared on an accrual basis and are presented in the Zimbabwean dollar (Z\$).

The Council's financial statements are prepared on an accrual basis and are presented in the Zimbabwean dollar (Z\$).

The Council's financial statements are prepared on an accrual basis and are presented in the Zimbabwean dollar (Z\$).

## Elimination Manual Entry/Posting Control

Financial Statements for the year ended 31 December 2015

### Accounting Policies

2. Presentation (continued)

2.2 Statement of comprehensive income (continued)

#### Elimination Accounts

The company's accounts are prepared on a double-entry basis and are prepared in accordance with the Companies Act 2006. The accounts are prepared on a double-entry basis and are prepared in accordance with the Companies Act 2006. The accounts are prepared on a double-entry basis and are prepared in accordance with the Companies Act 2006.

YSA		Income	Controlled Income
Q= 31		111.51	1.00
Q= 11		117.10	1.00
Q= 11		117.10	1.00

The above figures are based on the following assumptions:

1. The company's accounts are prepared on a double-entry basis and are prepared in accordance with the Companies Act 2006.
2. All items are transferred to the Income Statement and are prepared in accordance with the Companies Act 2006.
3. The company's accounts are prepared on a double-entry basis and are prepared in accordance with the Companies Act 2006.

2.3 Functional and presentation currency

The company's functional currency is the pound sterling and the presentation currency is the pound sterling. The company's functional currency is the pound sterling and the presentation currency is the pound sterling.

## ~~2020-21 National Family Planning Council~~

### ~~Financial Statements for the year ended 31 December 2022~~

#### ~~Accounting Policies~~

##### ~~2 Basis of preparation and continuity~~

##### ~~2.1 Basis of preparation and continuity~~

The accounts have been prepared on an accruals basis, and are prepared on a going concern basis. The accounts have been prepared on a going concern basis, and are prepared on a going concern basis. The accounts have been prepared on a going concern basis, and are prepared on a going concern basis.

##### ~~2.41 Financial instruments and related disclosures~~

The Council has no financial instruments. The Council has no financial instruments. The Council has no financial instruments. The Council has no financial instruments. The Council has no financial instruments.

##### ~~25 Non-current assets and liabilities~~

##### ~~25.1 Non-current assets and liabilities~~

The Council has no non-current assets and liabilities. The Council has no non-current assets and liabilities. The Council has no non-current assets and liabilities. The Council has no non-current assets and liabilities.

##### ~~25.2 Key standards, accounting policies and related disclosures~~

The Council has no key standards, accounting policies and related disclosures. The Council has no key standards, accounting policies and related disclosures. The Council has no key standards, accounting policies and related disclosures.

##### ~~25.3 Key standards, accounting policies and related disclosures~~

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## Zimbabwe National Family Planning Council

### Financial Statements for the year ended 31 October 2012

#### Accounting Policies

##### 1 Accounting policies

##### 1.1 Basis of preparation

##### 1.1.1 Recognition and measurement

Assets and liabilities are measured at fair value, which is the price that would be received from the disposal of an asset or the amount paid to settle a liability, in an orderly transaction in the principal market for the asset or liability at the measurement date.

##### 1.1.2 Depreciation

Depreciation is calculated on a straight-line basis over the estimated useful life of the asset. The useful life is determined by management based on the expected pattern of consumption of the asset's economic benefits.

Assets and liabilities are measured at fair value, which is the price that would be received from the disposal of an asset or the amount paid to settle a liability, in an orderly transaction in the principal market for the asset or liability at the measurement date.

Assets and liabilities are measured at fair value, which is the price that would be received from the disposal of an asset or the amount paid to settle a liability, in an orderly transaction in the principal market for the asset or liability at the measurement date.

##### 1.1.3 Recognition of provisions and contingencies

A provision is recognised when the Council has a present obligation (legal or constructive) as a result of a past event, and it is probable that an outflow of resources will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. A provision is measured at the best estimate of the amount required to settle the obligation at the end of the reporting period, taking into account the risks and uncertainties surrounding the obligation. Where the Council has a present obligation, but it is not probable that an outflow of resources will be required to settle the obligation, the obligation is classified as a contingent liability and is not recognised in the financial statements.

##### 1.2 Revenue

Revenue is recognised when the Council has a present obligation (legal or constructive) as a result of a past event, and it is probable that an outflow of resources will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation.

##### 1.3 Expenses

Expenses are recognised when the Council has a present obligation (legal or constructive) as a result of a past event, and it is probable that an outflow of resources will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. Expenses are measured at the best estimate of the amount required to settle the obligation at the end of the reporting period, taking into account the risks and uncertainties surrounding the obligation.

##### 1.4 Provisions

Provisions are recognised when the Council has a present obligation (legal or constructive) as a result of a past event, and it is probable that an outflow of resources will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. Provisions are measured at the best estimate of the amount required to settle the obligation at the end of the reporting period, taking into account the risks and uncertainties surrounding the obligation.

## Zimbabwe National Family Planning Council

Financial Statements for the year ended 31 December 2022

### Accounting Policy

#### 1. Accounting policies / methods

##### 1.1 Revenue and Cost Recognition

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

- (i) Revenue is recorded when:
- (a) the Council has no further obligations to the donor;
- (b) the Council has no further obligations to the donor;
- (c) the Council has no further obligations to the donor;
- (d) the Council has no further obligations to the donor;
- (e) the Council has no further obligations to the donor;

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

##### 1.2 Recognition of revenue and cost recognition

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

##### 1.3 Revenue from grants and contributions

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

##### 1.4 Revenue from fees

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.

##### 1.5 Revenue from donations

The Council recognizes revenue at the point the revenue is earned and is recorded as soon as the Council has no further obligations to the donor.





**Zimbabwe National Budget Planning Committee**  
**Financial Statements for the Year Ended 31 December 2022**  
**Accounting Policies**

**Accounting policies (continued)**

**Financial Instruments (continued)**

**2.4 Classification of Financial assets and liabilities**

- The classification of financial assets and liabilities is as follows:
- **Financial assets & liabilities measured at fair value**  
 The financial assets and liabilities are measured at fair value if they are held for trading or are designated as such at initial recognition. Fair value is the price that would be received for an asset or settled for a liability in an orderly market.
  - **Assets and liabilities measured at amortised cost**  
 The financial assets and liabilities are measured at amortised cost if they are held for the purpose of collecting contractual cash flows and are held for a fixed or determinable period.
  - **Financial liabilities**  
 The financial liabilities are measured at amortised cost if they are held for the purpose of collecting contractual cash flows and are held for a fixed or determinable period.

**2.5 Recognition of Financial assets**

Financial assets are recognised when the company has control over the asset and the asset is expected to generate future cash flows.

**2.6 Derecognition of Financial assets**

A financial asset is derecognised when the company has transferred all the risks and rewards of ownership of the asset to another entity.

**2.7 Impairment**

The company assesses impairment of financial assets at the end of each reporting period. An impairment loss is recognised if the carrying amount of the asset exceeds its recoverable amount.

**2.8 Provisions**

Provisions are recognised when the company has a present obligation (legal or constructive) as a result of a past event, and it is probable that an outflow of resources will be required to settle the obligation. A provision is measured at the best estimate of the amount required to settle the obligation at the end of the reporting period.

**2.9 Revenue**

Revenue is recognised when the company has transferred control of the goods or services to the customer, and the amount of revenue is measurable. Revenue is recognised at the net amount, after deducting discounts and returns. Revenue is recognised when the company has satisfied all the criteria for recognition.

**2.10 Related parties**

The company has disclosed the related parties and the transactions with them in the financial statements. The company has also disclosed the related parties and the transactions with them in the financial statements. The company has also disclosed the related parties and the transactions with them in the financial statements.



# STATE OF NEW YORK

## OFFICE OF THE COMPTROLLER

### REPORT ON THE FINANCIAL STATEMENTS

#### 2011-2012

	Line	Amount	Amount	Amount	Amount	Amount	Amount
	Item	2011	2012	2011	2012	2011	2012
1. General Fund		100,000,000	100,000,000	100,000,000	100,000,000	100,000,000	100,000,000
2. Capital Projects		50,000,000	50,000,000	50,000,000	50,000,000	50,000,000	50,000,000
3. Debt Service		20,000,000	20,000,000	20,000,000	20,000,000	20,000,000	20,000,000
4. Other		30,000,000	30,000,000	30,000,000	30,000,000	30,000,000	30,000,000
5. Total		200,000,000	200,000,000	200,000,000	200,000,000	200,000,000	200,000,000
6. General Fund		100,000,000	100,000,000	100,000,000	100,000,000	100,000,000	100,000,000
7. Capital Projects		50,000,000	50,000,000	50,000,000	50,000,000	50,000,000	50,000,000
8. Debt Service		20,000,000	20,000,000	20,000,000	20,000,000	20,000,000	20,000,000
9. Other		30,000,000	30,000,000	30,000,000	30,000,000	30,000,000	30,000,000
10. Total		200,000,000	200,000,000	200,000,000	200,000,000	200,000,000	200,000,000

**CHUCK HARRIS & FAMILY - LAWRENCE COUNTY**  
**2022 ANNUAL FINANCIAL STATEMENT**  
 2022-23 FISCAL YEAR 06/01/2022 - 05/31/2023

	DEBITED		CREDITED	
	2022	2023	2022	2023
<b>Income</b>				
<b>Operating</b>				
<b>Revenue</b>	1,000,000.00	1,000,000.00	1,000,000.00	1,000,000.00
<b>Expenses</b>	(500,000.00)	(500,000.00)	(500,000.00)	(500,000.00)
<b>Net Operating</b>	500,000.00	500,000.00	500,000.00	500,000.00
<b>Non-Operating</b>				
<b>Revenue</b>	100,000.00	100,000.00	100,000.00	100,000.00
<b>Expenses</b>	(50,000.00)	(50,000.00)	(50,000.00)	(50,000.00)
<b>Net Non-Operating</b>	50,000.00	50,000.00	50,000.00	50,000.00
<b>Total Income</b>	550,000.00	550,000.00	550,000.00	550,000.00
<b>Expenses</b>				
<b>Operating</b>				
<b>Revenue</b>	1,000,000.00	1,000,000.00	1,000,000.00	1,000,000.00
<b>Expenses</b>	(500,000.00)	(500,000.00)	(500,000.00)	(500,000.00)
<b>Net Operating</b>	500,000.00	500,000.00	500,000.00	500,000.00
<b>Non-Operating</b>				
<b>Revenue</b>	100,000.00	100,000.00	100,000.00	100,000.00
<b>Expenses</b>	(50,000.00)	(50,000.00)	(50,000.00)	(50,000.00)
<b>Net Non-Operating</b>	50,000.00	50,000.00	50,000.00	50,000.00
<b>Total Expenses</b>	550,000.00	550,000.00	550,000.00	550,000.00
<b>Net Income</b>	0.00	0.00	0.00	0.00

# 2019-2020 FINANCIAL STATEMENTS

## STATE OF THE FINANCIAL STATEMENTS

For the year ended December 31, 2019

	2019-2020		2018-2019	
	2019-2020	2018-2019	2019-2020	2018-2019
	2019-2020	2018-2019	2019-2020	2018-2019
1. <b>Assets</b>				
Current Assets				
Cash and cash equivalents	11,215,000	12,111,000	11,215,000	12,111,000
Accounts receivable	1,000,000	1,000,000	1,000,000	1,000,000
Prepaid expenses	100,000	100,000	100,000	100,000
Other current assets	100,000	100,000	100,000	100,000
<b>Total Current Assets</b>	<b>12,415,000</b>	<b>13,311,000</b>	<b>12,415,000</b>	<b>13,311,000</b>
Non-current Assets				
Property, plant and equipment	10,000,000	10,000,000	10,000,000	10,000,000
Intangible assets	1,000,000	1,000,000	1,000,000	1,000,000
Other non-current assets	1,000,000	1,000,000	1,000,000	1,000,000
<b>Total Non-current Assets</b>	<b>12,000,000</b>	<b>12,000,000</b>	<b>12,000,000</b>	<b>12,000,000</b>
<b>Total Assets</b>	<b>24,415,000</b>	<b>25,311,000</b>	<b>24,415,000</b>	<b>25,311,000</b>
2. <b>Liabilities</b>				
Current Liabilities				
Accounts payable	1,000,000	1,000,000	1,000,000	1,000,000
Short-term debt	1,000,000	1,000,000	1,000,000	1,000,000
Other current liabilities	1,000,000	1,000,000	1,000,000	1,000,000
<b>Total Current Liabilities</b>	<b>3,000,000</b>	<b>3,000,000</b>	<b>3,000,000</b>	<b>3,000,000</b>
Non-current Liabilities				
Long-term debt	10,000,000	10,000,000	10,000,000	10,000,000
Other non-current liabilities	1,000,000	1,000,000	1,000,000	1,000,000
<b>Total Non-current Liabilities</b>	<b>11,000,000</b>	<b>11,000,000</b>	<b>11,000,000</b>	<b>11,000,000</b>
<b>Total Liabilities</b>	<b>14,000,000</b>	<b>14,000,000</b>	<b>14,000,000</b>	<b>14,000,000</b>
3. <b>Equity</b>				
Equity				
Capital	10,000,000	10,000,000	10,000,000	10,000,000
Reserves	10,000,000	10,000,000	10,000,000	10,000,000
<b>Total Equity</b>	<b>20,415,000</b>	<b>21,311,000</b>	<b>20,415,000</b>	<b>21,311,000</b>
<b>Total Liabilities and Equity</b>	<b>24,415,000</b>	<b>25,311,000</b>	<b>24,415,000</b>	<b>25,311,000</b>

## 069-0884-7884 and 069-0884-7884







# Zimbabwe National Exports Training Council

## Financial Statements for the year ended 31 December 2022

### Note 8.16: The Details of Expenditure

#### 10. Staff Wages

#### 10.1 Expenditure on Salaries

Expenditure on salaries is shown in the statement of financial performance. The total of salaries and wages paid to staff is shown in the statement of financial performance and the statement of financial position.

Expenditure on salaries is shown in the statement of financial performance and the statement of financial position. The total of salaries and wages paid to staff is shown in the statement of financial performance and the statement of financial position.

#### 10.2 Expenditure on Pension Contributions

Expenditure on pension contributions is shown in the statement of financial performance and the statement of financial position. The total of pension contributions paid to staff is shown in the statement of financial performance and the statement of financial position.

#### 10.3 Expenditure on Medical Contributions

Expenditure on medical contributions is shown in the statement of financial performance and the statement of financial position. The total of medical contributions paid to staff is shown in the statement of financial performance and the statement of financial position.

#### 10.4 Expenditure on Insurance Contributions

Expenditure on insurance contributions is shown in the statement of financial performance and the statement of financial position. The total of insurance contributions paid to staff is shown in the statement of financial performance and the statement of financial position.

#### 10.5 Expenditure on Other Contributions

Expenditure on other contributions is shown in the statement of financial performance and the statement of financial position. The total of other contributions paid to staff is shown in the statement of financial performance and the statement of financial position.

Expenditure on other contributions is shown in the statement of financial performance and the statement of financial position.

Expenditure on other contributions is shown in the statement of financial performance and the statement of financial position.

Expenditure on other contributions is shown in the statement of financial performance and the statement of financial position. The total of other contributions paid to staff is shown in the statement of financial performance and the statement of financial position.

# Zimbabwe National Examinations Council

## Financial Statement for the year ended 31 December 2022

### Notes to the Financial Statements

20. Going Concern  
The financial statements are prepared on a going concern basis. The directors have a duty to ensure that the company is able to continue to operate for the foreseeable future. The directors have reviewed the company's financial position and the cash flow forecasts for the year ending 31 December 2023 and are satisfied that the company is a going concern.
21. Dividends  
The directors have recommended a dividend of 10% for the year ending 31 December 2022. The dividend is payable on 15 January 2023 to shareholders who are registered in the company's register of members as at 31 December 2022.
22. Subsequent events  
There have been no subsequent events that require disclosure in the financial statements.



# **CORPORATE GOVERNANCE REPORT FOR THE YEAR ENDED 31 DECEMBER 2022**

## **1. Introduction**

- 1.1 The Zimbabwe National Family Planning Council\_ZNFPC was committed to complying with good corporate governance principles and practices in executing its mandate that contributes to achieving the goals of National Development Strategy (NDS) 1 (2021 – 2025) and National Vision 2030.
- 1.2 This Annual Corporate Governance report is premised on a framework that addresses the key elements of effective corporate governance as outlined below:
- a) Board Appointment and Composition
  - b) Tenure of Chief Executive Officer
  - c) Conflict of Interest and Declaration of Assets
  - d) Board Induction and Training
  - e) Conduct of Board meetings
  - f) Performance Contracts and Monitoring
  - g) Remuneration and benefits
  - h) Governance Documents
  - i) Strategic Plan Document
  - j) Conduct of Annual General Meeting
- 1.3 As a baseline, the Zimbabwe National Family Planning Council was rated at the medium compliance level in the first Compliance Assessment conducted by the Corporate Governance Unit in 2020 for the Group Category of Non-Commercial State Enterprises and Parastatals.
- 1.4 The Zimbabwe National Family Planning Council completed and submitted the Annual Compliance Assessment Questionnaire for the year 2022 and submitted to the Corporate Governance Unit for consideration. We are yet to receive the assessments for the subsequent years if they are available.

## **2. Regulatory Framework**

- 2.1 The functions of the Zimbabwe National Family Planning Council are set out in Section 22 of the establishing statute namely the Zimbabwe National Family Planning Council Act of 1985 (Chapter 15:11).
- 2.2 Other Legislative instruments that govern the Council in its operations are the Constitution of Zimbabwe Amendment Act (No. 20) of 2013, Public Entities Corporate Governance Act (Chapter 10:31), Public Health Act 2022, (Chapter 15:09), Public Procurement and Disposal of Public Assets Act (Chapter 22:23), Public Finance Management Act (Chapter 22:19), Labour Act (Chapter 28:01).
- 2.3 The Ministry of Health and Child Care, the Parliamentary Portfolio Committee on Health and Child Care, the Corporate Governance Unit and the Office of the Auditor General provide an oversight function on the operations of the Council.

### **3. Preparation and Audit of Financial Statements**

- 3.1 The Board exercised oversight on the financial reporting process during the year ended 31<sup>st</sup> December 2022. The Board therefore confirms responsibility for the preparation and fair presentation of the financial statements in accordance with International Financial Reporting Standards (IFRS) and in the manner required by the Zimbabwe National Family Planning Council Act (Chapter 15:11). The Board performed their fiduciary duties.
- 3.2 The Council's financial statements for the year ended 31 December 2022 were audited by Rockstone Chartered Accountants in accordance with the Public Accountants and Auditors Act (Chapter 27:12) and other applicable legislation such as Section 30 of the Zimbabwe National Family Planning Council Act (Chapter 15:11), Section 6 of the Audit Office Act Chapter (22:18), Section 36 b) of the Public Entities Corporate Governance Act, (Chapter 10:31) and Public Finance Management Act (Chapter 22:19).
- 3.3 The Auditors expressed the opinion that the financial statements presented fairly in all material respects the financial position of the Zimbabwe National Family Planning Council, financial performance and cash flows for the year ended 31 December 2022. The auditors affirmed that they conducted the audit in accordance with International Standards on Auditing (ISAs).
- 3.4 The Audit Committee Meeting of the Zimbabwe National Board of Family Planning held on 11 August 2023 adopted the audited financial statements.
- 3.5 The Council also has an established Internal Audit Department which reports directly to the Audit Committee of the Board. The Internal Audit Department operates within the framework of an approved Internal Audit Charter.

### **4. Board Appointment and Composition**

- 4.1 The Zimbabwe National Family Planning Council Board Members were appointed in terms Section 4 of the ZNFPC Act 1985 (Chapter 15:11). However, during the year under review the Board operated with five (5) Board members out of the nine (9) provided by the Act.
- 4.2 One additional board member was appointed in April 2023 and the appointment of three more board members is still outstanding. The Ministry is working on the appointment of the additional members with knowledge, experience and expertise in reproductive health, law and a representative from the Ministry.
- 4.3 Gender parity and balance in regional representation in the board composition was upset due to the outstanding replacements of the board members.

4.4 The list of board members in post as at 31 December 2022 is shown in the table below.

No.	Full Names	Nature of Membership
1.	Prof. Stanzia Moyo	Non-Executive (Acting Chairperson)
2.	Mr Dzikamai Rufu	Non-Executive (Acting Vice Chairperson)
3.	Mr David Mutizwa	Non-Executive Director
4.	Mr Tanyaradzwa Nyakatawa	Non-Executive Director
5.	Mrs Junior Muchuchu	Non-Executive Director
6.	Mr Benson Chikati	Acting Executive Director - Ex-Officio
7.	Mr Stanford Mundandishe	Acting Director Administration and Finance, Ex-Officio
8.	Mr Farai Machinga	Acting Director Technical Services, Ex Officio

## 5) **Board Committees**

5.1 The Board operated with five (5) sub-committees established in accordance with Sections 15-19 of the Public Entities Corporate Governance (General) Regulations, 2018 which assisted the Board in dealing with specialized issues and making recommendations to the Board.

5.2 The following Standing Committees are in place and mandated with specific terms of reference.

- a) Finance and Projects Committee
- b) Technical and Operations Committee
- c) Human Resources Management Committee
- d) Audit Committee and the
- e) Risk Management Committee

5.3 The membership and attendance of the board and committee members in respective meetings is shown in Tables 1-6 below:

**Table 1 - Finance and Projects Committee**

Full Names	Nature of Membership	No. of Meetings
Mr Dzikamai Rufu	Non-Executive (Chairperson)	4
Dr Stanzia Moyo	Non-Executive	4
Mr Tanyaradzwa Nyakatawa	Non-Executive	2
Mrs Junior Muchuchu	Non-Executive	0
Mr Benson Chikati	Acting Executive Director - Ex-Officio	2
Mr Stanford Mundandishe	Acting Director Administration and Finance - Ex-Officio	4
Mr. Farai Machinga	Acting Director Technical Services Ex-Officio	1
Mr Peter Machimbirike	Acting Director Administration and Finance Ex-Officio	2

**Table 2 - Technical and Operations Committee**

Full Names	Nature of Membership	No. of Meetings
Dr Stanzia Moyo	Non-Executive (Chairperson)	3
Mr Tanyaradzwa Nyakatawa	Non-Executive (Chairperson)	2
Dr Valerie J. Tagwira	Non-Executive	0
Mrs Junior Muchuchu	Non-Executive	4
Mr Benson Chikati	Acting Executive Director Ex-Officio	3
Mr Peter Machimbirike	Acting Director Technical Services Ex-Officio	3
Mr Farai Machinga	Acting Director Technical Services Ex-Officio	1

**Table 3 - Human Resources Management Committee**

Full Names	Nature of Membership	No. of Meetings
Mr Tanyaradzwa Nyakatawa	Non-Executive (Chairperson)	4
Mr Dzikamai Rufu	Non-Executive	4
Mr David Mutizwa	Non-Executive	4
Mr Benson Chikati	Acting Executive Director - Ex-Officio	4
Mr Stanford Mundandishe	Acting Director Administration and Finance - Ex-Officio	4

**Table 4 - Audit Committee**

Full Names	Nature of Membership	No. of Meetings
Mr David Mutizwa	Non-Executive (Chairperson)	4
Mrs Junior Muchuchu	Non-Executive	2
Mr Tanyaradzwa Nyakatawa	Non-Executive	2
Mr Stanford Mundandishe	Acting Director Administration and Finance Ex-Officio	3
Mr Peter Machimbirike	Acting Director Technical Services Ex-Officio	2
Mr Farai Machinga	Acting Director Technical Services Ex-Officio	1

**Table 5 - Risk Management Committee**

Full Names	Nature of Membership	No. of Meetings
Dr Valerie J. Tagwira	Non-Executive (Chairperson)	1
Mrs Junior Muchuchu	Non-Executive (Chairperson)	3
Dr Stanzia Moyo	Non-Executive	2
Mr Dzikamai Rufu	Non-Executive	4
Mr Benson Chikati	Acting Executive Director Ex-Officio	4
Mr Stanford Mundandishe	Acting Director Administration and Finance Ex-Officio	4
Mr Peter Machimbirike	Acting Director Technical Services - Ex-Officio	2
Mr Farai Machinga	Acting Director Technical Services - Ex-Officio	1

**Table 6 - Zimbabwe National Board of Family Planning**

Full Names	Nature of Membership	No. of Meetings
Dr Stanzia Moyo	Non-Executive (Acting Chairperson)	4
Mr Dzikamai Rufu	Non-Executive (Acting Vice Chairperson)	4
Mr David Mutizwa	Non-Executive	4
Mr Tanyaradzwa Nyakatawa	Non-Executive	4
Mrs Junior Muchuchu	Non-Executive	3
Mr Benson Chikati	Acting Executive Director - Ex-Officio	4
Mr Stanford Mundandishe	Acting Director Administration and Finance Ex-Officio	4
Mr Peter Machimbirike	Acting Director Technical Services - Ex-Officio	3
Mr Farai Machinga	Acting Director Technical Services Ex Officio	1

**6) Appointment of Executive Director**

- a) During the year under review Council did not have a substantive Executive Director in post. The tenure of office of former Executive Director expired on 31<sup>st</sup> December 2021 after serving the statutory period of two terms (10 years) as provided in Section 17 of the Public Entities Corporate Governance Act.
- b) The process of recruiting a substantive Executive Director was commenced and would be finalized as soon as the Board is fully constituted by the Honourable Minister of Health and Child Care. During the year under review the organization had an Acting Executive Director until this date.

**7) Conduct of Board Meetings**

- a) The holding of Board Meetings was regulated by the provisions of the Zimbabwe National Family Planning Council Act, 1985 (Chapter 15:11) and the Public Entities Corporate Governance Act 2018 (Chapter 10:31).
- b) The Board and its Committees held meetings once every quarter as provided in Section 33(1) and Section 20 of the Act and Regulations respectively. The calendar of Board and Committee meetings for the year was preplanned at the beginning of the year and shared with all members for diary management.
- c) The Board meetings provided the Directors with a platform to review the Council's operations, strategies and policies that would assist in delivering the mandate of the Council.
- d) Adequate minutes for meetings attended by the board members and senior staff were taken and kept on record. Resolutions of board meetings were submitted to the Office of the Permanent Secretary for Health and Child Care in line with provisions of the Public Entities Corporate Governance Act.



## **8) Annual General Meeting**

8.1 The Zimbabwe National Family Planning Council held their 1<sup>st</sup> Annual General Meeting for the year 2021 on Friday, 27 January 2023. The Annual General Meeting for the year ended 31 December 2022 was penciled for 30 November 2023.

8.2 All key stakeholders were invited to the meeting in accordance with Section 33(3) and Section 20 of the Public Entities Corporate Governance Act and Regulations respectively.

## **9) Conflict of Interest and Declaration of Assets**

9.1 The declaration of conflict of interest was included as an item on the agenda of meetings to ensure compliance with Section 37 of the Public Entities Corporate Governance Act. Both Board members and senior management attending Board and Committee meetings signed declaration of conflict registers upon commencement of every meeting. No conflict of interest on matters on the agenda were recorded during the year under review.

9.2 The declaration of assets forms were completed by both board members and Executive management in compliance with the provisions of Section 37 of Public Entities Corporate Governance Act.

## **10) Remuneration and Benefits**

10.1 Board members were paid quarterly retainer fees and sitting allowances based on circulars issued by the Office of President and Cabinet. The rates were based on amounts determined by the size and financial performance of the Council.

10.2 The ZNFPC was placed in the functional category of non-commercial public entities Size 6 based on average asset base and turnover as derived from audited financial statements.

10.3 The remuneration package for Council senior staff members are based on health service salary key scales received from the Ministry of Health and Child Care and model conditions of service guidelines from the Office of the President and Cabinet.

## **11) Performance Contracts and Monitoring**

11.1 During the year under review, in February 2022, both the Board Chairperson and the Executive Director signed performance contracts. The contracts were submitted to both the line Ministry and the Corporate Governance Unit.

11.2 The Board conducted quarterly performance reviews of the Executive Director based on the signed performance contract.

11.3 The Board also conducted the board self-evaluation for the Chairperson of the Board, individual Board Members and the entire Board in line with the requirements of the Public Entities Corporate Governance Act.

## **12) Corporate Governance Documents**

- 12.1 In line with Section 26 of the Public Entities Corporate Governance Act, drafts of the Board Charter and Code of Ethics were developed and approved by the Board during the year under review.
- 12.2 The documents were submitted to the Ministry of Health and Child Care for review. Input from the Legal Officers of the Ministry was received this year and factored into the final drafts which were resubmitted for further approvals.
- 12.3 The Annual Report and Audited Financial Statements for the 2022 financial year were prepared in accordance with International Financial Reporting Standards (IFRS). The Annual Report was uploaded on the Council's Website for access to members of the public.
- 12.4 In addition, the Council was operating in line with the approved Strategy for the period 2022 to 2026. The strategy document was also uploaded on the Council's Website in line with the corporate governance requirements.