



More than Health: A National Investment Strategy

Executive Summary

Zimbabwe's family planning (FP) programme faces a growing financing gap as donor support declines while demand continues to rise. Without a clear and sustainable domestic financing strategy, the country risks reversing gains in contraceptive access, maternal health, and socio-economic development. This policy brief presents evidence on the importance of FP investments and outlines actionable policy options to strengthen domestic financing, expand access, and ensure long-term sustainability.

Key Messages

- Family Planning saves lives, boosts productivity and growth, and eases government costs.
- Zimbabwe risks reversing gains in family planning without a sustainable domestic financing strategy.
- Family planning is not population control - it enables healthy timing and spacing of pregnancies.
- Family planning is a driver of women's empowerment, labour force participation, and economic growth.
- Youth require integrated support that combines access to services with economic empowerment.
- Male involvement is essential to improve uptake and shared reproductive decision-making.

Problem Statement

Zimbabwe's population is growing steadily, driven by a youthful age structure (32% ages 10 – 24 years and 59% below 25 years) and persistently high fertility rates (approximately four children per woman). The population is projected to increase from 16.2 million in 2026 to 21.2 million by 2042 (ZIMSTAT Population Projections, 2022). While modern contraceptive prevalence has improved significantly for all women, from 36% in 1999 to 51% in 2026, demand for family planning services remains high (Zimbabwe Demographic and Health Survey, 2023-4).

At the same time, Zimbabwe faces serious challenges in ensuring a reliable supply of contraceptives. Family planning programmes have historically relied heavily on external donor funding, particularly from UNFPA, USAID, SIDA, and other partners. However, global financing is shrinking, and future donor commitments are increasingly uncertain.

Annually, Zimbabwe requires an average of US\$16 million for contraceptives, of which US\$8 million is for condoms and US\$8 million for other contraceptives. From 2022 to date, the Government of Zimbabwe has availed US\$7 million towards the procurement of contraceptives through the compact of agreement arrangement.

Funding Source	2026 (US\$)	2027 (US\$)	2028 (US\$)	2029 (US\$)
Govt	2.25 million	2.50 million	TBD	TBD
UNFPA	4.02 million	TBD	TBD	TBD
GFATM	5.43 million	TBD	TBD	TBD
Funding Gap	4.76 million	10.97 million	16.10 million	13.56 million
Total	16.46 million	13.47 million	16.10 million	13.56 million

Source: National Condoms and Contraceptives Quantification Report, 2026.

Policy Options

Investments in family planning are among the most cost-effective development interventions available. Every dollar (US\$1) invested in family planning yields significant returns across health, education, economic growth, and environmental sustainability. The evidence presented in this brief demonstrates the measurable, quantifiable benefits of sustaining and expanding Zimbabwe's family planning programs.

Economic and Social Returns

- Investments in family planning and reproductive health generate substantial economic and social returns for Zimbabwe. Evidence indicates that every dollar (US\$1) invested helps save more than two dollars (US\$2) in safe motherhood programs. Beyond health, Family Planning enables women to pursue education and employment opportunities, helping families and communities to thrive. Access to Family Planning supports public health, advances gender equality, strengthens health systems and promotes economic development.
- When families are able to plan their size, households can invest more in each child's nutrition, education and health. This strengthens human capital and improves overall well-being.
- Family Planning helps create a stronger workforce by ensuring more people are healthy, educated and ready to contribute productively to the economy. This sets the stage for faster economic growth.
- The most compelling evidence for family planning investment is its direct impact on saving lives. Contraceptive use reduces maternal, infant, and child mortality through fewer high-risk pregnancies, better birth spacing, and improved nutrition.

Cumulative Deaths Averted (2024–2054)

Under 5 Deaths Averted	13.4 million
Maternal Deaths Averted	66.9 thousand
Infant Deaths Averted	3.2 million

Source: Zimbabwe Health and Economic Impact of Family Planning Report, 2026.

Key Policy Issues

1. **Increased domestic financing** – Policy must prioritize long term budget allocations and timely disbursements.
2. **Adopt innovative Financing mechanisms for Family Planning programming** – Policies should ensure adoption of innovative financing mechanisms eg. to include FP on National Health Provision Program (NHPP) Benefits Package, AIDS Levy, Airtime Levy
3. **Strengthen Adolescent and Youth Access** – policies to ensure age-appropriate information is provided and eliminating barriers to access to protect the adolescents from HIV, STIs and SGBV.
4. **Gender and Women empowerment** – Policies should integrate Family Planning into gender equality strategies, ensuring women can make informed reproductive choices.
5. **Equity and Access** – Address geographic disparities, cultural barriers, and affordability to ensure national coverage.
6. **Strengthen Policy and Legal Frameworks**- Review/develop the National Population Policy and integrate family planning into broader national development strategies

Recommendations

1. **Secure Sustainable Domestic Financing for Family Planning** – *Budget, Finance and Investment Promotion.*
 - Ring-fence funding for contraceptive procurement
 - Increase government contributions progressively to reduce donor dependency
 - Ensure timely release of allocated funds
2. **Establish Innovative Financing Mechanisms** - *Budget, Finance and Investment Promotion.*
 - Include family planning in the National Health Insurance package
 - Allocate resources from existing financing streams (e.g., AIDS Levy)
 - Strengthen private sector partnerships for contraceptive financing.
3. **Strengthen Adolescent and Youth Access** - *Youth Empowerment, Development and Vocational Training.*
 - Provide age-appropriate sexual and reproductive health information.
 - Scale up adolescent-focused family planning services
 - Link services with education and economic empowerment initiatives
4. **Strengthen Equity, Access, and Community Systems** - *Health and Child Care.*
 - Prioritize underserved rural and hard-to-reach communities ensuring responsiveness to diverse needs and the inclusion of persons with disabilities.
 - Strengthen community-based distribution systems.
 - Address social and cultural barriers that limit access to services.
 - Integrate male engagement into sexual and reproductive health programmes.
5. **Integrate Family Planning into National Development Planning** – *Budget, Finance and Investment Promotion.*
 - Mainstream family planning in education, employment, and gender policies.
 - Accelerate development of the National Population Policy.
 - Recognize family planning as a strategic investment in human capital and economic growth.

Conclusion

Zimbabwe stands at a critical juncture. Rising demand for family planning services, combined with declining donor support, presents an urgent need for sustainable financing solutions. Strengthening domestic investment, adopting innovative funding approaches, and expanding equitable access will safeguard the gains made. This will position family planning as a cornerstone of national development.

References

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