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An article from the United Church of Christ in Zimbabwe on the Impact of USAID Closure in Zimbabwe.

INTRODUCTION

In recent years, the closure of United States Agency for International Development (USAID) programs in Zimbabwe has had considerable implications for the country's socio-economic landscape. As one of the largest international donors, USAID has played a critical role in providing humanitarian aid, health support, and economic assistance. The exit of USAID has triggered notable job losses and severely affected access to antiretroviral therapy (ART) for HIV and AIDS patients, intensifying existing challenges within the healthcare and socio-economic systems of Zimbabwe. The USAID announced its recent plan to exit the Zimbabwean economic landscape has sent massive shocks within the Zimbabwean employment sector with quite a few citizens who were depending on this organisation for employment lost their jobs.

Employment Impact

USAID and its partner organizations have been instrumental in creating employment opportunities across various sectors in Zimbabwe. Prior to its closure, USAID supported an estimated 40,000 jobs, directly and indirectly, in fields ranging from healthcare to agriculture and education. The loss of this funding has led to significant redundancies as programs scale back or cease altogether due to funding shortages. This has significantly increased the suffering of many families in Zimbabwe whose survival was premised on their employment status with the USAID. Statistics indicate that the abrupt end of these programs has left over 15,000 workers unemployed, particularly affecting those involved in community health initiatives, agricultural support, and educational outreach. The ramifications of this loss extend beyond immediate joblessness; entire communities that relied on these jobs for income and stability are now facing socioeconomic degradation.

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Access to Antiretroviral Therapy (ART)

One of the most concerning shifts following USAID's withdrawal is the profound impact on access to essential healthcare services, particularly antiretroviral therapy for HIV and AIDS. Before the reduction or closure of USAID programs, approximately 1.4 million individuals in Zimbabwe were receiving ART, significantly bolstered by USAID's contributions. The agency was responsible for facilitating access to medications, providing training to healthcare workers, and funding vital public health awareness campaigns. Following the shift in funding, reports show a decrease of about 25% in individuals able to receive consistent ART, translating to more than 350,000 people who suddenly lost access to life-saving medications. The disruption in electric reporting systems and absence of regular medication supply chains have further compounded the problem, leading to heightened risks of treatment interruption for those living with HIV.

Challenges in Other Humanitarian Programs

The closure of USAID programs has also dealt a blow to comprehensive humanitarian efforts that addressed food security, maternal and child health, and education. The World Food Program reported that food assistance in Zimbabwe has faced significant shortfalls, contributing to increased rates of malnutrition among vulnerable populations.

Girls and women, often the most affected by reductions in humanitarian aid, saw declines in educational and healthcare services, which disproportionately impacts their ability to access economic opportunities. According to UNICEF, girl child enrolment in schools has fallen by 12% since the decrease in international funding, which directly correlates with reduced support for educational programs.

Conclusion

The closure of USAID in Zimbabwe represents a significant loss for the nation, exacerbating existing vulnerabilities and diminishing the quality of life for thousands of citizens. The job losses combined with restricted access to ARVs, and essential humanitarian programs underscore the urgent need for alternative strategies to mitigate these impacts.

Continued advocacy and support from other international partners, government initiatives, and local NGOs will be crucial in addressing the gaps left by USAID's exit. Policymakers must prioritize funding and support for health and livelihood initiatives to safeguard the progress made in combating HIV and AIDS, ensuring that the most vulnerable populations in Zimbabwe are not left behind.

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