



ZIMBABWE ECID RESEARCH PROPOSAL

ACCESS TO HEALTH SERVICES FOR PwDs IN ZIMBABWE: A Case Of Manicaland
Province



BACKGROUND

- ▶ Overall disability prevalence in Zimbabwe is at 9 percent (9.4 percent female and 8.5 percent male).
- ▶ Disability prevalence in the ECID programme areas is 9.2% in Manicaland (9.6% female and 8.6% male) and 8.9% in Matebeleland North province (9.1% female and 8.6% male).
- ▶ PwDs are not enjoying their rights as enshrined in the country's 2013 Constitution.
- ▶ Current studies undertaken lack evidence on the intersectionality of challenges faced by PwDs in Zimbabwe.
- ▶ Social, physical, governance barriers exist that inhibit PwDs active and effective participation in development processes that affect their daily lives.



BACKGROUND Con'td

- ▶ The ECID Zimbabwe baseline survey identified Health, Education, WASH and Social Welfare as priority services for women and PwDs
- ▶ The ECID Zimbabwe baseline survey already indicated that 89.5% of the respondents find it important for PwDs to be involved in decision-making processes.
- ▶ The newly launched five-year (2021-2025) National Development Strategy (NDS1) makes it imperative that its implementation is informed by disaggregated data to ensure the mainstreaming of disability issues across all sectors



RESEARCH OBJECTIVES

1. Assess and understand the nature and extent of barriers to access to health by PwDs.
2. Explore the extent and impact of marginalization of PwDs in health service decision-making.
3. Recommend policies and programmes that can be undertaken to improve access to affordable quality health services by PwDs.




RESEARCH QUESTIONS

WHAT ARE THE CHALLENGES FACED BY PwDs (women and men above the age of 18 years) IN MUTASA, MUTARE URBAN AND MUTARE RURAL DISTRICTS IN ACCESSING HEALTH SERVICES?

- i. What are the impacts of marginalization of PwDs in Mutasa, Mutare Urban and Mutare Rural Districts in decision making?
- ii. How can existing policies and programmes be improved to increase access of PwDs to quality health services?



LITERATURE REVIEW

- ▶ On-going
 - ▶ Some Literature reviewed so far with a special focus on Africa demonstrates culturally specific attitudes and beliefs that suggest a social or pluralistic model of disability which is more common than in the global North.
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CONCEPTUAL /THEORETICAL FRAMEWORK

- ▶ The Research proposes to employ the social Model Theory of Disability.
- ▶ A clear distinction is made between disability and impairment.
- ▶ The research will focus on disability and not necessarily impairment.



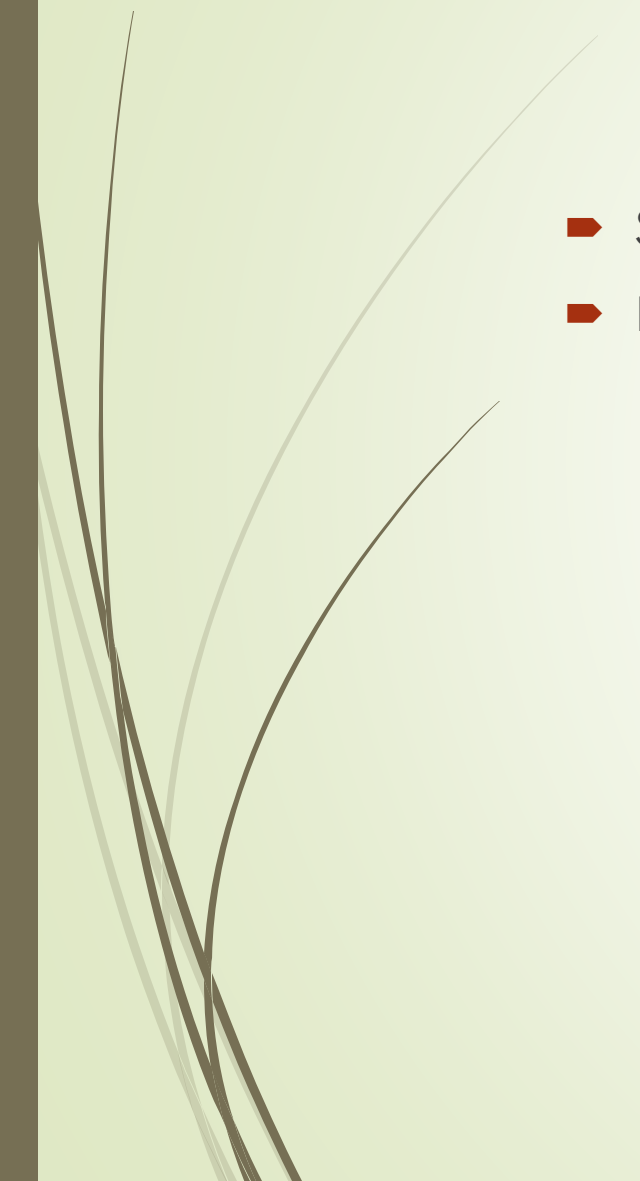
SAMPLING



- The research will be undertaken in one of the ECID project sites, covering three districts.
- The target group will be women and men above the age of 18 years living with disability.
- The sample group will however not include people with cognitive impairment.
- A subgroup consisting of care-givers might be considered.
- Participatory mapping of disability in the research area will be undertaken.



DATA COLLECTION METHODS

- ▶ Survey- this will be undertaken in collaboration with ZIMSTAT
 - ▶ KII, Observations, FGDs, Literature review
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AUDIENCE AND USE OF FINDINGS

- Government line ministries
- Policy makers, Parliamentarians
- Local authorities, CSOs, INGOs
- Traditional leaders, Village Health Care workers
- ECID partners
- Private Sector
- Inform health policies & programs, budget allocations
- Debating & informing policies
- Inform programming & service delivery
- Influence attitude/behaviour
- Inform lobby and advocacy activities
- Design responsive Social Cooperate Responsibility initiatives.

ALIGNMENT INTEREST AND INFLUENCE MATRIX

- Village health workers
- Media (Manica Post, Herald, ZBC TV, Newsday)
- Residents Associations (Mutare Residents and Rate Payers Association)
- Leonard Cheshire Disability Zimbabwe,

(Aligned to the approach but not necessarily interested- engage)

- Government (Ministry of Public Service, labour and Social Welfare Ministry of Health & Ministry of Women Affairs, Community, Small and Medium Enterprises)
- Traditional Leaders in Mutare Rural and Mutasa Rural (Chiefs, Headmen, Village Heads)
- National Disability Organisation (NASCO, FODPZ)
- DPOs in Mutare Urban, Rural and Mutasa District
- National Statistics Agency (Zimstat)
- Local Authorities (Mutare City Council, Mutasa Rural District Council & Mutare Rural District Council)
- District Development Coordinators (Mutare and Mutasa)
- Manicaland Provincial District Development Coordinator
- Zimbabwe ECID Partners
(Allies, have to collaborate)



ALIGNMENT INTEREST AND INFLUENCE MATRIX

- Other CSOs
 - INGOs (UN Family)
 - Private Sector (Confederation of Zimbabwe Industries, Zimbabwe National Chamber of Commerce)
- (Not interested – steer interest)

- Parliament of Zimbabwe
 - Academic institutions
- (not interested- persuade)



RESEARCH ETHICS

- ▶ Follow informed consent rules
- ▶ Respect confidentiality and Privacy
- ▶ Uphold Professionalism at all times
- ▶ Project not involving children
- ▶ Research participants will not be forced to participate, can decline to answer certain questions and can withdraw anytime if they feel uncomfortable,
- ▶ Research enumerators to be trained in the Do-No-Harm Principles & Research Ethics
- ▶ All collected data will only be used for intend purposes, stored in secure storage systems (password protected laptops, locked up external hard-drive).
- ▶ Research outputs will be made easily accessible to all interested parties (through hard copies and on all PRFT online platforms)
- ▶ Dedicated safeguarding officer and will share contacts with communities.