

TI Z PERSPECTIVE ON TRANSPARENCY ACCOUNTABILITY AND INTEGRITY (TAI) IN THE PUBLIC HEALTH CARE SECTOR: THE ROLE OF PARLIAMENTARY OVERSIGHT

1. INTRODUCTION

This paper aims to add more perspectives to enhance discussions on how oversight bodies can effectively reinforce transparency, accountability and integrity (TAI) in the utilization of public resources for Zimbabwe’s public health care sector. Whilst there are multifaceted factors impacting on TAI in the public health care sector, TI Z locates the problem mainly in the area of public procurement. The reason for this emphasis is the vast amounts of public resources committed to public procurement, amounting to nearly 50% of total government expenditure annually (Dube, 2022). Indeed, any leakages which may arise from the public procurement process must be plugged to ensure value for money, and secure significant saving on resources as a strategy to unlock additional fiscal resources, which can expand productive capacity elsewhere for economic expansion (Dube, 2022).

There are different types of oversight bodies relevant to this topic, such as the legislature and regulatory bodies overseeing specific government

functions such as public procurement. However, the paper seeks to emphasise specifically how parliamentary oversight can effectively reinforce anti-corruption frameworks in public procurement to enable the country to respond optimally to public health emergencies. This is topical given the large public expenditure on COVID-19 goods and services by the Government of Zimbabwe (GoZ) in response to the pandemic. The paper will begin by highlighting specific concerns by civil society organisations (CSOs) on the usage of public health resources. It will also summarise reports from relevant CSO resource trackers and monitoring reports, government reports and the investigative media on the usage of COVID-19 public resources. It will then conclude by presenting opportunities which oversight bodies can exploit to effectively reinforce TAI in the health care sector.

Parliamentary oversight is defined as “the means by which parliament and parliamentarians, on behalf of the people, hold the government to account” (Inter-Parliamentary Union, IPU and United Nations Development Programme, UNDP 2017). It is one of the three main functions of

Parliament apart from representation and law-making. Ultimately, parliamentary oversight is a “means for holding the Executive accountable for its actions and for ensuring that it implements policies in accordance with the laws and budget passed by the parliament” (Agora 2022). In this regard, *financial accountability*, and *upholding the rule of law* are among the key standards to which the Executive is held during the parliamentary oversight process (Agora, 2022). Parliaments have unique tools at their disposal (e.g., questions, summons and interpellations) that allow them to hold the government to account, compared to other institutions. This makes parliamentary oversight the most powerful mechanism to ensure that the government guarantees citizens human rights, in particular the right to health in the context of the topic.

2. WHY THE USAGE OF PUBLIC HEALTH RESOURCES MATTERS TO CIVIL SOCIETY

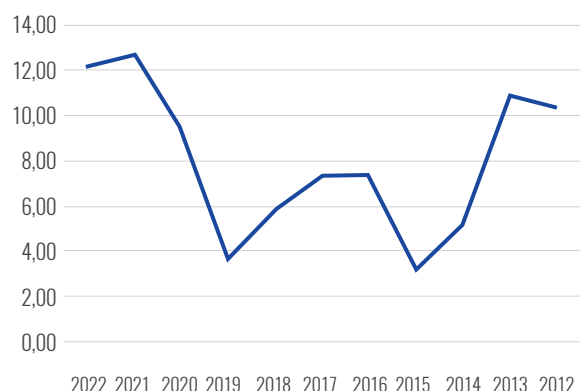
It is not delirium for local CSOs to be concerned with the manner in which public health resources in Zimbabwe are allocated and utilised. A few issues are necessary to highlight here noting the diversity of perspectives or viewpoints from which the issue can be assessed.

Firstly, from a resource perspective Zimbabwe is among the states which committed themselves in the Abuja Declaration on HIV/AIDS, Tuberculosis and other related Infectious Diseases to take all necessary measures to ensure that adequate resources are made available from all sources and that they are efficiently and effectively utilised (OAU, 2001). Furthermore, they pledged to set a target allocation of at least 15% of the national budget

towards the improvement of the health sector (OAU, 2001). However, as illustrated in the graph below Zimbabwe’s 2021-2022 health allocation was below the expected threshold, being only 13% of the national budget, falling short of Abuja *yet again* (Harris, 2021; Zimbabwe Democracy Institute, ZDI on Kubatana 2021). The recurrent under-allocation of resources in the health sector makes financial accountability *even more important*. This is because public health expenditure is a significant factor for health outcomes and is indeed a matter of life and death in the context of Zimbabwe. For instance, according to Makochehanwa and Madziva (2016), increases in public health expenditure have the positive impact of reducing infant and under-five mortality and increasing life expectancy.

Secondly, many developing countries struggled with the economic impacts of the COVID-19 pandemic including Zimbabwe. The main features of this struggle were stalled economic growth and massive unemployment, exacerbating prevailing levels of poverty and social exclusion. When this social and economic

FIGURE 1: ZIMBABWE BUDGET ALLOCATIONS TO HEALTH AND CHILD CARE 2012-2022



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crisis is viewed with a gender and social inclusion (GESI) lens,¹ the massive unemployment and shrinking opportunities had disproportionate impacts on specific groups based on their gender, nature and level of disability and geographic location. The disproportionate economic impacts meant that GoZ had to launch large scale programmes to procure COVID-19 vaccines and related goods and services. In addition, since COVID was also a health crisis, most people (considering the economic state in the country) became reliant on public health services - which meant more resources were required in the health sector.

Thirdly by their nature, public emergencies tend to necessitate the release of large amounts of resources in a short space of time necessitating higher levels of accountability with the greater complexity which comes in handling increased expenditure. To illustrate the scale of resources committed to COVID-19, in a pre-budget seminar in October 2021, the Minister of Finance and Economic Development (MoFED) announced that the country received US\$960 million in Special Drawing Rights (SDRs) (Ncube, 2021). He indicated that a detailed plan on the usage of the SDRs was developed consistent with IMF guidelines, and that the funds would be used prudently, with utmost accountability and transparency to support clearly visible impactful projects in a number of specified areas² (Ncube, 2021). The Minister also pledged to keep parliamentarians updated on SDR expenditures (Ncube, 2021). By September 2021, Zimbabwe had spent about US\$127 million towards procurement of vaccines, and commitment was also made to use the 'budget surplus' of

US\$100 million from the previous year for the same purpose (Ncube, 2021).

Unfortunately, the massive procurement programme created unprecedented opportunities for corruption. As is the tendency of large-scale relief programmes launched in the country from time to time, one factor promoting corruption was the huge influx of resources to address a national crisis before systems are strengthened first, whilst comprehensive checks and balances were set aside for expediency. Whilst such high levels of expenditure was being committed towards the pandemic in Zimbabwe (and other countries), traditional checks and balances took a back seat, as governments needing to respond quickly and efficiently to the emergency often struggled under archaic and ineffective, paper-based systems (Bleetman, and Metcalfe, 2020). In this context, several high-level corruption cases subsequently surfaced in 2020 which raised widespread debates over the country's procurement process, and the role of anti-corruption agencies and indeed oversight bodies in preventing grand corruption; as well as related risks and vulnerabilities within the COVID-19 public procurement cycle.

Fourth, GoZ also launched a programme in 2020 to disburse ZWL\$600 million (approximately USD\$8 million) in COVID-19 relief funds to the most vulnerable groups such as food insecure households, people with disabilities (PWDs), the elderly, chronically ill persons and child headed households (Mudzingwa, 2020; Mugoto, 2021). Other stakeholders such as Alibaba's Jack Ma (through the African Union) weighed-in with financial and in-kind donations (Xinhua, 2020).

¹ GESI is an approach emphasises that factors which exclude certain groups based on wide-ranging factors such as stereotypes, stigmas, and superstitions based or on their status such as gender and disability be analysed or addressed (World Bank, 2018).

² The specified areas included investments in social sectors namely health, education, and the vulnerable groups; Productive sectors that include: Industry (value chains in, coffee, cotton, and leather etc, pharmaceuticals) Agriculture (export revolving fund for horticulture as well as high impact climate proof/irrigation schemes) and Mining (access to equipment of SMEs and artisanal mining) Infrastructure investment covering roads (Mashonaland Central – Kanyemba) and housing (upgrading Mbare, Sakubva, Makokoba) etc. (Ncube, 2021).

Initially government claimed that the funds would be distributed via the Ministry of Public Service, Labour & Social Welfare (Mudzingwa, 2020). However, it quickly became apparent in the distribution of these funds, that the government had not done its homework in terms of objectively vetting beneficiaries to receive these resources. For instance, there was a criticism that they bunched the social welfare element together with the informal sector facility (Mudzingwa, 2020).

The distribution of the resources also raised eyebrows, with the money subsequently being distributed via a mobile money platform with limited market share (7%) which was a total departure from the Minister’s (MoFED) earlier commitment to disperse the funds through the Department of Social Welfare (Kunambura, 2020; Mugoto, 2021). The Minister then reportedly claimed that a “sophisticated algorithm” had been used to determine those eligible to receive funding, which some observers saw as testimony of government’s aversion to transparency and accountability (Mudzingwa, 2020; Kunambura, 2020), as well as the opening up of a new mechanism for patronage politics (Chipenda and Tom, 2021 in Mugoto, 2021).

Amidst public concern on government’s readiness to tackle COVID-19, there was a trickle of fragmented data from various government ministries departments and agencies (MDAs). TI Z in March 2020 wrote a formal request to the MoHCC (C.c. Ministry of Information) on a detailed distribution matrix as it relates to funds and aid meant for COVID-19. When there was no response, TI Z approached the High Court of Zimbabwe, which ordered the

ministry to release the information in the public interest on the 15th of September 2020. TI Z thereafter engaged the MoHCC to abide by the court order and was subsequently given the documentation relating to distribution of the related funds on 16 November 2020 (HC, 2020). TI Z continues to engage MoHCC and other relevant authorities requesting more data, to facilitate the regular publication of up-to-date information.

The actions by TI Z to approach the courts to access information on COVID-19 expenditure builds up on insights the CSO gleaned from its 2021 study on corruption in the public health care sector in Zimbabwe. According to the study by TI Z, corruption in Zimbabwe continues to have direct and indirect negative consequences on the performance of the public health system (Maguchu, Mundopa and Tshabangu, 2021). The common forms

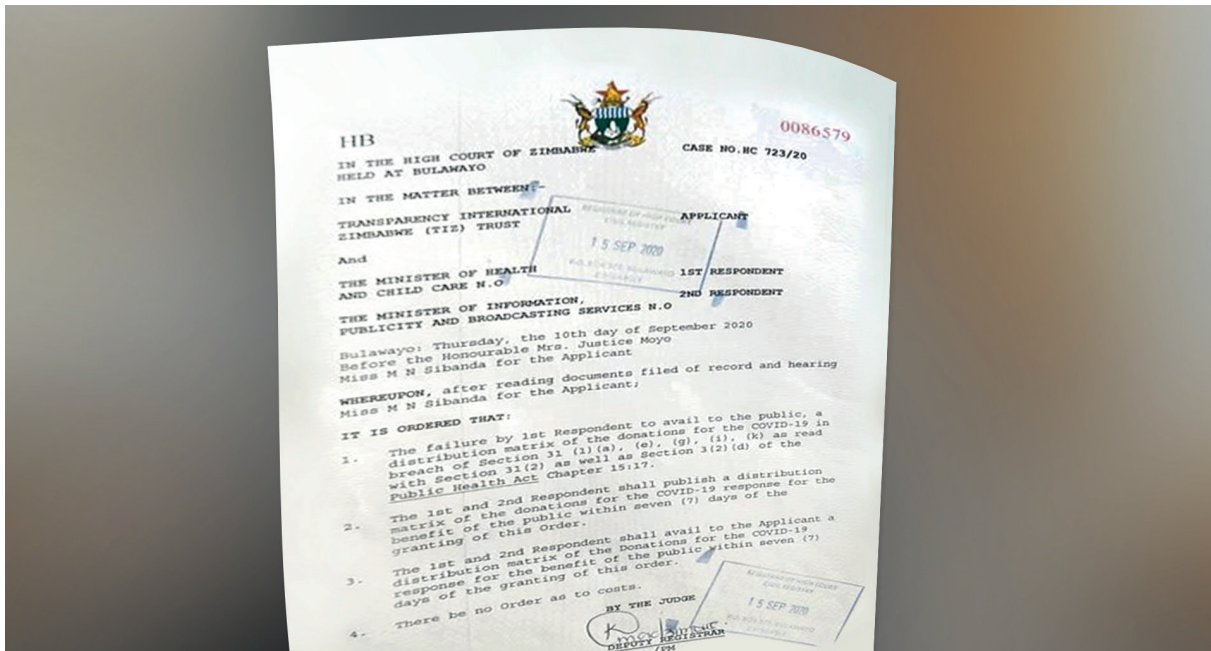


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TI Z used a freedom of information (FOI) request to make information on usage of public health resources openly available in the public interest.

of corruption were found to be procurement malpractices, theft of essential medicines (and subsequent diversion to grey markets), bribery, nepotism/favouritism and false referrals (Maguchu, Mundopa and Tshabangu, 2021). Not surprisingly, the report found that the outbreak of the COVID-19 pandemic amplified the deleterious impact of corruption on the overall performance of health systems as noted in the 2020 Corruption Perceptions Index (CPI) Report by Transparency International. The CPI report revealed that endemic corruption is weakening governments’ response to the pandemic, further threatening people’s health and livelihoods (Transparency International, 2021).

Hence whilst the foregoing does not present all perspectives within the diversity of CSOs on the topic, it is clear that the usage of public health resources is a genuine cause for concern to civil society seen through the lens of TAI.

3. THE STATE OF PLAY WITH USAGE OF COVID-19 PUBLIC RESOURCES

At the time of writing, the state of play with the usage of COVID-19 public resources paints a grim picture in terms of financial accountability. On 10 May 2022 the Office of the Auditor General (OAG) presented to the National Assembly a special audit report on the financial

The usage of public health resources matters to stakeholders due to recurrent under-allocations for meeting the Abuja threshold; the socio-economic fallout from the COVID-19 pandemic and the higher levels of financial accountability necessary to handle greater, more complex resource allocations for public health emergencies among other things.

management and utilization of public resources in combating COVID-19 in the country in terms of Section 11 of the Audit Office Act [Chapter 22:18]. The audit which had been conducted in 2021 with the support of the World Bank, was carried out in six out of ten provinces of the country where initiatives to address the COVID pandemic were introduced by government (OAG, 2021). Parliament tasked the Public Accounts Committee (PAC) to examine the report as part of its oversight function over the Executive. The PAC submitted a report in May 2022 in response to the OAG's report. Both reports revealed that the intended objectives of the publicly funded COVID-19 intervention were not achieved.

Several reasons are cited in both reports to explain why the intended objectives of the programme were not met. For example, weaknesses were identified in the procurement and control system related to ordering, delivery, invoicing and payment processes for goods and services. There was also inconsistent and inadequate record keeping among MDAs which, lacked updated or reliable information on the donations received and distributed; goods and services delivered and reports on the implementation status of the Government COVID-19 initiatives. The PAC was also concerned about the laxity by Ministries in maintaining records in the usage of COVID-19 funds (PAC, 2022). What is startling though, where the issue of financial accountability with public resources is concerned, is that the PAC's report observes that the MDAs involved failed to provide information and documentation required by the auditors in the agreed time, therefore the audit report was concluded with gaps (PAC, 2022).

The PAC therefore made recommendations to these Ministries, as well as the Zimbabwe

Anti-Corruption Commission (ZACC) and the Zimbabwe Republic Police (ZRP). For instance, the PAC pointed out that the ZRP and the ZACC should institute investigations on the matter of failure by the implementing Ministry to submit to the Committee a list of beneficiaries of fuel cited in one case, and the purpose for which they used the fuel within 180 days of tabling the report. In their view, the failure to submit was a clear case of concealing incriminating evidence (PAC, 2022).

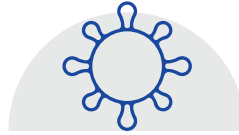
Over and above the worrying findings of the OAG and PAC, the abuses in the usage of COVID-19 relief funds are corroborated by other sources. For example, the 2021 Afrobarometer Study Report in Mugoto (2021) asserts that 90% of surveyed citizens said that they *did not* receive government COVID assistance. More importantly in the context of this topic, 54% of the surveyed population in that report believe that the bulk of the resources meant for COVID-19 response were lost to government corruption (Afrobarometer, 2021 in Mugoto, 2021). Linked to the foregoing point, TI Z (2022) has it on good authority that a womens' group which mobilised women in rural areas to register to receive the COVID-19 relief funds via the aforementioned mobile platform reports that their affiliates did not receive the resources at all. To borrow a metaphor from Schellekens and Sourrouille (2020), in Mugoto (2021) therefore, the corrupt acts perpetrated in the usage of public resources for COVID-19 acted with the incisiveness of a 'heat seeking missile' aiming for those in society who were least able to defend themselves.

Investigative journalists have also dug deep into the matter to unearth and document corruption related to public procurement during

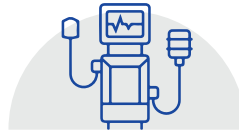
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COVID-19 crisis. Briefly, one report unearthed how COVID-19 funds which were meant to cushion citizens and minority groups through the aforementioned telecommunications company, was misused resulting in violation of the Public Finance Management (PFM) Act and related regulations (Newshawks, 2021). Just like the government departments who refused to give the PAC detailed information to complete their report above, the telecommunications company balked at the opportunity to clarify issues to the media (Newshawks, 2022a). Another report unearthed the existence of equipment donations lying idle at one of the country's central hospitals in Bulawayo (Mayo-Ndlovu, 2022). Anomalies in the procurement process of COVID-19 goods and services and the alleged misuse of the SDR funds were also highlighted by another investigative journalist (Newshawks, 2022c). Another report exposed an address in Buhera District which was allegedly used by 1,000 beneficiaries as a residential address for claiming COVID-19 relief funds (Chikodza, 2022). Finally, another report put into sharper focus the loopholes in the policy and institutional framework for public procurement which enabled looting of COVID-19 goods (Newshawks, 2022b).

Hence the foregoing demonstrates that public funding to guarantee the right to health is vulnerable to significant corruption risks, as highlighted by research and investigative reporting by TI Z, the OAG, the PAC and the media on the usage of COVID-19 funds.



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4. ENFORCING TRANSPARENCY AND ACCOUNTABILITY THROUGH EFFECTIVE PARLIAMENTARY OVERSIGHT

As highlighted above, parliamentary oversight is a powerful mechanism to ensure that the government guarantees citizens the right to health. “Parliamentarians play an essential role in health by enacting legislation, approving budgets and mobilizing resources, providing oversight to ensure government accountability and transparency, encouraging multisectoral action, ensuring national implementation of global commitments, fostering the participation of constituencies, and engaging in international partnerships” (WHO, 2022). Indeed, there are a number of opportunities which oversight bodies can exploit to effectively reinforce transparency and accountability in the health care sector.



Firstly, the amounts committed to addressing the COVID-19 challenge by MoFED have already been mentioned above, including the IMF’s SDR allocation. The PAC and other portfolio committees such as the Committee on Health and Child Care, can follow up on the pledge of regular reporting by MoFED above by tracking the implementation of these special COVID-19 projects against objectives and the amounts publicly stated.



A number of corruption prevention strategies have been mooted globally to plug the holes opened up by procurement of COVID-19 goods and services. One such mechanism is electronic government procurement (E-procurement) which is promoted as a mechanism to

institutionalise TAI in public procurement. The reduction in corruption through E-procurement mainly stems from the minimisation of human contact in public procurement (Dube, 2022). A multilateral development agency has gone some way in assisting the country to adopt E-procurement as part of a broad reform programme (Dube, 2022). Parliament should therefore continuously follow up with the relevant ministry on the full implementation of this plan, as well as allocating additional resources towards the realisation of this goal.



TI Z’s continuous analysis on corruption risks and vulnerabilities during emergencies has shown that there is no strict anti-corruption policy specific to the public procurement system resulting in a gap in the National Anti-Corruption Strategy (NACS). Since all commissions are supposed to report to parliament in line with section 323 of the constitution, the National Anti-Corruption Strategy Steering Committee (NACSSC) must include COVID-19 procurement on their agenda and reports to parliament so that resources in the health sector are used optimally.



Parliament should make effective use of the inexhaustive set of tools at its disposal to deliver on its oversight role on public health. These include hearings, written or oral parliamentary questions, summons, establishing committees of enquiry and oversight on government budget proposals and spending, to name a few (Agora, 2022 in Transparency International, 2022; Parliament of Zimbabwe, 2020). In particular, parliament must continue to use these to ‘follow the money trail’ in the usage of COVID-19 funds.



Parliament must continue analysing the reports from the OAG and call for stronger actions based on the findings. In addition, relevant parliamentary committees (especially the committee on Health and Child Care) should systematically keep track of government’s implementation of the OAG’s findings and recommendations on the use of COVID-19 resources. Where government is not taking action, parliament can use tools to hold the government to account. For instance, it can summon ministers and the relevant bureaucrats and censure government’s lack of action. Furthermore, parliamentarians can support the OAG to get information on time given the experience reported above.



Finally, Parliament cannot go it alone in tracking expenditures on COVID-19 incisively given the broad issues covered with limited resources (e.g., time, human, technical). In this regard, parliament (individual MPs, committees or parliamentary parties) must collaborate with the private sector, or specialised CSOs tracking such issues on behalf of various constituents to strengthen their oversight on COVID-19. Equally, CSOs need to continuously programme the task of supporting Parliamentary oversight over public resources spent on the right to health.

Government must also demonstrate political will on a whistle-blower policy and protection mechanism noting the challenges faced by specific segments in society. To illustrate this point, TI Z has found over the years that women are not forthcoming in terms of reporting corruption because of fear, lack of information as

well as cultural limitations i.e., socialization and organizational rank and hierarchy (Chiweshe and Bhatasara, 2019; Tavares in Mundopa, 2022). The low rate of conviction in high-profile corruption cases has been attributed to the intimidation of whistle-blowers and witnesses, so that they refuse to testify against suspects in court (The Chronicle, 2022). Research by TI Z in 2021 shows that the majority of the 2,583 citizens surveyed on Bribery in the Public Sector expressed low levels of confidence with organisations tasked to tackle corruption and their strategies and efforts (TI Z, 2022). This is despite the majority of them (69.3%) expressing high awareness of the existence of these anti-corruption institutions. More concerning is the fact that 70.1% of them preferred to report to family or friends instead of competent authorities, when asked by public officials to pay a bribe for a service (TIZ, 2022).

Besides its oversight role therefore, the parliament must make use of its legislative role to enhance TAI in the health sector. For years, various stakeholders have called for the adoption of a comprehensive, standalone whistle-blower protection legislation, and initial positive steps have been taken towards adoption of such a law. At the time of writing, in his state of the nation address (SONA) whilst opening the fifth session of the ninth parliament the President of Zimbabwe called for the tabling of the Public Interest Disclosure (Protection of the Whistle Blowers) Bill, and Witness Protection Bill during the session (Mnangagwa, 2022). Indeed, fear of retribution is a significant factor



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in the low levels of public participation in the anti-corruption fight (Mundopa, 2022). In this regard it is plausible to assert that the gaps in exposing the malfeasance under investigation by the PAC above would be complimented by information from brave whistle-blowers exposing individuals looting COVID-19 funds. However, this is only possible with the existence of a robust framework to support the whistle-blowers themselves. TI Z therefore encourages the relevant government departments and parliament to accelerate the enactment of a whistle-blower protection law.

To conclude, it is clear from the foregoing that the manner in which public health resources in Zimbabwe are allocated and utilised is a matter of genuine concern to any stakeholder concerned with TAI. The paper has highlighted the concerns with public health expenditure from a civic perspective. It has also presented the state of play with on the usage of health resources using COVID-19 as a case study. It has also presented opportunities and mechanism which parliamentary oversight bodies (complimented by efforts from likeminded stakeholders) can exploit to effectively reinforce TAI in the health care sector.

REFERENCES USED

1. Afrobarometer (2021) Zimbabweans endorse government's COVID-19 response but voice concerns about corruption and lack of assistance. Available at: https://afrobarometer.org/sites/default/files/publications/Dispatches/ad458-zimbabweans_endorse_covid_response_but_concerned_about_aid_and_corruption-afrobarometer_dispatch-17june21.pdf (Accessed 11 August 2021) in Mugoto
2. Agora 2022 [<https://www.agora-parl.org/resources/aoe/parliamentary-function-oversight> accessed 27/19/2022]
3. Bleetman, R., & Metcalfe, A., (2020) "New Models of Public Procurement: A Tool for Sustainable Recovery". United Kingdom: Association of Chartered Certified Accountants (ACCA)
4. Chipenda, C. and Tom, T., (2021) Zimbabwe's Social Policy Response to COVID-19: Temporary Food Relief and Cash Transfers. Available at <https://nbn-resolving.org/urn:nbn:de:0168-ssoar-72580-2> (Accessed 3 May 2021) in Mugoto, C.K. (2021)
5. Chiweshe, M., and Bhatasara, S., (2019) Gender and Corruption in Zimbabwe. Harare: Transparency International Zimbabwe
6. Dube, C., (2022). "E-Procurement as A Mechanism to Institutionalise Transparency and Accountability in procurement of Public COVID-19 Resources". Policy Brief Volume 2 Issue 1/2022. Transparency International Zimbabwe: Harare
7. Harris, L.B., (2021) "Health budget falls short of Abuja Declaration" in CITE [<https://cite.org.zw/health-budget-falls-short-of-abuja-declaration/> accessed 27.10.2022]
8. Government of Zimbabwe Constitution of Zimbabwe As amended up to 31st December 2018 Published by VERITAS
9. HC, 2020 (15 September 2020) 0086579 Transparency International Zimbabwe (TI Z) Trust vs The Minister of Health and Child Care 1
10. Inter-Parliamentary Union (IPU) and the United Nations Development Programme (UNDP) (2017) 'Global Parliamentary Report 2017' Publisher: UNDP [<https://www.undp.org/publications/global-parliamentary-report-2017> accessed 31.10.22]
11. Kunambura, A., (2020) "Zimbabwe: Transparency a Pipedream As Ncube Throws Algorithm Farce" [<https://allafrica.com/stories/202005010369.html> accessed 27.10.2020]
12. Makocheke, A., and Madziva, C. (2016) "Impact Of Public Health Expenditure On Health Outcomes in Zimbabwe (1980-2014)" University of Zimbabwe Business Review, Volume 4, No. 2, July-December 2016
13. Maguchu, P., Mundopa, M., and Tshabangu, N., (2021) "A Report on Corruption in the Public Health Sector in Zimbabwe", TI Z: Harare
14. Mayo-Ndlovu, T., (12 September 2022) '*Donated Equipment gathers Dust at UBH*' The Chronicle- [<https://www.chronicle.co.zw/donated-equipment-gathers-dust-at-ubh/#:~:text=An%20investigation%20by%20Chronicle%20revealed,they%20were%20donated%20last%20year> accessed 27.10.2022].
15. Ministry of Finance and Economic Development (2012-2022). The National Budget Statements Presented to The Parliament of Zimbabwe for the years 2012-2022. Government of Zimbabwe Published by VERITAS
16. Mnangagwa, E. (2022) "The President's Annual State of the Nation Address (SONA" on the opening the fifth session of the ninth parliament 23 November 2022. Published by Veritas
17. Mudzingwa, F. (2020) "Mthuli Ncube & His "Sophisticated Algorithms" For Corona Relief Funds – Another Privacy Disaster Looming?" on Techzim [<https://www.techzim.co.zw/2020/04/mthuli-ncube-his-sophisticated-algorithms-for-corona-relief-funds-another-privacy-disaster-looming/> accessed 27.10.2022]
18. Mugoto, C.K. (2021) "Algorithms in the distribution of COVID-19 relief funds in Zimbabwe: A discourse or actual practice?" A research paper in partial fulfilment of the requirements for obtaining the degree of Master Of Arts in Development Studies. The Hague: International Institute of Social Studies
19. Mundopa, M. (2022) 'The Quest for Whistleblower Protection i Zimbabwe: Issues for Consideration' Seminar Paper #2 02 April 2022. Harare: Transparency International Zimbabwe
20. Ncube, N. (2021) "Setting the Tone: Performance of the 2021 National Budget, 2022 Revenue and Expenditure Targets, Fiscal Framework,

- Economic Outlook and Key Budget Assumptions” presentation made to Parliament of Zimbabwe by the Minister (MoFED), at the 2022 Pre-Budget seminar held between 22-26 October 2021, Elephant Hills Hotel, Victoria Falls.
21. Newshawks (2022a) *‘NetOne fails to fix abuse of us\$1M COVID-19 fund’* The Newshawks
 22. Newshawks (2022b) *‘Public procurement loopholes enable looting of Covid-19 goods’*- <https://bulawayo24.com/index-id-news-sc-national-byo-223556.html>.
 23. Newshawks, (2022c) *‘Questions Surround US\$1 Bn IMF windfall’s disbursement’* Harare: The Newshawks
 24. Office of the Auditor-General Zimbabwe (2021) *‘Special audit report on the COVID-19 pandemic financial management and utilisation of public resources in the country’s provinces By Ministries, Departments and Agencies (MDAs)’* presented to Parliament of Zimbabwe 2021
 25. Organisation for African Unity, OAU (2001) *‘Abuja Declaration on HIV/AIDS, Tuberculosis and other related Infectious Diseases signed April 2001’* Addis Ababa: OAU
 26. Parliament of Zimbabwe’s National Assembly Standing Orders Public Business Ninth Edition: 2020
 27. Public Accounts Committee (PAC) of the Parliament of Zimbabwe (2022) Report on the COVID-19 pandemic financial management and utilisation of public resources in the country’s provinces by MDAs. Fourth session – ninth parliament
 28. Schellekens, P. and Sourrouille, D. M. (2020) COVID-19 mortality in rich and poor countries: a tale of two pandemics? (9260). Available at: <https://elibrary-worldbank-org.eur.idm.oclc.org/doi/abs/10.1596/1813-9450-9260> (Accessed 17 June 2021). in Mugoto 2021
 29. Tavares
 30. The Chronicle (2022) *“Witness intimidation in high profile corruption cases”* on <https://www.chronicle.co.zw/witness-intimidation-in-high-profile-corruption-cases/> [accessed on 15/7/2022]
 31. The Herald (2022) *‘Cabinet okays Whistle-blower Bill’* [<https://www.herald.co.zw/cabinet-okays-whistleblower-bill/> accessed 31.10.2022]
 32. Transparency International (2021) *The Corruption Perceptions Index (CPI) 2020*. Berlin: Transparency International
 33. TI Z (2022) *‘Zimbabwe Bribe Payers Index 2021. The Dynamics of Bribery within Zimbabwe’s Public Sector’*. Harare: Transparency International Zimbabwe
 34. WHO (2022) *“Working with parliamentarians to improve health”* [<https://www.who.int/westernpacific/activities/working-with-parliamentarians-to-improve-health> accessed on 3-11.2022]
 35. Xinhua March 25, 2020 on [en.people.cn](http://en.people.cn/n3/2020/0325/c90000-9672146.html) *“Zimbabwe receives donation from China’s Jack Ma to fight COVID-19”* [<http://en.people.cn/n3/2020/0325/c90000-9672146.html> accessed 30.11.2022]
 36. ZDI, 2021, on Kubatana, 2021 *“Zimbabwe National 2022 Budget: Abuja Declaration Still a Dream for Zimbabwe – December 2021 Access to Public Health Monitoring Report”* [<https://kubatana.net/2021/12/28/zimbabwe-national-2022-budget-abuja-declaration-still-a-dream-for-zimbabwe-december-2021-access-to-public-health-monitoring-report/> accessed 27.10.2022]



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ABOUT TRANSPARENCY INTERNATIONAL ZIMBABWE (TI Z)

Transparency International Zimbabwe (TI Z) is a non-profit, non-partisan, systems-oriented local chapter of the international movement against corruption. Its broad mandate is to fight corruption and related vices through networks of integrity in line with the Global Strategy. TI Z believes corruption can only be sufficiently tackled by all citizens including people at grass root level.

VISION

A Zimbabwean society free from all forms of corruption and malpractices.

MISSION

We exist to be a knowledge-driven and evidence-based anti-corruption civil society organization that practices and promotes transparency, accountability, and integrity in all sectors to achieve good governance.

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