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Examining the robustness of Zimbabwean social protection mechanisms in the context of Corona Virus Disease 2019 (COVID-19)

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ABSTRACT

Pervasiveness of the 2019 novel coronavirus (SARS-CoV-2) (COVID-19) pandemic has called into question the appropriateness of many countries' social security systems. This article explores dynamics of Zimbabwe's current social security trajectory in the context of the COVID 19 pandemic. Despite operational shortcomings, it is undisputed that that Zimbabwe has a robust social security system galvanised by a well-functioning Department of Social Services. However, social assistance programmes targeting vulnerable person's social assistance present as insufficient, fragmented due to inflationary pressures. Significantly, on 30 March 2020 the Minister of Finance and Economic Development promulgated a ZWL\$200 (approximately US \$550,000) million safety net availing monthly, targeting one million vulnerable households under the harmonised cash transfer programme. Effectively, this was to translate to ZWL\$200 per household. Through reliance on secondary literature review, article aimed at gaining insights into social security administration domains in light of the COVID-19 pandemic. Using social work lens grounded on advancing of service users' enhanced dignity and social functioning, article's conclusions and recommendations are for advancement of Zimbabwe's social security towards desired outcomes of Sustainable Development Goal 1 realisation of ending poverty. When this is achievable can desired outcomes of safeguarding of vulnerable persons from COVID-19 impacts be achieved.

KEY TERMS: COVID-19, social security, Zimbabwe, poverty, vulnerable persons, ubuntu

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INTRODUCTION

This article aims to contribute to building of an evidence based social security foundation for addressing the drivers of vulnerability induced by the COVID-19 pandemic amongst the indigent in Zimbabwe. A COVID-19 outbreak caused by the 2019 novel coronavirus (SARS-CoV-2) has spread rapidly globally since December 2019, following initial cases diagnosis in Wuhan, Hubei Province, China. COVID-19 pandemic mitigation is a complex and fast changing practice area and certainly in terms of empirical social security research, the body of knowledge is limited. This article aims to contribute to discourses around social protection practices bolstering COVID-19 pandemic responses and its impacts, and any other pandemics to emerge in the future. The article proceeds as follows. The next section explores the rationale that underpins the Zimbabwe's current social security trajectory in the realm of COVID-19 pandemic. A literature review is then conducted then afterwards domains of social security needs amongst vulnerable populations as children and older persons are explored. The final section offers pathways for social workers' led robust social security interventions for Zimbabwe in the face of COVID-19.

BACKGROUND

On 31 December 2019, a cluster of pneumonia cases of unknown aetiology was reported in Wuhan, Hubei Province, China. On 9 January 2020, China CDC reported a novel coronavirus as the causative agent of this outbreak, which is phylogenetically in the SARS-CoV clade. Undeniably, COVID-19 effects could reverse the past two decades hard-won gains in poverty reduction. According to the African Development Bank's (2021) African Economic Outlook revised estimates show that up to 38.7 million more Africans could slide into extreme poverty in 2020-21, pushing up the total to 465.3 million people, or 34.4 percent of the African population in 2021 (African Development Bank 2021).

On the same note before onset of current on-going third wave Mpilo Central Hospital acting Chief Executive Solwayo Ngwenya had warned of an imminent advent of a more dangerous COVID-19 third wave coupled with deadly variants, resulting in an unprecedented spike in fatalities (NewZimbabwe, 2021). Solwayo Ngwenya stated that the possible cause of the third wave was the need to make money for a living, which was forcing citizens to disregard set Covid-19 regulations and engage in various activities, thereby, risking getting infected.

Robust COVID-19 mitigation is grounded on embedding universalistic social security interventions. Pertinently, Zimbabwe faces multiple hazards inclusive of widespread economic shocks, recurrent drought, severe food insecurity crisis, Cyclone Idai recovery, cholera and typhoid outbreak risks (UNICEF, 2020). According to Action Aid (2020) measures applied to help stop the spread of COVID-19 have worsened the food security situation and amplified pre-existing inequalities. Action Aid (2020) outlines that these include access to productive assets by women, access to markets by smallholder farmers and the informal traders, among many others.

Accordingly, most national constitutions and legislation make provision for measures to be taken by invoking a state of emergency, state of siege, state of disaster or some other similar justification. However, extremes posed by COVID-19 are such that no national constitution or legislation could have predicted and provided for the appropriate measures needed to deal with it (Institute for International and Comparative Law in Africa and Centre for Human Rights of the University of Pretoria, 2020). For United Nations Economic Commission for Africa (UNECA) (2020), the ongoing COVID 19 pandemic has showcased Africa's resilience and ability to tap into home-grown resourcefulness that presents unique opportunities for creating a better future. Many African governments have taken quick and decisive leadership in managing the COVID-19 pandemic with the international aid community playing a supportive role (United Nations Economic Commission for Africa (UNECA), 2020).

In this article contestations regarding Zimbabwean social security for the agenda of bolstering COVID-19 mitigation efforts are explored. This article critiques the desired outcomes underpinning Zimbabwean social security systems. Questions are raised about how best suited the current social policy domains can contribute to COVID-19 pandemic induced vulnerabilities mitigation. As pointed out by Zamchiya, Mavhinga, Gwinji, Chamunogwa, & Madhuku (2020) for fragile countries such as Zimbabwe, with weak health systems and constrained social assistance programmes the COVID-19 global pandemic poses serious challenges. Accordingly, Zamchiya et al (2020) assert that such countries must formulate and implement measures to tackle the unfolding public health crisis without plunging millions of people into starvation.

CONTEXT

Through National Development Strategy (NDS) 1 2021-2025, Government of Zimbabwe (GoZ) is keen on transforming domains of Zimbabwe's social protection requirements. On the same note Zimbabwe's 2021 national budget according to Mapungwana (2020) is anchored on the National Development Strategy 1 (NDS1), running from 2021 to 2025.

Chitambara (2020) critiqued NDS1 and observed how it aims to consolidate and advance stabilisation and further give the economy momentum for faster growth, with the capability to create jobs, increase economic resilience and create a more competitive economy. According to Chitambara the NDS-1 completely left out Persons with Disabilities (PWDs). Notwithstanding this omission, the Education Amendment Act, 2020 effected on March 6, 2020 and aligning the Education Act (Chapter 25:04) with the Constitution guarantees the right of pupils with disabilities through suitable infrastructure provision (Chitambara, 2020).

As asserted by Zeng Lannes, & Mutasa (2018) during the 1980s and most of the 1990s, Zimbabwe's economy was on the path to middle-income status. Primary and preventive health care investments was by primary health care services roll out within ten kilometres of at least 80% of the population. However, the 1990s economic situation deterioration and resultant government financing decline led to various forms of user fees' introduction by public and not for-profit health providers (Zeng, Lannes, & Mutasa, 2018).

Zimbabwe economic trajectory

After facing an economic crisis exacerbated by COVID-19, Zimbabwe's economy is set to rebound by 2.9% in 2021, supported by recovery of agriculture (World Bank 2021). Despite increases in social protection spending, including repayment of arrears on important social programs, most extremely poor citizens remained unprotected, and their numbers are rising. In November 2020, GoZ launched its latest economic blueprint, National Development Strategy (NDS) 2021-2025. For social protection NDS stipulates that several programmes, projects and interventions will be implemented to reduce extreme poverty and improve access to basic social services across the life-cycle of vulnerable groups as follows: -

- Provision of food assistance, social cash transfers, health assistance, holistic education support including school feeding and provision of sanitary wear for female learners in schools
- Provision of discretionary assistance in funeral and transport assistance
- Support towards disaster preparedness and response programmes to build resilience in communities; and
- Strengthen social protection delivery systems inclusive of shock responsiveness (Government of Zimbabwe, 2020).

Zimbabwe's 2021 national budget towards a social protection to all vulnerable groups, in total, has an allocation of ZW\$6.9 billion (US\$793 million) to the Ministry of Public Service, Labour and Social Services, which is 1.64% of the budget down from the 2020 percentage share of 4.3% (Mapungwana 2020). International Monetary Fund Zimbabwe country Office (2021) outlined that a COVID-19 National Preparedness and Response Plan was launched on March 19, 2020 with President Mnangagwa declaring the pandemic a State of National Disaster. On 2 April, 2020 the authorities launched a US\$2.2 billion domestic and international humanitarian appeal covering the period April 2020 to April 2021 (International Monetary Fund Zimbabwe country office 2021). Key donors according to International Monetary Fund Zimbabwe country office (2021) include the European Union, the United Kingdom, Japan, Sweden, The Global Fund, the African Development Bank, and the World Bank.

Zimbabwe's humanitarian situation in has caused a decrease in quality dietary habits in recent years which is negatively affecting children's nutrition, while nutrition referral mechanisms have been severely impacted by the pandemic. Distressed households have reported increased use of negative coping mechanisms including child labour, early marriage and transactional sex, while economic challenges are creating barriers for children's return to education, especially for girls (OCHA 2020).

The pandemic added 1.3 million Zimbabweans to the extreme poor reflecting job and income losses in urban areas, and a deterioration of social services in rural areas. The number of extreme poor reached 7.9 million in 2020—almost 49 percent of the population. The economic disruptions caused by COVID-19 reduced jobs in urban areas and limited job opportunities in rural areas. The scale of job losses reduced livelihoods of families, especially in urban areas. One of five respondents of the first round of a nationally representative telephone survey who had a job in March 2020 reported that they were not working in July 2020 (World Bank, 2021).

Given these prevailing household poverty conditions in 2020 Ministry of Finance set aside \$600 million in financial support for three months' worth of financial support [\$200 million a month] for small businesses and vulnerable people affected by the lockdown (Moyo, 2020). The Minister is quoted by Moyo as having stated,

Vulnerable groups in our society are the most exposed under this COVID-19 crisis. Accordingly, Treasury has set aside resources to cover one million vulnerable households under a Cash Transfer programme and payment will commence immediately. The Social Welfare Department will use its usual mechanisms to identify the beneficiaries.

However, cash transfers, which had their value eroded to the equivalent of less than US\$3 per household at the end of 2020 exchange rate were not automatically adjusted and remained increasingly inadequate under high inflation levels (World Bank, 2021).

METHODOLOGY

Secondary sources of data, including review of policy and research documents were used for this article. Through discourse analysis a review of documents related to COVID -19 dynamics, and social security in particular, was carried out. This included published peer-reviewed articles, official government documents, World Health Organization (WHO), United Nations (UN)/non-governmental organisational (NGO) documents/evaluation reports and academic publications online newspaper articles retrieved from various journals and internet sources.

LITERATURE REVIEW

This section of the article explores literature regarding Zimbabwean social security dynamics *viz-a-vis* COVID-19 pandemic. Social protection is at the heart of sustainable development and the achievement of Sustainable Development Goals (SDGs) with 11 out of 17 SDGs very explicit on social protection (ZIMCODD 2020b). The social services sector budgetary allocation ZIMCODD (2020b) argues, reflects the government's commitment towards addressing the needs and aspirations of ordinary citizens. In Zimbabwe, the percentage share of social spending to the total budget is very insignificant and the 2020 national budget allocated only 4% to social protection. In ZIMCODD's (2020b) analysis government spending towards other social sectors such as health (10%) and education (18%) is encouraging, despite the health budget falling way below the 15% and 20% stipulations of the Abuja and Dakar Declarations respectively. Many natural and man-made disasters experienced by Zimbabwe. They include climate change induced floods, droughts, road accidents, grassland fires and disease outbreaks, e.g cholera in urban areas all reflecting socio-economic and service delivery frailties (Chatiza, 2019, p. 4). In analysis of key drivers towards development of the National Social Protection Policy Framework, Arruda (2018) identified challenges compromising social security as:

- fragmented application of the instruments without a proper guiding structure; y the inadequacy and exclusionary nature of available services;
- a lack of predictability, consistency, transparency and durability in most of the schemes;
- a lack of proper centralised coordination, leading to incoherent, sector-based implementation of social protection under various ministries such as the Ministry of Public Service, Labour and Social Welfare (MoPSLSW), the Ministry of Primary and Secondary Education and the Ministry of Health and Child Care, which often creates bureaucratic, complex situations;
- Lack of mutually supportive and clear policy objectives, leading to disjointed approaches;
- a lack of awareness among people of what services they can access, their rights and entitlements

As COVID-19 has impacted the most vulnerable populations globally, gains made in building their resilience need to be protected. Furthermore, for Mate (2018) cyclical droughts at the rate of two per decade make agro-based livelihoods, food security and economic performance threats mitigation planning essential. Mate laments how every decade, when droughts strike, the government scrambles for food aid, school feeding programmes, and agriculture recovery programmes with free inputs. Mate (2018) argues that even at their onset in the 2000s, cash transfers disbursements were below the poverty datum line, erratic with small recipient numbers. Beneficiaries had no recourse to make demands on the government to pay regularly or increase the amounts and officials seemed to present these benefits as a favour rather than a right (Mate, 2018). Nevertheless, MacPherson opines that in many societies rights first promised in the Universal Declaration of Human Rights as healthcare, unemployment benefits, housing, social security, education access, are privileges reserved for some, rather than rights guaranteed to all. Henceforth, shifting the focus from human needs to human rights requires social workers to see their service users' concerns in larger socio-political context and to assess for political issues beyond the standard social or psychiatric ones (McPherson, 2020). In the next section COVID-19 pandemic impacts to Zimbabwean social security are enumerated.

DISCUSSION ON COVID-19 AND SOCIAL SECURITY INTERSECTIONS

Undeniably, the massive social welfare cuts resulted in health care and education most social services and human development indicators have deteriorated. Subsequently, the number of people with difficulties to access basic social services has risen (ZIMCODD 2020). COVID-19 related expenditure has enabled Zimbabwe to finally meet the Abuja Declaration target of 15% of national budget for the health sector as a total of ZW\$25 billion (US\$294,1 million) was spent towards the sector in 2020. Since ratifying the declaration 20 years ago in 2001 Zimbabwe's

public healthcare has been mostly donor funding reliant, never meeting the mandatory 15% of the national budget quota (Matimaire, 2021).

Section 30 of the Constitution of Zimbabwe Amendment (No.20) Act 2013 states that 'the State must take all practical measures, within the limits of the resources available to it to provide social security and social care to those who are in need'. Pertinently, Section 76 of the Constitution states that basic health care access provision is to be at the state's expense. For this obligation's fulfilment government promulgates laws, policies and programmes seeking to protect children from diseases (SOS, 2014). In April 2020 the United Nations Zimbabwe country team launched a US\$715 million response plan towards COVID-19 impacts, climate change and economic challenges mitigation (ZIMCODD 2020). In light of the deepening humanitarian crisis exacerbated by COVID-19, the GoZ must revisit its policies towards social spending to cushion the vulnerable citizens who face disproportionate risks that require government's commitment to save their lives.

It is lamentable that rapid COVID-19 spread is spurred in under resourced, overburdened African health systems like that of Zimbabwe, thus disrupting routine health services. Additionally, in the COVID 19 pandemic realm increased children's exposure to violence, abuse, mental stress, school drop-out and exploitation requires support scaling up their education, protection and access to protective environments (Save the Children, 2020).

Basic Education Assistance Module (BEAM) and the Harmonised Social Cash Transfer Programme (HSCT) are Zimbabwe's primary social protection programmes.

BEAM only has a coverage of about 530 000 out of the about 1 300 000 million children in need, while the government implemented and United Nations supported HSCT programme only covers about 55 509 very poor and labour-constrained households in 20 districts (Chitambara, 2020).

Government disbursement of COVID-19 relief funds to the vulnerable reportedly benefitted 276 000 people by December of 2020. There is marked opacity surrounding the quantum of resources availed by the government in support of the facility, access and distribution mechanisms for potential beneficiaries and follow up assessments of impacts on reducing vulnerability of affected groups and families. The media estimates that 276 000 people benefitted from the relief funds in 2020. However, ZIMCODD (2021) argues such statistics do not tally with the 8 million food insecure citizens whose vulnerability is worsened by the COVID-19 induced lockdown. ZIMCODD (2021) laments how the potential beneficiaries were urged to register with the Department of Social Services for vetting though the criteria for selection remains opaque.

Vulnerable girls' exposure to child marriage has been reinforced by COVID (Girls Not Brides 2021). Since the COVID-19 outbreak reports of child marriages taking place in Zimbabwe have been made including NGO workers warning that child marriage is being used as a negative coping strategy amidst economic hardships (based on reports from traditional leaders and Village Health Workers). GBV shelters report that they have received girls who have been at risk of experiencing or have experienced child marriage during COVID-19 (Martin & Ahlenback, 2020).

Furthermore, in Zimbabwean rural tribal communities' contemporary orphans and vulnerable children (OVC) care and support systems remain hinged the extended family system (Ringson & Chereni, 2020). The informal welfare arrangements of OVC care and support are predicated on traditional practices within a community manifested through the indigenous knowledge philosophy of *ubuntu* and its multidimensional ethos and practices. On the same basis, Adesina (2020, p. 571) highlights community resilience citing Ellis' observations that African communities get given a limited number of bags of food or fertilizer and seed packs for allocation to the poorest households. These allocations sometimes split these resources equally among all community members.

However, for COVID 19 pandemic spread curbing social distancing has been emphasised on, so leveraging support from the extended family may prove to be problematic. With social distancing there is less physical proximity between family and community members, thus transforming interpersonal relationships. Families and community solidarity, particularly the contribution and role of women, through traditional safety nets and most importantly through the cultural habitus of patient care within the family unit is threatened by COVID 19 (Niang & Taylor, 2020).

Undeniably, resilience in Africa and particularly Zimbabwe is grounded on families and community solidarity, particularly the contribution and role of women, through traditional safety nets and the cultural habitus of patient care within the family unit (Niang & Taylor, 2020). Individuals or nuclear families cannot provide for all vital needs in the African context, especially in poor communities. Another social security target group that needs prioritisation in the milieu of COVID 19 pandemic are older persons especially those with comorbidities are most at risk of serious illness and death from the virus (Help Age 2020). Older persons have multiple roles in society, including as caregivers, volunteers and community leaders.

COVID 19 pandemic has not just threatened older persons' lives and safety but also threatening their social networks, their access to health services, their jobs and their pensions. The resolution adopted by Member States at the World Health Assembly shows an important recognition of the impact of COVID-19 on older people but does not go far enough in guiding a targeted response (Help Age Africa Regional Office, 2020). Member States called for access to safe testing, treatment, and palliative care for COVID-19, with particular attention to older people.

On the same note, Zimbabwe Coalition on Debt and Development (ZIMCODD) (2020) highlighted that with ZWL\$200 one household could only buy either of the following products;

- 6 loaves of bread only per month
- 2kg of rice only per month
- 4kgs of sugar only per month
- 1 pocket of potatoes only per month
- 1kg of meat only per month

Furthermore, it was reported that the Social Welfare Minister had stated government's identification of 90 000 vulnerable citizens to be recipients of an increased amount of \$300 aiming to cushion them against the COVID-19 induced lockdown period effects (Chibamu, 2020). The newspaper report stated that the Social Welfare Minister highlighted that ZWL\$200 million was not enough to sustain vulnerable citizens thus the Z\$200 (US\$8) originally planned to pay out to each beneficiary had been shrivelled by inflation, and the amount to be paid had now been upped to Z\$300 (US\$12) (Chibamu, 2020). For the logistics of rolling out the \$200 monthly safety net, Treasury employed an algorithm towards for potential vulnerable beneficiaries targeting. The algorithm encompassed mobile money transactions trends. Government is being proactive with COVID-19 pandemic information dissemination by publishing official information, printing booklets in all 16 local languages, radio and television and state newspapers usage, phone and text messages (Scoones, 2020). However, older persons largely lack knowledge on mobile money transfer usage and for the \$200 monthly safety net beneficiary algorithm based targeting, better sensitisation would have been required. It is however encouraging that according to Chikandiwa's (2021) report on Social Welfare Minister Paul Mavima presentation to parliament that NSSA would be disbursing grocery vouchers to its beneficiaries, with priority being given to orphans and persons with disabilities. NSSA has a ceiling and according to the this curtails the levels of benefits. Minister Mavima is reported by Chikandiwa (2021) as indicating that measures have been taken to ensure that contribution rates are self-adjusting in line with the poverty datum line ensuring that contributing members will receive a more meaningful pension at a time of retirement.

CONCLUSIONS OF STUDY FINDINGS

The article has enumerated various dynamics of Zimbabwean social security trajectory in the midst of the COVID-19 pandemic. The African Union developed Agenda 2063 encapsulates seven aspirations for the continent of Africa and Aspiration six provides for people driven development. For Zimbabwe to attain a developmental welfare status as it strives to do social security must be adaptive and instil resilience for vulnerable groups' protection. This also attests to the clarion call by various social work scholars on the need for galvanising citizens' social security through embedding of developmental social work tenets in social security systems in countries as Zimbabwe.

IMPLICATIONS FOR FRONTLINE ZIMBABWEAN SOCIAL WORK

Social workers are a key element for societies all around the world to enhance social justice—a complex concept, relating to questions of distribution and redistribution of privileges and resources and based on moral and political values and normative frameworks (United Nations Institute for Research and Social Development 2021). To remain relevant in a rapidly changing society, social work must ensure that policies respond timeously and justly to mitigate the impact of continuous change on individuals, families, communities and the wider society. This requires rethinking social work's role in shaping policy in a broader context to address a new order, going beyond social welfare and social policy.

GoZ's response to the social protection and health needs of its citizens depends on the financial commitments which are made through the national budget. The percentage share of social spending determines the country's preparedness to achieving the sustainable development goals particularly on no poverty, zero hunger, quality education, good health and wellbeing, gender equality and reduced inequality (ZIMCODD 2021). The GoZ is transitioning from social protection to social development in view to enhance self-reliance of vulnerable groups through livelihoods support outside the conventional traditional social safety nets provided by the government. There are considerable women empowerment projects which help in poverty eradication such as the start-up capital projects provided for women in small to medium enterprises by the Women's Bank and Youth Empower bank alongside internal savings and lending schemes facilitated by NGOs and the Ministry of Women Affairs, Community, Small and Medium Enterprises (National Association of Non Governmental Organisations(NANGO, 2021).

The economic challenges and extraordinary shocks caused by the drought, cyclone, and pandemic provide opportunities to press forward with bold measures to protect lives and livelihoods, and support Zimbabwe's longer-term recovery (World Bank, 2021). Families, and adolescent girls themselves, have reduced income

generating opportunities due to the COVID-19 lockdown, which has compounded their economic instability. Consequentially, child marriage may increase as families aim to reduce the perceived economic burden of having a girl child and use the bride price (lobola) for survival (Martin and Ahlenback 2020).

Development of a shock-responsive social protection system with a flexible design able to adapt to emergencies is crucial. World Bank (2021) recommends implementation of “systems strengthening” initiatives cutting across policy, programmatic and administrative levels. These could include reforming and re-establishing the National Social Protection Steering Committee (NSPSC) and conducting a targeting assessment of social protection programs (World Bank, 2021).

NANGO (2021) notes NDS1 aspiration of inclusive social assistance provision through rationalisation of beneficiaries to target deserving vulnerable groups. Expansion of existing but modified and new social assistance programmes in urban areas addresses rising urban poverty and vulnerability thus ensuring universal coverage. The Strategy will develop and strengthen social protection delivery systems particularly improving on the payment system and Management Information System (MIS). NDS1 has specific poverty mitigation strategies and targets, while the 2021 budget incorporated poverty targets for the first time. The country is in the process of finalizing the Disability Policy and there are provisions of ending poverty and economic empowerment for PWDs. However, provisions are dependent on availability of resources (National Association of Non Governmental Organisations(NANGO, 2021).

With COVID-19 pervasiveness it is critical that different constituencies providing social services be brought together to collectively think of solutions, particularly social service responses dealing with COVID-19 induced psychosocial effects and exacerbation of inequality (Rasool, 2020).Government’s designing a National Unemployment Benefit Scheme for workers protection against the impact of job losses is commendable. Government has tasked NSSA to craft a concept paper assessing the feasibility of setting up the scheme (Towindo, 2020). Currently, Government offers workers two mandatory social security schemes under NSSA: the National Pension Scheme (NPS), which supports retirees above the age of 60; and the Workers Compensation Insurance Fund (WCIF) for workers injured or killed in work-related accidents or suffer from work-related diseases (Towindo, 2020). Furthermore, National Building Society (NBS) a NSSA subsidiary has created a tailor-made loan facility for pensioners. Under the scheme the pensioners will receive loans amounting to \$100 000 to fund income-generating projects. NBS acting managing director Mr Alfred Chaavure stated this is a loan facility designed for individuals who receive their NSSA pay-outs whether as pensioners or beneficiaries through an NBS bank account.

Again, on the International Federation of Social Workers (2020) website National Association of Social Workers Zimbabwe articulates public conscientisation programs, strengthening multi-disciplinary collaborations and advocacy work as levers enhancing governments, citizens and development partners resilience and preparedness in countries with weak health care systems. McPherson (2020) however asserts that rights-based practice is political requiring advocacy and activism, and addressing the human rights violations, gaps in care and services that the coronavirus has made (even more) visible needs political action.

Also, to ensure universal health coverage and guarantee quality health care access Chitambara advocates for additional public funds mobilisation to boost budgets through implementing innovative and sustainable financing for health care delivery. Chitambara (2020) comments that the current health financing model remains unsustainable due to heavy external financing reliance complemented by out-of-pocket financing of the health sector. For Chitambara, government must bear the greatest burden in terms of health financing. Accordingly, GoZ must draft and adhere to a National Social Protection Policy Framework outlining the minimum standards and social spending priorities of a radically expanded social protection system (ZIMCODD 2020).

CONCLUSION

The article concludes by noting that robust social security arrangements in Zimbabwe are achievable by mainstreaming ubuntu as a principle for enhancing social solidarity. By having social security targeting mechanisms underpinned on Ubuntu universal rights, opportunities, freedom and sustainable well-being for vulnerable Zimbabweans can be realised.

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