2026

WISKO

CONSORTIUM

Capacity Statement

World Vision ZIMBABWE

Save the Children

OPHID Organization for Public Health Interventions & Development

JF KAPNEK ZIMBABWE

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WHO WE ARE

The **WISKO Consortium** comprises organizations with a combined 175 years of experience of implementing programs in Zimbabwe. One of WISKO's strengths is the strong partnerships that its member organizations have built with MOHCC from national to district level. WISKO also has the strongest and most trusted community level partnerships through its members. As such, WISKO has a deep understanding of Zimbabwe's health system and the health sector development needs. WISKO has collectively mobilized and successfully programmed US$429,934,142 over the past (3 or 5 yrs) of which US$168,942,381 (39%) was invested in the health sector. With combined geographic reach covering all provinces and complementary technical expertise of its members, WISKO has unmatched operational capacity in the country.

World Vision Zimbabwe (WVZ)

WVZ has over 52 years of experience serving communities across all 10 provinces. As a Christian, child-focused humanitarian and development organization, WVZ delivers integrated programming in Health & Nutrition, WASH, Education & Life Skills, Food Security, Livelihoods, Resilience, and Climate Change. WVZ partners with government, civil society, and international agencies to strengthen community resilience and ensure vulnerable populations, especially children, are protected and able to thrive.

Save the Children Zimbabwe (SCI)

Save the Children Zimbabwe has over 40 years of experience working across all 10 provinces. Through integrated humanitarian and development programming, SCI advances child rights and delivers programs in Health and Nutrition, Food Security and Livelihoods, Child Protection, Education, and WASH. SCI has responded to major crises including cholera, COVID-19, Cyclone Idai, and drought.

International Medical Corps (IMC)

IMC is a global nonprofit organization that has been delivering healthcare, training, and development programs since 1984. Operational in Zimbabwe since the 2008–2009 cholera outbreak, IMC delivers integrated health, nutrition, climate adaptation, and WASH programming across all provinces.

JF Kapnek Zimbabwe

JF Kapnek is a locally registered PVO with over 40 years of experience improving family health, reducing child mortality, and expanding education opportunities. The organization operates across 8 provinces (previously all 10) and delivers programs across health, nutrition, education, social welfare, and disability sectors.

OPHID

OPHID is a Zimbabwean NGO (PVO 31/16) established in 2001 and a long-standing technical partner to MoHCC. It specializes in HIV, TB, and RSSH, with expertise in MNCH, mobile populations, digital health, NCDs, and climate/environmental health. The organization delivered programs in all 10 provinces, working through public health facilities and beneficiary communities.

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WISKO CONSORTIUM VALUE PROPOSITION FOR GF GC8 IMPLEMENTATION IN ZIMBABWE

Our consortium brings together multiple organizations with complementary strengths, enabling more effective and comprehensive delivery of complex health programs. By combining technical expertise, geographic reach, operational capacities and robust financial management systems of its members, our consortium can address Zimbabwe's diverse programmatic needs—ranging from service delivery and community engagement to data systems and supply chain management—within a single coordinated framework.

Technical Rigor & Impact:

WISKO consortium will ensure coordinated, technically robust, and impactful implementation through its members acting as centers of excellence in key thematic areas such as service integration, community engagement including CLM, health system strengthening, KVP programing, Gender, Equity, Human Rights (GEHR), etc. The centers of excellence will provide high-quality technical guidance to other partners and enhance strategic coherence by ensuring that interventions within each thematic area are aligned with national guidelines and global standards, while also fostering innovation through continuous learning and adaptation.

Operational efficiency:

Our consortium approach for implementation of GF grants in Zimbabwe will reduce duplication of efforts and optimize resource utilization. Shared planning, pooled procurement, and coordinated monitoring frameworks further streamline processes, lowering transaction costs and improving speed of execution.

Enhanced program coverage:

Our consortium has deep-rooted presence in all provinces and hence is well positioned to enhance coverage of underserved and hard-to-reach populations, ensuring that interventions are more inclusive and aligned with on-the-ground realities while building the capacity of local and community-based organizations.

Stronger sustainability & transition:

WISKO has robust experience of programing for sustainability with system strengthening being at the core of programs implemented by all its members in recent past. WISKO will be even more intentional on sustainability and transition by identifying centers of excellence with the consortium that will drive key sustainability strategies such as service integration, building governance and technical capacity of local organizations, strengthening governance and accountability frameworks, etc.

Extensive international networks

WISKO, through its INGO members, has a vast network of international partnerships with in Southern African region and beyond that enables it to leverage technical expertise and program innovations for greater impact of its health programs in Zimbabwe including GF programs.

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STRATEGIC ALIGNMENTS WITH THE NATIONAL HEALTH STRATEGY

The consortium aligns national priorities to deliver equitable health outcomes through;

Health Service Delivery & Clinical Care

- Provide integrated, comprehensive care (HIV, TB, NCDs, MNCH, SRH)
- Ensure continuity of HIV, TB, and malaria programs
- Strengthen MNCH services (emergency obstetric care, referral systems, equity)
- Improve access to RMNCH-N services
- Improve access to maternal, newborn, child and adolescent health services
- Strengthening child health and nutrition outcomes
- Promote adolescent sexual and reproductive health and rights

Disease Prevention & Public Health Programs

- Improve adoption of healthy behaviors (including HIV risk reduction)
- Address gaps in HIV prevention, treatment and care (focus on vulnerable groups)
- Strengthen TB care cascade (screening, diagnostics, treatment, HIV/TB collaboration)
- Protect EMTCT gains and advance Triple Elimination
- Scale up prevention and management of NCDs
- Enhance epidemic preparedness and response (cholera and outbreaks)

Health Systems Strengthening

- Community and institutional health systems strengthening
- Strengthen overall health systems (service delivery, supply chains, referrals, accountability)
- Advance health systems sustainability (HRH, supply chains, lab systems, preparedness)
- Strengthening and integrating digital health and health information systems
- Support integrated service delivery at primary and community levels
- Improve efficiency, integration, and reduce fragmentation

Community Systems & Demand Generation

- Reinforce community systems and peer-led models
- Supporting task-shifting and capacity development of community health workers
- Improve demand generation, access, retention, and continuity of care

Equity, Inclusion & Vulnerable Populations

- Improve access to equitable, climate-resilient healthcare services
- Improve inclusion and quality of life for children and youth with disabilities
- Focus on vulnerable populations (children, adolescents, key populations in HIV)

WASH (Water, Sanitation & Hygiene)

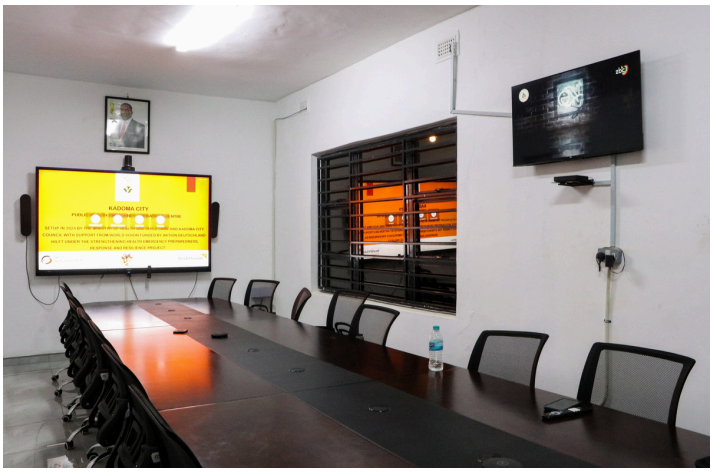
- Expand access to safe water, sanitation, and hygiene services
- Reduce disease risk and improve nutrition and dignity

Health in Emergencies & Resilience

- Enhance health in emergencies (focus on vulnerable groups)
- Ensure access to life-saving health, nutrition, and WASH services during crises
- Strengthening preparedness for climate and public health shocks

Financing, Transition & Sustainability

- Support transition and co-financing readiness
- Strengthening domestic capacity and efficiency gains



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KEY ACHIEVEMENTS ACROSS HEALTH SYSTEM BUILDING BLOCKS (2022–2026)

Governance, Leadership & Coordination

- Establishment of 9 subnational PHEOCs for outbreak coordination
- Support to national Emergency Operations Centre (EOC)
- Strengthened coordination platforms across national to community levels
- Engagement with MoHCC, partners, and community leadership for planning and information sharing
- Contribution to technical working groups, policy processes, and sustainability roadmaps

Service Delivery & Clinical Care

1. HIV, TB, and SRHR/GBV Programs

- HIV care & treatment: 120,000+ people supported with HIV care and treatment; 330,000 clients retained in ART care
- HIV testing & treatment cascade: 590,872 tested; 22,639 HIV positive; 21,933 initiated on ART (97% linkage) [3]
- PrEP (HIV prevention): 25,859 newly initiated
- TB preventive therapy: 89,558 PLHIV completed therapy
- Cervical cancer screening & treatment: 91,082 screened; 4,552 precancerous lesions identified; 3,353 treated (74%)
- SRHR-HIV/GBV (Beitbridge): 22,518+ reached with information; 2,405+ referrals for services; 1,700+ accessed integrated services (HIV, STI, FP, psychosocial support) [7]

2. Malaria Prevention and Control

- People protected: 1,503,677 people protected (Additional mention: 1,201,368 people protected in separate intervention set)
- Outreach & service delivery: 43,058 people reached through mobile outreach services

3. Integration of TB, cervical cancer, NCDs, and mental health into HIV services
4. Establishment and operationalization of 30+ Cholera Treatment Centers (CTCs), ORPs, treatment units
5. Continuity of essential health services during emergencies

Health Workforce Capacity & Training

Capacity of health work force strengthened through training of:

- 996+ Community Health Workers (CHWs) in community-based disease surveillance risk communication, and reporting.
- 105 healthcare workers in Public Health Emergency Management (PHEM) (PHEM)
- 30 health care workers in IDSR
- 3,150+ frontline workers in IPC, malaria, cholera, surveillance, etc.

Health Information Systems & Surveillance

- Establishment of 8 call centers for Event-Based Surveillance (EBS)
- Strengthening Electronic Health Records (EHR) and client tracking systems
- Integrated disease surveillance (IDSR) training

Health Infrastructure & Medical Products

1. Construction/rehabilitation/equipping of 290+ health facilities
2. Procurement and installation of laboratory equipment in 7 districts
3. Procurement and distribution of:

- Medical supplies and equipment (beds, tents, etc.)
- IPC materials, cleaning/disinfection kits, NFIs
- Long-lasting insecticidal nets (LLINs): 1,119,832+ distributed through continuous channels and 1,718,604 distributed through mass campaigns

Laboratory Systems & Diagnostics

- Improved cholera diagnostics: Turnaround time reduced from 7 days to 24 hours
- Introduction of computer-aided diagnostics (TB)

Immunization & Public Health Programs

Vaccination:

- 582 children vaccinated (measles outbreak response)
- Increased COVID-19 vaccine coverage (by 18.3% and 13.5% for 1st and 2nd dose)

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Community Engagement, Demand Creation & RCCE

Community System Strengthening:

- 29 dialogue platforms established/strengthened
- 95 community leaders reached (RCCE malaria interventions)
- 54 focus group discussions conducted to inform vaccine policy and delivery

Demand Creation and RCCE:

- 55,407 people (cholera prevention, hygiene, treatment)
- 100,000+ through RCCE and hygiene promotion

Community-level preparedness:

- Risk communication, referral linkages, local engagement

Emergency Preparedness, Response & Resilience

Strengthened outbreak response systems and case management

- 30+ cholera treatment centers and oral rehydration points established
- 9 Public Health Emergency Operations Centers established

Advanced anticipatory action and hazard preparedness planning

- Training of 15 partner organizations on anticipatory action

Reinforced community-level preparedness systems
Delivery of integrated emergency health, nutrition, WASH, malaria, and cholera interventions

MAJOR HEALTH GRANTS IMPLEMENTED IN RECENT YEARS

WISCO has implemented health grants with combined value of more than US$67 million during the past 4-5 years.

Maternal, Newborn & Child Health (MNCH)

- Strengthening maternal, newborn and child health services in Binga district, Matabeleland North Province, Zimbabwe in Matabeleland North Province, Zimbabwe Binga District. REESE Family Foundation: Budget US$150,000.00 (September 2024- February 2025)
- Improving Local Capacity to Serve the Needs of Pregnant and Nursing Women and their children-II in Matabeleland North Province – Binga district. Hickey Family Foundation in Budget US$150,000 (October 2022 to September 2023.
- Improving Local Capacity to Serve the Needs of Pregnant and Nursing Women and their Children in Nkayi district. Hickey Family Foundation: Budget US$305,716 (May 2019 to March 2020)
- Improving Neonatal, Child and Maternal Health in Zimbabwe; Kariba; Garden Trust: Budget GBP 99,556. (2022)

Community System Strengthening (CSS)

- Social Behaviour Change Systems Strengthening (UNICEF, WVUS, WVUK): Covered six provinces with a budget of US$275,542.94 (2023–2024)
- Building Resilient and Sustainable Community Systems for GBV Risk Mitigation. Focused on Gender-Based Violence (GBV) risk mitigation, community systems strengthening in Hwange, Mudzi, Zvishavane. UNFPA; Budget: US$504,000 (2022 to 2024)
- Hygiene and Behaviour Change Coalition; Beitbridge, Binga, Kariba and Matobo; Unilever: Budget GBP500,790. (2022–2023)
- Enhanced Resilience for Vulnerable Households in Zimbabwe (ERVHIZ); Beitbridge; UNICEF / EU: Budget US$472,130. (2022–2023)

Nutrition

- Protection and Nutrition Emergency Response for Mudzi (PRONE for Mudzi); USAID/BHA: Budget US$1,324,205.00. (2023–2025)
- Improving Nutrition and Health Outcomes in Shock-Affected Communities in Zimbabwe; Binga and Gokwe North; ECHO: Budget US$1,067,024. (2026–2027)

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HIV/AIDS Prevention, Treatment & Care

- Addressing Critical Gaps in HIV Prevention, Treatment, Care and Support in Zimbabwe. Focused on HIV prevention, treatment, care and support in Bubi, Tsholotsho, Mangwe, Bulilima, Beitbridge. UNFPA; Budget: US$1,200,000 (2017 to 2021)
- The FACE-HIV (Families and Communities for the Elimination of HIV) project began in 2012 as an initial 5-year project that extended to 8 years. The FACE-HIV consortium was led by OPHID, in partnership with JF Kapnek, ZAPPT, and EGPFA. The project supported the transition of PMTCT to Option B+ up to test and treat protocol. The program was initially implemented in all 10 provinces before transitioning to focus on 6 provinces. The budget utilized was US$60 000 000.00.
- The Target Accelerate and Sustain Quality Care (TASQC) HIV project is ongoing since 2020, with support from PEPFAR through USAID. The consortium was led by OPHID, in partnership with J.F. Kapnek and ZNNP+ The program provided HIV prevention, care and treatment services to over 330 public health facilities. The total annual budget is US$16 000 000.00.
- HIV Knows No Borders; Beitbridge; IOM / Royal Netherlands Embassy: Budget EUR 350,000. (2023–2026)

Emergency / Multi-sector (Health, Nutrition, Protection, WASH)

- OPHID and JF Kapnek implemented the TB Treatment access and Prevention (TB-TAP) project in 6 provinces. (OPHID in Bulawayo, Manicaland, Matabeleland South, Harare (Chitungwiza) and J.F. Kapnek in Masvingo and Midlands provinces) from 2023 to January 2025. It was to scale up approaches to improve case detection and treatment outcomes for people with TB. The project sought to introduce improved screening, and computer-aided diagnostics for TB. The budget was US$4 000 000.00
- Zimbabwe Assistance Programme in Malaria II (ZAPIM II); USAID: Budget US$2,013,334. (2021–2025)

WASH (Water, Sanitation & Hygiene)

- Reducing Cholera Mortality, Incidence and Risk in Zimbabwe through improved access to Health and WASH Services. Harare, Chitungwiza, Mutare Rural, Gutu, Bikita, Beitbridge, Sanyati and Mt Darwin districts. EU ECHO: Budget US$480,555 (January 2024 to June 2024)
- Reducing the effects of COVID-19 through Emergency WASH Response in Binga District. USAID/BHA Budget US$1,458 570 (August 2021 to September 2022).
- Water, Sanitation and Hygiene (WASH) Response to COVID-19 in Healthcare Facilities in 7 Hospitals in Matabeleland South province, 7 Hospitals in Matabeleland North province and 3 Central Hospitals in Bulawayo. UNICEF: Budget US$470.000(June 2020 to May 2021).

Other Infectious Diseases (TB, Malaria, Cholera)

- RAISING Project, Served 20,000 vulnerable women and children in Mberengwa and Mudzi. USAID/BHA: Budget US$2.29 million, (2021–2022)
- Zimbabwe El Nino Emergency Response (ZEER) Food Security, nutrition, Protection and health support in multiple districts. EU ECHO: Budget US$843,550.60 (November 2024- October 2025)
- Integrated Nutrition, WASH and Protection Project; Mangwe and Bulilima; BHA: Budget US$2,388,011. (2023–2024)
- Integrated Health, WASH and Protection COVID-19 Response Projects; Beitbridge, Kariba, Binga and Matobo; BHA: Budget US$1,412,554. (2021–2022)

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AREAS OF EXPERTISE

Integrated Disease-Specific & Service Delivery Capacity

- Experience implementing Global Fund malaria interventions and community-level programming, including case management, behavior change, community action cycles, and elimination support.
- Strong expertise in HIV/AIDS prevention, care, treatment, monitoring, referral systems, and advanced HIV disease management at facility and community levels.
- Integrated HIV/TB programming and delivery of clinical services across HIV, TB, and malaria through skilled clinical teams (doctors, nurses, laboratory technicians).
- HIV/SRHR/SGBV programming for high-risk, mobile, and vulnerable populations, including service delivery and response systems.
- Technical expertise across HIV, TB, malaria, MNCH, SRHR, nutrition, and WASH enabling fully integrated service delivery.

Partnerships, Governance, Coordination & Donor Engagement

- Long-standing partnerships with government at national, subnational, and facility levels.
- Collaboration with civil society, international partners, research institutions, and UN agencies.
- Strong coordination with national programs and sector platforms.
- Proven experience in consortium leadership and multi-partner program implementation.
- Engagement with bilateral and multilateral donors, global initiatives, and foundations.

Operational Capacity, Scale & Geographic Reach

- Nationwide presence across all provinces, including hard-to-reach and disaster-prone areas.
- Proven capacity to deliver in fragile, high-risk, and underserved settings.
- Flexible and decentralized service delivery models.
- Strong organizational agility and diverse implementation portfolio.

Health Systems Strengthening & Resilient & Sustainable Systems for Health

- Comprehensive health systems strengthening, across community systems, health information systems, supply chain and commodities management, and maternal, newborn, and child health services.
- Strong alignment with Primary Health Care (PHC) and Universal Health Coverage (UHC) strategies.
- Experience simplifying service delivery through differentiated care and community-based models.
- Capacity building and mentorship of healthcare workers in IPC, case management, surveillance, and service delivery.
- Development of manuals, SOPs, and training materials in collaboration with government.
- Institutional strengthening, program management, and delivery of large, complex, multi-year programs.
- Public–private mix approaches to expand equitable access to services.
- Support to national coordination platforms and inter-ministerial systems.

Gender, Equity & Human Rights (GEHR)

- Expertise in gender equality, human rights, disability inclusion, and child protection.
- Targeted programming for vulnerable populations including youth, migrants, and key populations.
- Inclusive community-based service delivery models that enhance equitable access to services.

Financial Management & Fiduciary Systems

- Robust financial systems capable of managing large-scale programs (up to US$100 million).
- Strong fiduciary controls, compliance frameworks, and internal accountability systems.
- Consistent record of clean audits.
- Extensive experience managing multi-donor and complex funding portfolios.

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Community Systems Strengthening, Engagement & Equity

- Deep engagement with community-led and peer-based service delivery models, including VHWs, expert clients, mentor mothers, caregivers, and community networks.
- Strong focus on hard-to-reach, underserved, and mobile populations, with nationwide coverage including fragile and high-risk districts.
- Community-based referral systems, demand creation, behavior change, accountability, and feedback mechanisms.
- Sub-granting and capacity building of local CSOs, NGOs, and CBOs.
- Strong localization approach and community ownership models.

Strategic Information, Surveillance, Monitoring & Evaluation & Digital Health

- Advanced digital and strategic information systems aligned with national standards, including EHRs, dashboards, and interoperability frameworks.
- Community-based disease surveillance systems and epidemiological expertise.
- Strong monitoring, accountability, and value-for-money systems.
- Proven research and implementation science capability for evidence generation and adaptive programming.
- Use of formative research, perception tracking, and digital learning platforms to inform decision-making and policy.

Emergency Preparedness, Response & Health Security

- Extensive experience responding to public health emergencies including cholera, COVID-19, measles, mpox, and climate-related disasters.
- Integrated emergency response across health, WASH, and protection sectors.
- Rapid response and surge capacity, including scale-up within short time frames.
- Emergency preparedness systems, disaster risk reduction, and epidemic-prone disease management.

Policy, Advocacy, Governance & Innovation

- Active contribution to national policy and strategy development.
- Advocacy and engagement on PHC, UHC, nutrition, and service delivery models.
- Innovation in digital health, behavior change platforms, and resilience programming.
- Experience piloting and scaling new approaches to service delivery, governance, and learning.

Resource Mobilization & Sustainability

- Demonstrated capacity to mobilize additional resources in multi-donor environments.
- Cost-efficient program expansion approaches.
- Long-term country presence supporting sustainability and transition.

Integrated Multisectoral Programming & One Health

- Integration of health, nutrition, WASH, food security, livelihoods, education, child protection, and climate adaptation.
- One Health approaches linking health, environment, resilience, and disaster risk reduction.
- Holistic programming, addressing underlying determinants of disease, vulnerability, and poverty.
- Strong maternal, newborn, and child health and nutrition programming platform.
- Refugee and settlement programming incorporating environmental and value-chain approaches.

CONTACT US

59 Joseph Road, Mt Pleasant, Harare, Zimbabwe
Bhekimpilo Sithole: Health & Nutrition Technical Advisor
Email: bhekimpilo_sithole@wvi.org
Mobile Phone: +263 77 574 0850
www.wvi.org/zimbabwe