



'creating a level playing field'

INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) CENSUS 2017

ACCESS AND USE BY HEALTH FACILITIES REPORT



For further information contact:

Zimbabwe National Statistics Agency
P.O. Box CY 342
Causeway, Harare
Zimbabwe
Telephone: 263-4-706681/8 or 263-4-703971/7
Fax: 263 4 762494
Email: transinfrastructure@zimstat.co.zw
Website: www.zimstat.co.zw

Postal and Telecommunications Regulatory
Authority of Zimbabwe (POTRAZ)
P.O. Box MP 843
Harare, Zimbabwe
Telephone: 263-4-333032
Fax: 263 4 333041
Email: the.regulator@potraz.org.zw
Website: www.potraz.org.zw

LIST OF ACRONYMS

ASDL	Asymmetric Digital Subscriber Line
COFOG	Classification of Functions of Government
COICOP	Classification of Individual Consumption According to Purpose
DSL	Digital Subscriber Line
DSTV	Digital Satellite Television
DTT	Digital Terrestrial Television
EMRs	Electronic Medical Records
ePMS	Electronic Patient Management System
GPRS	General Packet Radio Service (GPRS
GSM	Global System for Mobile Communications.
HIE	Health Information Exchange
ICT	Information and Communication Technology
IP	Internet Protocol
ISCO	International Standard Classification of Occupations
ISP	Internet Service Provider
PDA	Personal Digital Assistant
PHRs	Personal Health Records
POTRAZ	Postal and Telecommunications Regulatory Authority of Zimbabwe
SNA	System of National Accounts
VOIP	Voice Over Internet Protocol,

WHO	World Health Organisation
WIFI	Wireless Fidelity
WIMAX	Wireless Interoperability for Microwave Access
ZIMSTAT	Zimbabwe National Statistics Agency

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FOREWORD

The Report presents census findings on Information and Communication Technology (ICT) access and use by health facilities that fall under the purview of the Ministry of Health and Child Care (MoHCC) in Zimbabwe. It is the first time for the Country to conduct such a census. The Census was conducted from October to December 2017.

The objectives of the census were to:

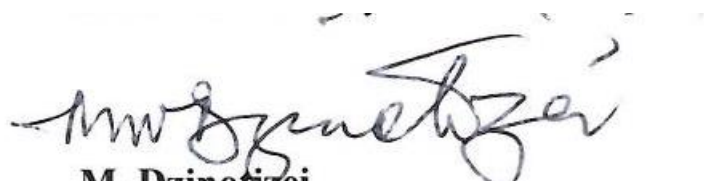
- Establish the access and use of ICTs in all hospitals and clinics;
- Identify areas (provinces and districts) with low penetration, impediments and strategies for improving penetration of ICTs in all hospitals and clinics;

The Census was conducted following internationally agreed methodologies to allow for international comparison. It covered the Country's ten provinces across all the land use sectors.

The results of the Census are critical in informing policy makers to develop national ICT policies and strategies as well as the monitoring and evaluation of on-going ICT programmes. Some of the strategic programmes which may require the use of the census results are the rural electrification programme, the computerization of health facilities and crafting of the National Broadband Plan by the Postal and Telecommunications Regulatory Authority of Zimbabwe (POTRAZ)'s to ensure that ICTs are used innovatively across the social and economic environment for sustainable growth.

The Census results will also inform on the equity status of ICT access and use by health facilities across the provinces, rural and urban areas, and the land use sectors. The results may also be used to monitor Sustainable Development Goals (SDGs) on ICTs and their reporting to the international community, particularly the International Telecommunication Union (ITU), which is the United Nations specialized agency for ICTs.

ZIMSTAT is grateful to the Ministry of Health and Child Care (MoHCC) and all health facilities that contributed to the successful conducting of the Census through supply of information. Profound gratitude is extended to POTRAZ for availing financial resources and technical support.



M. Dzinotizei
DIRECTOR-GENERAL, ZIMSTAT

INTRODUCTION

Geographical Background

Zimbabwe is in the southern part of Africa. It is a landlocked country and is bordered by Mozambique on the east, South Africa on the south, Botswana on the west and Zambia on the north and north-west. It has ten administrative provinces which are Manicaland, Mashonaland Central, Mashonaland East, Mashonaland West, Matabeleland North, Matabeleland South, Midlands, Masvingo, Bulawayo and Harare. Its total land area is approximately 390 757 square kilometres.

The major physical feature is the great-plateau which stretches from the west to the east of the Country. The Country is bordered by two major rivers, the Zambezi and the Limpopo on the North and South, respectively. Almost the entire surface area of the country is more than 300 metres above sea level, with nearly 80 percent of the land area lying more than 900 metres above sea level and about 5 percent lying more than 1 500 metres above sea level.

Health Service Delivery System Structure

Zimbabwe's health service delivery system is structured at four levels which are primary, secondary, tertiary (provincial) and quaternary (central). The Primary Health Care (PHC) is the main vehicle through which health care programmes are implemented in the country as they constitute a majority of the health facilities. The main components of the PHC include maternal and child health services; health education; nutrition education and food production; expanded programme on immunization; communicable diseases control; water and sanitation; essential drugs programme; and the provision of basic and essential preventive and curative services. The Primary Health Care refers complicated cases to the next levels of care.

The majority of health services in Zimbabwe are provided by the public sector (Ministry of Health and Child Care and Ministry of Local Government, Public Works and National Housing and to a lesser extent through ministries responsible for education, prisons and correctional services, home affairs and defence), both in rural and urban areas.

Public sector health services are complemented by the private sector, which includes both private for profit (e.g. industrial clinics, private hospitals, maternity homes and general practitioners) and not-for-profit private sector (e.g. mission hospitals and clinics and Non-Governmental Organizations) health facilities. Mission and private sector facilities provide considerable services mostly in rural and urban areas, respectively.

Information and Communication Technologies access and use are at the top of the international agenda. The International Telecommunication Union and the World Health Organization (WHO) signed a cooperation agreement to launch a joint partnership to scale up the use of digital technologies to strengthen the delivery of public health care services in Africa. The "Digital Health for Africa" partnership aims to assist countries in Africa to promote the use of ICTs in the health sector.

The programme aims to equip health care workers with digital skills and build the required digital infrastructure, including integrated systems and platforms for providing and scaling up digital health services in a consistent and efficient manner. The partnership also aims to transform health care delivery system in Africa, and contribute to the attainment of universal health coverage and the Sustainable Development Goals and in particular SDG 3 on good health and wellbeing.

EXECUTIVE SUMMARY

A total of 1 489 health facilities were successfully interviewed. Manicaland Province had the highest number of 278 health facilities, followed by Midlands and Mashonaland West Provinces with 231 and 200, respectively. Bulawayo Province had the least number of health facilities with 33. The Local Government institutional sector owned the highest number (903) of health facilities, followed by Central Government with 366.

Manicaland Province had the highest proportion of health facilities that enrolled students/learners/trainees of about 19 percent followed by Mashonaland East Province with about 17 percent. Masvingo Province had the least proportion of health facilities that enrolled students/learners/trainees of about 3 percent.

Harare Province had the highest number of employees of 7 018 employed by health facilities followed by Midlands Province with 4 103. District (Mission/Private) Hospitals had the highest number of 11 001 employees, of which 6 947 were female.

Out of the 1 489 facilities interviewed, 1 264 had access to electricity.

Manicaland had the highest number of 6 District (Mission/Private) Hospital with access to a radio. Mashonaland West and Midlands Provinces had the highest number of Rural Hospitals with access to a radio of 3 each.

Manicaland Province had the highest number of 13 Clinics/ Rural Health Centres with access to Direct to Home (DTH) multichannel television followed by Mashonaland East Province with 7.

All Central and Provincial Hospitals had access to a fixed telephone. Of the 104 District (Mission/Private) Hospitals, 49 had access to a fixed telephone compared to 55 which had no access to a fixed telephone.

Five Central Hospitals had access to a mobile cellular telephone. Of the 104 District (Mission/Private) Hospitals, 93 facilities had access to a mobile cellular telephone while 11 facilities had no access.

Of the 1 169 Clinics/Rural Health Centres with access to a mobile signal, the highest number of 228 was in Manicaland Province followed by Midlands Province with 185. Bulawayo Province had 1 health facility without access to a mobile network signal.

Manicaland Province had the highest number of 136 health facilities with access to a computer followed by Mashonaland East and Midlands Province with 98 each.

Out of 1 333 computers used for clinical implementation, 314 were in Harare Province while Bulawayo Province accounted for 225. Out of 1 828 computers that were used for administration purposes, 513 were in Harare Province.

Out of 1 489 health facilities, 343 had access to the Internet while 1 146 did not have access.

Out of 1 489 health facilities, 51 had a website while 1 438 did not have.

Out of a total of 1 489 health facilities, 390 had an electronic system while 1 099 did not have any. Mashonaland East Province had the highest number, 59 of health facilities with an electronic system for the provision of health services, followed by Mashonaland West and Matabeleland North Provinces with 53 and 51, respectively.

A total of about US\$1.296 million was spent by health facilities on ICT equipment of which the highest expenditure of 49.3 percent was spent in Harare Province followed by 16.6 percent in Bulawayo Province. Health facilities in Matabeleland South Province had the least expenditure of about 1.4 percent.

A total of about US\$1.530 million was spent on ICT services by health facilities. Health Facilities in Harare Province had the highest expenditure on ICT services of US\$384,897 followed by US\$381,603 spent in Bulawayo Province. The least expenditure of US\$29,117 was made by health facilities in Matabeleland North Province.

CHAPTER 2: METHODOLOGY

Methodology

This chapter describes the 2017 ICT census methodology. It outlines detailed information on the scope and coverage of the Census, designing of census instruments, training of trainers, pre-test of census instruments, interviewer training process, updating of census frame, data collection, data processing (editing and coding, data entry and data cleaning).

Scope and Coverage

The census covered all the 10 provinces and was meant to provide information at all administrative levels which are national, provincial, district and ward. It also provided information by land use sectors, including urban and rural areas.

Table 2.1 shows number of health facilities classified by province and type of facility. Health facilities that responded to the census were 6 Central Hospitals, 8 Provincial Hospitals, 104 District (Mission/Private) hospitals, 1 276 Clinics/Rural Health Centres and 33 Other Health Facilities.

Table 2.1: Number of Health Facilities Classified by Province and Type of Facility: ICT Census 2017

Province	Type of Health Facility							Total
	Central Hospital	Provincial Hospital	District (Mission/Private) hospital	Infectious Disease Hospital	Rural Hospital	Clinic /Rural Health Centre	Other Health Facility	
Bulawayo	3	0	1	1	0	22	6	33
Manicaland	0	1	18	1	11	245	2	278
Mashonaland Central	0	1	9	0	6	104	2	122
Mashonaland East	0	1	15	0	5	173	0	194
Mashonaland West	0	1	12	0	8	174	5	200
Matabeleland North	0	1	8	0	4	87	5	105
Matabeleland South	0	1	10	0	8	103	4	126
Midlands	0	1	20	1	7	193	9	231
Masvingo	0	1	10	0	9	133	0	153
Harare	3	0	1	1	0	42	0	47
National	6	8	104	4	58	1 276	33	1 489

Census Questionnaire

An institutional questionnaire was used to collect data on ICT access and use by health facilities. The questionnaire was responded to by a chief respondent who in most cases is the head of the health facility or an officer from ICT or accounts departments.

Section A of the questionnaire was on identification, which solicited information about the chief respondent, registration, contact details and ownership status of the facility. The enrolment and employment section (Section B) of the questionnaire was used to collect data on enrolment of students/learners/trainees and staff engaged at the facility. Sections C, D and E were on electricity access, access to ICTs and use of ICTs by health facilities, respectively. Section F covered questions on expenditure on ICT equipment and services by health facilities classified according to Classification of Individual Consumption According to Purpose (COICOP). The reference date for the Census was 31 August 2017. A copy of the 2017 ICT Census questionnaire is Appendix 2.

Training of Trainers

Training of Trainers (ToT) workshop was conducted from 3 to 6 September 2017. The objectives of the training of trainers were to internalise objectives and train in concepts, definitions and procedures of the census, pre-test and refine the questionnaire and manual.

Training of Enumerators

Training of Enumerators (ToE) workshop was held from 15 to 20 September 2017. The objectives of the workshop were to train enumerators on how to administer the questionnaire, ensure census objectives and concepts are mastered and further refine the census instrument. The interviewers were trained at one central training venue to standardize understanding of the census objectives, instruments, expected output and ethical considerations.

Publicity

Publicity of the ICT census exercise was done through the MoHCC, ZIMSTAT field staff and local leadership. The Ministry of Health and Child Care authorised all health facilities to participate in the census.

Census Frame

The Census Frame was constructed from the national Health Information System (HIS). The frame was shared with ZIMSTAT provincial offices for updating. Further consultations and clarifications with the Ministry of Health and Child Care were done during and after the Census.

Data Collection

The data collection exercise was done over 21 days with 31 August 2017 as the Census reference date. The Census was conducted by 134 enumerators, of which 33 were female. Each enumerator was provided with a ZIMSTAT identification letter and approval letters from MoHCC, Provincial Medical Officer (PMO) and District Health Officer (DHO) to obtain information from health facilities. Data collection supervision was done by team leaders and provincial supervisors, supported by national supervisors.

Data Processing

Manual coding and editing of questionnaires was done by 44 persons in 10 days. Data entry was done by the same number of persons for 15 days. Census and Survey Processing (CSPRO 7.0) software was used to develop data entry template. Double entry was done to verify entries. Data processing was done using Statistical Analysis System (SAS) software. Data cleaning was done by 15 persons for 7 days.

Chapter 3 : CENSUS RESULTS

The Census results are classified by type of health facility, province, rural/urban area and land use sectors. The results are disaggregated by sex of head of health facility, employees and students/learners/trainees.

Distribution of Health Facilities

Table 3.1 shows number of health facilities classified by province, type of facility, and sex of head. A total of 1 489 health facilities were successfully interviewed, of which 946 were female headed. Manicaland Province had the highest number of 278 health facilities, followed by Midlands and Mashonaland West Provinces with 231 and 200, respectively. Manicaland Province had the highest number of 166 female-headed health facilities, followed by Midlands Province with 145 and Mashonaland East Province with 133. Clinics/Rural Health Centres had the highest number of 1 276 facilities followed by District (Mission/Private) hospitals with 104 facilities. Central, Provincial and District (Mission/Private) hospitals had more male heads than the remaining types of facilities.

Table 3:1 Number of Health Facilities Classified by Province, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe

Province	Type of Health Facility and Sex of Head											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	2	1	3	0	0	0	0	1	1	0	1	1
Manicaland	0	0	0	0	1	1	12	6	18	0	1	1
Mashonaland Central	0	0	0	1	0	1	8	1	9	0	0	0
Mashonaland East	0	0	0	1	0	1	11	4	15	0	0	0
Mashonaland West	0	0	0	1	0	1	11	1	12	0	0	0
Matabeleland North	0	0	0	1	0	1	5	3	8	0	0	0
Matabeleland South	0	0	0	1	0	1	9	1	10	0	0	0
Midlands	0	0	0	1	0	1	12	8	20	0	1	1
Masvingo	0	0	0	1	0	1	7	3	10	0	0	0
Harare	2	1	3	0	0	0	1	0	1	1	0	1
National	4	2	6	7	1	8	76	28	104	1	3	4

Table 3.1 Number of Health Facilities Classified by Province, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility and Sex of Head											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	0	0	0	4	18	22	3	3	6	9	24	33
Manicaland	5	6	11	94	151	245	1	1	2	112	166	278
Mashonaland Central	0	6	6	41	63	104	0	2	2	50	72	122
Mashonaland East	3	2	5	46	127	173	0	0	0	61	133	194
Mashonaland West	2	6	8	69	105	174	3	2	5	86	114	200
Matabeleland North	0	4	4	23	64	87	1	4	5	30	75	105
Matabeleland South	4	4	8	30	73	103	1	3	4	45	81	126
Midlands	1	6	7	68	125	193	4	5	9	86	145	231
Masvingo	5	4	9	40	93	133	0	0	0	53	100	153
Harare	0	0	0	7	35	42	0	0	0	11	36	47
National	20	38	58	422	854	1 276	13	20	33	543	946	1 489

Table 3.2 shows number of health facilities classified by land use, type of facility and sex of head. Communal Areas had the highest number of health facilities of 874 of which 544 were female headed. Out of the 1 489 health facilities, 946 were headed by females.

Table 3.2: Number of Health Facilities Classified by Land Use Sector, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility and Sex of Head											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	38	17	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	2	4	6	0	0	0
Urban Council Areas	4	2	6	7	1	8	19	4	23	1	3	4
Administrative Centres	0	0	0	0	0	0	5	1	6	0	0	0
Growth Points	0	0	0	0	0	0	7	1	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	4	0	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	4	2	6	7	1	8	76	28	104	1	3	4

Table 3.2: Number of Health Facilities Classified by Land Use Sector, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe
(Continued)

Land Use Sector	Type of Health Facility and Sex of Head											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	4	2	6	2	0	2	6	2	8
Communal Areas	14	29	43	278	496	774	0	2	2	330	544	874
Small Scale Commercial Farming Areas	0	0	0	11	24	35	0	0	0	11	24	35
Large Scale Commercial Farming Areas	1	1	2	16	29	45	1	1	2	20	35	55
Urban Council Areas	0	0	0	42	121	163	8	15	23	81	146	227
Administrative Centres	3	1	4	2	11	13	0	0	0	10	13	23
Growth Points	1	5	6	8	16	24	1	0	1	17	22	39
Other Urban Areas	0	1	1	10	25	35	0	2	2	14	28	42
State land	0	0	0	3	1	4	0	0	0	3	1	4
Old Resettlement Areas	1	0	1	23	64	87	0	0	0	24	65	89
A1 Farms	0	1	1	20	49	69	1	0	1	21	50	71
A2 Farms	0	0	0	5	16	21	0	0	0	6	16	22
National	20	38	58	422	854	1 276	13	20	33	543	946	1 489

Table 3.3 shows number of health facilities classified by urban and rural areas, type of facility and sex of head. Rural Areas had the highest number of health facilities with 1 267 of which 802 were female headed.

Table 3.3: Number of Health Facilities Classified by Urban and Rural Areas, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe

Area	Type of Health Facility and Sex of Head											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	4	2	6	7	1	8	18	4	22	1	3	4
Rural	0	0	0	0	0	0	58	24	82	0	0	0
National	4	2	6	7	1	8	76	28	104	1	3	4

Table 3.3: Number of Health Facilities Classified by Urban and Rural Areas, Type of Facility and Sex of Head: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility and Sex of Head											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	0	0	0	40	119	159	8	15	23	78	144	222
Rural	20	38	58	382	735	1 117	5	5	10	465	802	1 267
National	20	38	58	422	854	1 276	13	20	33	543	946	1 489

Table 3.4 shows number of health facilities classified by province, and type of ownership. The Local Government institutional sector owned the highest number of 903 health facilities, followed by Central Government with 366. Manicaland Province had the highest number of 166 health facilities owned by Local Government.

Table 3.4: Number of Health Facilities Classified by Province and Type of Ownership: ICT Census 2017, Zimbabwe

Province	Type of Ownership							
	Sole Proprietorship	Private Limited Company	Partnership	Central Government	Local Government	Parastatal	Non-Profit Making Institution	Total
Bulawayo	2	3	3	3	19	1	2	33
Manicaland	0	23	0	58	166	1	30	278
Mashonaland Central	0	7	0	29	82	1	3	122
Mashonaland East	0	4	0	43	132	0	15	194
Mashonaland West	0	13	0	46	129	1	11	200
Matabeleland North	1	9	0	30	58	1	6	105
Matabeleland South	0	6	0	38	67	2	13	126
Midlands	2	10	1	64	129	0	25	231
Masvingo	0	7	0	50	80	1	15	153
Harare	0	1	0	5	41	0	0	47
National	5	83	4	366	903	8	120	1 489

Table 3.5 shows number of health facilities classified by land use sector and type of ownership. Communal Areas had the highest number of 569 health facilities owned by Local Government. Of the 83 health facilities owned by Private Limited Companies, 28 were in Large Scale Commercial Farming Areas. Partnerships accounted for the least number (4) of health facilities of which all were in Urban Council Areas.

Table 3.5: Number of Health Facilities Classified by Land Use Sector and Type of Ownership: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Ownership							
	Sole Proprietorship	Private Limited Company	Partnership	Central Government	Local Government	Parastatal	Non-Profit Making Institution	Total
Special category Area	0	0	0	8	0	0	0	8
Communal Areas	0	11	0	202	569	1	91	874
Small Scale Commercial Farming Area	0	0	0	6	29	0	0	35
Large Scale Commercial Farming Area	0	28	0	4	13	1	9	55
Urban Council Areas	4	19	4	54	133	5	8	227
Administrative Centres	0	0	0	11	12	0	0	23
Growth Points	1	2	0	19	16	1	0	39
Other Urban Areas	0	20	0	4	17	0	1	42
State Land	0	1	0	1	2	0	0	4
Old Resettlement Areas	0	0	0	39	46	0	4	89
A1 Farms	0	2	0	14	50	0	5	71
A2 Farms	0	0	0	4	16	0	2	22
National	5	83	4	366	903	8	120	1 489

Table 3.6 shows number of health facilities classified by urban and rural areas and type of health facility. Of the 903 health facilities owned by Local Government, 776 were in rural areas.

Table 3.6: Number of Health Facilities Classified by Urban and Rural Areas and Type of Health Facility: ICT Census 2017, Zimbabwe

Area	Type of Health Facility							
	Sole Proprietorship	Private Limited Company	Partnership	Central Government	Local Government	Parastatal	Non-Profit Making Institution	Total
Urban	4	19	4	55	127	5	8	222
Rural	1	64	0	311	776	3	112	1 267
National	5	83	4	366	903	8	120	1 489

Students/Learners/Trainees Enrolment

Table 3.7 shows distribution of health facilities that enrolled students/learners/trainees as at 31 August 2017 classified by province. Manicaland Province had the highest proportion of health facilities that enrolled students/learners/trainees of about 19 percent followed by Mashonaland East Province with about 17 percent. Masvingo Province had the least proportion of health facilities that enrolled students/learners/trainees of about 3 percent.

**Table 3.7: Distribution of Health Facilities That Enrolled Students/Learners/Trainees as at 31 August 2017
Classified by Province: ICT Census 2017, Zimbabwe**

Province	Number of Health Facilities	Percent
Bulawayo	18	11.6
Manicaland	29	18.7
Mashonaland Central	11	7.1
Mashonaland East	27	17.4
Mashonaland West	24	15.5
Matabeleland North	7	4.5
Matabeleland South	6	3.9
Midlands	8	5.2
Masvingo	5	3.2
Harare	20	12.9
National	155	100

Table 3.8 shows distribution of health facilities that enrolled students/learners/trainees as at 31 August 2017 classified by land use sector. Urban Council Areas had the highest proportion of 40 percent of health facilities that enrolled students/learners/trainees followed by Communal Areas with about 38 percent. A1 Farms had the least proportions of about 1 percent of health facilities that enrolled students/learners/trainees.

**Table 3.8: Distribution of Health Facilities That Enrolled Students/Learners/Trainees as at 31 August 2017
Classified by Land Use Sector: ICT Census 2017, Zimbabwe**

Land Use Sector	Number of Health Facilities	Percent
Communal Areas	59	38.1
Small Scale Commercial Farming Area	2	1.3
Large Scale Commercial Farming Area	3	1.9
Urban Council Areas	62	40.0
Administrative Centres	5	3.2
Growth Points	12	7.7
Other Urban Areas	3	1.9
Old Resettlement Areas	5	3.2
A1 Farms	1	0.6
A2 Farms	3	1.9
National	155	100

Table 3.9 shows distribution of health facilities that enrolled students/learners/trainees as at 31 August 2017 classified by urban and rural areas. Rural Areas accounted for the highest proportion of about 61 percent of health facilities that enrolled students/learners/trainees compared to Urban Areas with about 39 percent.

**Table 3.9: Distribution of Health Facilities That Enrolled Students/Learners/Trainees as at 31 August 2017
Classified by Urban and Rural Area: ICT Census 2017, Zimbabwe**

Area	Number of Health Facilities	Percent
Urban	60	38.7
Rural	95	61.3
National	155	100

Table 3.10 shows the number of students/learners/trainees enrolled by health facilities as at 31 August 2017 classified by province, type of health facility and sex of students/learners/trainees. Harare Province had the highest number of students/learners/trainees enrolled, with 1 379, followed by Bulawayo with 857. Out of 3 860 students/learners/trainees, 2 881 were females.

Table 3.10: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Province, Type of Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	189	575	764	0	0	0	2	4	6	0	2	2
Manicaland	0	0	0	8	76	84	46	165	211	0	0	0
Mashonaland Central	0	0	0	8	43	51	13	31	44	0	0	0
Mashonaland East	0	0	0	0	0	0	16	51	67	0	0	0
Mashonaland West	0	0	0	8	27	35	21	30	51	0	0	0
Matabeleland North	0	0	0	27	35	62	14	85	99	0	0	0
Matabeleland South	0	0	0	132	163	295	0	0	0	0	0	0
Midlands	0	0	0	10	95	105	24	82	106	0	0	0
Masvingo	0	0	0	2	13	15	18	94	112	0	0	0
Harare	320	991	1 311	0	0	0	0	0	0	0	0	0
National	509	1 566	2 075	195	452	647	154	542	696	0	2	2

Table 3.10: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Province, Type of Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	0	0	0	13	28	41	4	40	44	208	649	857
Manicaland	3	13	16	9	25	34	0	0	0	66	279	345
Mashonaland Central	0	0	0	3	9	12	0	0	0	24	83	107
Mashonaland East	0	3	3	22	45	67	0	0	0	38	99	137
Mashonaland West	3	7	10	21	36	57	0	0	0	53	100	153
Matabeleland North	0	0	0	4	6	10	0	0	0	45	126	171
Matabeleland South	1	2	3	6	4	10	1	0	1	140	169	309
Midlands	10	43	53	5	3	8	0	0	0	49	223	272
Masvingo	0	0	0	1	2	3	0	0	0	21	109	130
Harare	0	0	0	15	53	68	0	0	0	335	1 044	1 379
National	17	68	85	99	211	310	5	40	45	979	2 881	3 860

Table 3.11 shows the number of students/learners/trainees enrolled by health facilities as at 31 August 2017 classified by land use sector, type of health facility and sex of students/learners/trainees. The highest number of 2 974 students/learners/trainees were enrolled in Urban Council Areas followed by Communal Areas with 533. Of the 2 075 students/learners/trainees in Central Hospitals, 1 566 were female.

Table 3.11: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Land Use Sector, Type of Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	56	297	353	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	25	83	108	0	0	0
Urban Council Areas	509	1 566	2 075	195	452	647	33	29	62	0	2	2
Administrative Centres	0	0	0	0	0	0	3	3	6	0	0	0
Growth Points	0	0	0	0	0	0	34	125	159	0	0	0
Other Urban Areas	0	0	0	0	0	0	0	0	0	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	3	3	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	3	2	5	0	0	0
National	509	1 566	2 075	195	452	647	154	542	696	0	2	2

Table 3.11: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Land Use Sector, Type of Health Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	13	59	72	48	60	108	0	0	0	117	416	533
Small Scale Commercial Farming Area	0	0	0	3	4	7	0	0	0	3	4	7
Large Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	25	83	108
Urban Council Areas	0	0	0	36	107	143	5	40	45	778	2 196	2 974
Administrative Centres	1	2	3	1	4	5	0	0	0	5	9	14
Growth Points	2	6	8	0	19	19	0	0	0	36	150	186
Other Urban Areas	1	1	2	5	7	12	0	0	0	6	8	14
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	3	3	6	0	0	0	3	6	9
A1 Farms	0	0	0	2	2	4	0	0	0	2	2	4
A2 Farms	0	0	0	1	5	6	0	0	0	4	7	11
National	17	68	85	99	211	310	5	40	45	979	2 881	3 860

Table 3.12 shows the number of students/learners/trainees enrolled by health facilities as at 31 August 2017 classified by urban and rural areas, type of health facility and sex of students/learners/trainees. Urban Areas had the highest number of 2 967 students/learners/trainees enrolled by health facilities compared to 893 in rural areas. Central Hospitals enrolled the highest number of 2 075 students/learners/trainees followed by District (Mission/Private) Hospitals with 696. Infectious Disease Hospitals had no male students/learners/trainees enrolled.

Table 3.12: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Province, Type of Health Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	509	1 566	2075	195	452	647	33	29	62	0	2	2
Rural	0	0	0	0	0	0	121	513	634	0	0	0
National	509	1 566	2075	195	452	647	154	542	696	0	2	2

Table 3.12: Number of Students/Learners/Trainees Enrolled by Health Facilities as at 31 August 2017 Classified by Province, Type of Health Facility and Sex of Students/Learners/Trainees: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	0	0	0	35	101	136	5	40	45	777	2 190	2 967
Rural	17	68	85	64	110	174	0	0	0	202	691	893
National	17	68	85	99	211	310	5	40	45	979	2 881	3 860

Employment

Table 3.13 shows number of employees engaged by health facilities as at 31 August 2017 classified by province, type of health facility and sex of employees as at 31 August 2017. Harare Province had the highest number of employees of 7 018 employed in health facilities followed by Midlands Province with 4 103. District (Mission/Private) Hospitals had the highest number of 11 001 employees, of which 6 947 were female. Infectious Disease Hospitals had the least number of 283 employees.

Table 3.13: Number of Employees engaged by Health Facilities as at 31 August 2017 Classified by Province, Type of Health Facility and Sex of Employees: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	889	1 685	2 574	0	0	0	91	256	347	10	31	41
Manicaland	0	0	0	136	334	470	621	1 149	1 770	3	14	17
Mashonaland Central	0	0	0	142	342	484	442	656	1 098	0	0	0
Mashonaland East	0	0	0	194	373	567	665	1 123	1 788	0	0	0
Mashonaland West	0	0	0	174	355	529	503	729	1 232	0	0	0
Matabeleland North	0	0	0	97	82	179	305	448	753	0	0	0
Matabeleland South	0	0	0	99	211	310	392	774	1 166	0	0	0
Midlands	0	0	0	102	457	559	651	1 214	1 865	3	19	22
Masvingo	0	0	0	137	412	549	343	564	907	0	0	0
Harare	1 708	3 957	5 665	0	0	0	41	34	75	87	116	203
National	2 597	5 642	8 239	1 081	2 566	3 647	4 054	6 947	11 001	103	180	283

Table3.13: Number of Employees at Health Facilities Classified by Province, Type of Health Facility and Sex of Employees as at 31 August 2017: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	0	0	0	77	333	410	43	68	111	1 110	2 373	3 483
Manicaland	95	152	247	539	889	1 428	1	3	4	1 395	2 541	3 936
Mashonaland Central	34	76	110	372	757	1 129	6	5	11	996	1 836	2 832
Mashonaland East	75	153	228	325	683	1 008	0	0	0	1 259	2 332	3 591
Mashonaland West	113	175	288	443	680	1 123	89	26	115	1 322	1 965	3 287
Matabeleland North	45	81	126	223	420	643	5	10	15	675	1 041	1 716
Matabeleland South	45	77	122	238	471	709	4	22	26	778	1 555	2 333
Midlands	88	172	260	483	829	1 312	30	55	85	1 357	2 746	4 103
Masvingo	151	226	377	314	661	975	0	0	0	945	1 863	2 808
Harare	0	0	0	176	899	1 075	0	0	0	2 012	5 006	7 018
National	646	1 112	1 758	3 190	6 622	9 812	178	189	367	11 849	23 258	35 107

Table 3.14 shows the number of employees engaged by health facilities as at 31 August 2017 classified by land use sector, type of health facility and sex of employees. Health facilities in Urban Council Areas had the highest number of 18 760 employees engaged as at 31 August 2017 followed by Communal Areas with 10 551. Of the 8 239 employees engaged as at 31 August 2017 in Central Hospitals, 5 462 were female. Health facilities in State Lands had the least number of 16 employees engaged as at 31 August 2017.

Table 3.14: Number of Employees Engaged by Health Facilities Classified by Land Use Sector, Type of Health Facility and Sex of Employees as at 31 August 2017: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	1 609	2 732	4 341	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	203	407	610	0	0	0
Urban Council Areas	2 597	5 642	8 239	1 081	2 566	3 647	1 258	2 414	3 672	103	180	283
Administrative Centres	0	0	0	0	0	0	343	368	711	0	0	0
Growth Points	0	0	0	0	0	0	509	783	1 292	0	0	0
Other Urban Areas	0	0	0	0	0	0	105	190	295	0	0	0
State lands	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	6	17	23	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	21	36	57	0	0	0
National	2 597	5 642	8 239	1 081	2 566	3 647	4 054	6 947	11 001	103	180	283

Table3.14: Number of Employees Engaged by Health Facilities Classified by Land Use Sector, Sex of Employees and Type of Health Facility as at 31 August 2017: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Special Category Area	0	0	0	22	23	45	71	12	83	93	35	128
Communal Areas	396	731	1 127	1 893	3 186	5 079	0	4	4	3 898	6 653	10 551
Small Scale Commercial Farming Area	0	0	0	54	107	161	0	0	0	54	107	161
Large Scale Commercial Farming Area	10	20	30	76	140	216	1	3	4	290	570	860
Urban Council Areas	0	0	0	558	2 098	2 646	100	163	263	5 697	13 063	18 760
Administrative Centres	111	130	241	30	64	94	0	0	0	484	562	1 046
Growth Points	84	119	203	71	186	257	3	2	5	667	1 090	1 757
Other Urban Areas	12	24	36	97	198	295	2	4	6	216	416	632
State land	0	0	0	6	10	16	0	0	0	6	10	16
Old Resettlement Areas	29	73	102	196	284	480	0	0	0	231	374	605
A1 Farms	4	15	19	138	229	367	1	1	2	143	245	388
A2 Farms	0	0	0	49	97	146	0	0	0	70	133	203
National	646	1 112	1 758	3 190	6 622	9 812	178	189	367	11 849	23 258	35 107

Table 3.15 shows the number of employees engaged by health facilities as at 31 August 2017 classified by urban and rural areas, type of health facility and sex of employees. Health facilities in Urban Areas had the highest number of employees of 18 633 compared to Rural Areas with 16 474. Central, Provincial and Infectious Disease Hospitals were only found in Urban Areas.

Table 3.15: Number of Employees engaged by Health Facilities as at 31 August 2017 Classified by Urban and Rural Areas, Type of Health Facility and Sex of Employees: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	2 597	5 642	8 239	1 081	2 566	3 647	1 227	2 366	3 593	103	180	283
Rural	0	0	0	0	0	0	2 827	4 581	7 403	0	0	0
National	2 597	5 642	8 239	1 081	2 566	3 647	4 054	6 947	11 001	103	180	283

Table 3.15: Number of Employees engaged by Health Facilities as at 31 August 2017 Classified by Urban and Rural Areas, Type of Health Facility and Sex of Employees: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Urban	0	0	0	553	2 055	2 608	100	163	263	5 661	12 972	18 633
Rural	646	1 112	1 758	2 637	4 567	7 204	78	26	104	6 188	10 286	16 474
National	646	1 112	1 758	3 190	6 622	9 812	178	189	367	11 849	23 258	35 107

Access to Electricity

During the Census, health facilities were asked whether they had access to electricity or not. A facility is considered to have access to electricity if the electricity supply service is available for use at any time, regardless of whether it is used.

Table 3.16 shows the number of health facilities with access to electricity in the last 4 Months ending 31 August 2017 classified by Province and type of facility. Out of the 1 489 facilities interviewed, 1 264 had access to electricity. Manicaland Province had the highest number of 247 health facilities with access to electricity followed by Midlands and Mashonaland West Provinces with 183 and 179, respectively. All health facilities in Bulawayo Province had access to electricity, while only 1 in Harare Province had no access to electricity. Midlands Province had the highest number of 48 of health facilities without access to electricity.

Table 3.16: Distribution of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With	Without	Total	With	Without	Total	With	Without	Total	With	Without	Total
Bulawayo	3	0	3	0	0	0	1	0	1	1	0	1
Manicaland	0	0	0	1	0	1	18	0	18	1	0	1
Mashonaland Central	0	0	0	1	0	1	9	0	9	0	0	0
Mashonaland East	0	0	0	1	0	1	15	0	15	0	0	0
Mashonaland West	0	0	0	1	0	1	12	0	12	0	0	0
Matabeleland North	0	0	0	1	0	1	8	0	8	0	0	0
Matabeleland South	0	0	0	1	0	1	10	0	10	0	0	0
Midlands	0	0	0	1	0	1	20	0	20	1	0	1
Masvingo	0	0	0	1	0	1	10	0	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	8	0	8	104	0	104	4	0	4

Table 3.16: Distribution of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With	Without	Total	With	Without	Total	With	Without	Total	With	Without	Total
Bulawayo	0	0	0	22	0	22	6	0	6	33	0	33
Manicaland	11	0	11	214	31	245	2	0	2	247	31	278
Mashonaland Central	6	0	6	85	19	104	2	0	2	103	19	122
Mashonaland East	5	0	5	132	41	173	0	0	0	153	41	194
Mashonaland West	8	0	8	153	21	174	5	0	5	179	21	200
Matabeleland North	3	1	4	78	9	87	5	0	5	95	10	105
Matabeleland South	8	0	8	89	14	103	3	1	4	111	15	126
Midlands	7	0	7	145	48	193	9	0	9	183	48	231
Masvingo	7	2	9	96	37	133	0	0	0	114	39	153
Harare	0	0	0	41	1	42	0	0	0	46	1	47
National	55	3	58	1 055	221	1 276	32	1	33	1 264	225	1 489

Table 3.17 shows the number of health facilities with and without access to electricity classified by land use sector and type of facility in the last 4 Months ending 31 August 2017. Among health facilities with access to electricity, Communal Areas had the highest number of 691 health facilities with access to electricity followed by Urban Council Areas which had 227 while health facilities in State Land had the least number of 4.

Table 3.17: Number of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	55	0	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	6	0	6	0	0	0
Urban Council Area	6	0	6	8	0	8	23	0	23	4	0	4
Administrative Centres	0	0	0	0	0	0	6	0	6	0	0	0
Growth Points	0	0	0	0	0	0	8	0	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	4	0	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Area	0	0	0	0	0	0	1	0	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	6	0	6	8	0	8	104	0	104	4	0	4

Table 3.17: Number of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	6	0	6	2	0	2	8	0	8
Communal Areas	40	3	43	594	180	774	2	0	2	691	183	874
Small Scale Commercial Farming Area	0	0	0	26	9	35	0	0	0	26	9	35
Large Scale Commercial Farming Area	2	0	2	44	1	45	2	0	2	54	1	55
Urban Council Area	0	0	0	159	4	163	22	1	23	222	5	227
Administrative Centres	4	0	4	12	1	13	0	0	0	22	1	23
Growth Points	6	0	6	24	0	24	1	0	1	39	0	39
Other Urban Areas	1	0	1	35	0	35	2	0	2	42	0	42
State Land	0	0	0	4	0	4	0	0	0	4	0	4
Old Resettlement Area	1	0	1	72	15	87	0	0	0	74	15	89
A1 Farms	1	0	1	60	9	69	1	0	1	62	9	71
A2 Farms	0	0	0	19	2	21	0	0	0	20	2	22
National	55	3	58	1 055	221	1 276	32	1	33	1 264	225	1 489

Table 3.18 shows the number of health facilities with and without access to electricity in the last 4 months ending 31 August 2017 classified by Urban and Rural Areas and Type of Facility. Rural Areas had the highest number (899) of Clinics/Rural Health Centres with access to electricity. All Central, Provincial, District (Mission/Private) and Infectious Disease Hospitals had access to electricity.

Table 3.18: Number of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	6	0	6	8	0	8	22	0	22	4	0	4
Rural	0	0	0	0	0	0	82	0	82	0	0	0
National	6	0	6	8	0	8	104	0	104	4	0	4

Table 3.18: Number of Health Facilities With and Without Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	0	0	0	156	3	159	22	1	23	218	4	222
Rural	55	3	58	899	218	1 117	10	0	10	1 046	221	1 267
National	55	3	58	1 055	221	1 276	32	1	33	1 264	225	1 489

Table 3.19 shows the number of health facilities with access to electricity in the last 4 Months ending 31 August 2017 classified by province, main source of electricity and type of facility. Out of 1 264 health facilities with access to electricity, 1 048 were connected to the main grid, followed by 185 that used solar. Manicaland Province had the highest number of 247 health facilities with access to electricity followed by Midlands Province with 183.

Table 3.19: Number of Health Facilities With Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Main Source of Electricity and Type of Facility and Province: ICT Census 2017, Zimbabwe

Main Source of Electricity and Type of Facility	Province										
	Bulawayo	Manicaland	Mashonaland Central	Mashonaland East	Mashonaland West	Matabeleland North	Matabeleland South	Midlands	Masvingo	Harare	National
Fuel Powered Generator											
Clinic/Rural Health Centre	0	1	1	1	6	0	0	1	3	0	13
Other Health Facility	0	0	0	0	1	0	0	1	0	0	2
Total	0	1	1	1	7	0	0	2	3	0	15
Local Mini Grid											
District (Mission/Private) Hospital	0	0	0	0	0	1	0	0	0	0	1
Rural Hospital	0	0	0	0	0	1	1	0	0	0	2
Clinic/Rural Health Centre	0	3	0	1	4	1	3	1	0	0	13
Total	0	3	0	1	4	3	4	1	0	0	16
National Grid											
Central Hospital	3	0	0	0	0	0	0	0	0	3	6
Provincial Hospital	0	1	1	1	1	1	1	1	1	0	8
District (Mission/Private) Hospital	1	17	9	15	12	6	10	19	10	1	100
Infectious Disease Hospital	1	1	0	0	0	0	0	1	0	1	4
Rural Hospital	0	11	6	5	7	1	6	7	7	0	50
Clinic/Rural Health Centre	22	184	76	105	119	50	74	108	71	41	850
Other Health Facility	6	2	2	0	4	5	3	0	0	0	30
Total	33	216	94	126	143	63	94	144	89	46	1 048
Solar											
District (Mission/Private) Hospital	0	1	0	0	0	1	0	1	0	0	3
Rural Hospital	0	0	0	0	1	1	1	0	0	0	3
Clinic/Rural Health Centre	0	26	8	25	24	27	12	35	22	0	179
Total	0	27	8	25	25	29	13	36	22	0	185

Table 3.20 shows the number of health facilities with access to electricity in the last 4 Months ending 31 August 2017 classified by main source and type of facility and land use sector. Of the 691 health facilities in Communal Areas with access to electricity, 524 reported the national grid as their main source of electricity.

Table 3.20: Number of Health Facilities With Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Main Source of Electricity, Type of Facility and Land Use Sector: ICT Census 2017, Zimbabwe

Main Source and Type of Facility	Land Use Sector												
	Special category area	Communal Areas	Small Scale Commercial Farming Area	Large Scale Commercial Farming Area	Urban Council Area	Administrative Centres	Growth Points	Other Urban Areas	State land	Old Resettlement Area	A1 Farms	A2 Farms	National
Fuel Powered Generator													
Clinic/Rural Health Centre	0	11	1	0	0	0	0	0	0	1	0	0	13
Other Health Facility	0	0	0	0	1	0	0	0	0	0	1	0	2
Total	0	11	1	0	1	0	0	0	0	1	1	0	15
Local Mini Grid													
District (Mission/Private) Hospital	0	0	0	0	0	0	1	0	0	0	0	0	1
Rural Hospital	0	2	0	0	0	0	0	0	0	0	0	0	2
Clinic/Rural Health Centre	0	5	0	1	0	0	0	0	0	5	1	1	13
Total	0	7	0	1	0	0	1	0	0	5	1	1	16
National Grid													
Central Hospital	0	0	0	0	6	0	0	0	0	0	0	0	6
Provincial Hospital	0	0	0	0	8	0	0	0	0	0	0	0	8
District(Mission/Private) Hospital	0	52	0	6	23	6	7	4	0	1	0	1	100
Infectious Disease Hospital	0	0	0	0	4	0	0	0	0	0	0	0	4
Rural Hospital	0	35	0	2	0	4	6	1	0	1	1	0	50
Clinic/Rural Health Centre	6	435	18	42	157	12	22	34	4	49	53	18	850
Other Health Facility	2	2	0	2	21	0	1	2	0	0	0	0	30
Total	8	524	18	52	219	22	36	41	4	51	54	19	1 048
Solar													
District (Mission/Private) Hospital	0	3	0	0	0	0	0	0	0	0	0	0	3
Rural Hospital	0	3	0	0	0	0	0	0	0	0	0	0	3
Clinic/Rural Health Centre	0	143	7	1	2	0	2	1	0	17	6	0	179
Total	0	149	7	1	2	0	2	1	0	17	6	0	185

Table 3.21 shows the number of health facilities with access to electricity classified by main source of electricity, type of facility and urban and rural areas in the last 4 months ending 31 August 2017. Of the 1 048 health facilities with access to electricity, 833 were in rural areas while 215 were in urban areas

Table 3.21: Number of Health Facilities With Access to Electricity in the Last 4 Months Ending 31 August 2017 Classified by Main Source of Electricity, Type of Facility and Urban and Rural Areas: ICT Census 2017, Zimbabwe

Main Source of Electricity and Type of Facility	Area		
	Urban	Rural	National
Fuel Powered Generator			
Clinic/Rural Health Centre	0	13	13
Other Health Facility	1	1	2
Total	1	14	15
Local Mini Grid			
District(Mission/Private) Hospital	0	1	1
Rural Hospital	0	2	2
Clinic/Rural Health Centre	0	13	13
Total	0	16	16
National Grid			
Central Hospital	6	0	6
Provincial Hospital	8	0	8
District(Mission/Private) Hospital	22	78	100
Infectious Disease Hospital	4	0	4
Rural Hospital	0	50	50
Clinic/Rural Health Centre	154	696	850
Other Health Facility	21	9	30
Total	215	833	1 048
Solar			
District(Mission/Private) Hospital	0	3	3
Rural Hospital	0	3	3
Clinic/Rural Health Centre	2	177	179
Total	2	183	185

Access to Information and Communication Technologies

Access to information and communication technologies covered by the Census include access to radio, television, fixed and mobile telephone, computer and the internet. For a health facility to have access to ICTs, the ICTs should generally be available for use by all members at the health facility at any time, regardless of whether it is being used and in working order.

Radio

Table 3.22 shows the number of health facilities with and without access to a radio in the last 4 months ending 31 August 2017 classified by province and type of facility. Harare Province accounted for 3 of the 4 Central Hospitals with access to a radio. Manicaland Province had the highest number of 6 District (Mission/Private) Hospital with access to a radio. Mashonaland West and Midlands Provinces had the highest number of Rural Hospitals with access to a radio of 3 each.

Midlands Province had the highest number of 15 District (Mission/Private) Hospitals without access to a radio followed by Manicaland Province with 13. Manicaland Province had the highest number of 231 Clinics/ Rural Health Centres without access to a radio followed by Midlands Province with 183. Bulawayo Province had the least number of Clinics/ Rural Health Centres without access to a radio of 18.

Table 3.22 : Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Facility								
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	1	2	3	0	0	0	0	1	1
Manicaland	0	0	0	0	1	1	6	13	18
Mashonaland Central	0	0	0	0	1	1	3	6	9
Mashonaland East	0	0	0	0	1	1	4	10	15
Mashonaland West	0	0	0	0	1	1	3	9	12
Matabeleland North	0	0	0	1	0	1	0	8	8
Matabeleland South	0	0	0	0	1	1	3	7	10
Midlands	0	0	0	0	1	1	5	15	20
Masvingo	0	0	0	0	1	1	2	8	10
Harare	3	0	3	0	0	0	0	1	1
National	4	2	6	1	7	8	26	78	104

Table 3.22: Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	1	0	1	0	0	0	4	18	22	1	5	6
Manicaland	0	1	1	2	9	11	13	232	245	0	2	2
Mashonaland Central	0	0	0	1	5	6	4	100	104	0	2	2
Mashonaland East	0	0	0	0	5	5	5	168	173	0	0	0
Mashonaland West	0	0	0	3	5	8	8	166	174	1	4	5
Matabeleland North	0	0	0	1	3	4	3	84	87	0	5	5
Matabeleland South	0	0	0	1	7	8	2	101	103	1	3	4
Midlands	0	1	1	3	4	7	9	184	193	2	7	9
Masvingo	0	0	0	1	8	9	3	130	133	0	0	0
Harare	1	0	1	0	0	0	4	38	42	0	0	0
National	2	2	4	12	46	58	55	1 221	1 276	5	28	33

Table 3.23 shows the number of health facilities with and without access to a radio in the last 4 Months ending 31 August 2017 classified by land use sector and type of facility. Urban Council Areas accounted for 4 Central Hospitals, 1 Provincial Hospital and 3 District (Mission/Private) Hospitals with access to a radio. A total of 26 District (Mission/ Private) Hospitals had access to a radio with Communal Areas accounting for 15.

A total of 7 Provincial Hospitals in Urban Council Areas had no access to a radio. Communal Areas had the highest number of 40 District (Mission/Private) Hospitals without access to a radio followed by Urban Council Areas with 18.

Table 3.23: Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility								
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital		
	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total
Special Category Area	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	15	40	55
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	3	3	6
Urban Council Areas	4	2	6	1	7	8	4	19	23
Administrative Centres	0	0	0	0	0	0	1	5	6
Growth Points	0	0	0	0	0	0	2	6	8
Other Urban Areas	0	0	0	0	0	0	1	3	4
State Land	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1
A1 Farms	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	0	1	1
National	4	2	6	1	7	8	26	78	104

Table 3.23: Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total
Special Category Area	0	0	0	0	0	0	1	5	6	0	2	2
Communal Areas	0	0	0	8	35	43	23	751	774	0	2	2
Small Scale Commercial Farming Areas	0	0	0	0	0	0	0	35	35	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	2	2	1	44	45	0	2	2
Urban Council Areas	2	2	4	0	0	0	18	145	163	5	18	23
Administrative Centres	0	0	0	1	3	4	2	11	13	0	0	0
Growth Points	0	0	0	3	3	6	1	23	24	0	1	1
Other Urban Areas	0	0	0	0	1	1	2	33	35	0	2	2
State Land	0	0	0	0	0	0	0	4	4	0	0	0
Old Resettlement Areas	0	0	0	0	1	1	4	83	87	0	0	0
A1 Farms	0	0	0	0	1	1	2	67	69	0	1	1
A2 Farms	0	0	0	0	0	0	1	20	21	0	0	0
National	2	2	4	12	46	58	55	1 221	1 276	5	28	33

Table 3.24 shows the number of health facilities with and without access to a radio in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. All Central Hospitals and 1 Provincial Hospital with access to a radio were in urban areas. Rural Areas accounted for the highest number of 22 District (Mission/ Private) Hospitals with access to a radio compared to 3 for Urban Areas. Rural Areas accounted for the highest number of 37 Clinics/ Rural Health Centres with access to a radio compared to 17 in Urban Areas.

A total of 1 219 Clinics/ Rural Health Centres had no access to a radio with Rural Areas accounting for 1 079. At national level, there were 78 District (Mission/ Private) Hospitals without access to a radio with Rural Areas accounting for 59.

Table 3.24: Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Facility								
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital		
	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total
Urban	4	2	6	1	7	8	4	18	22
Rural	0	0	0	0	0	0	22	60	82
National	4	2	6	1	7	8	26	78	104

Table 3.24: Number of Health Facilities With and Without Access to a Radio in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total	With access to a radio	Without access to a radio	Total
Urban	2	2	4	0	0	0	18	141	159	5	18	23
Rural	0	0	0	12	46	58	37	1 080	1 117	0	10	10
National	2	2	4	12	46	58	55	1 221	1 276	5	28	33

Table 3.25 shows the number of health facilities with and without access to a two-way radio in the last 4 Months ending 31 August 2017 classified by province and type of facility. Harare Province accounted for 2 of the 3 Central Hospitals with access to a two-way radio. Only 1 Provincial Hospital out of a national total of 7 had access to a two-way radio. Mashonaland East and Midlands Provinces had the highest number of District

(Mission/Private) Hospitals with access to a two-way radio of 2 each. The only Infectious Disease Hospital with access to a two-way radio was in Bulawayo Province.

Two Central Hospitals without access to a two-way radio were in Bulawayo Province. Midlands Province had the highest number of 18 District (Mission/Private) Hospitals without access to a two-way radio followed by Manicaland Province with 17. Manicaland Province had the highest number of 233 Clinics/ Rural Health Centres without access to a two-way radio followed by Midlands Province with 191. Bulawayo Province had the least number of 22 Clinics/ Rural Health Centres without access to a two-way radio.

Table 3.25: Number of Health Facilities With and Without Access to a Two-Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Facility								
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital		
	With access to two way radio	Without access to two way radio	Total	With access to two way radio	Without access to two way radio	Total	With access to two way radio	Without access to two way radio	Total
Bulawayo	1	2	3	0	0	0	0	1	1
Manicaland	0	0	0	0	1	1	1	17	18
Mashonaland Central	0	0	0	0	1	1	1	8	9
Mashonaland East	0	0	0	0	1	1	2	13	15
Mashonaland West	0	0	0	1	0	1	0	12	12
Matabeleland North	0	0	0	0	1	1	0	8	8
Matabeleland South	0	0	0	0	1	1	0	10	10
Midlands	0	0	0	0	1	1	2	18	20
Masvingo	0	0	0	0	1	1	0	10	10
Harare	2	1	3	0	0	0	0	1	1
National	3	3	6	1	7	8	6	98	104

Table 3.25: Number of Health Facilities With and Without Access to a Two-Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total
Bulawayo	1	0	1	0	0	0	0	22	22	0	6	6
Manicaland	0	1	1	1	10	11	12	233	245	1	1	2
Mashonaland Central	0	0	0	0	6	6	8	96	104	0	2	2
Mashonaland East	0	0	0	1	4	5	0	173	173	0	0	0
Mashonaland West	0	0	0	0	8	8	10	164	174	0	5	5
Matabeleland North	0	0	0	0	4	4	5	82	87	0	5	5
Matabeleland South	0	0	0	0	8	8	2	101	103	0	4	4
Midlands	0	1	1	0	7	7	1	192	193	2	7	9
Masvingo	0	0	0	0	9	9	1	132	133	0	0	0
Harare	0	1	1	0	0	0	2	40	42	0	0	0
National	1	3	4	2	56	58	41	1 235	1 276	3	30	33

Table 3.26 shows the number of health facilities with and without access to a two-way radio in the last 4 Months ending 31 August 2017 classified by land use sector and type of facility. Urban Council Areas accounted for all Central Hospitals and Provincial Hospitals with access to a two-way radio. Large Scale Commercial Farming Areas accounted for 2 of the 6 District (Mission/ Private) Hospitals with access to a two-way radio. Communal Areas had the highest number of 22 Clinics/ Rural Health Centres with access to a two-way radio followed by Urban Council Areas with 11.

A total of 7 Provincial Hospitals in Urban Council Areas had no access to a two-way radio. Communal Areas had the highest number of 54 District (Mission/ Private) Hospitals without access to a two-way radio followed by Urban Council Areas with 22. A total of 1 235 Clinics/Rural Health Centres had no access to a two-way radio with Communal Areas accounting for 752.

Table 3.26: Number of Health Facilities With and Without Access to a Two-Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility								
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital		
	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total
Special Category Area	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	1	54	55
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	2	4	6
Urban Council Areas	3	3	6	1	7	8	1	22	23
Administrative Centres	0	0	0	0	0	0	1	5	6
Growth Points	0	0	0	0	0	0	1	7	8
Other Urban Areas	0	0	0	0	0	0	0	4	4
State Land	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1
A1 Farms	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	0	1	1
National	3	3	6	1	7	8	6	98	104

Table 3.26: Number of Health Facilities With and Without Access to a Two Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to two way radio	Without access to two way radio	Total	With access to two way radio	Without access to two way radio	Total	With access to two way radio	Without access to two way radio	Total	With access to two way radio	Without access to two way radio	Total
Special Category Areas	0	0	0	0	0	0	0	6	6	0	2	2
Communal Areas	0	0	0	2	41	43	22	752	774	0	2	2
Small Scale Commercial Farming Areas	0	0	0	0	0	0	1	34	35	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	2	2	3	42	45	1	1	2
Urban Council Areas	1	3	4	0	0	0	11	152	163	2	21	23
Administrative Centres	0	0	0	0	4	4	0	13	13	0	0	0
Growth Points	0	0	0	0	6	6	0	24	24	0	1	1
Other Urban Areas	0	0	0	0	1	1	0	35	35	0	2	2
State Land	0	0	0	0	0	0	0	4	4	0	0	0
Old Resettlement Area	0	0	0	0	1	1	1	86	87	0	0	0
A1 Farms	0	0	0	0	1	1	2	67	69	0	1	1
A2 Farms	0	0	0	0	0	0	1	20	21	0	0	0
National	1	3	4	2	56	58	41	1 235	1 276	3	30	33

Table 3.27 shows the number of health facilities with and without access to a two-way radio in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. Only 1 District (Mission/Private) Hospital in Urban Areas had access to a two-way radio compared to 5 in Rural Areas.

District (Mission/Private) Hospitals without access to a two-way radio were 76 in Rural Areas compared to 19 in Urban Areas.

Table 3.27: Number of Health Facilities With and Without Access to a Two-Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Facility								
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital		
	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total
Urban	3	3	6	1	7	8	1	21	22
Rural	0	0	0	0	0	0	5	77	83
National	3	3	6	1	7	8	6	98	104

Table 3.27: Number of Health Facilities With and Without Access to a Two-Way Radio in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total	With access to two-way radio	Without access to two-way radio	Total
Urban	1	3	4	0	0	0	11	148	159	2	21	23
Rural	0	0	0	2	56	58	30	1 087	1 117	1	9	10
National	1	3	4	2	56	58	41	1 235	1 276	3	30	33

Television

Table 3.28 shows the number of health facilities with and without access to a television in the last 4 Months ending 31 August 2017 classified by province and type of facility. Bulawayo and Harare Provinces had an equal share of Central Hospitals with access to a television of 3 each. Manicaland Province had the highest number of 10 District (Mission/Private) Hospitals with access to a television. A total of 121 Clinics/ Rural Health Centres had access to a television with Manicaland Province accounting for 28.

Mashonaland East and Masvingo Provinces accounted for the only 2 Provincial Hospitals without access to a television. Midlands Province had the highest number of 11 District (Mission/Private) Hospitals without access to a television followed by Manicaland and Mashonaland East Provinces with 7 each.

Table 3.28: Number of Health Facilities With and Without Access to a Television in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility								
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital		
	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total
Bulawayo	3	0	3	0	0	0	1	0	1
Manicaland	0	0	0	1	0	1	10	8	18
Mashonaland Central	0	0	0	1	0	1	5	4	9
Mashonaland East	0	0	0	0	1	1	8	7	15
Mashonaland West	0	0	0	1	0	1	7	5	12
Matabeleland North	0	0	0	1	0	1	2	6	8
Matabeleland South	0	0	0	1	0	1	5	5	10
Midlands	0	0	0	1	0	1	9	11	20
Masvingo	0	0	0	0	1	1	7	3	10
Harare	3	0	3	0	0	0	1	0	1
National	6	0	6	6	2	8	55	49	104

Table 3.28: Number of Health Facilities With/Without Access to a Television in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	0	1	1	0	0	0	7	15	22	5	1	6
Manicaland	0	1	1	2	9	11	28	217	245	0	2	2
Mashonaland Central	0	0	0	1	5	6	12	92	104	1	1	2
Mashonaland East	0	0	0	3	2	5	17	156	173	0	0	0
Mashonaland West	0	0	0	4	4	8	14	160	174	3	2	5
Matabeleland North	0	0	0	1	3	4	7	80	87	1	4	5
Matabeleland South	0	0	0	0	8	8	8	95	103	1	3	4
Midlands	0	1	1	2	5	7	13	180	193	4	5	9
Masvingo	0	0	0	2	7	9	10	123	133	0	0	0
Harare	1	0	1	0	0	0	5	37	42	0	0	0
National	1	3	4	15	43	58	121	1 155	1 276	15	18	33

Table 3.29 shows the number of health facilities with and without access to a television in the last 4 Months ending 31 August 2017 classified by land use sector and type of facility. All Central Hospitals and Provincial Hospitals with access to a television were in Urban Council Areas. Health facilities in Communal Areas accounted for 24 of the 55 District (Mission/ Private) Hospitals with access to a television. Communal Areas had the highest number of 53 Clinics/ Rural Health Centres with access to a television followed by Urban Council Areas with 40.

Communal Areas had the highest number of 31 District (Mission/ Private) Hospitals without access to a television followed by Urban Council Areas with 7.

Table 3.29: Number of Health Facilities With and Without Access to a Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type Of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility								
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Areas	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	24	31	55
Small Scale Commercial Farming Areas	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	0	0	4	2	6
Urban Council Areas	6	0	6	6	2	8	16	7	23
Administrative Centres	0	0	0	0	0	0	3	3	6
Growth Points	0	0	0	0	0	0	4	4	8
Other Urban Areas	0	0	0	0	0	0	2	2	4
State Land	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	1	0	1
A1 Farms	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1
National	6	0	6	6	2	8	55	49	104

Table 3.29: Number of Health Facilities With and Without Access to a Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector And Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	6	6	2	0	2
Communal Areas	0	0	0	9	34	43	53	721	774	0	2	2
Small Scale Commercial Farming Areas	0	0	0	0	0	0	1	34	35	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	2	2	2	43	45	0	2	2
Urban Council Areas	1	3	4	0	0	0	40	123	163	12	11	23
Administrative Centres	0	0	0	2	2	4	5	8	13	0	0	0
Growth Points	0	0	0	3	3	6	4	20	24	1	0	1
Other Urban Areas	0	0	0	0	1	1	4	31	35	0	2	2
State Land	0	0	0	0	0	0	0	4	4	0	0	0
Old Resettlement Area	0	0	0	1	0	1	7	80	87	0	0	0
A1 Farms	0	0	0	0	1	1	3	66	69	0	1	1
A2 Farms	0	0	0	0	0	0	2	19	21	0	0	0
National	1	3	4	15	43	58	121	1 155	1 276	15	18	33

Table 3.30 shows the number of health facilities with and without access to a television in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. All Central Hospitals in Urban Areas had access to a television. Rural Areas had 40 District (Mission/Private) Hospitals with access to a television compared to 15 in Urban Areas. Rural Areas had 83 Clinics/Rural Health Centres with access to a television compared to 38 in Urban Areas.

District (Mission/Private) Hospitals without access to a television were 42 in Rural Areas compared to 7 in Urban Areas.

Table 3.30: Number of Health Facilities With and Without Access to a Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Facility							
	Central Hospital		Provincial Hospital			District (Mission/Private) Hospital		
	With access to a television	Total	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total
Urban	6	6	6	2	8	15	7	22
Rural	0	0	0	0	0	40	42	82
National	6	6	6	2	8	55	49	104

Table 3.30: Number of Health Facilities With and Without Access To A Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Facility											
	Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total	With access to a television	Without access to a television	Total
Urban	1	3	4	0	0	0	38	121	159	12	11	23
Rural	0	0	0	15	43	58	83	1 034	1 117	3	7	10
National	1	3	4	15	43	58	121	1 155	1 276	15	18	33

Table 3.31 shows number of health facilities with access to multichannel television in the last 4 Months ending 31 August 2017 classified by province, type of service and type of facility. Manicaland Province had the highest number of 13 Clinics/Rural Health Centres with access to Direct to Home (DTH)¹ multichannel television followed by Mashonaland East Province with 7. Bulawayo Province had the least number of Clinics/Rural Health Centres with access to DTH multichannel television of 1.

¹ Direct-to-Home (DTH) is a digital satellite service that provide television viewing services directly to subscribers through satellite transmission. Home refers to anywhere where the satellite dish has been installed.

Midlands Province had the highest number of 10 Clinics/ Rural Health Centres with access to Digital/ Analogue Terrestrial multichannel television followed by Mashonaland East Province with 9. Mashonaland Central had the least number of 1 Clinic/ Rural Health Centre with access to Digital/ Analogue Terrestrial multichannel television.

Table 3.31: Number of Health Facilities With Access to Multichannel Television in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Service and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Facility					
	Central Hospital		Provincial Hospital		District (Mission/Private) Hospital	
	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial
Bulawayo	1	3	0	0	0	1
Manicaland	0	0	0	1	6	3
Mashonaland Central	0	0	0	1	4	2
Mashonaland East	0	0	0	0	4	3
Mashonaland West	0	0	1	0	3	5
Matabeleland North	0	0	1	0	1	0
Matabeleland South	0	0	1	1	1	2
Midlands	0	0	1	0	7	3
Masvingo	0	0	0	0	7	2
Harare	3	3	0	0	1	0
National	4	6	4	3	34	21

Table 3.31: Number of Health Facilities With Access to Multichannel Television in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Service and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Facility							
	Infectious Disease Hospital		Rural Hospital		Clinic/Rural Health Centre		Other Health Facility	
	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial
Bulawayo	0	0	0	0	1	4	2	2
Manicaland	0	0	1	0	13	5	0	0
Mashonaland Central	0	0	0	1	6	1	0	0
Mashonaland East	0	0	2	1	7	9	0	0
Mashonaland West	0	0	1	2	5	7	2	2
Matabeleland North	0	0	1	0	3	2	1	0
Matabeleland South	0	0	0	0	2	3	0	1
Midlands	0	0	2	0	3	10	4	0
Masvingo	0	0	0	1	6	3	0	0
Harare	1	1	0	0	3	5	0	0
National	1	1	7	5	49	49	9	5

Table 3.32 shows number of health facilities with access to multichannel television in the last 4 Months ending 31 August 2017 classified by land use sector, type of service and type of facility. Communal Areas had the highest number of 23 Clinics/ Rural Health Centres with access to DTH multichannel television followed by Urban Areas with 14.

Communal Areas had the highest number of 22 Clinics/ Rural Health Centres with access to Digital/ Analogue Terrestrial multichannel television followed by Urban Council Areas with 21.

Table 3.32: Number of Health Facilities With Access to Multichannel Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector, Type of Service and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility					
	Central Hospital		Provincial Hospital		District (Mission/Private) Hospital	
	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial
Special Category Area	0	0	0	0	0	0
Communal Areas	0	0	0	0	14	9
Small Scale Commercial Farming Areas	0	0	0	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	3	2
Urban Council Areas	4	6	4	3	10	8
Administrative Centres	0	0	0	0	3	1
Growth Points	0	0	0	0	2	0
Other Urban Areas	0	0	0	0	1	1
Old Resettlement Area	0	0	0	0	1	0
A1 Farms	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0
National	4	6	4	3	34	21

Table 3.32: Number Of Health Facilities With Access to Multichannel Television in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector, Type of Service and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Facility							
	Infectious Disease Hospital		Rural Hospital		Clinic/Rural Health Centre		Other Health Facility	
	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial
Special Category Area	0	0	0	0	0	0	2	1
Communal Areas	0	0	4	4	23	22	0	0
Small Scale Commercial Farming Areas	0	0	0	0	1	0	0	0
Large Scale Commercial Farming Areas	0	0	0	0	1	0	0	0
Urban Council Areas	1	1	0	0	14	21	6	4
Administrative Centres	0	0	1	0	2	1	0	0
Growth Points	0	0	1	1	3	1	1	0
Other Urban Areas	0	0	0	0	2	0	0	0
Old Resettlement Area	0	0	1	0	2	1	0	0
A1 Farms	0	0	0	0	1	1	0	0
A2 Farms	0	0	0	0	0	2	0	0
National	1	1	7	5	49	49	9	5

Table 3.33 shows number of health facilities with access to multichannel television in the last 4 Months ending 31 August 2017 classified by urban and rural areas, type of service and type of facility. All Central Hospitals, Provincial Hospitals and Infectious Disease Hospitals with access to DTH and Digital/ Analogue Terrestrial multichannel television were in Urban Areas.

Table 3.33: Number of Health Facilities With Access to Multichannel Television in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas, Type of Service and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Facility													
	Central Hospital		Provincial Hospital		District (Mission/Private) Hospital		Infectious Disease Hospital		Rural Hospital		Clinic/Rural Health Centre		Other Health Facility	
	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial	Direct-to-Home	Digital/Analogue Terrestrial
Urban	4	6	4	3	9	8	1	1	0	0	12	20	6	4
Rural	0	0	0	0	25	13	0	0	7	5	37	29	3	1
National	4	6	4	3	34	21	1	1	7	5	49	49	9	5

Table 3.34 shows number of health facilities with access to multichannel television services classified by province and purpose of use. At national level, 151 health facilities used multichannel television services for patients' entertainment followed by 38 facilities that used it for pedagogy in health. Seventy-one (71) Clinics/ Rural Health Centres used multichannel television services for entertainment for patients.

Table 3.34: Number of Health Facilities With Access to Multichannel TV Services in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility and Purpose of Use: ICT Census 2017, Zimbabwe

Type of Facility	Purpose of Use						
	Pedagogy in health	Evidence-based educational practice	Research Projects	Effective learning in the workplace	Patient Partnership	Entertainment for Patients	Other
Central Hospital	3	3	1	4	3	6	0
Provincial Hospital	1	0	0	0	0	6	0
District (Mission/Private) Hospital	12	6	0	2	9	42	0
Infectious Disease Hospital	0	0	0	0	0	1	0
Rural Hospital	2	3	0	1	3	12	0
Clinic/Rural Health Centre	17	14	3	10	14	71	5
Other Health Facility	3	2	1	2	4	13	0
National	38	28	5	19	33	151	5

Table 3.35 shows number of health facilities with access to multichannel television services in the last 4 Months ending 31 August 2017 classified by land use sector and purpose of use. Urban Council Areas had the highest number of 62 health facilities that used multichannel television services for entertainment for patients followed by Communal Areas with 55 facilities. Only 1 health facility in Small Scale Commercial Farming Areas had used multichannel television service facilities for patient's entertainment.

Table 3.35: Number of Health Facilities With Access to Multichannel TV Services in the Last 4 Months Ending 31 August 2017 Classified by Land and Sector and Purpose of Use: ICT Census 2017, Zimbabwe

Land Use Sector	Purpose of Use						
	Pedagogy in health	Evidence-based educational practice	Research Projects	Effective learning in the workplace	Patient Partnership	Entertainment for Patients	Other
Special Category Area	1	0	1	0	1	2	0
Communal Areas	15	11	1	6	15	55	2
Small Scale Commercial Farming Area	0	0	0	0	0	1	0
Large Scale Commercial Farming Area	0	1	0	0	0	4	0
Urban Council Area	15	12	3	10	13	62	2
Administrative Centres (District Centres)	2	1	0	1	1	7	0
Growth Points	1	0	0	0	1	7	1
Other Urban Areas	1	0	0	0	0	4	0
Old Resettlement Area	1	1	0	1	0	5	0
A1 Farms	1	1	0	0	1	2	0
A2 Farms	1	1	0	1	1	2	0
National	38	28	5	19	33	151	5

Table 3.36 shows number of health facilities with access to multichannel television services in the last 4 Months ending 31 August 2017 classified by urban and rural areas and purpose of use. In Rural Areas, 91 health facilities used multichannel television services for entertainment for patients compared to 60 in Urban Areas.

Table 3.36: Number of Health Facilities With Access to Multichannel TV Services in the Last 4 Months Ending 31 August 2017 Classified by Rural/Urban And Purpose of Use: ICT Census 2017, Zimbabwe

Area	Purpose of Use						
	Pedagogy in health	Evidence-based educational practice	Research Projects	Effective learning in the workplace	Patient Partnership	Entertainment for Patients	Other
Urban	15	12	3	10	13	60	1
Rural	23	16	2	9	20	91	4
National	38	28	5	19	33	151	5

Telephone

Table 3.37 shows the number of health facilities with and without access to a fixed telephone in the last 4 Months ending 31 August 2017 classified by type of health facility. All Central and Provincial Hospitals had access to a fixed telephone. Of the 104 District (Mission/Private) Hospitals, 49 had access to a fixed telephone compared to 55 which had no access to a fixed telephone. Of the 1 276 Clinics/Rural Health Centres, 149 had access to a fixed telephone compared to 1 127 which had no access.

Table 3.37: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility: ICT Census 2017, Zimbabwe

Type of Health Facility	With and Without Access	Number of Facilities
Central Hospital	With access	6
	Without access	0
	Total	6
Provincial Hospital	With access	8
	Without access	0
	Total	8
District (Mission/Private) Hospital	With access	49
	Without access	55
	Total	104
Infectious Disease Hospital	With access	3
	Without access	1
	Total	4
Rural Hospital	With access	10
	Without access	48
	Total	58
Clinic/Rural Health Centre	With access	149
	Without access	1 127
	Total	1 276
Other Health Facility	With access	24
	Without access	9
	Total	33

Table 3.38 shows the number of health facilities with and without access to a fixed telephone in the last 4 Months ending 31 August 2017 classified by province and type of health facility. Harare Province and Bulawayo Province had three Central Hospitals each with access to a fixed telephone. All Provincial Hospitals had access to a fixed telephone. District (Mission/Private) Hospitals in Manicaland Province had the highest number of facilities with access to a fixed telephone of 10 followed by District (Mission/Private) Hospitals in Midlands Province which had 8. District (Mission/Private) Hospitals in Midlands Province had the highest number (12) of facilities without access to a fixed telephone followed by District (Mission/Private) Hospitals in Mashonaland East and Masvingo Provinces with 8 each.

Table 3.38: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total
Bulawayo	3	0	3	0	0	0	1	0	1	0	1	1
Manicaland	0	0	0	1	0	1	10	8	18	1	0	1
Mashonaland Central	0	0	0	1	0	1	5	4	9	0	0	0
Mashonaland East	0	0	0	1	0	1	7	8	15	0	0	0
Mashonaland West	0	0	0	1	0	1	6	6	12	0	0	0
Matabeleland North	0	0	0	1	0	1	4	4	8	0	0	0
Matabeleland South	0	0	0	1	0	1	5	5	10	0	0	0
Midlands	0	0	0	1	0	1	8	12	20	1	0	1
Masvingo	0	0	0	1	0	1	2	8	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	8	0	8	49	55	104	3	1	4

Table 3.38: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total
Bulawayo	0	0	0	20	2	22	6	0	6	30	3	33
Manicaland	2	9	11	22	223	245	0	2	2	36	242	278
Mashonaland Central	1	5	6	7	97	104	1	1	2	15	107	122
Mashonaland East	2	3	5	4	169	173	0	0	0	14	180	194
Mashonaland West	2	6	8	25	149	174	4	1	5	38	162	200
Matabeleland North	0	4	4	4	83	87	2	3	5	11	94	105
Matabeleland South	2	6	8	8	95	103	2	2	4	18	108	126
Midlands	0	7	7	22	171	193	9	0	9	41	190	231
Masvingo	1	8	9	10	123	133	0	0	0	14	139	153
Harare	0	0	0	27	15	42	0	0	0	32	15	47
National	10	48	58	149	1 127	1 276	24	9	33	249	1 240	1 489

Table 3.39 shows the number of health facilities with and without access to a fixed telephone in the last 4 Months ending 31 August 2017 classified by land use sector and type of health facility. All Central Hospitals had access to a fixed telephone. There were 8 Provincial Hospitals in Urban Council Areas with access to a fixed telephone. Of the 6 Clinics/Rural Health Centres in Special Category Areas, 4 had access to a fixed telephone compared to 2 which had no access to a fixed telephone.

Table 3.39: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	11	44	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	2	4	6	0	0	0
Urban Council Area	6	0	6	8	0	8	20	3	23	3	1	4
Administrative Centres	0	0	0	0	0	0	6	0	6	0	0	0
Growth Points	0	0	0	0	0	0	6	2	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	3	1	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Area	0	0	0	0	0	0	1	0	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	0	1	1	0	0	0
National	6	0	6	8	0	8	49	55	104	3	1	4

Table 3.39: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	4	2	6	2	0	2	6	2	8
Communal Areas	2	41	43	9	765	774	0	2	2	22	852	874
Small Scale Commercial Farming Area	0	0	0	0	35	35	0	0	0	0	35	35
Large Scale Commercial Farming Area	1	1	2	4	41	45	0	2	2	7	48	55
Urban Council Area	0	0	0	108	55	163	20	3	23	165	62	227
Administrative Centres	3	1	4	4	9	13	0	0	0	13	10	23
Growth Points	3	3	6	6	18	24	1	0	1	16	23	39
Other Urban Areas	1	0	1	7	28	35	1	1	2	12	30	42
State Land	0	0	0	1	3	4	0	0	0	1	3	4
Old Resettlement Area	0	1	1	3	84	87	0	0	0	4	85	89
A1 Farms	0	1	1	2	67	69	0	1	1	2	69	71
A2 Farms	0	0	0	1	20	21	0	0	0	1	21	22
National	10	48	58	149	1 127	1 276	24	9	33	249	1 240	1 489

Table 3.40 shows distribution of health facilities with and without access to a fixed telephone in the last 4 Months ending 31 August 2017 classified by rural and urban areas and type of health facility. All Central Hospitals had access to a fixed telephone. Forty (40) Clinics/Rural Health Centres in Rural Areas had access to a fixed telephone compared to 109 in Urban Areas. Fifty (50) Clinics/Rural Health Centres in Urban Areas had no access to a fixed telephone compared to 1 077 in Rural Areas.

Table 3.40: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total
Urban	6	0	6	8	0	8	19	3	22	3	1	4
Rural	0	0	0	0	0	0	30	52	82	0	0	0
National	6	0	6	8	0	8	49	55	104	3	1	4

Table 3.40: Number of Health Facilities With and Without Access to a Fixed Telephone in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total	With access to a fixed telephone	Without access to a fixed telephone	Total
Urban	0	0	0	109	50	159	20	3	23	165	57	222
Rural	10	48	58	40	1077	1117	4	6	10	84	1183	1267
National	10	48	58	149	1127	1276	24	9	33	249	1240	1489

Table 3.41 shows the number of health facilities with and without access to a mobile cellular telephone in the last 4 Months ending 31 August 2017 classified by type of health facility. Five Central Hospitals had access to a mobile cellular telephone. Of the 104 District (Mission/Private) Hospitals, 93 facilities had access to a mobile cellular telephone while 11 facilities had no access. There were 1 276 Clinics/Rural Health Centres of which 936 had access to a mobile cellular telephone while 340 had no access.

Table 3.41: Number of Health Facilities With and Without Access to a Mobile Cellular Telephone in the Last 4 Months Ending 31 August 2017 Classified Type of Facility: ICT Census 2017, Zimbabwe

Type of Facility	Number of Health Facilities		
	With access	Without access	Total
Central Hospital	5	1	6
Provincial Hospital	7	1	8
District (Mission/Private) Hospital	93	11	104
Infectious Disease Hospital	1	3	4
Rural Hospital	53	5	58
Clinic/Rural Health Centre	936	340	1 276
Other Health Facility	17	16	33
Total	1 112	377	1 489

Table 3.42 shows the number of health facilities with and without access to a mobile cellular telephone in the last 4 Months ending 31 August 2017 classified by province, and type of health facility. Of the 3 Central Hospitals in Bulawayo Province 2 had access to a mobile cellular telephone. All Provincial Hospitals had access to a mobile cellular telephone except 1 in Matabeleland North Province.

Table 3.42: Number of Health Facilities With and Without Access to a Mobile Cellular Telephone in the Last 4 Months Ending 31 August 2017
Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility																				
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	2	1	3	0	0	0	1	0	1	0	1	1	0	0	0	18	4	22	5	1	6
Manicaland	0	0	0	1	0	1	16	2	18	0	1	1	9	2	11	137	108	245	1	1	2
Mashonaland Central	0	0	0	1	0	1	9	0	9	0	0	0	5	1	6	66	38	104	1	1	2
Mashonaland East	0	0	0	1	0	1	12	3	15	0	0	0	5	0	5	159	14	173	0	0	0
Mashonaland West	0	0	0	1	0	1	12	0	12	0	0	0	8	0	8	156	18	174	3	2	5
Matabeleland North	0	0	0	0	1	1	5	3	8	0	0	0	4	0	4	59	28	87	2	3	5
Matabeleland South	0	0	0	1	0	1	8	2	10	0	0	0	7	1	8	65	38	103	0	4	4
Midlands	0	0	0	1	0	1	19	1	20	0	1	1	7	0	7	116	77	193	5	4	9
Masvingo	0	0	0	1	0	1	10	0	10	0	0	0	8	1	9	126	7	133	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1	0	0	0	34	8	42	0	0	0
National	5	1	6	7	1	8	93	11	104	1	3	4	53	5	58	936	340	1 276	17	16	33

Table 3.43 shows the number of health facilities with and without access to a mobile cellular telephone classified by land use sector and type of health facility. There were 5 Central Hospitals in Urban Council Areas with access to a mobile cellular telephone while one facility had no access. Of the 8 Provincial Hospitals, only 1 had no access to a mobile cellular telephone.

Table 3.43: Number of Health Facilities With and Without Access to a Mobile Cellular Telephone in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility. ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility																				
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	2	6	0	2	2
Communal Areas	0	0	0	0	0	0	50	5	55	0	0	0	39	4	43	577	197	774	0	2	2
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	27	8	35	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	5	1	6	0	0	0	2	0	2	30	15	45	1	1	2
Urban Council Area	5	1	6	7	1	8	22	1	23	1	3	4	0	0	0	120	43	163	13	10	23
Administrative Centres	0	0	0	0	0	0	4	2	6	0	0	0	3	1	4	7	6	13	0	0	0
Growth Points	0	0	0	0	0	0	6	2	8	0	0	0	6	0	6	17	7	24	1	0	1
Other Urban Areas	0	0	0	0	0	0	4	0	4	0	0	0	1	0	1	29	6	35	1	1	2
State Land	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	4	0	0	0
Old Resettlement Area	0	0	0	0	0	0	1	0	1	0	0	0	1	0	1	58	29	87	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	45	24	69	1	0	1
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	18	3	21	0	0	0
National	5	1	6	7	1	8	93	11	104	1	3	4	53	5	58	936	340	1 276	17	16	33

Table 3.44 shows distribution of health facilities with and without access to a mobile cellular telephone in the last 4 Months ending 31 August 2017 classified by rural and urban areas and type of health facility. Five Central Hospitals and 115 Clinics/Rural Health Centres in Urban Areas had access to a mobile cellular telephone.

Forty-four (44) Clinics/Rural Health Centres in Urban Areas had no access to a mobile cellular telephone compared to 296 in Rural Areas.

Table 3.44: Number of Health Facilities With and Without Access to a Mobile Cellular Telephone in the Last 4 Months Ending 31 August 2017 Classified by Rural and Urban Areas and Type of Facility. ICT Census 2017, Zimbabwe

Area	Type of Health Facility																				
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	5	1	6	7	1	8	22	0	22	1	3	4	0	0	0	115	44	159	13	10	23
Rural	0	0	0	0	0	0	71	11	82	0	0	0	53	5	58	821	296	1 117	4	6	10
National	5	1	6	7	1	8	93	11	104	1	3	4	53	5	58	936	340	1 276	17	16	33

Table 3.45 shows number of health facilities with and without access to a mobile network signal in the last 4 Months ending 31 August 2017 classified by province. Manicaland Province had the highest number of 261 health facilities with access to a mobile network signal followed by Midlands Province with 221. Of the 1 169 Clinics/Rural Health Centres with access to a mobile signal, the highest number of 228 was in Manicaland Province followed by Midlands Province with 185.

Bulawayo Province had 1 health facility without access to a mobile network signal.

Table 3.45: Number of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017
Classified by Province: ICT Census 2017, Zimbabwe.

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	3	0	3	0	0	0	1	0	1	1	0	1
Manicaland	0	0	0	1	0	1	18	0	18	1	0	1
Mashonaland Central	0	0	0	1	0	1	9	0	9	0	0	0
Mashonaland East	0	0	0	1	0	1	15	0	15	0	0	0
Mashonaland West	0	0	0	1	0	1	12	0	12	0	0	0
Matabeleland North	0	0	0	1	0	1	6	2	8	0	0	0
Matabeleland South	0	0	0	1	0	1	9	1	10	0	0	0
Midlands	0	0	0	1	0	1	19	1	20	1	0	1
Masvingo	0	0	0	1	0	1	10	0	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	8	0	8	100	4	104	4	0	4

Table 3.45: Number of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017 Classified by Province: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	0	0	0	21	1	22	6	0	6	32	1	33
Manicaland	11	0	11	228	17	245	2	0	2	261	17	278
Mashonaland Central	5	1	6	85	19	104	2	0	2	102	20	122
Mashonaland East	5	0	5	165	8	173	0	0	0	186	8	194
Mashonaland West	8	0	8	160	14	174	5	0	5	186	14	200
Matabeleland North	4	0	4	73	14	87	3	2	5	87	18	105
Matabeleland South	8	0	8	90	13	103	3	1	4	111	15	126
Midlands	7	0	7	185	8	193	8	1	9	221	10	231
Masvingo	8	1	9	123	10	133	0	0	0	142	11	153
Harare	0	0	0	39	3	42	0	0	0	44	3	47
National	56	2	58	1 169	107	1 276	29	4	33	1 372	117	1 489

Table 3.46 shows number of health facilities with and without access to a mobile network signal in the last 4 Months ending 31 August 2017 classified by land use sector. Communal Areas accounted for the highest number of 791 health facilities with access to a mobile network signal followed by Urban Council Areas with 220. Special Category Areas and State Land had the lowest number of health facilities with access to mobile network signal.

Out of 774 Clinics/Rural Health Centres in Communal Areas, 697 had access to a mobile network signal while 77 did not have access.

Table 3.46: Distribution of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector: ICT Census 2017, Zimbabwe.

Land Use Sector	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	52	3	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	6	0	6	0	0	0
Urban Council Area	6	0	6	8	0	8	23	0	23	4	0	4
Administrative Centres	0	0	0	0	0	0	6	0	6	0	0	0
Growth Points	0	0	0	0	0	0	7	1	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	4	0	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Area	0	0	0	0	0	0	1	0	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	6	0	6	8	0	8	100	4	104	4	0	4

Table 3.46: Distribution of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	6	0	6	2	0	2	8	0	8
Communal Areas	41	2	43	697	77	774	1	1	2	791	83	874
Small Scale Commercial Farming Area	0	0	0	32	3	35	0	0	0	32	3	35
Large Scale Commercial Farming Area	2	0	2	43	2	45	2	0	2	53	2	55
Urban Council Area	0	0	0	158	5	163	21	2	23	220	7	227
Administrative Centres	4	0	4	12	1	13	0	0	0	22	1	23
Growth Points	6	0	6	23	1	24	1	0	1	37	2	39
Other Urban Areas	1	0	1	34	1	35	1	1	2	40	2	42
State Land	0	0	0	4	0	4	0	0	0	4	0	4
Old Resettlement Area	1	0	1	82	5	87	0	0	0	84	5	89
A1 Farms	1	0	1	60	9	69	1	0	1	62	9	71
A2 Farms	0	0	0	18	3	21	0	0	0	19	3	22
National	56	2	58	1 169	107	1 276	29	4	33	1 372	117	1 489

Table 3.47 shows number of health facilities with and without access to a mobile network signal in the last 4 Months ending 31 August 2017 classified by rural and urban areas. Of the 1 267 health facilities in Rural Areas, 1 157 had access to a mobile network signal while 110 did not have access. Out of 1 169 Clinics/Rural Health Centres with access to a mobile network signal, 1 015 were in Rural Areas compared to 154 in Urban Areas.

Table 3.47: Distribution of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017
Classified by Urban and Rural Areas: ICT Census 2017, Zimbabwe

Area	Type of Health Facility											
	Central Hospital			Provincial Hospital			District(Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	6	0	6	8	0	8	22	0	22	4	0	4
Rural	0	0	0	0	0	0	78	4	82	0	0	0
National	6	0	6	8	0	8	100	4	104	4	0	4

Table 3.47: Distribution of Health Facilities With and Without Access to a Mobile Network Signal in the Last 4 Months Ending 31 August 2017
Classified by Urban and Rural Areas: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	0	0	0	154	5	159	21	2	23	215	7	222
Rural	56	2	58	1 015	102	1 117	8	2	10	1 157	110	1 267
National	56	2	58	1 169	107	1 276	29	4	33	1 372	117	1 489

Computer

Table 3.48 shows number of health facilities with and without access to a computer in the last 4 Months ending 31 August 2017 classified by province. Manicaland Province had the highest number of 136 health facilities with access to a computer followed by Mashonaland East and Midlands Provinces with 98 each. Out of 245 Clinics/Rural Health Centres in Manicaland Province, 106 had access to a computer. Of the 1 276 Clinics/Rural Health Centres interviewed, 591 had access to a computer.

Table 3.48: Distribution of Health Facilities With and Without Access to a Computer in the Last 4 Months Ending 31 August 2017
Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	3	0	3	0	0	0	1	0	1	1	0	1
Manicaland	0	0	0	1	0	1	18	0	18	0	1	1
Mashonaland Central	0	0	0	1	0	1	9	0	9	0	0	0
Mashonaland East	0	0	0	1	0	1	15	0	15	0	0	0
Mashonaland West	0	0	0	1	0	1	12	0	12	0	0	0
Matabeleland North	0	0	0	1	0	1	8	0	8	0	0	0
Matabeleland South	0	0	0	1	0	1	10	0	10	0	0	0
Midlands	0	0	0	1	0	1	18	2	20	0	1	1
Masvingo	0	0	0	1	0	1	10	0	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	8	0	8	102	2	104	2	2	4

Table 3.48: Distribution of Health Facilities With and Without Access to a Computer in the Last 4 Months Ending 31 August 2017
Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	0	0	0	21	1	22	5	1	6	31	2	33
Manicaland	11	0	11	106	139	245	0	2	2	136	142	278
Mashonaland Central	6	0	6	50	54	104	1	1	2	67	55	122
Mashonaland East	5	0	5	77	96	173	0	0	0	98	96	194
Mashonaland West	8	0	8	60	114	174	4	1	5	85	115	200
Matabeleland North	4	0	4	58	29	87	4	1	5	75	30	105
Matabeleland South	8	0	8	61	42	103	2	2	4	82	44	126
Midlands	7	0	7	67	126	193	5	4	9	98	133	231
Masvingo	9	0	9	50	83	133	0	0	0	70	83	153
Harare	0	0	0	41	1	42	0	0	0	46	1	47
National	58	0	58	591	685	1 276	21	12	33	788	701	1 489

Table 3.49 shows number of health facilities with and without access to a computer in the last 4 Months ending 31 August 2017 classified by land use sector. Of the 874 health facilities in Communal Areas, 433 had access to a computer while 441 did not have access. Out of 774 Clinics/Rural Health Centres in Communal Areas, 336 had access to a computer while 438 did not have access.

Table 3.49 Distribution of Health Facilities With and Without Access to a Computer in the Last 4 Months Ending 31 August 2017
Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	53	2	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	6	0	6	0	0	0
Urban Council Areas	6	0	6	8	0	8	23	0	23	2	2	4
Administrative Centres	0	0	0	0	0	0	6	0	6	0	0	0
Growth Points	0	0	0	0	0	0	8	0	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	4	0	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	1	0	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	6	0	6	8	0	8	102	2	104	2	2	4

**Table 3.49 Distribution of Health Facilities With and Without Access to a Computer Classified by Land Use Sector and Type Of Facility:
ICT Census 2017, Zimbabwe (Continued)**

Land Use Sector	Type of Health Facility										
	Rural Hospitals			Clinic/Rural Health Centre			Other Health Facility			Total	
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access
Special Category Area	0	0	0	1	5	6	1	1	2	2	6
Communal Areas	43	0	43	336	438	774	1	1	2	433	441
Small Scale Commercial Farming Area	0	0	0	5	30	35	0	0	0	5	30
Large Scale Commercial Farming Area	2	0	2	10	35	45	0	2	2	18	37
Urban Council Areas	0	0	0	130	33	163	15	8	23	184	43
Administrative Centres	4	0	4	6	7	13	0	0	0	16	7
Growth Points	6	0	6	17	7	24	1	0	1	32	7
Other Urban Areas	1	0	1	21	14	35	2	0	2	28	14
State Land	0	0	0	1	3	4	0	0	0	1	3
Old Resettlement Areas	1	0	1	35	52	87	0	0	0	37	52
A1 Farms	1	0	1	23	46	69	1	0	1	25	46
A2 Farms	0	0	0	6	15	21	0	0	0	7	15
National	58	0	58	591	685	1 276	21	12	33	788	701

Table 3.50 shows number of health facilities with and without access to a computer in the last 4 Months ending 31 August 2017 classified by rural and urban areas. Access to a computer means that the health facility reported having at least one computer at the health facility in working order. Of the 1 489 health facilities interviewed 788 had access to a computer while 701 did not have access. Out of 222 health facilities in Urban Areas, 178 had access to a computer while 44 did not have access. Rural Areas had 610 health facilities with access to a computer and 657 without access.

**Table 3:50: Distribution of Health Facilities With and Without Access to a Computer in the Last 4 Months Ending 31 August 2017
Classified by Urban and Rural Areas: ICT Census 2017, Zimbabwe**

Area	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	6	0	6	8	0	8	22	0	22	2	2	4
Rural	0	0	0	0	0	0	80	2	82	0	0	0
National	6	0	6	8	0	8	102	2	104	2	2	4

**Table 3.50: Distribution of Health Facilities With And Without Access to a Computer in the Last 4 Months Ending 31 August 2017
Classified By Urban and Rural Areas: ICT Census 2017, Zimbabwe (Continued)**

Classified By Urban and Rural Areas, ICF Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility										
	Rural Hospitals			Clinic/Rural Health Centre			Other Health Facility			Total	
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access
Urban	0	0	0	125	34	159	15	8	23	178	44
Rural	58	0	58	466	651	1 117	6	4	10	610	657
National	58	0	58	591	685	1 276	21	12	33	788	701

Table 3.51 shows number of computers in health facilities in the last 4 Months ending 31 August 2017 classified by province, type and age of computer in the last 4 months ending 31 August 2017. Health facilities in Harare Province had the highest number of 708 desktop computers followed by facilities in Bulawayo Province which accounted for 465. Of the 2 408 desktop computers recorded, 250 were aged less than 1 year, 958 were aged 1 to less than 3 years, 964 were aged 3 to less than 6 years, and 236 were aged 6 years and above.

Health facilities in Manicaland Province had the highest number of 257 laptops followed by facilities in Mashonaland East Province with 250.

Mashonaland East Province had the highest number of 126 tablets in health facilities followed by Manicaland Province with 49.

Table 3:51: Number of Computers at Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type and Age of Computer: ICT Census 2017, Zimbabwe

Province	Type of Computer														
	Desktop					Laptop					Tablet				
	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Laptop Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total
Bulawayo	32	253	165	15	465	12	57	45	30	144	4	2	3	0	9
Manicaland	13	36	64	12	125	42	125	82	8	257	15	28	3	3	49
Mashonaland Central	9	30	108	12	159	27	68	56	2	153	7	4	0	0	11
Mashonaland East	11	66	108	35	220	23	97	85	45	250	49	64	13	0	126
Mashonaland West	41	50	100	16	207	37	67	51	0	155	15	9	0	0	24
Matabeleland North	14	27	46	2	89	44	69	34	3	150	6	7	0	0	13
Matabeleland South	7	27	57	27	118	30	46	34	6	116	2	32	7	0	41
Midlands	18	68	93	41	220	27	76	86	11	200	4	31	0	0	35
Masvingo	7	36	46	8	97	19	61	34	5	119	5	22	1	0	28
Harare	98	365	177	68	708	52	69	80	3	204	8	21	12	0	41
National	250	958	964	236	2 408	313	735	587	113	1 748	115	220	39	3	377

Table 3.52 shows number of computers in health facilities classified by land use sector, type and age of computer in the last 4 months ending 31 August 2017. Of the 1 605 desktop computers at health facilities in Urban Council Areas, 204 were less than 1 year old, 703 were aged from 1 to less than 3 years, 545 were aged 3 to less than 6 years and 153 were aged 6 years and above.

Of the 728 Laptops at health facilities in Communal Areas, 130 were less than 1 year old, 344 were aged 1 to less than 3 years, 203 were in the 3 to less than 6 years age bracket and 51 were aged 6 years and above.

Table 3.52: Number of Computers in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector, Type of Computer and Age of Computer: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Computer														
	Desktop					Laptop					Tablet				
	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total
Special Category Area	0	0	1	0	1	0	2	0	0	2	0	0	0	0	0
Communal Areas	35	161	219	40	455	130	344	203	51	728	44	123	18	3	188
Small Scale Commercial Farming Area	0	1	0	0	1	2	3	0	0	5	0	0	0	0	0
Large Scale Commercial Farming Area	0	16	16	11	43	5	17	19	0	41	5	2	0	0	7
Urban Council Areas	204	703	545	153	1 605	133	214	255	50	652	35	63	20	0	118
Administrative Centres	0	10	24	10	44	5	13	40	6	64	1	7	1	0	9
Growth Points	5	47	53	18	123	15	76	33	4	128	29	19	0	0	48
Other Urban Areas	3	13	66	0	82	5	24	15	1	45	0	3	0	0	3
State Land	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	1	4	8	4	17	9	22	10	1	42	1	2	0	0	3
A1 Farms	2	2	1	0	5	9	15	2	0	26	0	1	0	0	1
A2 Farms	0	1	30	0	31	0	5	10	0	15	0	0	0	0	0
National	250	958	964	236	2 408	313	735	587	113	1 748	115	220	39	3	377

Table 3.53 shows number of computers in health facilities in the last 4 Months ending 31 August 2017 classified by urban and rural areas, type and age of computer in the last 4 months ending 31 August 2017. Out of a total of 2 408 desktop computers recorded, 1 593 were in Urban Areas compared to 815 in Rural Areas. Out of a total of 377 tablets recorded at health facilities, 220 tablets were aged 1 to less than 3 years. Of the 220 tablets, 158 were in Rural Areas while 62 were in Urban Areas.

Table 3.53: Number of Computers in the Last 4 Months Ending 31 August 2017 Classified by Rural and Urban Areas, Type of Computer and Age of Computer: ICT Census 2017, Zimbabwe

Area	Type of Computer														
	Desktop					Laptop					Tablet				
	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total	Less than 1 year	1 to less than 3 years	3 to less than 6 years	6 years and above	Total
Urban	204	697	539	153	1 593	132	209	249	50	640	35	62	20	0	117
Rural	46	261	425	83	815	181	526	338	63	1 108	80	158	19	3	260
National	250	958	964	236	2 408	313	735	587	113	1 748	115	220	39	3	377

Table 3.54 shows the number of computers in health facilities in the last 4 Months ending 31 August 2017 classified by province and purpose of use. Out of 1 333 computers used for clinical implementation, 314 were in Harare Province while Bulawayo Province accounted for 225. Out of 1 828 computers that were used for administration purposes, 513 were in Harare Province.

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe

Province	Central Hospitals									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Bulawayo	0	204	4	6	123	6	4	22	15	7
Manicaland	0	0	0	0	0	0	0	0	0	0
Mashonaland Central	0	0	0	0	0	0	0	0	0	0
Mashonaland East	0	0	0	0	0	0	0	0	0	0
Mashonaland West	0	0	0	0	0	0	0	0	0	0
Matabeleland North	0	0	0	0	0	0	0	0	0	0
Matabeleland South	0	0	0	0	0	0	0	0	0	0
Midlands	0	0	0	0	0	0	0	0	0	0
Masvingo	0	0	0	0	0	0	0	0	0	0
Harare	49	255	17	36	405	14	337	256	139	0
National	49	459	21	42	528	20	341	278	154	7

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe (Continued)

Province	Provincial Hospitals									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Bulawayo	0	0	0	0	0	0	0	0	0	0
Manicaland	0	23	0	2	6	5	0	0	9	0
Mashonaland Central	0	2	0	12	3	0	0	0	4	7
Mashonaland East	4	30	0	5	5	0	0	0	6	0
Mashonaland West	0	4	0	9	14	0	0	0	7	8
Matabeleland North	6	17	0	31	15	0	38	5	8	4
Matabeleland South	19	19	1	19	12	2	42	0	6	0
Midlands	10	0	0	10	41	0	10	0	6	0
Masvingo	6	0	0	6	11	0	0	0	8	3
Harare	0	0	0	0	0	0	0	0	0	0
National	45	95	1	94	107	7	90	5	54	22

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe (Continued)

Province	District (Mission/Private) Hospitals									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Bulawayo	0	0	0	0	25	0	0	0	3	0
Manicaland	27	35	7	10	60	14	3	1	19	6
Mashonaland Central	60	66	2	51	57	5	57	7	13	0
Mashonaland East	12	81	13	38	109	31	35	11	28	1
Mashonaland West	1	29	11	4	71	25	46	8	26	3
Matabeleland North	3	61	34	12	46	9	35	14	19	0
Matabeleland South	2	41	5	5	54	19	43	3	11	1
Midlands	16	33	17	20	84	65	14	7	32	4
Masvingo	5	46	31	7	34	38	1	3	10	6
Harare	0	3	0	1	27	0	2	0	4	0
National	126	395	120	148	567	206	236	54	165	21

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe (Continued)

Province	Rural Hospitals									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Bulawayo	0	0	0	0	0	0	0	0	0	0
Manicaland	0	3	0	0	10	0	0	0	3	17
Mashonaland Central	1	4	1	1	4	1	0	0	1	2
Mashonaland East	5	5	2	5	9	0	0	0	4	1
Mashonaland West	8	7	0	8	9	10	1	1	5	0
Matabeleland North	0	4	4	0	3	2	0	0	1	1
Matabeleland South	0	13	3	0	11	5	3	0	3	4
Midlands	1	6	3	1	11	3	1	0	3	2
Masvingo	26	5	2	0	3	57	0	0	1	0
Harare	0	0	0	0	0	0	0	0	0	0
National	41	47	15	15	60	78	5	1	21	27

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe (Continued)

Province	Clinics/Rural Health Centres									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Bulawayo	9	12	3	3	70	7	7	1	12	0
Manicaland	7	23	2	8	91	10	1	3	10	10
Mashonaland Central	11	30	8	10	33	7	6	5	11	15
Mashonaland East	31	118	7	41	61	18	16	9	4	11
Mashonaland West	10	35	10	13	40	23	4	7	12	9
Matabeleland North	11	31	12	6	48	13	8	5	6	5
Matabeleland South	2	40	11	8	53	12	4	1	8	8
Midlands	2	14	6	4	51	9	6	0	5	25
Masvingo	4	34	8	7	34	14	2	1	7	7
Harare	6	56	1	4	76	7	2	1	22	10
National	93	393	68	104	557	120	56	33	97	100

Table 3.54: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Province, Type of Health Facility and Purpose of Use: ICT Census 2017, Zimbabwe (Continued)

Province	Other Health Facilities								
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting
Bulawayo	2	9	5	1	14	0	0	0	9
Manicaland	0	0	0	0	0	0	0	0	0
Mashonaland Central	6	6	0	6	6	0	6	0	0
Mashonaland East	0	0	0	0	0	0	0	0	0
Mashonaland West	1	1	1	5	4	1	3	1	4
Matabeleland North	2	6	1	1	5	1	3	0	1
Matabeleland South	0	1	0	0	11	2	0	0	2
Midlands	4	6	1	0	9	0	0	0	4
Masvingo	0	0	0	0	0	0	0	0	0
Harare	0	0	0	0	0	0	0	0	0
National	15	29	8	13	49	4	12	1	20

Table 3.55 shows number of computers in health facilities in the last 4 Months ending 31 August 2017 classified by land use sector and purpose of use. Out of 1 333 computers used for clinical implementation by health facilities, 799 were in Urban Council Areas, Communal Areas had 413 and 121 were in other land use categories. Of the 1 828 computers used for administrative purposes by health facilities, 1 099 were in Urban Council Areas while 512 were in Communal Areas.

**Table 3.55: Number of Computers in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Purpose of Use: ICT
Census 2017, Zimbabwe**

Land Use Sector	Purpose of Use									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Special Category Area	1	0	0	0	1	0	0	0	0	1
Communal Areas	104	413	112	132	512	179	122	46	101	81
Small Scale Commercial Farming Area	0	2	0	1	2	1	1	0	0	0
Large Scale Commercial Farming Area	9	6	2	9	21	12	2	1	7	5
Urban Council Areas	177	799	77	191	1099	127	535	304	343	69
Administrative Centres	28	31	11	5	22	52	7	1	13	2
Growth Points	25	39	11	15	81	11	14	10	18	3
Other Urban Areas	8	25	10	11	49	25	42	2	19	4
State Land	0	0	0	0	1	0	0	0	0	0
Old Resettlement Areas	1	11	1	3	23	8	0	1	2	5
A1 Farms	1	6	5	6	13	3	3	2	1	3
A2 Farms	1	1	1	1	4	2	1	0	1	0
National	355	1 333	230	374	1 828	420	727	367	505	173

Table 3.56 shows number of computers in health facilities in the last 4 Months ending 31 August 2017 classified by urban and rural areas and purpose of use. Of the 1 333 computers used for clinical implementation by health facilities, 730 were in Urban Areas compared to 603 in Rural Areas. Out of 420 computers that were used for mobile health by health facilities, 296 were in Rural Areas compared to 124 in Urban Areas.

Table 3:56: Number of Computers in Health Facilities in the Last 4 Months Ending 31 August 2017 Classified by Rural/Urban and Purpose of Use. ICT Census 2017, Zimbabwe

Area	Purpose of Use									
	Pedagogy in Health	Clinical Implementation	Telemedicine	Education and Training	Administration	Mobile Health	Research	Community Settings	Accounting	Other
Urban	170	730	58	183	1 069	124	492	302	330	68
Rural	185	603	172	191	759	296	235	65	175	105
National	355	1 333	230	374	1 828	420	727	367	505	173

Table 3.57 shows number of staff in health facilities with access to a computer in the last 4 Months ending 31 August 2017 classified by type of health facility, staff category and sex. Out of 5 165 female medical staff with access to a computer, 1 679 were employed in Clinics /Rural Health Centres.

Table 3:57: Number of Staff in Health Facilities With Access to a Computer in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility, Staff Category and Sex: ICT Census 2017, Zimbabwe

Type of Health Facility	Category of Staff								
	Medical Staff			Students/Learners			Other Support Staff		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
Central Hospitals	335	798	1 133	245	741	986	283	855	1 138
Provincial Hospitals	233	719	952	57	202	259	89	105	194
District (Mission/Private) Hospitals	797	1 515	2 312	120	321	441	642	555	1 197
Infectious Disease Hospitals	39	40	79	0	1	1	10	11	21
Rural Hospitals	201	342	543	19	59	78	75	96	171
Clinics/Rural Health Centres	747	1 679	2 426	31	46	77	340	369	709
Other Health Facilities	60	72	132	1	0	1	39	38	77
Total	2 412	5 165	7 577	473	1 370	1 843	1 478	2 029	3 507

Table 3.58 shows the number of staff at health facilities with access to a computer classified by urban and rural areas, type of facility, category of staff and sex. A total of 2 810 female medical staff at health facilities in Urban Areas had access to computers compared to 1 073 males. Rural Areas had 2 355 female medical staff who had access to computers compared to 1 339 males.

Table 3.58: Number of Staff at Health Facilities With Access to a Computer in the Last 4 Months Ending 31 August 2017 Classified by Rural/Urban Area, Type of Facility, Category of Staff and Sex: ICT Census 2017, Zimbabwe

Area	Type of Health Facility	Category of Staff								
		Medical Staff			Students/Learners			Other Support Staff		
		Males	Females	Total	Males	Females	Total	Males	Females	Total
Urban	Central Hospitals	335	798	1 133	245	741	986	283	855	1 138
	Provincial Hospitals	233	719	952	57	202	259	89	105	194
	District (Mission/Private) Hospitals	251	579	830	63	88	151	183	202	385
	Infectious Disease Hospitals	39	40	79	0	1	1	10	11	21
	Clinic/Rural Health Centres	191	613	804	10	23	33	103	167	270
	Other Health Facilities	24	61	85	1	0	1	32	32	64
	Total	1 073	2 810	3 883	376	1 055	1 431	700	1 372	2 072
Rural	District (Mission/Private) Hospitals	546	936	1 482	57	233	290	459	353	812
	Rural Hospitals	201	342	543	19	59	78	75	96	171
	Clinic/Rural Health Centres	556	1 066	1 622	21	23	44	237	202	439
	Other Health Facilities	36	11	47	0	0	0	7	6	13
	Total	1 339	2 355	3 694	97	315	412	778	657	1 435

Internet

Table 3.59 shows number of health facilities with and without access to the Internet in the last 4 Months ending 31 August 2017 classified by Province. Internet access means the Internet is generally available for use by members of staff at the health facility, regardless of whether it is actually used. Out of 1 489 health facilities, 343 had access to the Internet while 1 146 did not have access. Of the 1 276 Clinics/Rural Health Centres, 195 had access to the Internet while 1 081 did not have access. Mashonaland West Province had the highest number of 63 health facilities with access to the Internet followed by Midlands Province with 45.

Table 3.59: Distribution of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017
Classified by Province: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Bulawayo	3	0	3	0	0	0	1	0	1	1	0	1
Manicaland	0	0	0	1	0	1	13	5	18	0	1	1
Mashonaland Central	0	0	0	1	0	1	9	0	9	0	0	0
Mashonaland East	0	0	0	1	0	1	15	0	15	0	0	0
Mashonaland West	0	0	0	1	0	1	12	0	12	0	0	0
Matabeleland North	0	0	0	1	0	1	6	2	8	0	0	0
Matabeleland South	0	0	0	1	0	1	9	1	10	0	0	0
Midlands	0	0	0	1	0	1	15	5	20	0	1	1
Masvingo	0	0	0	1	0	1	7	3	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	8	0	8	88	16	104	2	2	4

**Table 3.59: Distribution of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017
Classified by Province: ICT Census 2017, Zimbabwe (Continued)**

Province	Type of Health Facility										
	Rural Hospitals			Clinics/Rural Health Centres			Other Health Facilities			Total	
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access
Bulawayo	0	0	0	20	2	22	5	1	6	30	3
Manicaland	6	5	11	17	228	245	0	2	2	37	241
Mashonaland Central	1	5	6	18	86	104	1	1	2	30	92
Mashonaland East	1	4	5	20	153	173	0	0	0	37	157
Mashonaland West	5	3	8	41	133	174	4	1	5	63	137
Matabeleland North	2	2	4	17	70	87	2	3	5	28	77
Matabeleland South	5	3	8	13	90	103	1	3	4	29	97
Midlands	4	3	7	22	171	193	3	6	9	45	186
Masvingo	4	5	9	22	111	133	0	0	0	34	119
Harare	0	0	0	5	37	42	0	0	0	10	37
National	28	30	58	195	1 081	1 276	16	17	33	343	1 146

Table 3.60 shows the number of health facilities with and without access to the Internet in the last 4 Months ending 31 August 2017 classified by land use sector. Of the 874 health facilities in Communal Areas, 151 had access to the Internet while 723 did not have access. Out of 163 Clinics/Rural Health Centres in Urban Council Areas, 54 had access to the Internet while 109 did not have access.

Table 3.60: Distribution of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017
Classified by Land Use Sector: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	43	12	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	4	2	6	0	0	0
Urban Council Areas	6	0	6	8	0	8	23	0	23	2	2	4
Administrative Centres	0	0	0	0	0	0	6	0	6	0	0	0
Growth Points	0	0	0	0	0	0	8	0	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	3	1	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	6	0	6	8	0	8	88	16	104	2	2	4

Table 3.60: Distribution of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017
Classified by Land Use Sector: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility										
	Rural Hospitals			Clinic/Rural Health Centre			Other Health Facility			Total	
	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access
Special Category Area	0	0	0	2	4	6	1	1	2	3	5
Communal Areas	20	23	43	88	686	774	0	2	2	151	723
Small Scale Commercial Farming Area	0	0	0	3	32	35	0	0	0	3	32
Large Scale Commercial Farming Area	1	1	2	5	40	45	0	2	2	10	45
Urban Council Areas	0	0	0	54	109	163	12	11	23	105	122
Administrative Centres	2	2	4	1	12	13	0	0	0	9	14
Growth Points	3	3	6	9	15	24	1	0	1	21	18
Other Urban Areas	1	0	1	19	16	35	1	1	2	24	18
State Land	0	0	0	2	2	4	0	0	0	2	2
Old Resettlement Areas	1	0	1	3	84	87	0	0	0	4	85
A1 Farms	0	1	1	6	63	69	1	0	1	7	64
A2 Farms	0	0	0	3	18	21	0	0	0	4	18
National	28	30	58	195	1 081	1 276	16	17	33	343	1 146

Table 3.61 shows number of health facilities with and without access to the Internet in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. Of the 195 Clinics/Rural Health Centres with access to the Internet, 141 were in Rural Areas while 54 were in Urban Areas.

Table 3.61: Number of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Health Facility														
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals			Rural Hospitals		
	With access	Without Access	Total	With access	Without Access	Total	With access	Without access	Total	With access	Without access	Total	With access	Without access	Total
Urban	6	0	6	8	0	8	22	0	22	2	2	4	0	0	0
Rural	0	0	0	0	0	0	66	16	82	0	0	0	28	30	58
National	6	0	6	8	0	8	88	16	104	2	2	4	28	30	58

Table 3.61: Distribution of Health Facilities With and Without Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility							
	Clinics/Rural Health Centres			Other Health Facilities			Total	
	With access	Without access	Total	With access	Without access	Total	With access	Without access
Urban	54	105	159	12	11	23	104	118
Rural	141	976	1 117	4	6	10	239	1 028
National	195	1 081	1 276	16	17	33	343	1 146

Table 3.62 shows number of health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by province and type of Internet service. A total of 109 health facilities accessed the Internet through mobile phone networks (at least 3G, e.g. UMTS), via a handset while 102 health facilities accessed the Internet through satellite.

Table 3.62: Number of Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Internet Service Technology: ICT Census 2017, Zimbabwe

Province	Type of Internet Service Technology									
	Dial-up	Mobile Narrowband	Cable modem	DSL	Fibre-to- the- institution	Satellite (VSAT)	Other fixed (wired) broadband	Terrestrial fixed wireless	Mobile phone network via a handset	Mobile phone networks via a card or USB
Bulawayo	0	1	4	24	7	1	0	1	1	3
Manicaland	1	3	6	9	4	10	0	9	11	8
Mashonaland Central	4	4	10	8	7	14	2	10	6	5
Mashonaland East	4	5	6	4	6	16	2	9	12	8
Mashonaland West	2	4	4	13	15	17	1	9	34	6
Matabeleland North	4	4	11	3	7	8	1	11	5	3
Matabeleland South	1	3	7	8	5	12	1	8	8	1
Midlands	2	0	9	9	10	11	3	10	12	2
Masvingo	1	2	4	6	3	11	2	5	16	7
Harare	1	0	0	3	5	2	0	4	4	1
National	20	26	61	87	69	102	12	76	109	44

Table 3.63 shows the number of health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by land use sector areas and type of Internet service technology. Out of the 109 health facilities with access to the Internet through mobile phone networks via a handset, 54 facilities were in Communal Areas followed by Urban Council Areas with 22.

Table 3.63: Number of Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Internet Service Technology: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Internet Service Technology									
	Dial-up	Mobile Narrowband	Cable modem	DSL	Fibre-to-the-institution	Satellite (VSAT)	Other fixed (wired) broadband	Terrestrial fixed wireless	Mobile phone network via a handset	Mobile phone networks via a card or USB
Special Category Area	0	0	0	1	1	0	0	0	1	0
Communal Areas	8	11	26	16	8	65	4	41	54	15
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	1	2	0
Large Scale Commercial Farming Area	0	0	2	1	1	3	1	1	2	0
Urban Council Area	5	6	20	49	42	15	3	20	22	17
Administrative Centres	1	3	5	4	4	5	2	3	3	3
Growth Points	6	3	6	10	6	7	2	5	9	4
Other Urban Areas	0	2	1	4	6	2	0	4	9	3
State Land	0	0	0	0	1	0	0	0	2	0
Old Resettlement Areas	0	0	0	0	0	2	0	0	2	0
A1 Farms	0	0	0	1	0	2	0	1	2	1
A2 Farms	0	1	1	1	0	1	0	0	1	1
National	20	26	61	87	69	102	12	76	109	44

Table 3.64 shows number of health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of Internet service technology. Out of 109 health facilities that reported that they access the Internet through Mobile phone network via a handset, 87 were in Rural Areas while 22 were in Urban Areas.

Table 3:64: Number of Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Rural and Urban Area and Type of Internet Service Technologies: ICT Census 2017, Zimbabwe

Area	Type of Internet Service Technology									
	Dial-up	Mobile Narrowband	Cable modem	DSL	Fibre-to-the-institution	Satellite (VSAT)	Other fixed (wired) broadband	Terrestrial fixed wireless	Mobile phone network via a handset	Mobile phone networks via a card or USB
Urban	5	6	20	50	41	15	3	19	22	16
Rural	15	20	41	37	28	87	9	57	87	28
National	20	26	61	87	69	102	12	76	109	44

Table 3.65 shows distribution of students/learners/trainees at health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by province and sex as at 31 August 2017. Out of 2 745 students/learners/trainees at health facilities, 1 993 were females. Harare Province had the highest proportion of about 32 percent of female students/learners/trainees enrolled at health facilities. Mashonaland East Province had the highest proportion of about 31 percent of male students/learners/trainees enrolled at health facilities.

Table 3.65: Distribution of Students/Learners/Trainees at Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Province and Sex: ICT Census 2017, Zimbabwe

Province	Students/Learners/Trainees					
	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Bulawayo	47	6.3	194	9.7	241	8.8
Manicaland	30	4.0	118	5.9	148	5.4
Mashonaland Central	98	13.0	164	8.2	262	9.5
Mashonaland East	236	31.4	454	22.8	690	25.1
Mashonaland West	20	2.7	32	1.6	52	1.9
Matabeleland North	46	6.1	135	6.8	181	6.6
Matabeleland South	6	0.8	7	0.4	13	0.5
Midlands	63	8.4	199	10.0	262	9.5
Masvingo	11	1.5	60	3.0	71	2.6
Harare	195	25.9	630	31.6	825	30.1
National	752	100.0	1 993	100.0	2 745	100.0

Table 3.66 shows number of students/learners/trainees at health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by land use sector, type of facility and sex in the last 4 months ending 31 August 2017. The highest number of 806 female students/learners/trainees at health facilities with access to the Internet were in Central Hospitals followed by 603 in Provincial Hospitals which are all in Urban Council Areas.

Table 3:66: Number of Students/Learners/Trainees at Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector, Type of Health Facility and Sex: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Facility											
	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Rural Hospital		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	45	155	200	16	53	69
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	1	1	2	0	0	0
Urban Council Area	240	806	1 046	244	603	847	73	89	162	0	0	0
Administrative Centres	0	0	0	0	0	0	77	74	151	0	3	3
Growth Points	0	0	0	0	0	0	23	107	130	0	0	0
Other Urban Areas	0	0	0	0	0	0	2	2	4	1	1	2
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	0	0	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	3	2	5	0	0	0
National	240	806	1 046	244	603	847	224	430	654	17	57	74

Table 3.66: Number of Students/Learners/Trainees at Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector, Type of Health Facility and Sex: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Facility							
	Clinic/Rural Health Centre			Other Health Facility			Total	
	Males	Females	Total	Males	Females	Total	Males	Females
Special Category Area	0	0	0	0	0	0	0	0
Communal Areas	16	27	43	0	0	0	77	235
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	1	1	0	0	0	1	2
Urban Council Areas	4	35	39	3	12	15	564	1 545
Administrative Centres	0	0	0	0	0	0	77	77
Growth Points	1	7	8	0	0	0	24	114
Other Urban Areas	3	15	18	0	0	0	6	18
State Land	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	0
A1 Farms	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	3	2
National	24	85	109	3	12	15	752	1 993

Table 3.67 shows number of students/learners/trainees at health facilities with access to the Internet in the last 4 Months ending 31 August 2017 classified by urban and rural area and sex in the last 4 months ending 31 August 2017. Out of 2 085 students/learners/trainees at facilities in Urban Areas, 1 521 were female and 564 were male. Health facilities in Rural Areas had a total of 660 students/learners/trainees of which 472 were female and 188 were male.

Table 3.67: Number of Students/Learners/Trainees at Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Sex: ICT Census 2017, Zimbabwe

Area	Sex		Number of Students
	Males	Females	
Urban	564	1 521	2 085
Rural	188	472	660
National	752	1 993	2 745

Table 3.68 shows distribution of health facilities with and without a website in the last 4 Months ending 31 August 2017 classified by province and type of facility. Out of 1 489 health facilities, 51 had a website while 1 438 did not have.

Table 3.68: Distribution of Health Facilities With and Without a Website in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			Districts (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	With Website	Without website	Total
Bulawayo	1	2	3	0	0	0	0	1	1	0	1	1
Manicaland	0	0	0	0	1	1	3	15	18	0	1	1
Mashonaland Central	0	0	0	0	1	1	4	5	9	0	0	0
Mashonaland East	0	0	0	0	1	1	3	12	15	0	0	0
Mashonaland West	0	0	0	1	0	1	1	11	12	0	0	0
Matabeleland North	0	0	0	1	0	1	2	6	8	0	0	0
Matabeleland South	0	0	0	0	1	1	2	8	10	0	0	0
Midlands	0	0	0	0	1	1	1	19	20	0	1	1
Masvingo	0	0	0	0	1	1	0	10	10	0	0	0
Harare	2	1	3	0	0	0	1	0	1	0	1	1
National	3	3	6	2	6	8	17	87	104	0	4	4

Table 3.68: Distribution of Health Facilities With and Without a Website in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility										
	Rural Hospitals			Clinics/Rural Health Centres			Other Health Facilities			Total	
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	With website	Without website
Bulawayo	0	0	0	6	16	22	1	5	6	8	25
Manicaland	1	10	11	2	243	245	0	2	2	6	272
Mashonaland Central	0	6	6	3	101	104	1	1	2	8	114
Mashonaland East	0	5	5	0	173	173	0	0	0	3	191
Mashonaland West	0	8	8	2	172	174	3	2	5	7	193
Matabeleland North	0	4	4	2	85	87	0	5	5	5	100
Matabeleland South	0	8	8	3	100	103	1	3	4	6	120
Midlands	0	7	7	0	193	193	1	8	9	2	229
Masvingo	0	9	9	2	131	133	0	0	0	2	151
Harare	0	0	0	1	41	42	0	0	0	4	43
National	1	57	58	21	1 255	1 276	7	26	33	51	1 438

Table 3.69 shows distribution of health facilities with and without a website in the last 4 Months ending 31 August 2017 classified by land use sector and type of facility. Urban Council Areas had the highest number of 30 health facilities with a website followed by Communal Areas with 9. Communal Areas had the highest number of 865 health facilities without a website.

Table 3.69: Distribution of Health Facilities With and Without a Website in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Facility: ICT Census 2017, Zimbabwe

Land Use Sector	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals	
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	Without website	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	5	50	55	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	1	5	6	0	0
Urban Council Areas	3	3	6	2	6	8	6	17	23	4	4
Administrative Centres	0	0	0	0	0	0	2	4	6	0	0
Growth Points	0	0	0	0	0	0	3	5	8	0	0
Other Urban Areas	0	0	0	0	0	0	0	4	4	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	0	1	1	0	0
National	3	3	6	2	6	8	17	87	104	4	4

Table 3.69: Distribution of Health Facilities With and Without a Website in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Facility in The Last 4 Months Ending 31 August 2017: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Rural Hospitals			Clinics/Rural Health Centres			Other Health Facilities			Total	
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	With website	Without website
Special Category Area	0	0	0	0	6	6	1	1	2	1	7
Communal Areas	1	42	43	3	771	774	0	2	2	9	865
Small Scale Commercial Farming Area	0	0	0	0	35	35	0	0	0	0	35
Large Scale Commercial Farming Area	0	2	2	0	45	45	0	2	2	1	54
Urban Council Areas	0	0	0	13	150	163	6	17	23	30	197
Administrative Centres	0	4	4	0	13	13	0	0	0	2	21
Growth Points	0	6	6	2	22	24	0	1	1	5	34
Other Urban Areas	0	1	1	3	32	35	0	2	2	3	39
State Land	0	0	0	0	4	4	0	0	0	0	4
Old Resettlement Areas	0	1	1	0	87	87	0	0	0	0	89
A1 Farms	0	1	1	0	69	69	0	1	1	0	71
A2 Farms	0	0	0	0	21	21	0	0	0	0	22
National	1	57	58	21	1 255	1 276	7	26	33	51	1 438

Table 3.70 shows number of health facilities with and without a website in the Last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. Of the 21 Clinics/Rural Health Centres with a website, 8 were in rural areas and 13 in urban areas. Out of 58 Rural Hospitals, only 1 had a website. All Infectious Disease Hospitals did not have a website. Central Hospitals had an equal number of health facilities with and without a website of 3 each.

Table 3.70: Distribution of Health Facilities With and Without a Website in The Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	With Website	Without website	Total
Urban	3	3	6	2	6	8	6	16	22	0	4	4
Rural	0	0	0	0	0	0	11	71	82	0	0	0
National	3	3	6	2	6	8	17	87	104	0	4	4

Table 3.70: Distribution of Health Facilities With and Without a Website in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Area and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total	
	With website	Without website	Total	With website	Without website	Total	With website	Without website	Total	With website	Without website
Urban	0	0	0	13	146	159	6	17	23	30	192
Rural	1	57	58	8	1 109	1 117	1	9	10	21	1 246
National	1	57	58	21	1 255	1 276	7	26	33	51	1 438

Table 3.71 shows number of health facilities without access to the Internet in the last 4 Months ending 31 August 2017 classified by province and reason for not having Internet. Of the health facilities without access to the Internet, 715 reported that the cost of equipment was too high while 597 reported that the cost of the service was too high.

Table 3.71: Number of Health Facilities Without Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Province and Reason for Not Having Access to the Internet: ICT Census 2017, Zimbabwe

Province	Reason for not having Access to the Internet									
	Do not need the Internet (not useful, not interesting, lack of local content)	Have access to the Internet elsewhere	Lack of confidence, knowledge or skills to use the Internet	Cost of the equipment is too high	Cost of the service is too high	Privacy or security concerns	Internet service is not available in the area	Internet service is available but does not correspond to health facility needs (e.g. quality, speed)	Cultural reasons (e.g. exposure to harmful content)	Other
Bulawayo	0	1	1	0	0	0	0	0	0	0
Manicaland	3	9	21	183	149	2	38	7	0	29
Mashonaland Central	1	5	11	62	63	3	34	4	2	21
Mashonaland East	0	2	9	103	87	2	46	3	0	30
Mashonaland West	2	4	2	97	90	3	57	6	1	20
Matabeleland North	0	9	3	48	36	2	45	2	0	15
Matabeleland South	1	1	7	46	33	2	37	1	0	28
Midlands	1	4	14	112	90	4	61	7	0	51
Masvingo	3	4	15	58	42	1	44	0	0	23
Harare	1	2	0	6	7	0	0	0	0	32
National	12	41	83	715	597	19	362	30	3	249

Table 3.72 shows number of health facilities without access to the Internet in the last 4 Months ending 31 August 2017 classified by land use sector and reason for not having access to the Internet. In Communal Areas, 469 health facilities cited issues of costs of the equipment being too high as the reason for not having access to the Internet while 395 cited cost of the service as too high to use the Internet.

Table 3.72: Number of Health Facilities Without Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Land Use Sector and Reason for Not Having Internet: ICT Census 2017, Zimbabwe

Land Use Sector	Reason for not having the Internet									
	Do not need the Internet (not useful, not interesting, lack of local content)	Have access to the Internet elsewhere	Lack of confidence, knowledge or skills to use the Internet	Cost of the equipment is too high	Cost of the service is too high	Privacy or security concerns	Internet service is not available in the area	Internet service is available but does not correspond to health facility needs (e.g. quality, speed)	Cultural reasons (e.g. exposure to harmful content)	Other
Special Category Area	0	1	0	3	2	0	2	0	0	1
Communal Areas	4	21	64	469	395	16	263	18	2	133
Small Scale Commercial Farming Area	0	1	2	24	16	0	13	2	0	4
Large Scale Commercial Farming Area	1	4	1	25	18	1	3	2	0	11
Urban Council Areas	2	12	5	43	42	1	6	1	0	61
Administrative Centres	1	0	3	10	7	0	4	1	1	1
Growth Points	1	0	0	10	8	0	5	0	0	5
Other Urban Areas	0	0	0	9	8	0	4	0	0	5
State Land	0	0	0	2	2	0	0	0	0	0
Old Resettlement Areas	3	1	6	55	44	1	33	1	0	17
A1 Farms	0	1	2	49	40	0	21	4	0	11
A2 Farms	0	0	0	16	15	0	8	1	0	0
National	12	41	83	715	597	19	362	30	3	249

Table 3.73 shows number of health facilities without access to the Internet in the last 4 months ending 31 August 2017 classified by urban and rural areas and reason for not having access to the Internet. In Rural Areas, 676 health facilities reported that the cost of the equipment was too high compared to 39 facilities in Urban Areas. In Rural Areas, 558 health facilities reported that the cost of the service was too high compared to 39 facilities in Urban Areas.

Table 3.73: Number of Health Facilities Without Access to The Internet in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas, Reason and Type of Facility: ICT Census 2017, Zimbabwe

Area	Reason for not using the Internet									
	Do not need the Internet (not useful, not interesting, lack of local content)	Have access to the Internet elsewhere	Lack of confidence, knowledge or skills to use the Internet	Cost of the equipment is too high	Cost of the service is too high	Privacy or security concerns	Internet service is not available in the area	Internet service is available but does not correspond to health facility needs	Cultural reasons	Other
Urban	2	12	5	39	39	1	5	1	0	62
Rural	10	29	78	676	558	18	357	29	3	187
National	12	41	83	715	597	19	362	30	3	249

Table 3.74 shows number of health facilities with and without an electronic system for the provision of health services in the last 4 months ending 31 August 2017 classified by province and type of health facility. Out of a total 1 489 health facilities, 390 had an electronic system while 1 099 did not have any.

Mashonaland East Province had the highest number, 59 of health facilities with an electronic system for the provision of health services, followed by Mashonaland West and Matabeleland North Provinces with 53 and 51, respectively. Clinics/Rural Health Centres made up the highest number of 263 health facilities with an electronic system for the provision of health services followed by District (Mission/Private) Hospitals with 70 facilities.

Table 3.74: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified by Province: ICT Census 2017, Zimbabwe

Province	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total
Bulawayo	3	0	3	0	0	0	1	0	1	0	1	1
Manicaland	0	0	0	1	0	1	9	9	18	0	1	1
Mashonaland Central	0	0	0	0	1	1	4	5	9	0	0	0
Mashonaland East	0	0	0	1	0	1	13	2	15	0	0	0
Mashonaland West	0	0	0	1	0	1	10	2	12	0	0	0
Matabeleland North	0	0	0	0	1	1	7	1	8	0	0	0
Matabeleland South	0	0	0	1	0	1	6	4	10	0	0	0
Midlands	0	0	0	0	1	1	14	6	20	0	1	1
Masvingo	0	0	0	1	0	1	5	5	10	0	0	0
Harare	3	0	3	0	0	0	1	0	1	1	0	1
National	6	0	6	5	3	8	70	34	104	1	3	4

Table 3.74: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified by Province: ICT Census 2017, Zimbabwe (Continued)

Province	Type of Health Facility											
	Rural Hospital			Clinic/Rural Health Centre			Other Health Facility			Total		Total
	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	
Bulawayo	0	0	0	16	6	22	3	3	6	23	10	33
Manicaland	5	6	11	16	229	245	0	2	2	31	247	278
Mashonaland Central	1	5	6	18	86	104	1	1	2	24	98	122
Mashonaland East	2	3	5	43	130	173	0	0	0	59	135	194
Mashonaland West	6	2	8	34	140	174	2	3	5	53	147	200
Matabeleland North	3	1	4	39	48	87	2	3	5	51	54	105
Matabeleland South	4	4	8	26	77	103	1	3	4	38	88	126
Midlands	4	3	7	18	175	192	4	5	9	40	191	231
Masvingo	7	2	9	20	113	133	0	0	0	33	120	153
Harare	0	0	0	33	9	42	0	0	0	38	9	47
National	32	26	58	263	1 013	1 276	13	20	33	390	1 099	1 489

Table 3.75 shows number of health facilities with and without an electronic system for the provision of health services in the last 4 Months ending 31 August 2017 classified by land use sector and type of facility. Communal Areas had the highest number of 178 health facilities with an electronic system followed by Urban Council Areas with 128.

Table 3.75: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified by Land Use: ICT Census 2017, Zimbabwe

Land Use Sector	Type of Health Facility											
	Central Hospitals			Provincial Hospitals			District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total
Special Category Area	0	0	0	0	0	0	0	0	0	0	0	0
Communal Areas	0	0	0	0	0	0	34	21	55	0	0	0
Small Scale Commercial Farming Area	0	0	0	0	0	0	0	0	0	0	0	0
Large Scale Commercial Farming Area	0	0	0	0	0	0	2	4	6	0	0	0
Urban Council Areas	6	0	6	5	3	8	18	5	23	1	3	4
Administrative Centres	0	0	0	0	0	0	5	1	6	0	0	0
Growth Points	0	0	0	0	0	0	7	1	8	0	0	0
Other Urban Areas	0	0	0	0	0	0	3	1	4	0	0	0
State Land	0	0	0	0	0	0	0	0	0	0	0	0
Old Resettlement Areas	0	0	0	0	0	0	0	1	1	0	0	0
A1 Farms	0	0	0	0	0	0	0	0	0	0	0	0
A2 Farms	0	0	0	0	0	0	1	0	1	0	0	0
National	6	0	6	5	3	8	70	34	104	1	3	4

Table 3.75: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified by Land Use: ICT Census 2017, Zimbabwe (Continued)

Land Use Sector	Type of Health Facility										
	Rural Hospitals			Clinics/Rural Health Centres			Other Health Facilities			Total	
	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system
Special Category Area	0	0	0	0	6	6	0	2	2	0	8
Communal Areas	21	22	43	123	651	774	0	2	2	178	696
Small Scale Commercial Farming Area	0	0	0	1	34	35	0	0	0	1	34
Large Scale Commercial Farming Area	0	2	2	6	39	45	0	2	2	8	47
Urban Council Areas	0	0	0	87	76	163	11	12	23	128	99
Administrative Centres	3	1	4	3	10	13	0	0	0	11	12
Growth Points	6	0	6	12	12	24	1	0	1	26	13
Other Urban Areas	1	0	1	9	26	35	1	1	2	14	28
State Land	0	0	0	1	3	4	0	0	0	1	3
Old Resettlement Areas	1	0	1	9	78	87	0	0	0	10	79
A1 Farms	0	1	1	10	59	69	0	1	1	10	61
A2 Farms	0	0	0	2	19	21	0	0	0	3	19
National	32	26	58	263	1 013	1 276	13	20	33	390	1 099

Table 3.76 shows number of health facilities with and without an electronic system for the provision of health services in the last 4 Months ending 31 August 2017 classified by urban and rural areas and type of facility. Rural Areas had a higher number of 266 health facilities with an electronic system whilst Urban Areas accounted for 124.

Table 3.76: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified By Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe

Area	Type of Health Facility									
	Central Hospitals		Provincial Hospitals		District (Mission/Private) Hospitals			Infectious Disease Hospitals		
	With electronic system	Without electronic system	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system
Urban	6	5	3	8	18	4	22	1	3	4
Rural	0	0	0	0	52	30	82	0	0	0
National	6	5	3	8	70	34	104	1	3	4

Table 3.76: Number of Health Facilities With and Without an Electronic System for the Provision of Health Services in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Facility: ICT Census 2017, Zimbabwe (Continued)

Area	Type of Health Facility										
	Rural Hospitals			Clinics/Rural Health Centres			Other Health Facilities			Total	
	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system	Total	With electronic system	Without electronic system
Urban	0	0	0	83	76	159	11	12	23	124	98
Rural	32	26	58	180	937	1 117	2	8	10	266	1001
National	32	26	58	263	1 013	1 276	13	20	33	390	1 099

Table 3.77 shows number of health facilities with electronic systems in the last 4 Months ending 31 August 2017 classified by type of facility and purpose of use of electronic system. Of the 345 health facilities with an electronic system used to store and manage electronic medical records, 234 were Clinics/Rural Health Centres. Infectious Disease Hospitals had the least number of 1 health facility with an electronic system used to store and manage electronic medical records.

Table 3.77: Number of Health Facilities With Electronic Systems in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility, and Purpose Of Use of Electronic System: ICT Census 2017, Zimbabwe

Type of Facility	Purpose of Use of Electronic System				
	Electronic Medical Records (EMRs)	Personal Health Records (PHRs)	Health Information Exchange	Tele-health	Other
Central Hospital	6	3	4	0	0
Provincial Hospital	4	0	2	0	1
District (Mission/Private) Hospital	64	30	47	6	6
Infectious Disease Hospital	1	1	0	0	0
Rural Hospital	28	8	22	3	1
Clinic/Rural Health Centre	234	85	104	23	15
Other Health Facility	8	3	8	1	0
National	345	130	187	33	23

Table 3.78 shows number of health facilities with clinical data for individual patients in the last 4 months ending 31 August 2017 classified by type of facility and type of clinical data. Out of 342 health facilities that kept patient demographics, Clinics/Rural Health Centres had the highest share of 235 facilities.

Table 3.78: Number Of Health Facilities With Clinical Data for Individual Patients in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility and Type of Clinical Data: ICT Census 2017, Zimbabwe

Type of Facility	Type of Clinical Data								
	Patient demographics	Detailed clinical notes from encounter with clinician/medical history/anamnesis	Problem list	Diagnoses	Active/current medication list	Vital signs	Allergies	Immunizations	Other
Central Hospital	6	3	5	5	4	3	0	1	1
Provincial Hospital	5	2	1	2	0	1	1	1	0
District (Mission/Private) Hospital	61	38	29	46	40	24	29	31	6
Infectious Disease Hospital	1	1	0	0	1	0	1	0	0
Rural Hospital	26	20	14	16	18	13	10	9	4
Clinic/Rural Health Centre	235	160	137	142	172	123	141	62	23
Other Health Facility	8	4	4	8	3	5	3	2	0
National	342	228	190	219	238	169	185	106	34

Table 3.79 shows number of health facilities with an electronic system that allowed and did not allow medical staff to perform functions that support patient engagement in the last 4 months ending 31 August 2017 classified by type of facility. A total of 137 health facilities had an electronic system that allowed medical staff to perform functions that support patient engagement. Four Central Hospitals out of a total of 6 had an electronic system that allowed medical staff to perform functions that support patient engagement. Five Provincial Hospitals had an electronic system that did not allow Medical Staff to perform functions that support patient engagement.

Table 3.79: Number of Health Facilities With an Electronic System That Allowed and Did Not Allow Medical Staff to Perform Functions That Support Patient Engagement in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility: ICT Census 2017, Zimbabwe.

Type of Facility	Number of Health Facilities With Electronic System		
	Allowing Medical Staff To Perform Functions That Support Patient Engagement	Not Allowing Medical Staff To Perform Functions That Support Patient Engagement	Total
Central Hospital	4	2	6
Provincial Hospital	0	5	5
District (Mission/Private) Hospital	23	47	70
Infectious Disease Hospital	1	0	1
Rural Hospital	13	19	32
Clinic/Rural Health Centre	92	171	263
Other Health Facility	4	9	13
National	137	253	390

Table 3.80 shows number of health facilities with an electronic system that allowed medical staff to perform routine clinical functions and general health management in the last 4 months ending 31 August 2017 classified by type of function performed and type of facility. A total of 99 health facilities allowed medical staff to use their electronic system to list patients who are due for tests followed by 87 health facilities which allowed their staff to list patients by diagnosis.

Table 3.80: Number of Health Facilities With an Electronic System That Allowed Medical Staff to Perform Routine Clinical Functions and General Health Management in the Last 4 Months Ending 31 August 2017 Classified by Type of Function Performed and Type of Facility: ICT Census 2017, Zimbabwe

Type of Function	Type of Facility						Total
	Central Hospital	District (Mission/Private) Hospital	Infectious Disease Hospital	Rural Hospital	Clinic/Rural Health Centre	Other Health Facility	
List patients who are due for tests	2	19	1	10	66	1	99
List medications ordered from outside of this health facility	0	8	0	9	22	3	42
List of medications dispensed outside of this health facility	1	6	1	5	21	2	36
List patients by diagnosis	2	17	0	8	59	1	87
List of patients by lab result	2	15	0	9	44	1	71
List of all patients within this health facility who have been prescribed a particular medication	2	17	1	8	55	2	85

Table 3.81 shows number of health facilities with an electronic system in the last 4 Months ending 31 August 2017 classified by type of facility and activity performed. Fifty-nine health facilities used their electronic system for accessing clinical guidelines, protocols, and or best practice of which 35 were Clinics/Rural Health Centres followed by District (Mission/Private) Hospital with 14 facilities.

Thirty-nine health facilities used their electronic system for drug-drug interaction or contra-indications alerts/reminders of which 28 were Clinics/Rural Health Centres followed by District (Mission/Private) Hospital with 6 facilities.

Table 3.81: Number of Health Facilities With an Electronic System in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility and Activity Performed: ICT Census 2017, Zimbabwe

Type of Facility	Type of Activity Performed				
	Access to clinical guidelines, protocols, and or best practice	Structured order sets	Drug-drug interaction or contra-indications alerts/reminders	Drug-allergy alerts/reminders	Other
Central Hospital	1	1	1	1	0
District (Mission/Private) Hospital	14	5	6	5	1
Rural Hospital	7	3	4	3	1
Clinic/Rural Health Centre	35	18	28	23	2
Other Health Facility	2	1	0	1	0
Total	59	28	39	33	4

Table 3.82 shows number of health facilities with an electronic system that allowed medical staff to send and receive clinical/patient health information in the last 4 months ending 31 August 2017 classified by activity and type of health facility. Medical staff in 59 health facilities used an electronic system to send clinical/patient medical information securely to other health professionals of which 37 were Clinics/Rural Health Centres.

Medical staff in 62 health facilities used an electronic system to send patient summaries of which 41 were Clinics/Rural Health Centres. Medical staff in 10 health facilities used an electronic system to receive radiology test results (reports) of which 4 were Clinics/Rural Health Centres.

Table 3.82: Number of Health Facilities With an Electronic System That Allowed Medical Staff to Send and Receive Clinical/Patient Health Information in the Last 4 Months Ending 31 August 2017 Classified by Activity and Type of Health Facility: ICT Census 2017, Zimbabwe

Activity	Type of Health Facility						Total
	Central Hospital	District (Mission/Private) Hospital	Infectious Disease Hospital	Rural Hospital	Clinic/Rural Health Centre	Other Health Facility	
Send clinical/patient medical information securely to other health professionals	1	10	0	7	37	4	59
Receive clinical/patient medical information securely from other health professionals	1	7	0	5	23	4	40
Send patient summaries	1	13	1	5	41	1	62
Receive patient summaries	1	11	0	2	23	0	37
Send electronic referrals	2	7	0	2	18	1	30
Receive electronic referral reports	2	7	0	2	11	2	24
Send summary of the care received during a hospitalisation, upon discharge (e.g. discharge summary)	2	7	0	2	10	0	21
Receive summary of the care received during a hospitalisation upon discharge (e.g., discharge summary)	1	6	0	0	6	0	13
Send order/request for lab test	1	6	0	2	16	1	26
Receive lab test results	1	8	0	3	17	2	31
Receive radiology test results: reports	2	2	0	1	4	1	10
Receive radiology test results: images	2	2	0	1	5	1	11

Use of ICTs

Table 3.83 shows number of health facilities with access to computer in the last 4 months ending 31 August 2017 classified by computer-related activity and type of facility. A total of 727 health facilities used computers for data storage, of which 540 were Clinics and Rural Health Centres followed by 98 District (Mission/Private) Hospitals.

Table 3.83: Number of Health Facilities With Access to a Computer in the Last 4 Months Ending 31 August 2017 Classified by Computer-Related Activity and Type of Facility: ICT Census 2017, Zimbabwe

Computer Related Activity	Type of Facility							Total
	Central Hospital	Provincial Hospital	District (Mission/Private) Hospital	Infectious Disease Hospital	Rural Hospital	Clinic/Rural Health Centre	Other Health Facility	
Copying or moving a file or folder	6	8	89	1	49	444	18	615
Using copy and paste tools to duplicate or move information within a document	6	8	90	1	46	369	15	535
Accessing the Internet, e.g. sending e-mails with attached files (document, picture, video)	6	8	78	2	28	139	16	277
Using basic arithmetic formulae in a spreadsheet	5	7	70	1	23	171	10	287
Connecting and installing new devices (e.g. a modem, camera, printer)	6	7	77	0	34	224	12	360
Finding, downloading, installing and configuring software	6	6	60	0	16	102	12	202
Creating electronic documents and presentations with presentation software (including text, images, sound, videos or chart)	6	8	71	1	23	198	11	318
Transferring files between computers and other devices	6	8	81	2	37	303	11	448
Writing a computer program using a specialized programming language	3	1	17	0	5	39	5	70
E-learning	5	3	26	0	6	31	7	78
Playing games, streaming, or downloading games, images, videos or movies	4	2	25	0	9	61	9	110
Data storage	6	8	98	1	56	540	18	727
Other	0	0	2	0	1	25	0	28

Table 3.84 shows number of health facilities with access to the Internet in the last 4 months ending 31 August 2017 classified by Internet-related activity and type of facility. A total of 291 health facilities used the Internet to send or receive e-mails, of which 152 were Clinics and Rural Health Centres followed by 80 District (Mission/Private) Hospitals. Six health facilities used the Internet to take part in on-line consultations or voting to define civic or political issues (e.g. urban planning, signing a petition) of which 3 were District (Mission/Private) Hospitals.

Table 3.84: Number of Health Facilities With Access to the Internet in the Last 4 Months Ending 31 August 2017 Classified by Internet-Related Activity and Type of Facility: ICT Census 2017, Zimbabwe

Internet Related Activity	Type of Facility							
	Central Hospital	Provincial Hospital	District (Mission/Private) Hospitals	Infectious Disease Hospital	Rural Hospital	Clinic/Rural Health Centre	Other Health Facility	National
Getting information about goods or services	6	8	68	2	16	114	16	230
Seeking health information (on injury, disease, nutrition etc.)	6	7	60	2	19	120	18	232
Making an appointment with a health practitioner via a website	0	1	7	0	2	16	3	29
Getting information from general government organizations	6	3	59	1	17	82	13	181
Interacting with general government organizations	6	5	52	1	14	77	9	164
Sending or receiving e-mail	6	8	80	2	25	152	18	291
Purchasing or ordering goods or services (purchase orders placed via the internet whether payment was made online)	3	8	55	1	9	43	9	128
Internet banking (includes electronic transaction with a bank for payment, transfers)	6	6	41	0	4	17	8	82
E-learning (learning conducted via electronic media, typically on the Internet.)	5	3	18	0	3	21	4	54
Consult wikis (Wikipedia), online encyclopaedias or other websites for formal learning purposes (Research)	6	4	33	0	9	53	11	116
Downloading software or applications (includes patches and upgrades, either paid or free of charge)	6	3	51	0	12	61	13	146
Reading or downloading on-line newspapers or magazines, electronic books	6	6	50	1	15	87	14	179
Participating in professional networks (LinkedIn, Xing, etc.)	5	4	25	0	4	30	8	76
Managing personal/own homepage	3	3	15	0	4	20	9	54
Uploading self/user-created content to website to be shared (text, images, photos, etc.)	3	1	11	0	3	10	4	32
Blogging (maintaining or adding content to a blog)	2	1	7	0	1	4	5	20

Posting opinions on civic or political issues via websites (e.g. blogs, social networks, etc.)	0	0	5	0	1	4	4	14
Taking part in on-line consultations or voting to define civic or political issues (e.g. urban planning, signing a petition)	0	0	3	0	1	1	1	6
Using storage space on the Internet to save documents, pictures, music, video, other files (e.g. Google Drive, Dropbox, Windows Skydrive, iCloud, Amazon Cloud Drive)	4	3	37	0	8	52	11	115
Using software run over the Internet for editing text documents, spreadsheets or presentations (e.g. Google Docs, Office 365)	3	2	31	0	10	36	10	92

Table 3.85 shows number of health facilities with ICT functionalities that supported patient engagement in the last 4 Months ending 31 August 2017 classified by type of health facility. Central Hospitals with ICT functionalities that supported patient engagement were 2 while 4 did not have such facilities. Provincials Hospitals that had ICT functionalities supporting patient engagement were 2 while 6 did not have such facilities. Of the 1 276 Clinics and Rural Health Centres, 102 had ICT functionalities that supported patient engagement.

Table 3.85: Number of Health Facilities With and Without ICT Functionalities That Support Patient Engagement in the Last 4 Months Ending 31 August 2017 Classified by Type of Health Facility: ICT Census 2017, Zimbabwe

Type of Facility	Number of Health Facilities		
	With ICT functionalities	Without ICT functionalities	Total
Central Hospital	2	4	6
Provincial Hospital	2	6	8
District (Mission/Private) Hospital	31	73	104
Infectious Disease Hospital	0	4	4
Rural Hospital	10	48	58
Clinic/Rural Health Centre	102	1 174	1 276
Other Health Facility	4	29	33

Table 3.86 shows distribution of health facilities with ICT functionalities that supported patient engagement in the last 4 Months ending 31 August 2017 classified by province and type of health facility. Central Hospitals with ICT functionalities that supported patient engagement were 2, one in Harare Province and the other in Bulawayo Province. Provincial Hospitals that had ICT functionalities supporting patient engagement were 2, one in Manicaland Province and the other in Mashonaland East Province. Of the 1 174 Clinics and Rural Health Centres without ICT functionalities supporting patient engagement, 241 were in Manicaland Province followed by 189 facilities in Midlands Province.

Table 3.86: Number of Health Facilities With and Without ICT Functionalities That Support Patient Engagement in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Health Facility: ICT Census 2017, Zimbabwe

Province	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Infectious Disease Hospital		Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	With	Without	Total	With	Without	Total	With	Without	Total	Without	Total	With	Without	Total	With	Without	Total	With	Without	Total
Bulawayo	1	2	3	0	0	0	0	1	1	1	1	0	0	0	3	19	22	0	6	6
Manicaland	0	0	0	1	0	1	4	14	18	1	1	3	8	11	4	241	245	0	2	2
Mashonaland Central	0	0	0	0	1	1	6	3	9	0	0	1	5	6	11	93	104	1	1	2
Mashonaland East	0	0	0	1	0	1	9	6	15	0	0	1	4	5	31	142	173	0	0	0
Mashonaland West	0	0	0	0	1	1	2	10	12	0	0	1	7	8	14	160	174	1	4	5
Matabeleland North	0	0	0	0	1	1	2	6	8	0	0	0	4	4	14	73	87	1	4	5
Matabeleland South	0	0	0	0	1	1	3	7	10	0	0	1	7	8	8	95	103	0	4	4
Midlands	0	0	0	0	1	1	2	18	20	1	1	1	6	7	4	189	193	1	8	9
Masvingo	0	0	0	0	1	1	2	8	10	0	0	2	7	9	4	129	133	0	0	0
Harare	1	2	3	0	0	0	1	0	1	1	1	0	0	0	9	33	42	0	0	0
National	2	4	6	2	6	8	31	73	104	4	4	10	48	58	102	1 174	1 276	4	29	33

Table 3.87 shows number of health facilities with and without ICT functionalities that support patient engagement in the last 4 Months ending 31 August 2017 classified by type of facility and urban and rural areas. Two Central Hospitals and 2 Provincial Hospitals that had ICT functionalities that support patient engagement were in Urban Areas. Of the 159 Clinics and Rural Health Centres, with ICT functionalities that support patient engagement, 25 were in Urban Areas.

Table 3.87: Number of Health Facilities With and Without ICT Functionalities That Support Patient Engagement in the Last 4 Months Ending 31 August 2017 Classified by Type of Facility, and Urban and Rural Areas: ICT Census 2017, Zimbabwe

Type of Facility		Area		Total
		Urban	Rural	
Central Hospital	With	2	0	2
	Without	4	0	4
	Total	6	0	6
Provincial Hospital	With	2	0	2
	Without	6	0	6
	Total	8	0	8
District (Mission/Private) Hospital	With	3	28	31
	Without	19	54	73
	Total	22	82	104
Infectious Disease Hospital	With	0	0	0
	Without	4	0	4
	Total	4	0	4
Rural Hospital	With	0	10	10
	Without	0	48	48
	Total	0	58	58
Clinic/Rural Health Centre	With	25	77	102
	Without	134	1 040	1 174
	Total	159	1 117	1 276
Other Health Facility	With	3	1	4
	Without	20	9	29
	Total	23	10	33

Table 3.88 shows number of health facilities with ICT functionalities in the last 4 months ending 31 August 2017 classified by type of facility and type of information accessed. At national level, test results were accessed by 43 health facilities and diagnoses results were accessed by 31 health facilities.

Table 3.88: Number of Health Facilities With ICT Functionalities Classified by Type of Information Accessed in the Last 4 Months Ending 31 August 2017: ICT Census 2017, Zimbabwe

Type of Facility	Type of Information Accessed					
	Test results	Medication lists	Discharge instructions	Summary care notes	Diagnoses	Other
Central Hospital	0	1	0	0	0	0
Provincial Hospital	2	1	0	0	1	0
District (Mission/Private) Hospital	11	8	8	9	9	4
Rural Hospital	3	3	0	0	0	0
Clinic/Rural Health Centre	26	19	8	17	20	2
Other Health Facility	1	1	1	1	1	0
National	43	33	17	27	31	6

Table 3.89 shows number of health facilities with ICT functionalities in the last 4 months ending 31 August 2017 classified by province and type of information accessed. There were 8 health facilities in Mashonaland East Province where test results were obtained online followed by 7 facilities each in Manicaland, Mashonaland Central and Mashonaland West Provinces. There were 8 facilities in Mashonaland Central Province where medication lists were provided online. Mashonaland Central Province had the highest number of facilities with online discharge instructions (5) and online summary care notes, 7.

Table 3.89: Number of Health Facilities With ICT Functionalities in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of Information Accessed: ICT Census 2017, Zimbabwe

Province	Type of Information Accessed					
	Test results	Medication lists	Discharge instructions	Summary care notes	Diagnoses	Other
Bulawayo	1	1	1	1	1	0
Manicaland	7	2	0	1	3	0
Mashonaland Central	7	8	5	7	5	2
Mashonaland East	8	5	1	4	7	1
Mashonaland West	7	5	1	3	5	0
Matabeleland North	4	4	3	4	3	0
Matabeleland South	6	5	4	5	4	0
Midlands	1	1	1	1	1	0
Masvingo	2	1	0	0	1	2
Harare	0	1	1	1	1	1
National	43	33	17	27	31	6

Table 3.90 shows number of health facilities with ICT functionalities that support patient engagement in the last 4 months ending 31 August 2017 classified by urban and rural areas and type of information accessed. Rural Areas had 34 health facilities where test results were obtained online while Urban Areas had 9. Seven health facilities in Urban Areas provided medication lists compared to 26 in Rural Areas. Four facilities in Urban Areas provided summary care notes.

Table 3.90: Number of Health Facilities With ICT Functionalities in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas and Type of Information Accessed: ICT Census 2017, Zimbabwe

Area	Type of Information Accessed					
	Test results	Medication lists	Discharge instructions	Summary care notes	Diagnoses	Other
Urban	9	7	4	4	8	2
Rural	34	26	13	23	23	4
National	43	33	17	27	31	6

Table 3.91 shows number of health facilities with ICT functionalities in the last 4 months ending 31 August 2017 classified by province and type of ICT function that support online patient engagement. There were 5 provinces with health facilities with an online system that support booking of appointments with Mashonaland Central Province having 2 facilities.

Table 3.91: Number of Health Facilities With ICT Functionalities in the Last 4 Months Ending 31 August 2017 Classified by Province and Type of ICT Function That Support Online Patient Engagement: ICT Census 2017, Zimbabwe

Province	Type of ICT Function That Support Online Patient Engagement		
	Booking Appointments Online	Booking Lab Test Online	Request Prescriptions Online
Bulawayo	1	1	0
Manicaland	0	0	0
Mashonaland Central	2	1	1
Mashonaland East	1	1	1
Mashonaland West	0	0	0
Matabeleland North	1	1	0
Matabeleland South	0	0	0
Midlands	0	0	0
Masvingo	1	1	0
Harare	0	0	0
National	6	5	2

Table 3.92 shows number of health facilities with ICT functionalities in the last 4 months ending 31 August 2017 classified by urban and rural areas and type of ICT function that support online patient engagement. The census findings revealed that there is an equal number of health facilities in rural and urban areas where a patient can book appointments and request prescriptions online. Three health facilities in Rural Areas had ICT functions that support booking lab tests while two were in Urban Areas.

Table 3.92: Number of Health Facilities With ICT Functionalities in the Last 4 Months Ending 31 August 2017 Classified by Urban and Rural Areas, and Type of ICT Function That Support Online Patient Engagement: ICT Census 2017, Zimbabwe

Area	Type of ICT Function That Support Patient Engagement			Total
	Booking Appointments Online	Booking Lab Test Online	Request Prescriptions Online	
Urban	3	2	1	6
Rural	3	3	1	7
National	6	5	2	13

Table 3.93 shows number of ICT qualified medical staff as at 31 August 2017 classified by type of health facility and sex. Of the 837 ICT qualified medical staff at Central Hospitals, 649 were female. There were 21 ICT qualified medical staff at Provincial Hospitals of which 10 were male and 11 female. District (Mission/Private) Hospital had 886 ICT qualified medical staff of which 412 were male.

Table 3.93: Number of ICT Qualified Medical Staff as at 31 August 2017 Classified by Type of Facility and Sex: ICT Census 2017, Zimbabwe

Type of Facility	Sex	Number of Staff
Central Hospital	Male	188
	Female	649
	Total	837
Provincial Hospital	Male	10
	Female	11
	Total	21
District (Mission/Private) Hospital	Male	412
	Female	474
	Total	886
Rural Hospital	Male	52
	Female	54
	Total	106
Clinic/Rural Health Centre	Male	371
	Female	542
	Total	913
Other Health Facility	Male	43
	Female	47
	Total	90

Table 3.94 shows number of ICT qualified medical staff as at 31 August 2017 classified by province, type of facility and sex. Of the 188 male ICT qualified medical staff at Central Hospitals, 117 and 71 were in Bulawayo and Harare Provinces, respectively. There were 649 female ICT qualified medical staff at Central Hospitals of which 501 were in Harare Province. There were 10 male ICT qualified medical staff at Provincial Hospitals of which 5 were in Manicaland Province.

Table 3.94: Number of ICT Qualified Medical Staff as at 31 August 2017 Classified by Province, Type of Facility and Sex: ICT Census 2017, Zimbabwe

Province	Central Hospital			Provincial Hospital			District (Mission/Private) Hospital			Rural Hospital			Clinic/Rural Health Centre			Other Health Facility		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Bulawayo	117	148	265	0	0	0	12	20	32	0	0	0	21	29	50	3	9	12
Manicaland	0	0	0	5	1	6	50	84	134	15	9	24	35	31	66	1	0	1
Mashonaland Central	0	0	0	0	0	0	144	110	254	3	4	7	38	34	72	0	0	0
Mashonaland East	0	0	0	1	0	1	79	37	116	7	3	10	56	79	135	0	0	0
Mashonaland West	0	0	0	0	0	0	24	14	38	13	17	30	72	131	203	21	7	28
Matabeleland North	0	0	0	0	0	0	12	18	30	1	4	5	20	43	63	3	2	5
Matabeleland South	0	0	0	1	3	4	15	15	30	0	3	3	23	43	66	0	2	2
Midlands	0	0	0	3	6	9	59	153	212	2	5	7	48	58	106	15	27	42
Masvingo	0	0	0	0	1	1	15	23	38	11	9	20	38	41	79	0	0	0
Harare	71	501	572	0	0	0	2	0	2	0	0	0	20	53	73	0	0	0
National	188	649	837	10	11	21	412	474	886	52	54	106	371	542	913	43	47	90

Table 3.95 shows number of ICT qualified medical staff as at 31 August 2017 classified by type of facility, urban and rural areas and sex. Central Hospitals had the highest number of 649 female ICT qualified medical staff. There were 21 ICT qualified medical staff at Provincial Hospitals of which 10 were male and 11 female.

Other Health Facilities such as industrial and family planning clinics in Urban Areas had the highest number of 23 male ICT qualified medical staff compared to 20 in Rural Areas.

Table 3.95: Number of ICT Qualified Medical Staff as at 31 August 2017 Classified by Type of Facility, Urban and Rural Areas and Sex: ICT Census 2017, Zimbabwe

Type of Facility	Sex	Area		
		Urban	Rural	National
Central Hospital	Male	188	0	188
	Female	649	0	649
	Total	837	0	837
Provincial Hospital	Male	10	0	10
	Female	11	0	11
	Total	21	0	21
District (Mission/Private) Hospital	Male	75	337	412
	Female	178	296	474
	Total	253	633	886
Rural Hospital	Male	0	52	52
	Female	0	54	54
	Total	0	106	106
Clinic/Rural Health Centre	Male	82	289	371
	Female	141	401	542
	Total	223	690	913
Other Health Facility	Male	23	20	43
	Female	44	3	47
	Total	67	23	90

Expenditure on ICT Equipment and Services

Table 3.96 shows expenditure on ICT equipment for the last 12 months ending 31 August 2017 classified by Province. A total of about US\$1.296 million was spent by health facilities on ICT equipment of which the highest expenditure of 49.3 percent was spent in Harare followed by 16.6 percent in Bulawayo Province. Health facilities in Matabeleland South Province had the least expenditure of 1.4 percent.

Table 3:96: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017
Classified by Province: ICT Census 2017, Zimbabwe

Province	Amount in US\$	Percent
Bulawayo	215,776	16.6
Manicaland	68,422	5.3
Mashonaland Central	94,133	7.3
Mashonaland East	30,330	2.3
Mashonaland West	59,402	4.6
Matabeleland North	34,971	2.7
Matabeleland South	18,717	1.4
Midlands	80,450	6.2
Masvingo	54,630	4.2
Harare	639,172	49.3
National	1,296,003	100.0

Table 3.97 shows expenditure on ICT equipment for the last 12 months ending 31 August 2017 classified by land use sector. Health facilities in Urban Council Areas had the highest expenditure on ICT equipment of about US\$1.085 million constituting about 84 percent of total. Health facilities in Special Category Areas that include army, police and prison camps had the least expenditure on ICT equipment of US\$55.

Table 3.97: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017
Classified by Land Use Sector: ICT Census 2017, Zimbabwe

Land Use Sector	Amount in US\$	Percent
Special Category Area	55	0.0
Communal Areas	89,418	6.9
Small Scale Commercial Farming Area	1,855	0.1
Large Scale Commercial Farming Area	22,967	1.8
Urban Council Area	1,085,835	83.8
Administrative Centres	30,642	2.4
Growth Points	30,218	2.3
Other Urban Areas	24,700	1.9
Old Resettlement Area	6,066	0.5
A1 Farms	3,129	0.2
A2 Farms	1,118	0.1
National	1,296,003	100.0

Table 3.98 shows expenditure on ICT equipment for the last 12 months ending 31 August 2017 classified by Urban and Rural Areas. Health facilities in Urban Areas constituted about 84 percent of ICT expenditure of about US\$1.085 million.

Table 3.98: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017
Classified by Urban and Rural Areas: ICT Census 2017, Zimbabwe

Area	Amount in US\$	Percent
Urban	1,084,706	83.7
Rural	211,297	16.3
National	1,296,003	100.0

Table 3.99 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by province. A total of US\$1.530 million was spent on ICT services by health facilities. Health facilities in Harare Province had the highest expenditure on ICT services of US\$384,897 followed by US\$381,603 spent in Bulawayo Province. The least expenditure of US\$29,117 was made by health facilities in Matabeleland North Province.

Table 3:99: Expenditure on ICT Services for the Last 12 Months Ending 31 August 2017 Classified by Province: ICT Census 2017, Zimbabwe

Province	Amount in US\$	Percent
Bulawayo	381,603	24.9
Manicaland	97,009	6.3
Mashonaland Central	88,122	5.8
Mashonaland East	107,974	7.1
Mashonaland West	190,389	12.4
Matabeleland North	29,117	1.9
Matabeleland South	37,860	2.5
Midlands	143,783	9.4
Masvingo	69,343	4.5
Harare	384,897	25.2
National	1,530,097	100.0

Table 3.100 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by land use sector. Health facilities in Urban Council Areas had the highest expenditure of US\$1.129 million (73.8 percent) on ICT services. Health facilities in Special Category Areas had the least expenditure of US\$120.

Table 3.100: Expenditure on ICT Services for the Last 12 Months Ending 31 August 2017 Classified by Land Use Sector: ICT Census 2017, Zimbabwe.

Land Use Sector	Amount in US\$	Percent
Special Category Area	120	0.0
Communal Areas	197,134	12.9
Small Scale Commercial Farming Area	2,754	0.2
Large Scale Commercial Farming Area	30,788	2.0
Urban Council Area	1,129,179	73.8
Administrative Centres	72,371	4.7
Growth Points	40,070	2.6
Other Urban Areas	31,626	2.1
State Land	465	0.0
Old Resettlement Area	15,101	1.0
A1 Farms	7,769	0.5
A2 Farms	2,720	0.2
National	1,530,097	100.0

Table 3.101 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by urban and rural areas. Health facilities in Urban Areas spent US\$1.124 million accounting for 73.4 percent of total expenditure on ICT services.

**Table 3:101: Expenditure On ICT Services for the Last 12 Months Ending 31 August 2017
Classified By Urban And Rural Areas: ICT Census 2017, Zimbabwe.**

Area	Amount (US\$)	Percent
Urban	1,123,785	73.4
Rural	406,312	26.6
National	1,530,097	100.0

Table 3.102 shows expenditure on ICT equipment for the last 12 months ending 31 August 2017 classified by province and type of equipment.

Table 3.102: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017 Classified by Province and Type of Equipment: ICT Census 2017, Zimbabwe

Type of Equipment	Expenditure by Province (US\$)										
	Bulawayo	Manicaland	Mashonaland Central	Mashonaland East	Mashonaland West	Matabeleland North	Matabeleland South	Midlands	Masvingo	Harare	Total
Desktop Computers, Laptops, Tablets, E-Book Readers, etc.	22,341	20,485	23,163	2,128	30,360	19,809	5,200	17,123	19,283	125,298	285,190
Network Hardware (e.g. cables, servers, routers, switches, etc.)	15,370	2,730	110	165	125	699	75	1,375	2,350	9,234	32,233
Mobile cellular telephone handsets, CDMA handsets	5,335	5,452	2,062	931	2,442	2,485	70	13,516	10,775	3,750	46,818
Decoders, Satellite Dishes, Aerials, etc.	1,164	0	70	110	990	820	0	1,090	0	0	4,244
Television Sets, Radio Sets, Two-Way Radios, MP3 or MP4 players/ CD players, etc.	703	0	605	280	140	870	0	66	0	1,800	4,464
Whiteboards, Video Streaming Hardware, PA Systems & Wireless Microphones, etc.	0	0	0	0	850	0	134	135	0	0	1,119
Printers, Photocopiers, Toners, Ink, Scanners, Visual Display Units, etc.	125,212	31,509	5,917	18,101	22,555	9,359	11,828	39,317	17,538	163,250	444,586
Telephone-Answering machines, Telefax equipment, radio-telephones	0	389	0	500	0	74	0	1,288	45	0	2,296
Computer software packages	34,524	861	3,137	1,320	430	100	1,090	30	1,600	333,300	376,392
Calculators	90	419	276	4,136	1,455	94	0	627	1,239	1,040	9,376
Photographic equipment	10,078	1,785	100	2,300	0	266	200	2,280	0	1,500	18,509
Other equipment	959	4,792	58,693	359	55	395	120	3,603	1,800	0	70,776
Total	215,776	68,422	94,133	30,330	59,402	34,971	18,717	80,450	54,630	639,172	1,296,003

Table 3.103 shows expenditure by health facilities on ICT equipment for the last 12 months ending 31 August 2017 classified by land use sector and type of equipment.

Table 3.103: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Equipment: ICT Census 2017, Zimbabwe

ICT Equipment	Expenditure by Land Use Sector (US\$)											
	Special Category Area	Communal Areas	Small Scale Commercial Farming	Large Scale Commercial Farming	Urban Council Area	Administrative Centre	Growth Points	Other Urban Areas	Old Resettlement Area	A1 Farms	A2 Farms	Total
Desktop Computers, Laptops, Tablets, E-Book Readers, etc.	0	27,181	775	8,736	214,829	8,000	13,789	8,851	2,251	778	0	285,190
Network Hardware	0	2,998	0	0	26,771	1,570	769	60	0	65	0	32,233
Mobile cellular telephone handsets, CDMA handsets	0	4,473	110	134	26,935	11,120	1,633	2,180	195	20	18	46,818
Decoders, Satellite Dishes, Aerials, etc.	0	130	0	1,090	1,474	0	800	750	0	0	0	4,244
Television Sets, Radio Sets, Two-Way Radios, MP3 or MP4 players/ CD players, etc.	0	325	0	66	3,103	0	870	0	0	100	0	4,464
Whiteboards, Video Streaming Hardware, PA Systems & Wireless Microphones, etc.	0	134	0	0	635	0	350	0	0	0	0	1,119
Printers, Photocopiers, Toners, Ink, Scanners, Visual Display Units, etc.	50	39,655	70	9,733	361,647	7,852	10,550	10,057	2,965	1,207	800	444,586
Telephone-Answering machines, Telefax equipment, radio-telephones	0	45	0	0	1,677	0	574	0	0	0	0	2,296
Computer software packages	0	1,740	0	600	369,324	1,000	640	2,797	50	221	20	376,392
Calculators	5	5,022	50	375	2,340	1,100	64	0	35	105	280	9,376
Photographic equipment	0	2,656	850	0	14,623	0	170	0	60	150	0	18,509
Other equipment	0	5,059	0	2,233	62,477	0	9	5	510	483	0	70,776
Total	55	89,418	1,855	22,967	1,085,835	30,642	30,218	24,700	6,066	3,129	1,118	1,296,003

Table 3.104 shows expenditure on ICT equipment for the last 12 months ending 31 August 2017 classified by urban and rural area and type of equipment.

Table 3.104: Expenditure on ICT Equipment for the Last 12 Months Ending 31 August 2017 Classified by Rural and Urban Areas and Type of Equipment: ICT Census 2017, Zimbabwe

Type of Equipment	Expenditure by Area (US\$)		
	Urban	Rural	Total
Desktop Computers, Laptops, Tablets, E-Book Readers, etc.	214,829	70,361	285,190
Network Hardware (e.g. cables, servers, routers, switches, etc.)	26,771	5,462	32,233
Mobile cellular telephone handsets, CDMA handsets	26,865	19,953	46,818
Decoders, Satellite Dishes, Aerials, etc.	1,474	2,770	4,244
Television Sets, Radio Sets, Two-Way Radios, MP3 or MP4 players/ CD players, etc.	3,103	1,361	4,464
Whiteboards, Video Streaming Hardware, PA Systems & Wireless Microphones, etc.	635	484	1,119
Printers, Photocopiers, Toners, Ink, Scanners, Visual Display Units, etc.	360,588	83,998	444,586
Telephone-Answering machines, Telefax equipment, radio-telephones	1,677	619	2,296
Computer software packages	369,324	7,068	376,392
Calculators	2,340	7,036	9,376
Photographic equipment	14,623	3,886	18,509
Other equipment	62,477	8,299	70,776
Total	1,084,706	211,297	1,296,003

Table 3.105 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by province and type of service.

**Table 3:105: Expenditure on ICT Services for the Last 12 Months Ending 31 August 2017 Classified by Province and Type of Service:
ICT Census 2017, Zimbabwe**

Type of Service	Expenditure by Province (US\$)										
	Bula wayo	Manica land	Mashonaland Central	Mashonaland East	Mashonaland West	Matabeleland North	Matabeleland South	Midlands	Masvingo	Harare	Total
Installation of equipment and subscription costs, e.g. DSTV	1,259	1,897	2,310	2,650	365	1,650	8,386	5,394	132	5,844	29,887
Hiring of ICT equipment (computers, Projectors, etc.)	350	0	0	0	0	0	0	0	0	0	350
Hiring of Audio-visual equipment (PA System, Video Cameras)	2,320	380	0	0	600	110	0	200	2,100	5,300	11,010
SIM Cards, Dongles, Flash Disks, Memory Cards	782	694	47	432	2,807	167	247	725	10,428	617	16,946
Internet charges and connection services	99,542	24,178	47,704	11,679	12,468	6,678	12,342	16,780	11,225	106,222	348,818
Fixed telephone charges	247,918	10,710	6,640	38,250	107,052	6,214	3,210	63,476	4,392	214,302	702,164
Post-Paid/Contract Phones Charges	840	4,830	2,016	2,720	1,580	0	0	2,804	1,468	9,600	25,858
Repair of ICT equipment/devices	5,325	3,396	919	4,578	2,615	405	3,296	6,710	8,794	7,300	43,338
Pre-paid airtime charges	22,153	50,056	26,538	47,479	62,176	12,358	10,379	47,612	30,622	35,652	345,025
Other services	1,114	868	1,948	186	726	1,535	0	82	180	60	6,699
Total	381,603	97,009	88,122	107,974	190,389	29,117	37,860	143,783	69,341	384,897	1,530,095

Table 3.106 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by land use sector and type of service.

Table 3.106: Expenditure on ICT Services for the Last 12 Months Ending 31 August 2017 Classified by Land Use Sector and Type of Service: ICT Census 2017, Zimbabwe

Type of Service	Expenditure by Land Use Sector (US\$)												
	Special Category Area	Communal Area	Small Scale Commercial Farming Area	Large Scale Commercial Farming Area	Urban Council Area	Administrative Centres (District	Growth Points	Other Urban Areas	State Land	Old Resettlement Area	A1 Farms	A2 Farms	Total
Installation of equipment and subscription costs, e.g. DSTV	0	2,743	384	0	23,275	0	613	0	0	2,872	0	0	29,887
Hiring of ICT equipment (computers, Projectors, etc.)	0	0	0	0	350	0	0	0	0	0	0	0	350
Hiring of Audio-visual equipment (PA System, Video Cameras)	0	260	0	20	8,720	2,000	10	0	0	0	0	0	11,010
SIM Cards, Dongles, Flash Disks, Memory Cards	0	2,545	49	55	2,912	10,016	279	971	20	63	36	0	16,946
Internet charges and connection services	0	36,837	0	14,261	245,572	43,025	4,602	3,988	0	9	284	240	348,818
Fixed telephone charges	0	5,216	0	1,286	667,248	5,860	16,854	5,360	0	0	340	0	702,164
Post-Paid/Contract Phones Charges	0	7,329	240	2,465	13,244	0	0	2,580	0	0	0	0	25,858
Repair of ICT equipment/devices	20	10,839	0	120	24,404	4,000	1,220	2,620	5	60	50	0	43,338
Pre-paid airtime charges	100	128,396	2,021	12,481	141,374	6,870	16,326	15,847	440	12,071	6,499	2,480	345,025
Other services	0	2,847	60	100	2,080	600	166	260	0	26	560	0	6,699
Total	120	197,012	2,754	30,788	1,129,179	72,371	40,070	31,626	465	15,101	7,769	2,720	1,530,095

Table 3.107 shows expenditure on ICT services for the last 12 months ending 31 August 2017 classified by urban and rural areas and type of service.

Table 3.107: Expenditure on ICT Services for the Last 12 Months Ending 31 August 2017 Classified by Rural and Urban Area and Type of Service: ICT Census 2017, Zimbabwe

Type of Service	Expenditure by Area (US\$)		
	Urban	Rural	Total
Installation of equipment and subscription costs, e.g. DSTV	23,275	6,612	29,887
Hiring of ICT equipment (computers, Projectors, etc.)	350	0	350
Hiring of Audio-visual equipment (PA System, Video Cameras)	8,720	2,290	11,010
SIM Cards, Dongles, Flash Disks, Memory Cards	2,892	14,054	16,946
Internet charges and connection services	244,128	104,690	348,818
Fixed telephone charges	667,248	34,916	702,164
Post-Paid/Contract Phones Charges	13,244	12,614	25,858
Repair of ICT equipment/devices	23,604	19,734	43,338
Pre-paid airtime charges	138,244	206,781	345,025
Other services	2,080	4,619	6,699
Total	1,123,785	406,310	1,530,095

REFERENCES

The ITU Manual for Measuring ICT Access and use by Households and Individuals (2014).

Manual for the Production of Statistics on the Information Economy (UNCTAD, 2009).

International Standard Classification of Occupations (ISCO-08).

System of National Accounts (SNA-08).

International Standard Industrial Classification of All Economic Activities (ISIC), Revision 4.

Classification of Health Workforce Statistics: World Health Organisation.

OECD Guide to Measuring ICTs in the Health Sector.

National Health Strategy for Zimbabwe (MoH&CC 2016-2020)

Appendix 1

Term Or Abbreviation	Notes
3G Mobile Cellular Network	Third generation of mobile communications technology, a group of mobile technologies that have been approved by ITU as IMT-2000. These technologies allow voice, data and video communications. Currently, five standards have been specified as IMT-2000 based on various combinations of mobile technologies: CDMA Direct Spread (WCDMA), CDMA Multi-Carrier (CDMA2000), CDMA Time division (TD-CDMA), TDMA Single-Carrier and FDMA/TDMA and of DMA TDD WMAN (IEEE 802.16).
Accuracy	Denotes the closeness of computations or estimates to the exact or true values. Statistics are not equal with the true values because of variability (the statistics change from implementation to implementation of the survey due to random effects) and bias (the average of the possible values of the statistics from implementation to implementation is not equal to the true value due to systematic effects).
ADSL	Asymmetric digital subscriber line, a modem technology that converts twisted-pair telephone lines into access paths for multimedia and high-speed data communications. The bit rates transmitted in both directions are different.
Area Sampling	Selection of geographical area units that comprise sampling frame (may include selection of area segments, defined as mapped subdivisions of administrative area).
Analogue Modem	Dial-up is a connection to the Internet via an analogue modem and telephone line, which requires that the modem dial a phone number when Internet access is needed. The modem converts a digital signal into analogue for transmission by traditional (copper) telephone lines. It also converts analogue transmissions back to digital.
Anti-Spyware Software	Software which detects and removes spyware from a computer system (spyware is tracking software which gathers information without the user's knowledge).
Bit	Abbreviation for binary digit and describing the smallest unit of information handled by a computer. One bit expresses a 1 or a 0 in a binary numeral, or a true or false logical condition. See also Byte.
Blog (Short For Web Log)	A blog (a truncation of the expression web log) is a discussion or informational site published on the World Wide Web and consisting of discrete entries ("posts") typically displayed in reverse chronological order (the most recent post appears first).
Broadband	A general term meaning a telecommunications signal or device of greater bandwidth, in some sense, than another standard or usual signal or device; the broader the band,

	the greater the capacity for traffic). In data communications, the term refers to a data transmission rate of at least 256 kb/s.
Byte	Abbreviation for binary term. A unit of data, today almost always consisting of 8 bits. A byte can represent a single character, such as a letter, a digit, or a punctuation mark. See also kilobit and kilobyte.
Cable Modem	Cable modem uses modems attached to cable television networks (cable TV lines) for permanent 'fixed' access to the Internet. A cable modem is a device that enables you to hook up a computer to a local cable TV line and receive data. It is considered as one of the high capacity 'speed' permanent 'fixed' Internet connection (broadband).
Cable TV(CATV)	Multi-Channel programming delivered over a coaxial cable for viewing on television sets
CAPI	Computer assisted personal interviewing.
CATI	Computer assisted telephoning interviewing.
CDMA 1x (Release 0)	CDMA 1x (Release 0) is a part of the IMT-2000 family of standards and provides an upgrade for CDMA users, but typically has a capacity of below 256 kb/s.
CDMA2000 1x	CDMA2000 1x is an IMT-2000 3G mobile network technology, based on CDMA that delivers packet switched data transmission speeds of up to 144 kbps. Also referred to as 1XRTT.
CDMA2000 1xevo	CDMA2000 1xEV-DO (Evolution, Data Optimized), an IMT-2000 3G mobile network technology, based on CDMA that delivers packet-switched data transmission speeds of up to 4.9 Mbit/s.
Cellular Mobile With Access At Broadband Speeds	Cellular mobile networks with access to data communications (e.g. the Internet) at broadband speeds (defined as greater than or equal to 256 kb/s in one or both directions) such as WCDMA, HSDPA, CDMA2000 1xEV-DO, CDMA 200 1xEV-DV etc. These services are typically referred to as 3G or 3.5G.
Commercial Internet Access Facility	Enables Internet use at publicly available commercial facilities such as Internet or cyber cafés, hotels, airports etc., where access is typically paid (i.e. not free of charge).
Community Internet Access Facility	Enables Internet use at community facilities such as public libraries, publicly provided Internet kiosks, non-commercial telecentres, digital community centres, post offices, other government agencies; access is typically free and is available to the general public.
Desktop Computer	A computer that usually remains fixed in one place. Normally the user is placed in front of it, behind the keyboard.

Dial-Up Internet Access	Uses an (analogue) modem and fixed telephone line to connect to the Internet; it requires that the modem dial a telephone number when Internet access is needed.
Digital Terrestrial TV (DTT)	The technological evolution from analogue terrestrial television, providing capability for sign
Direct-To-Home (DTH) Satellite Services	Television services received via a satellite dish capable of receiving satellite television broadcasts
DQAF	Data Quality Assessment Framework (IMF)
DSL	Internet access using Digital Subscriber Line (DSL) technology. DSL is a technology for bringing high-bandwidth information to homes and small businesses over ordinary copper telephone lines. Speed should be equal to, or greater than, 256 kbit/s, in one or both directions.
Fixed (Wired) Broadband Network	Refers to technologies at advertised download speeds of at least 256 kbit/s, such as DSL, cable modem, high speed leased lines, fibre-to-the home/building, powerline and other fixed (wired) broadband.
Fixed (Wired) Narrowband Network	Includes analogue modem (dial-up via standard telephone line), ISDN (Integrated Services Digital Network), DSL (Digital Subscriber Line) at advertised download speeds below 256 kbit/s, and other forms of access with an advertised download speed of less than 256 kbit/s.
Fixed Telephone Line	A telephone line connecting a customer's terminal equipment (e.g. telephone set, facsimile machine) to the public switched telephone network (PSTN) and which has a dedicated port on a telephone exchange. This term is synonymous with the terms main station or Direct Exchange Line (DEL) that are commonly used in telecommunication documents. It may not be the same as an access line or a subscription.
General Government Organizations	Are defined per the SNA93 (2008 revision) concept of general government. According to the SNA "... the principal functions of government are to assume responsibility for the provision of goods and services to the community or to individual households and to finance their provision out of taxation or other incomes; to redistribute income and wealth by means of transfers; and to engage in non-market production." (General) government organizations include central, state and local government units.)
GPRS	General Packet Radio Service (GPRS), a 2.5G mobile standard typically adopted by GSM operators as a migration step towards 3G (W-CDMA).
GSM	Global System for Mobile communications.

Handheld Computer	A small computer including a personal digital assistants (PDA), also known as a palmtop computer.
Homepage	A home page, index page, or main page is a page on a website.
Household	For the purposes of this Survey, a household consists of one or more persons, who may or may not be related to each other; share accommodation; and make common provision for food.
HSDPA	High-speed Downlink Packet Access (HSDPA), an upgrade to W-CDMA to allow downlink data transmission at speeds of typically 8-10 Mbit/s. It is complemented by High-Speed Uplink Packet Access (HSUPA), which offers uplink speeds of around 5 Mbit/s.
In Mobility (Internet Use)	Use of the Internet while mobile, via a mobile cellular telephone (including devices with mobile telephone functionality) or other mobile access devices, for example, a laptop computer, tablet or other handheld device connected to a mobile phone network.
Internet	communication services including the World Wide Web and carries email, news, entertainment and data files, irrespective of the device used (not assumed to be only via a computer – it may also be by mobile phone, PDA, games machine, digital TV etc.). Access can be via a fixed or mobile network.
IP	Internet protocol
ISDN	Integrated services digital network, a network that provides digital connections between user-network interfaces.
ISP	Internet service provider
Kbit/S (Or Kbit/S Or Kbps)	Kilobits per second (1 kilobit per second=one thousand bits per second). A kilobit is 1,024 bits. A bit expresses a 1 or a 0 in a binary numeral, or a true or false logical condition.
Laptop (Portable) Computer	A computer that is small enough to carry and usually enables the same tasks as a desktop computer. It includes notebooks and netbooks but does not include tablets and similar handheld computers.
Making On-Line Payments	Includes payment of fees, payments for purchases, taxation remittances etc. Online payments to government organizations may be made via an intermediary, for instance, a bank's website.
Master Sample	A super sample intended to be used for multiple surveys and/or multiple rounds of the same survey, usually over 10-year time frame.
Mobile (Cellular) Telephone	A portable telephone subscribing to a public mobile telephone service using cellular technology, which provides access to the PSTN. This includes analogue and digital

	cellular systems and technologies such as IMT-2000 (3G) and IMT-Advanced. Users of both post-paid subscriptions and pre-paid accounts are included.
Mobile Broadband Network Via A Card Or USB Modem	Mobile broadband network (at least 3G, e.g. UMTS) via a card (e.g. integrated SIM card in a computer) or USB modem.
Mobile Broadband Network Via A Handset	Mobile broadband network (at least 3G, e.g. UMTS) via a handset
Modem	Modulator-demodulator, a device or program that enables a computer to transmit data over, for example, telephone or cable lines.
OCR	Optical character recognition.
OECD	Organisation for Economic Co-operation and Development
PARTNERSHIP	Partnership on Measuring ICT for Development
PDA	Personal digital assistant
Primary Sampling Unit, PSU	Geographically-defined administrative unit selected at first stage of sampling
Radio	A device capable of receiving broadcast radio signals, using common frequencies, such as FM, AM, LW and SW. A radio may be a stand-alone device, or it may be integrated with another device, such as an alarm clock, an audio player, a mobile telephone or a computer.
Sample Frame(S)	Set of materials from which sample is actually selected, such as a list or set of areas.
Satellite Broadband Network	Satellite broadband network (via a satellite connection), at advertised download speeds of at least 256 Kbit/s
Segment	A delineated, mapped subdivision of a larger cluster
Social Network/Networking	Social networking can be distinguished from other communication and content activities by the aspect of creating a profile on certain websites.
Tablet	A computer that is integrated into a flat touch screen, operated by touching the screen rather than (or as well as) using a physical keyboard.
Target Population	Definition of population intended to be covered by survey; also known as coverage universe.
Television	A stand-alone device capable of receiving broadcast television signals, using popular access means such as over-the-air, cable and satellite. A television set is typically a stand-alone device, but it may also be integrated with another device, such as a computer or a mobile telephone.
Terrestrial Fixed (Wireless) Broadband Network	Refers to technologies at advertised download speeds of at least 256 Kbit/s, such as WiMAX, fixed CDMA
UIS	UNESCO Institute for Statistics

UMTS	Universal Mobile Telecommunications System (UMTS) is one of the third generation (3G) mobile phone technologies. It uses W-CDMA as the underlying standard, is standardized by the 3GPP, and represents the European answer to the ITU IMT-2000 requirements for 3G Cellular radio systems. It presently delivers packet switched data transmission speeds up to 384 kbps and up to 2 Mbps when fully implemented.
UNCTAD	United Nations Conference on Trade and Development
UNECA	United Nations Economic Commission for Africa
UNESCO	United Nations Education, Scientific and Cultural Organization
UNSC	United Nations Statistical Commission
UNSD	United Nations Statistics Division
URL	Uniform Resource Locator
USB Modem	Universal serial bus, an external bus standard that supports data transfer rates of 12 Mbit/s
User-Created Content	Can be uploaded by anyone, includes texts, photos, music files and video clips, which often act as the centre for interaction within a network (e.g. YouTube, MySpace).
VOIP	Voice over Internet Protocol, VoIP is a family of transmission technologies for delivery of voice communications over the Internet or other packet-switched networks. It is more generally referred to as IP (or Internet) telephony.
Web Presence	Includes a website, homepage or presence on another entity's website. It excludes inclusion in an online directory and any other web pages where the entity does not have control over the content of the page. A web presence includes social media pages and accounts (for example, Facebook, YouTube and Twitter) if the entity has control over content.
W-CDMA	Wideband CDMA (W-CDMA), an IMT-2000 3G mobile network technology, based on CDMA that presently delivers packet-switched data transmission speeds up to 384 Kbit/s and up to 2 Mbit/s when fully implemented. Known as Universal Mobile Telecommunications System (UMTS) in Europe.
Website	Location on the World Wide Web identified by a web address. Collection of web files on a particular subject that includes a beginning file called a home page. Information is encoded with specific languages (Hypertext mark-up language (HTML), XML, Java) readable with a web browser, like Netscape's Navigator or Microsoft's Internet Explorer.
Weight	Inverse of probability of selection; inflation factor applied against raw data; also known as design weight.

WIFI	Wireless fidelity, a wireless local area network based on the Institute of IEEE 802.11 standard
Wiki	Usually refers to a web application which allows people to add, modify, or delete content in a collaboration with others. Text is usually written using a simplified Markup language or a rich-text editor.
WIMAX	Wireless interoperability for microwave access/Worldwide Interoperability for Microwave Access, a family of telecommunications protocols that provide fixed and mobile Internet access, based on the IEEE 802.16 standard.
WPIIS	Working Party on Indicators for the Information Society (OECD)
WSIS	World Summit on the Information Society
WWW	World Wide Web
XDSL	Any of the various types of digital subscriber lines technologies, e.g. ADSL
ZIMSTAT	Zimbabwe National Statistics Agency

Appendix 2: Questionnaire

CONFIDENTIAL



INFORMATION AND COMMUNICATION TECHNOLOGY (ICT)



Serial Number:

For Official use only

ZIMBABWE NATIONAL STATISTICS AGENCY
INFORMATION AND COMMUNICATION TECHNOLOGY CENSUS 2017

SECTION A: IDENTIFICATION (HF)

Province	District		Ward		Sector			Type of Health Facility	Month		Year			
							0				2	0	1	7

The Interviewer is directed to verify the type of health facility before proceeding with the Interview

The reference period for the ICT census questions is the 4 months ending 31 August 2017, except for Question 6.1 whose reference period is the 12 months from 1 September 2016 – 31 August 2017

Please ensure that a separate questionnaire is completed for each health facility.

(Interviewers are instructed to observe skip patterns and to take note of instructions given in the questionnaire)

HF 1.1	What is the name of the Chief Respondent? <i>(Print the name in the space provided)</i>
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HF 1.2	What is the name of the Head of this Health Facility? <i>(Print the name in the space provided)</i>
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HF 1.3	What is the sex of the Head of this Health Facility?	Male = 1	Female = 2
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HF1.4	What type of Health Facility is this Establishment*? <i>Circle the appropriate response code</i>		
1.4.1	Central Hospital	0	1
1.4.2	Provincial Hospital	0	2
1.4.3	District (Mission/Private) Hospital	0	3
1.4.4	Infectious Disease Hospital	0	4
1.4.5	Rural Hospitals	0	5
1.4.6	Clinic/Rural Health Centre	0	6
1.4.7	Other Health Facility Not Elsewhere Classified (specify)	0	7

A Mission/Private Hospital may also be a District or a Rural Hospital.

**An establishment is an enterprise or part of an enterprise at a single location, engaged in essentially a single activity, and capable of, in principle, of providing the data required for the production and generation of income accounts (SNA 2008).*

HF1.5(a)	PARTICULARS OF THE HEALTH FACILITY <i>Give the following details about this Health Facility:</i>
1.5.1	Legal or Registered Name of the Health Facility:
1.5.2	Postal Address:.....
1.5.3	Physical Address:.....
1.5.4	Telephone No:
1.5.5	Mobile No:
1.5.6	E-mail address:

HF1.5(b)	Ownership of Health Facilities at different locations		
1.5.7	Is this Health Facility owned by another enterprise? <i>Circle the appropriate response code</i>	Yes... No ...	1 2 ➔ 1.6
1.5.8	What is the name and physical address of the enterprise?		
This question is intended to identify health facilities owned by another enterprise.			

HF 1.6	What is the type of ownership of this health facility? <i>Circle the appropriate response code</i>	
1.6.1	Sole Proprietorship	1
1.6.2	Private Limited Company	2
1.6.3	Partnership	3
1.6.4	Cooperative	4
1.6.5	Public Limited Company	5
1.6.6	Central Government	6
1.6.7	Local Government	7
1.6.8	Parastatal	8
1.6.9	Non-Profit Institution	9
1.6.10	Other Type of Ownership Not Elsewhere Classified (<i>Specify</i>)	10

SECTION B: ENROLMENT AND EMPLOYMENT (HF)

HF 2.1	Did this health facility enroll any students/learners/trainees in the last 4 months ending 31 August 2017?	Yes..	1	
	<i>Circle the appropriate response code</i>	No...	2	➡ 2.3

HF 2.2	What was the total number of students/learners/trainees enrolled at this health facility as at 31 August 2017 by sex?	Male	Female

HF 2.3	What was the total number of staff engaged by this health facility as at 31 August 2017 by sex?	Male	Female

SECTION C: ELECTRICITY ACCESS

HF 3.1	Did this health facility have access to electricity in the last 4 months ending 31 August 2017?	Yes...	1	
	<i>In order for a health facility to have access to electricity, the service should generally be available for use at the health facility at any time, regardless of whether it is actually used. There must be connections of the service at the health facility.</i> <i>Circle the appropriate response code</i>	No....	2	➡ 4.1

HF 3.2	What is the main source of electrical power for this health facility? <i>Identify the main source of electricity</i>	National Grid.....1
		Local Mini Grid.....2
		Fuel Powered Generator ...3
		Wind4
		Water5
		Solar6
		Other (Specify).....7

Electricity access may be by a grid/mains connection, or from power generated locally (including at the dwelling). Local power includes electricity generated by a fuel-powered generator, or from renewable resources such as wind, water or solar. It excludes sole use of energy storage devices, such as batteries (though these may be used to store electricity from other sources).

An electrical national grid consists of stations that produce electrical power, high voltage transmission lines that carry power from distant sources to demand centres, and distribution lines that connect individual customers.

A mini grid is a set of electricity generators and possibly energy storage systems interconnected to a distribution network that supplies electricity to a localized group of customers.

A fuel powered generator convert mechanical energy into electricity powered by a fuel source such as diesel or petrol.

Wind power is the use of air flow through wind turbines to mechanically power generators for electric power.

Solar power is the use of the sun's energy either directly as thermal energy (heat) or through the use of photovoltaic cells in solar panels and transparent photovoltaic glass to generate electricity.

Water –these are mini hydro powered sources that use waterfalls, e.g. Pungwe Falls - Kashiri/Buwu Village, Duru Falls, Nyawamba River, Honde Valley, Eastern Highlands, but are connected to the national grid.

SECTION D: ACCESS TO INFORMATION AND COMMUNICATION TECHNOLOGY BY HEALTH FACILITIES (HF)

HF 4.1	Did this health facility have access to a radio in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes	1
		No	2

A radio is defined as a stand-alone device capable of receiving broadcast radio signals, using popular frequencies, such as FM, AM, LW and SW. Unless they are intentionally used for educational purposes, radio sets integrated into other devices (such as a Walkman, car radio, clock radio, audio cassette or CD players/recorders) are excluded.

HF 4.2	Did this health facility have access to a two way radio for communication purposes in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes	1
		No	2

Communication is limited to persons within the health facility. The allocated frequency channel(s) is controlled especially from the health facility. Communication is done inside and outside the health facility premises using communication radios.

HF 4.3	Did this health facility have access to a television in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes	1	
		No	2	➡ 4.6

A television (TV) is defined as a stand-alone device capable of receiving broadcast television signals using popular access means such as over-the-air, cable and satellite.

Television broadcast receivers integrated into other devices (such as a computer, PDA, Smartphone or mobile phone) are considered only if their intended use is for educational purposes.

For health facilities with multichannel television, by type

HF 4.4	Did this health facility have access to any of the following television services in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>		
4.4.1	Direct-to-home (DTH) satellite services: TV services received via a satellite dish capable of receiving satellite television broadcasts, e.g. DStv, Wiztech, Philbao, etc.	Yes	1
		No	2
4.4.2	Digital/Analogue Terrestrial TV (DTTV): the technological evolution from analogue terrestrial television, providing capability for significantly more channels, e.g. ZTV, through antennae.	Yes	1
		No	2

National questionnaires should reflect services available in the country and describe them using local terminology, such as brand names.

DTTV (digital terrestrial television, sometimes also abbreviated DTT) is digital television (DTV) broadcast entirely over earthbound circuits. A satellite is not used for any part of the link between the broadcaster and the end user.

As health facilities can use more than one type of multichannel TV service, multiple responses are possible. The TV service(s) selected should be available at the time of the census.

This question is asked health facilities that responded “Yes” to Access to Multichannel Services in Question 4.4.		
HF 4.5	For which of the following activities did this health facility use television services in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code (Allow multiple responses)</i>	
4.5.1	Pedagogy in health	1
4.5.2	Evidence-based educational practice <i>To implement and apply pedagogic research to learning and teaching.</i>	2
4.5.3	Research Projects	3
4.5.4	Effective learning in the workplace <i>To develop students' research skills, enabling them to value and implement evidence-based professional practice.</i>	4
4.5.5	Patient Partnership <i>To enhance understanding of the nature and effectiveness of patient education, by the practitioner, the patient's peers and by the patients themselves.</i>	5
4.5.6	Entertainment for Patients	6
4.5.7	Other (Specify).....	7

HF4.6	Did this health facility have access to a fixed telephone in the last 4 months ending 31 August 2017?	Yes	1
	Circle the appropriate response code	No	2

A fixed telephone line refers to a telephone line connecting a customer's terminal equipment (e.g. telephone set, facsimile machine) to the public switched telephone network (PSTN) and which has a dedicated port on a telephone exchange. This term is synonymous with the terms main station or Direct Exchange Line (DEL) that are commonly used in telecommunication documents. It may not be the same as an access line or a subscription.

The equipment should be in working order.

HF 4.7	Did this health facility have access to a mobile cellular telephone in the last 4 months ending 31 August 2017?	Yes	1
	<i>In order for the health facility to have access to a mobile cellular phone, it should be able to be used, that is, equipment is in working condition at the time of the census</i>	No	2
<i>Circle the appropriate response code</i>			

A mobile (cellular) telephone refers to a portable telephone subscribing to a public mobile telephone service using cellular technology, which provides access to the Public Switched Telephone Network PSTN. This includes analogue and digital cellular systems and technologies such as, IMT-2000 (3G) and IMT-Advanced. Users of both post-paid subscriptions and pre-paid accounts are included.

HF 4.8	Did this health facility have access to a mobile network signal in the last 4 months ending 31 August 2017?	Yes	1
	Circle the appropriate response code	No	2

A mobile phone signal (also known as reception and service) is the signal strength (measured in dBm) received by a mobile phone from a cellular network (on the downlink). Depending on various factors, such as proximity to a tower, any obstructions such as buildings or trees, etc. this signal strength will vary. Most mobile devices use a set of bars of increasing height to display the approximate strength of this received signal to the mobile phone user.

HF 4.9	Did this health facility have access to a computer in the last 4 months ending 31 August 2017?	Yes.....	1	
	<i>Access to computers is defined as health facilities that reported having at least one personal computer in working order at the health facility.</i> Circle the appropriate response code	No.....	2	➡ 4.13

A computer refers to a desktop computer, a laptop (portable) computer or a tablet (or similar handheld computer).

- Desktop: a computer that usually remains fixed in one place; normally the user is placed in front of it, behind the keyboard.*
- Laptop (portable) computer: a computer that is small enough to carry and usually enables the same tasks as a desktop computer; it includes notebooks and netbooks but does not include tablets and similar handheld computers.*
- Tablet (or similar handheld computer): a tablet is a computer that is integrated into a flat touch screen, operated by touching the screen rather than (or as well as) using a physical keyboard.*

It does not include equipment with some embedded computing abilities, such as smart TV sets, and devices with telephony as their primary function, such as smartphones.

HF 4.10	Give a breakdown of the status of computers that were in working order at this health facility in the last 4 months ending 31 August 2017?		
	Type of Computer	Age	Number
4.10.1	Desktop	Less than 1 year	
		1 to less than 3 years	
		3 to less than 6 years	
		6 years and above	
4.10.2	Laptop	Less than 1 year	
		1 to less than 3 years	
		3 to less than 6 years	
		6 years and above	
4.10.3	Tablet	Less than 1 year	
		1 to less than 3 years	
		3 to less than 6 years	
		6 years and above	

HF4.11	How many computers at this health facility were available in the last 4 months ending 31 August 2017 for the following purposes?	Number
4.11.1	Pedagogy in Health: to foster excellent research into health professionals' learning and teaching practice on campus and in practice-based learning settings, fostering deep and collaborative engagement and understanding in how people learn in various health, social care, educational and community settings.	
4.11.2	Clinical Implementation	
4.11.3	Telemedicine: This is the use of medical information exchanged from one site to another via electronic communications to improve patients' health status.	
4.11.4	Education and Training:	
4.11.5	Administration	
4.11.6	Mobile Health: This is the use of mobile devices in health delivery. The mobile tools include mobile phone technologies use in disease monitoring and reporting, mobile computing tools such as wireless laptops, and tablet computers that provide easier mobility than more localised devices.	
4.11.7	Research: Access to international and national knowledge repositories build a rich source of reference for health service delivery.	
4.11.8	Community Settings	
4.11.9	Accounting	
4.11.10	Other (specify)	

HF 4.12	Give a breakdown of staff at this health facility who had access to a computer by sex in the last 4 months ending 31 August 2017?	Male	Female
4.12.1	Medical Staff		
4.12.2	Students/Learners		
4.12.3	Other Support Staff		

HF4.13	Did this health facility have access to the Internet in the last 4 months ending 31 August 2017?	Yes.....	1	
	Internet access means the Internet is generally available for use by members of staff at the health facility, regardless of whether it is actually being used. <i>Circle the appropriate response code</i>	No.....	2	⇒ 4.18

*The Internet is a worldwide public computer network. It provides access to a number of communication services including the World Wide Web and carries e-mail, news, entertainment and data files, irrespective of the device used (not assumed to be only via a computer – it may also be by mobile telephone, tablet, PDA, games machine, digital TV etc.). **Access to the Internet can be via a fixed or mobile network.***

El 4.14	What type/s of Internet service did this health facility use to access the Internet in the last 4 months ending 31 August 2017? <i>Please circle the code relevant to your response. (Allow multiple responses)</i>		
4.14 (a)	Fixed (wired) Narrowband: Includes mobile phone and other forms of access with an advertised download speed of less than 256 Kbit/s (including CDMA 1x (Release 0), GPRS, WAP and I-mode This question should be answered by health facilities using TELONE services: Dial-Up and Mobile Narrowband.	Yes	No
4.14.1	Dial-up via standard copper telephone line; it requires that the modem dial a phone number when Internet access is needed.	1	2
4.14.2	Mobile Narrowband (less than 3G, e.g. CDMA 1x, GPRS, EDGE.	1	2
Fixed (wired) Narrowband technologies were customised to reflect services available locally.			

4.14 (b)	Fixed (wired) Broadband: Includes technologies at speeds greater than or equal to 256 Kbit/s, in one or both directions, such as leased lines, fibre-to-the health facilities, satellite, fixed wireless, Wireless Local Area Network and WiMAX.	Yes	No
4.14.3	Cable modem A cable modem is a device that enables you to hook up your PC to a local cable TV line and receive data at about 1.5 Mbps. A cable modem can be added to or integrated with a set-top box that provides your TV set with channels for Internet access.	1	2
4.14.4	Digital Subscriber Line (DSL) includes ADSL, SHDSL, VDSL and uses ordinary copper telephone lines.	1	2
4.14.5	Fibre-to-the-health facility	1	2
4.14.6	Satellite Tel-One provides both C band and Ka band VSAT. C band VSAT is relatively expensive compared to Ka band mainly due to the high initial CPE that is required for each installation.	1	2
4.14.7	Other fixed (wired) broadband (specify)	1	2

4.14 (c)	Wireless broadband: refers to mobile cellular networks with access to the Internet at speeds greater than or equal to 256 Kbit/s, in one or both directions, such as Wideband CDMA (W-CDMA), Universal Mobile Telecommunications System (UMTS); High-speed Downlink Packet Access (HSDPA), complemented by High-Speed Uplink Packet Access (HSUPA); CDMA2000 1xEV-DO and CDMA 2000 1xEV-DV. Access can be via any device (handheld computer, laptop or mobile cellular telephone etc.).	Yes	No
4.14.8	Terrestrial fixed wireless (e.g. WIMAX, WIFI (hotspots), microwave)	1	2
4.14.9	Mobile phone network (at least 3G, e.g. UMTS), via a handset	1	2
4.14.10	Mobile phone network (at least 3G,e.g. UMTS) via a card or USB key (e.g. integrated SIM card)	1	2
If “Yes” in Q4.14.1) to (4.14.10) responses, proceed to Q4.15			
Record all Internet access services used by the educational institution (that is, allow multiple responses).			

HF 4.15	What was the total number of students/learners/trainees by sex who had access to the Internet at this health facility in the last 4 months ending 31 August 2017?	Male	Female
This question is a fundamental measure of access to ICTs.			

HF 4.16	Give a breakdown of staff with access to the Internet at this health facility by occupation and sex as at 31 August 2017.						
	Occupation	Male	Female		Occupation	Male	Female
4.16.1	Generalist Medical Practitioners			4.16.14	Health Professionals, n.e.c.		
4.16.2	Specialist Medical Practitioners			4.16.15	Medical Imaging and Therapeutic Equipment Technicians		
4.16.3	Nursing Professionals			4.16.16	Medical and Pathology Laboratory Technicians		
4.16.4	Midwifery Professionals			4.16.17	Pharmaceutical Technicians and Assistants		
4.16.5	Traditional Complementary Medicine Professionals			4.16.18	Medical and Dental Prosthetic Technicians		
4.16.6	Paramedical Practitioners			4.16.19	Nursing Associate Professionals		
4.16.7	Dentists			4.16.20	Midwifery Associate Professionals		
4.16.8	Pharmacists			4.16.21	Traditional and Complementary Medicine Associate Professionals		
4.16.9	Environmental and Occupational Health and Hygiene Professionals			4.16.22	Dental Assistants and Therapists		
4.16.10	Physiotherapists			4.16.23	Medical Records and Health Information Technicians		
4.16.11	Dietician and Nutritionists			4.16.24	Community Health Workers		
4.16.12	Audiologists and Speech Therapists			4.16.25	Dispensing Opticians		
4.16.13	Optometrists and Ophthalmic Opticians			4.16.26	Physiotherapy Technicians and Assistants		

This question is also a fundamental measure of access to ICTs.

The international classification of health workers is largely based on the International Standard Classification of Occupations (ISCO, 2008 revision), a system for classifying and aggregating occupational information obtained by means of population censuses and other statistical surveys, as well as from administrative records. Classification of health workforce statistics, World Health Organization, Geneva.

HF 4.16	Give a breakdown of staff with access to the Internet at this health facility by occupation and sex as at 31 August 2017 (Continued).						
	Occupation	Male	Female		Occupation	Male	Female
4.16.27	Medical Assistants			4.16.38	Non-Health Professionals, n.e.c.		
4.16.28	Environmental and Occupational Health Inspectors and Associates			4.16.39	Life Science Technicians		
4.16.29	Ambulance Workers			4.16.40	Medical Secretaries		
4.16.30	Health Associate Professionals, n.e.c.			4.16.41	Non-Health Technicians and Associate Professionals, n.e.c.		
4.16.31	Health Care Assistants			4.16.42	Clerical Support Workers		
4.16.32	Home-based Personal Care Workers			4.16.43	Service and Sales Workers		
4.16.33	Personal Care Workers in Health Services, n.e.c.			4.16.44	Trade Workers		
4.16.34	Health Service Managers			4.16.45	Plant and Machine Operators and Assemblers		
4.16.35	Health Management Personnel, n.e.c.			4.16.46	Elementary Occupations		
4.16.36	Life Science Professionals			4.16.47	Armed Forces Occupations		
4.16.37	Social Work and Counselling Professionals			4.16.48	Other Health Service Providers, n.e.c.		

This question is a fundamental measure of access to ICTs.

The international classification of health workers is largely based on the International Standard Classification of Occupations (ISCO, 2008 revision), a system for classifying and aggregating occupational information obtained by means of population censuses and other statistical surveys, as well as from administrative records. Classification of health workforce statistics, World Health Organization, Geneva.

Note: A website is Internet based.

HF 4.17	Did this health facilities have a website in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes	1
		No	2

Location on the World Wide Web identified by a web address. Collection of web files on a particular subject that includes a beginning file called a home page. Information is encoded with specific languages (Hypertext mark-up language (HTML), XML, Java) readable with a web browser, like Netscape's Navigator or Microsoft's Internet Explorer.

HF 4.18	Note: This question is asked only health facilities without access to the Internet. This question is asked health facilities that responded “No” to Access to the Internet in Question HF 4.13.		
	What were the reasons for this health facility not having Internet access in the last 4 months ending 31 August 2017? <i>(Allow multiple responses)</i>		
	Reason	Yes	No
4.18.1	Do not need the Internet (not useful, not interesting, lack of local content)	1	2
4.18.2	Have access to the Internet elsewhere	1	2
4.18.3	Lack of confidence, knowledge or skills to use the Internet	1	2
4.18.4	Cost of the equipment is too high	1	2
4.18.5	Cost of the service is too high	1	2
4.18.6	Privacy or security concerns	1	2
4.18.7	Internet service is not available in the area	1	2
4.18.8	Internet service is available but does not correspond to health facility needs (e.g. quality, speed)	1	2
4.18.9	Cultural reasons (e.g. exposure to harmful content)	1	2
4.18.10	Other (specify)	1	2

This question is ONLY asked health facilities that responded “Yes” to Access to Electricity, (Question HF 3.1), “Yes” to Access to Computers, (Question HF 4.9) and “Yes” to Access to the Internet, (Question 4.13).			
HF4.19	Did this health facility have an electronic system for the provision of health services in the last 4 months ending 31 August 2017? An electronic system is a physical interconnection of components, or parts that gathers various amounts of information together, e.g. ePMS Circle the appropriate response code	Yes.....	1
		No.....	2 ⇒ 5.1
<i>The World Health Organisation (WHO) defines E-Health as “the combined use of electronic communication and information technology in the health sector”.</i>			

HF 4.20	What were the uses of the electronic system available at this health facility in the last 4 months ending 31 August 2017? <i>Allow multiple responses</i>	
4.20.1	Electronic Medical Records (EMRs) <i>Provider - centric electronic records include systems that are used by healthcare professionals to store and manage patient health information and data, and include functionalities that directly support the health care delivery process. Patient Management System (ePMS)</i>	1
4.20.2	Personal Health Records (PHRs) <i>Patient – centric records are typically used by patients and their families to access and manage their health information and organize their health care.</i>	2
4.20.3	Health Information Exchange <i>Health Information Exchange (HIE) refers to the process of electronically transferring, or aggregating and enabling access to, patient health information and data across provider organisations.</i>	3
4.20.4	Tele-health <i>Tele-health encompasses a broad set of technologies that support care between patients and providers, or among providers, who are not co-located. Telemedicine is often defined as synchronous video-mediated consultations between physicians and patients.</i>	4
4.20.5	Other (specify)	5

HF 4.21	Which of the following types of clinical data for individual patients were available electronically to those treating patients at this health facility in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code (Allow multiple responses)</i>	
4.21.1	Patient demographics	1
4.21.2	Detailed clinical notes from encounter with clinician/medical history/anamnesis	2
4.21.3	Problem list	3
4.21.4	Diagnoses	4
4.21.5	Active/current medication list	5
4.21.6	Vital signs	6
4.21.7	Allergies	7
4.21.8	Immunizations	8
4.21.9	Other (specify).....	9
Please provide data that are generated from within this health facility not that generated from outside this health facility.		

Note: A health facility might have an electronic system but medical staff may not be allowed to use it to prescribe medications.

HF4.22	Did the electronic system that was used at this health facility allow <u>medical staff</u> to prescribe medications in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes.....	1	
		No.....	2	⇒ 5.1

HF4.23	Did the system make the prescription electronically available to pharmacies outside the health facility in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes.....	1
		No.....	2

HF4.24	Did the electronic system at this health facility allow <u>medical staff</u> to perform the following functions electronically when needed in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code (Allow multiple responses)</i>		
4.24 (a)	Routine Clinical Functions	Yes	No
4.24.1	List patients who are due for tests	1	2
4.24.2	List medications ordered from outside of this health facility	1	2
4.24.3	List of medications dispensed outside of this health facility	1	2
4.24 (b)	General Health Management	Yes	No
4.24.4	List patients by diagnosis	1	2
4.24.5	List of patients by lab result	1	2
4.24.6	List of all patients within this health facility who have been prescribed a particular medication	1	2
Please provide data that are generated from within this health facility not that generated from outside this health facility.			

HF4.25	Did the electronic system at this health facility in the last 4 months ending 31 August 2017 include the following: <i>Circle the appropriate response code (Allow multiple responses)</i>	Yes	No
4.25.1	Access to clinical guidelines, protocols, and/or best practices	1	2
4.25.2	Structured order sets	1	2
4.25.3	Drug-drug interaction or contraindications alerts/reminders	1	2
4.25.4	Drug-allergy alerts/reminders	1	2
4.25.5	Other (specify).....	1	2
Please provide data that are generated from within this health facility not that generated from outside this health facility.			

HF4.26	Did the electronic system at this health facility in the last 4 months ending 31 August 2017 allow medical staff to do the following: <i>Circle the appropriate response code (Allow multiple responses)</i>	Yes	No
4.26.1	Send clinical/patient medical information securely to other health professionals	1	2
4.26.2	Receive clinical/patient medical information securely from other health professionals	1	2
4.26.3	Send patient summaries	1	2
4.26.4	Receive patient summaries	1	2
4.26.5	Send electronic referrals	1	2
4.26.6	Receive electronic referral reports	1	2
4.26.7	Send summary of the care received during a hospitalisation, upon discharge (e.g. discharge summary)	1	2
4.26.8	Receive summary of the care received during a hospitalisation upon discharge (e.g., discharge summary)	1	2
4.26.9	Send order/request for lab test	1	2
4.26.10	Receive lab test results	1	2
4.26.11	Receive radiology test results: reports	1	2
4.26.12	Receive radiology test results: images	1	2
Please provide data that are generated from within this health facility not that generated from outside this health facility.			

SECTION E. USE OF INFORMATION AND COMMUNICATION TECHNOLOGY BY HEALTH FACILITIES (HF)			
This question is asked health facilities that responded “Yes” to Access to a Computer in Question HF 4.9			
HF5.1	For which of the following computer-related activities did staff categories at the health facility use the computer in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code (Allow multiple responses)</i>		
Code	Activity	Code	Activity
1	Copying or moving a file or folder	7	Creating electronic documents and presentations with presentation software (including text, images, sound, videos or chart)
2	Using copy and paste tools to duplicate or move information within a document	8	Transferring files between computers and other devices
3	Accessing the Internet, e.g. sending e-mails with attached files (document, picture, video)	9	Writing a computer program using a specialized programming language
4	Using basic arithmetic formulae in a spreadsheet	10	E-learning
5	Connecting and installing new devices (e.g. a modem, camera, printer)	11	Playing games, streaming, or downloading games, images, videos or movies
6	Finding, downloading, installing and configuring software	12	Data storage
		13	Other (specify)
<i>This is an agreed SDG indicator to measure target 4.4: By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship.</i> The tasks are broadly ordered from less complex to more complex, although there is no requirement for the respondent to select simpler tasks before selecting a more complex task.			

This question is asked health facilities that responded “Yes” to Access to the Internet in Question HF 4.13.

HF5.2 For which of the following activities did staff categories at the health facility use the Internet in the last 4 months ending 31 August 2017?

Circle the appropriate response code (Allow multiple responses)

Code	Activity	Code	Activity
1	Getting information about goods or services	11	Downloading software or applications (includes patches and upgrades, either paid or free of charge)
2	Seeking health information (on injury, disease, nutrition etc.)	12	Reading or downloading on-line newspapers or magazines, electronic books
3	Making an appointment with a health practitioner via a website	13	Participating in professional networks (LinkedIn, Xing, etc.)
4	Getting information from general government organizations	14	Managing personal/own homepage
5	Interacting with general government organizations	15	Uploading self/user-created content to website to be shared (text, images, photos, etc.)
6	Sending or receiving e-mail	16	Blogging (maintaining or adding content to a blog)
7	Purchasing or ordering goods or services (purchase orders placed via the internet whether payment was made online)	17	Posting opinions on civic or political issues via websites (e.g. blogs, social networks, etc.)
8	Internet banking (includes electronic transaction with a bank for payment, transfers)	18	Taking part in on-line consultations or voting to define civic or political issues (e.g. urban planning, signing a petition)
9	E-learning (<i>learning conducted via electronic media, typically on the Internet.</i>)	19	Using storage space on the Internet to save documents, pictures, music, video, other files (e.g. Google Drive, Dropbox, Windows SkyDrive, iCloud, Amazon Cloud Drive)
10	Consult wikis (Wikipedia), online encyclopedias or other websites for formal learning purposes	20	Using software run over the Internet for editing text documents, spreadsheets or presentations (e.g. Google Docs, Office 365)

A computer is also an important device to access and use the Internet, in particular advanced applications and services (which are usually more difficult to use on a smartphone). Moreover, there is growing evidence of the strong association between school performance and home access and use of computer.

Activities are not mutually exclusive, that is, there is overlap between some categories.

This question is ONLY asked health facilities that responded “Yes” to Access to Electricity, (Question HF 3.1), “Yes” to Access to a Computer, (Question HF 4.9) and /or “Yes” to Access to the Internet, (Question 4.13).

If “Yes” proceed to Question HF 5.4.

HF 5.3	Did this health facility use ICT functionalities that support patient engagement in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes.....	1	
		No.....	2	⇒ 5.8

HF 5.4	Did patients remotely have a view of, or access to, the following information in the electronic system that you used at this health facility in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code (Allow multiple responses)</i>	Yes	No
5.4.1	Test results	1	2
5.4.2	Medication lists	1	2
5.4.3	Discharge instructions	1	2
5.4.4	Summary care notes	1	2
5.4.5	Diagnoses	1	2
5.4.7	Other (specify)	1	2

This question is asked health facilities that responded “Yes” to Access the Internet in Question HF 4.13.

HF 5.5	Were patients at this health facility able to book appointments online in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes....	1
		No	2

Online means that a computer, device, or a person is connected to a network, and usually this means the Internet.

This question is asked health facilities that responded “Yes” to Access to the Internet in Question HF 4.13.

HF 5.6	Were patients at this health facility able to book lab tests online in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes....	1
		No	2

Online means that a computer, device, or a person is connected to a network, and usually this means the Internet.

This question is asked health facilities that responded “Yes” to Access to the Internet in Question HF 4.13.

HF 5.7	Were patients at this health facility able to request prescriptions online in the last 4 months ending 31 August 2017? <i>Circle the appropriate response code</i>	Yes....	1
		No	2

Online means that a computer, device, or a person is connected to a network, and usually this means the Internet.

This question is asked health facilities that responded “Yes” to Access to Fixed Telephone, (Question HF 4.6) and “Yes” to Access to Mobile Cellular Telephone, (Question HF 4.7).

HF5.8 Which telephone service provider did this health facility use to make or receive calls in the last 4 months ending 31 August 2017?
Circle the appropriate response code. Allow multiple responses

5.8.1	ECONET	1
5.8.2	NET*ONE	2
5.8.3	TELECEL	3
5.8.4	AFRICOM	4
5.8.5	TELONE	5
5.8.6	POWERTEL	6
5.8.7	LIQUID TELECOM/ZOL	7
5.8.8	TELECONTRACT	8
5.8.9	OTHER (SPECIFY)	9

This question captures usage of telephone services and is open to all technologies; fixed, mobile, CDMA, VOIP, wired, wireless, etc.

This question is asked health facilities that responded “Yes” to Access to Mobile Cellular Telephone in Question HF 4.7.

HF 5.9 How do you rate the mobile network signal at this health facility in the last 4 months ending 31 August 2017 by the following mobile network service providers:
Circle the appropriate response code

5.9.1	ECONET	Poor1	Good 2	Very Good3	Not available....4
5.9.2	NET*ONE	Poor1	Good 2	Very Good3	Not available....4
5.9.3	TELECEL	Poor1	Good 2	Very Good3	Not available....4

Network Availability (how much time the mobile device detects network coverage regardless of technology)
A mobile phone signal is the signal strength (measured in dBm) received by a mobile phone from a cellular network (on the downlink).
These are mobile cellular services licensed operators.

This question is asked health facilities that responded “Yes” to Access to the Internet in Question HF 4.13.

HF5.10	Which telecommunication service provider did the health facility use to access the Internet in the last 4 months ending 31 August 2017 <i>Circle the appropriate response code. (Allow multiple responses)</i>	
5.10.1	LIQUID TELECOM/ZOL	1
5.10.2	TELONE	2
5.10.3	POWERTEL	3
5.10.4	DANDEMUTANDE	4
5.10.5	AFRICOM	5
5.10.6	AFRICA ONLINE	6
5.10.7	ECONET	7
5.10.8	NET*ONE	8
5.10.9	TELECONTRACT	9
5.10.10	TELECEL	10
5.10.11	AQUIVA	11
5.10.12	APTICS	12
5.10.13	iWAY AFRICA	13
5.10.14	YO AFRICA	14
5.10.15	ZARNET	15
5.10.16	PECUS	16
5.10.17	OTHER (SPECIFY)	17

This question does not restrict us to one type of telecommunication license but includes service providers that are not licensed by POTRAZ.

The licensed operators provide data and Internet services.

This question is asked health facilities who responded “Yes” to Access to the Internet in Question HF 4.13.

HF5.11	How do you rate the speed of the Internet service available at this health facility in the last 4 months ending 31 August 2017 from your main Internet Access Provider? <i>Circle the appropriate response code</i>	
	Very slow	1
	Slow	2
	Fast	3
	Very fast	4

This question is interested in how you perceive the service from your main Internet Access Provider.

This question applies to all health facilities.			
HF 5.12	Give the breakdown of ICT-qualified Medical Staff at this Health Facility by sex as at 31 August 2017.	Male	Female
ICT-qualified medical staff are those who have trained specifically in pre-service or in-service schemes in ICT according to nationally defined qualification standards. This does not necessarily mean that the medical staff recorded as qualified actually teach an ICT course, nor does it ensure that ICT course delivery is effective.			

SECTION F: EXPENDITURE ON ICT EQUIPMENT AND SERVICES BY HEALTH FACILITIES			
EI 6.1	How much did this health facility spend on ICT equipment and services during the last 12 months ending 31 August 2017? (1st September 2016 – 31 August 2017) Please write values in figures to the nearest dollar.		
6.1 (a)	Annual amount spent on ICT equipment (Value in US\$)	US\$	
6.1.1	Desktop Computers, Laptops, Tablets, E-Book Readers, etc.		
6.1.2	Network Hardware (e.g. cables, servers, routers, switches, etc.)		
6.1.3	Mobile cellular telephone handsets, CDMA handsets		
6.1.4	Decoders, Satellite Dishes, Aerials, etc.		
6.1.5	Television Sets, Radio Sets, Two-Way Radios, MP3 or MP4 players/ CD players, etc.		
6.1.6	Whiteboards, Video Streaming Hardware, PA Systems & Wireless Microphones, etc.		
6.1.7	Printers, Photocopiers, Toners, Ink, Scanners, Visual Display Units, etc.		
6.1.8	Telephone-Answering machines, Telefax equipment, radio-telephones		
6.1.9	Computer software packages		
6.1.10	Calculators		
6.1.11	Photographic equipment		
6.1.12	Other equipment (Specify)		
Total			
If the value of the equipment is not known in Question 6.1(a) in the case of donations, e.g. please provide the name of the Donor in the space provided below.			
Item	Donor	Quantity	

The 1999 UN Classification of Individual Consumption According to Purpose (COICOP) is used as the basis of the classification presented above and to define the scope of ICT goods and services.

6.1 (b)	Annual amount spent on ICT services (Value in US\$)	US\$
6.1.13	Installation of equipment and subscription costs, e.g. DSTV	
6.1.14	Hiring of ICT equipment (computers, Projectors, etc.)	
6.1.15	Hiring of Audio-visual equipment (PA System, Video Cameras)	
6.1.16	SIM Cards, Dongles, Flash Disks, Memory Cards	
6.1.17	Internet charges and connection services	
6.1.18	Fixed telephone charges	
6.1.19	Post-Paid/Contract Phones Charges	
6.1.20	Repair of ICT equipment/devices	
6.1.21	Pre-paid airtime charges	
6.1.22	Other services (Specify)	
Total		

The 1999 UN Classification of Individual Consumption According to Purpose (COICOP) is used as the basis of the classification presented above and to define the scope of ICT goods and services.

SECTION G: CONTACT DETAILS

Please provide the name and address of person to whom any queries regarding this questionnaire may be addressed:

Name: Prof./Dr./Mr./Mrs./Ms:

Position:

Fixed Telephone Numbers:

Mobile Phone Numbers:

Email Address:

SECTION H: DECLARATION

I certify that the information contained in this form is substantially correct and complete to the best of my knowledge.

Name of Signatory:

Designation:

(e.g. Principal, Head, Administrator, Dr, Matron, Sister-in-Charge, Charge Nurse, Bursar, Accountant)

Signed:

Date:

THANK YOU FOR COOPERATION

We invite your comments/suggestions below. Please be assured that we will review all comments/suggestions with the intent of improving the quality of the Census.

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ZIMBABWE NATIONAL STATISTICS AGENCY (ZIMSTAT) PROVINCES CONTACT DETAILS

MANICALAND ZIMSTAT, Box 606, Mutare Phone No: 020-62645 or 62526 Physical Address Government Offices, 1 st Floor Robert Mugabe St. MUTARE E-mail: tchitsamba@zimstat.co.zw manicaland@zimstat.co.zw	MASHONALAND CENTRAL ZIMSTAT, Box 322, Bindura Phone No: 0271-6749 or 7551 Physical Address Mutungagore Government Offices, Ground Floor Thurlow Avenue, BINDURA E-mail: ttaongai@zimstat.co.zw mashcentral@zimstat.co.zw	MASHONALAND EAST ZIMSTAT, Box 680 Marondera Phone No: 0279-23125 or 23032 Physical Address Government Offices, 1 st Floor 2 nd Street MARONDERA, E-mail: masheast@zimstat.co.zw btambaoga@zimstat.co.zw
MATABELELAND NORTH ZIMSTAT, Box 267, Hwange Phone No: 0281-23143 Physical Address DA's Offices Coronation Drive, HWANGE E-mail: tmhlanga@zimstat.co.zw	MATABELELAND SOUTH ZIMSTAT, Box 230, Gwanda Phone No: 0284-22565/7 Physical Address 1 st Floor, New Government Complex 4 th Avenue and Queen Street, GWANDA, E-mail: tngwenya@zimstat.co.zw matsouth@zimstat.co.zw	MIDLANDS ZIMSTAT, Box 269, Gweru Phone No: 054-224215/223384 Physical Address DA,s Offices, 42 Lobengula Avenue, GWERU E-mail: azinhumwe@zimstat.co.zw midlands@zimstat.co.zw
HARARE PROVINCE ZIMSTAT, Box CY342, Harare Phone No: 04-703727 Physical Address Makombe Complex Cnr Harare St/ Herbert Chitepo Ave, HARARE E-mail: pdeve@zimstat.co.zw harare@zimstat.co.zw	HARARE HEAD OFFICE ZIMSTAT, Box CY342, Harare Phone No: 04-706681-8 Physical Address 20 th Floor Kaguvi Bldg. Cnr. 4 th St. / Central Ave. Harare E-mail: info@zimstat.co.zw	BULAWAYO Postal Address: ZIMSTAT, Box 2111, Bulawayo Phone No: 09-71245 Physical Address 2 nd Floor, Magnet House Cnr Main St/ 10 th Avenue, BULAWAYO E-mail: lmutizwa@zimstat.co.zw bulawayo@zimstat.co.zw
MASHONALAND WEST ZIMSTAT, Box 652, Chinhoyi, Phone No: 067-22732 or 22432 Physical Address Room 22, Ground Floor Seven Heroes Building, CHINHOYI, E- mail: Imapondera@zimstat.co.zw mashwest@zimstat.co.zw	MASVINGO ZIMSTAT, Box 870, Masvingo Phone No: 039-262827 or 262256 Physical Address Public Construction Building Room 111/112 Chrome Rd, MASVINGO. E-mail: masvingo@zimstat.co.zw dmanjengwa@zimstat.co.zw	

END OF QUESTIONNAIRE

For Office Use Only

Interviewer's Name:		Date:	
Team Leader		Date	
Field Supervisor		Date	
Filed By		Date	

Coding and Data Entry		
Edited/Coded By	Data Entry By	Data Entry Verification By
Name.....	Name.....	Name.....
Section.....	Section.....	Section.....
Signature.....	Signature.....	Signature.....
Date.....	Date.....	Date.....

