This chapter, through a single country case-study, seeks to draw together issues in the broad policy environment in which NGOs are functioning. This case-study is based upon research carried out by the authors in Zimbabwe. Although country-specific, the discussion echoes the situation existing in many countries. First the background to the research is presented, including a review of the NGO sector in Zimbabwe, and an over-view of the context in which national policy regarding NGOs has been made since independence. It then considers health policy in Zimbabwe, NGOs in the health sector and their particular contribution to the delivery of health care.

BACKGROUND TO THE RESEARCH

It is appreciated that some issues may have changed since the research was conducted in 1991. Nevertheless, the use of this case-study to provide situationally-specific information is considered important as it enables the issues discussed in other chapters to be placed within a specific context. The original research was not designed to be a detailed evaluative study of the health and population sector in Zimbabwe. Rather, it was intended to identify issues in the development of policy concerning NGOs and to contribute to the development of rapid assessment tools for investigating the role of NGOs. The field work involved a number of different but related elements.

- A review of documents
- Semi-structured interviews with:
  - central government staff from the Ministry of Health (MoH) and other Ministries;
  - Ministry of Health and Department of Social Welfare (DSW) field staff;
  - representatives of donor agencies in Zimbabwe
- A postal questionnaire survey of NGOs in the health sector, with selected follow-up interviews
The questionnaire provided information on the activities and characteristics of NGOs and investigated broad policy issues relating to NGOs and their work in Primary Health Care. However, it was very difficult to ensure that all relevant NGOs were identified as there was no single source of information. The survey was conducted on a country-wide basis and questionnaires and guidance notes were sent by post to 254 NGOs identified as health-related NGOs using three criteria (96 questionnaires were returned). The criteria used for selection were that organizations should be:

(a) non-profit making;
(b) not directly controlled by government; and
(c) involved in health care, which included rehabilitation activities but not basic education.

Zimbabwe is a country in Southern Africa which achieved its independence in 1979 following a long liberation struggle and 15 years of guerrilla war. In 1991 Zimbabwe was a country of around 10 million people with a per capita gross national product of US$650. At independence the new Government of Zimbabwe (GoZ) inherited a grossly inequitable urban-based health sector which was racially divided and class ridden. This sector, despite providing the best possible health care services to meet the health needs of the privileged white minority, failed to address the diseases of poverty suffered by the black majority. There was a First/Third World split in morbidity and mortality patterns between the two populations. Evidence from available indicators would support a conclusion that there have been considerable improvements in overall health status of the Zimbabwean people since independence. For many Zimbabweans, particularly those who are of the age to be in senior management positions, experience of the liberation struggle has had a significant influence. Many NGOs, especially Christian missions, were supportive to the cause during this time and thus are favourably placed in their relationship with the current government. Over the last decade the number of NGOs working in Zimbabwe has increased considerably, especially secular ones and the majority of NGOs perceived a positive attitude by government towards them.

Although the GoZ has taken a number of steps towards the formulation of policies for particular groups within the NGO sector, there would appear to be no single widely accepted definition in Zimbabwe of what in fact constitutes an NGO. This absence of a definition is probably a reflection of the lack of recognition of a specific and separate NGO sector. This has a number of consequences, including the fact that there is no single Department or Ministry with a mandate to over-see the NGO sector as a