Zimbabwe Network for Health – Europe (ZimHealth)
Réseau Zimbabwéen Pour l'Accès à La Santé
% Rutendo Kuwana Chemin des Palettes 29, 1212 Grand-Lancy

Minutes of the 17th Annual General Meeting of the Zimbabwe Network for Health

Saturday 20 June 2026 at 15h30hrs

Venue: Permanent Mission of the Republic of Zimbabwe to the United Nations, 27 Chemin William Barbey, 1292 Chambesy, Geneva

Time: 14:30hrs to 1600hrs

1. Opening remarks/Welcome (Chairperson)

The Chair opened the meeting by welcoming members both old and new.

2. Apologies

No Apologies were noted

3. Minutes of previous AGM

Minutes from the 16th AGM were read by the Sec. General Bongani Ncube-Zikhali[1]
Vonai Muyambo moved to accept the minutes as a correct record of the previous AGM and Erica Kufa seconded the motion. The 2025 minutes were adopted by the 2026 AGM

4. Matters arising from the Minutes

There were no matters arising from the minutes.

5. Presentation of Annual Report

The Annual Report was presented by the Chair, Rutendo Kuwana, in the form of a PowerPoint Slide.[2]

5.1. Status of Health and Health Services in Zimbabwe

The Chair began with an outline of the public health context in Zimbabwe outlining the Meaningful Progress the country has achieved over the past 12 months: Maternal mortality has decreased to 212 deaths per 100,000 (down from 651 in 2015). Antenatal care coverage from skilled providers reached 92%, & institutional deliveries increased to 84%. Additionally, the UNAIDS 95-95-95 target (ensuring that by 2030, 95% of all people living with HIV know their status, 95% of all people diagnosed with HIV receive sustained ARV therapy, & 95% of all people receiving ARV therapy have viral suppression) was achieved by Zimbabwe in December 2024.

Unfortunately Persistent Challenges still remain**:** Neonatal mortality has risen from 31 to 37 per 1,000 live births, & 26.2% of children under 5 experience stunted growth. The national health budget sits at only 10.2%. The sector also faces a brain drain depleting the clinical workforce and a serious threat to HIV gains due to the withdrawal of international aid.

[1] https://zimhealth.org/our-work/our-projects/annual-reports/

[2] https://docs.google.com/presentation/d/1MTF6fkzqTt2t-eiK_TxGLEIHUn6esXds/edit?usp=drive_link&ouid=106733171101375134812&rtpof=true&sd=true

5.2. ZimHealth 2025 Flagship Project: Mt Selinda Mission Hospital

As part of a decision by the ExCommittee, ZimHealth decided to focus on a single project in the year 2025.

Implemented in partnership with the United Nations Women's Guild (UNWG) Geneva who provided 5000 CHF in funding which was topped up by ZimHealth, this project aimed to enhance maternal & child health across 30 rural villages in the Chipinge District.

The Chair outlined the key achievements of the project across various metrics, including antenatal bookings increasing from 63 (2023) to 365 (2025), 36 community health workers were trained exceeding the targeted competency score, a reduction in perinatal mortality to 1% and all the equipment sourced by ZimHealth delivered to the facility. In contrast to previous projects the hospital was provided with cash for transport costs to facilitate outreach and training.

5.3. Resource Mobilisation & Finances 2025

The Chair outlined that the Resource Mobilisation efforts were still in recovery from their peak over ten years ago. Total income was USD 7,992 (an increase from USD 2,789 in 2023), while total expenditure was USD 15,152, primarily for project delivery, this indicated that the organization was still spending more in a year than it was taking in. Member contributions were still a cause of concern as they averaged USD 103 per month.

Several funding proposals were submitted throughout the year though none came to fruition, including a proposed partnership with the Swiss Embassy in Zimbabwe to support Health Facilities in farming communities. The proposal unfortunately did not go ahead because the proposed funding by ZimHealth was below the minimum threshold the Swiss Embassy usually supports.

5.4. Monitoring, Evaluation, & Organisational Development

The Chair described how ZimHealth began transitioning from output-focused reporting toward assessing long-term outcomes, impact, and sustainability. Initiatives included a member-led formal evaluation of projects, drafting Terms of Reference for a locally based M&E Officer, proving the feasibility of remote project monitoring.

5.5. Publicity & Communications

The organization held its first annual gala in 5 years in Geneva (selling ~100 tickets), The Chair highlighted that even if the event was a financial loss, it had been a social success as it had kickstarted face to face advocacy and attracted attention to the organisation. The event also secured media coverage in the Zimbabwean press, and helped augment the significant growth of ZimHealth’s social media presence, though

converting engagement into membership remains a challenge.

5.6. Partnerships & Acknowledgements

The Chair also acknowledged the crucial support the organisation had received from the Zimbabwe Ministry of Health and Child Welfare, the City of Harare Health Department, and the Permanent Mission of Zimbabwe in Geneva. Other key supporters included UNWG Geneva, corporate partners & suppliers (including Kenteco SAS, Cresta Hotels, Casha Dezigns, Avacash), Google LLC (for non-profit IT support), and performers Gemma Griffiths and Dereck Mpofu.

He also took the time to thank individual members of ZimHealth and friends of ZimHealth who consistently showed up to donate with their time, in-kind and in monetary terms, highlighting the example of food for the Social Event being completely donated with no recourse to ZimHealth funds. He also noted that a lot of the supporters and participants of ZimHealth events were not actually members of ZimHealth.

6. The Year Ahead: Strategic Priorities 2026/2027

6.1.1. The Chair outlined the organization vision for the year ahead which was based on 3 pillars:

6.1.1.1. **Pillar 1 - Deepen Project Impact:** Expand the Mutasa District PHC pilot (targeting 8 clinics and 750 households), focus on farming communities, and formalize the Monitoring, Evaluation, and Learning (MEL) approach.

6.1.1.2. **Pillar 2 - Funder Strategy:** Target a newly identified pipeline of 50 funders distributed across three tiers, and build evidence bases through research partnerships.

6.1.1.3. **Pillar 3 - Organisational Growth:** Diversify the member contribution base, deepen engagements with local authorities, and maximize local talent for future galas to reduce costs.

6.1.2. Funder Strategy 2026/2027

6.1.2.1. **Funding Pipeline:** The Chair has identified a structured 50-funder landscape consisting of 6 Tier 1 Priority Funders Tier 2 Good-Fit Funders and Tier 3 Strategic Targets.

6.1.2.2. **Funding Pathway:** Operations are to be structured in four stages: Seed (USD 5k–50k), Proof of Concept (USD 25k–75k), Evidence Base (USD 50k–250k), and Scale (USD 250k–5m+).

6.1.2.3. **Urgent Actions Required:** Key deadlines included submitting proposals to two potential donors by 15 June 2026. Both were unfortunately missed. The Chair clarified in response to a question from the General Assembly that this strategy was to be presented to the incoming Executive Board for approval and guiding the operation of the organisation over the following 12 months. The board must also approve the Funder Strategy, assign Board Relationship Managers to Tier 1 funders.

7. Presentation of Accounts

Bongani presented the accounts from the Annual Report noting that the organization had lacked a permanent Treasurer which had complicated the final reconciliation of the 2025 Financial Year and delayed the full audit process.

At the end of 2025 the ZimHealth USD, CHF and PayPal accounts held 1,336.26 USD, 1,700.95 CHF and 1788.61 USD. This indicated that ZimHealth's expenditure exceeded income. Member contributions were also lower in 2025 when compared to the previous year. Bongani urged ZimHealth members to regularly donate and/or set up debit orders for consistent donations.

8. Adoption of Accounts

Bongani proposed, that as the accounts had not been finalised with the auditors, that the General Assembly Conditionally Accept the Accounts as presented on the condition of the final accounts being diffused to the General Assembly as soon as possible.
The General Assembly accepted the motion. A timeline of the end of July was proposed for the completion of the audit activities in response to a question from Vonai.

9. Election of Executive Committee Members

Godfrey Gwete took on the role of Returning Officer and officially dissolved the 2025/2026 Executive Committee. He then proceeded to call for volunteers and nominations for the 2026/2027 Executive Committee. The votes were as follows:

Chair: Rutendo Kuwana
(Erica Kufa nominated, Vonai Muyambo seconded)

Secretary General: Erica Kufa
(Chiedza Pfister, Vonai Muyambo seconded)

Treasurer: Vonai Muyambo

(Rutendo Kuwana nominated, Jenifer Mutano seconded)

Executive Committee

Lois Kuwana
(Bongani nominated, Vonai Muyambo seconded)

Bongani Ncube-Zikhali
(Rutendo Kuwana nominated, Vonai Muyambo seconded)

Charles Chiku
(Erica Kufa nominated, Vonai Muyambo seconded)

Gamuchirai Gwaza
(Rutendo Kuwana nominated, Godfrey Gwete seconded)

Jenifer Mutano
(Vonai Muyambo nominated, Chiedza Pfister seconded)

Godfrey Gwete
(Chiedza Pfister nominated, Vonai Muyambo seconded)

Dorcas Mapondera
(Bongani Ncube nominated, Vonai Muyambo seconded) ***in-absentia***

Jane Chikami
(Chiedza Pfister nominated, Vonai Muyambo seconded)

Patience Musanhu
(Vonai Muyambo nominated, Jenifer Mutano seconded) ***in-absentia***

Rodwell Mkhwananzi
(Bongani Ncube-Zikhali nominated, Vonai seconded)

Kudakwashe Mazenenga
(Jane Chikami, nominated, Godfrey Gwete seconded)

10. Motions of the day

The Chair reminded the incoming Committee members that the organisation is entirely non-political and that the members who were attending the Social Event after the AGM were to respect the neutrality of the organisation.

The Chair appealed for donations and reminded members that donations could be made via Apple/Google Pay and credit card during the Social Event.

In closing the meeting, the Chair thanked all members present for their donations of food , drinks and time and emphasised that these would be provided to social event attendees at no

charge.

11. Any other business

There being no other business Chair closed the AGM and thanked all the members for their attendance and support. He invited all members to join the Social Event.
The meeting ended at 16:30

Minutes recorded and prepared by Bongani Ncube-Zikhali

Annexe I

Attendance Register

1. Rutendo Kuwana
2. Erica Kufa
3. Charles Chiku
4. Lois Kuwana
5. Gamuchirai Gwaza
6. Sandra Mkhize
7. Luther Gwaza
8. Official Wonekai
9. Jane Chikami
10. Godfrey Gwete
11. Chiedza Pfister
12. Kudakwashe Mazenenga
13. Vonai Muyambo
14. Jenifer Mutano
15. Tirinashe Kufa
16. Bongani Ncube-Zikhali
17. Rodwell Mkhwananzi (online)