# Dramatic Shifts in Zimbabwe Life Expectancy Mirror GDP Growth

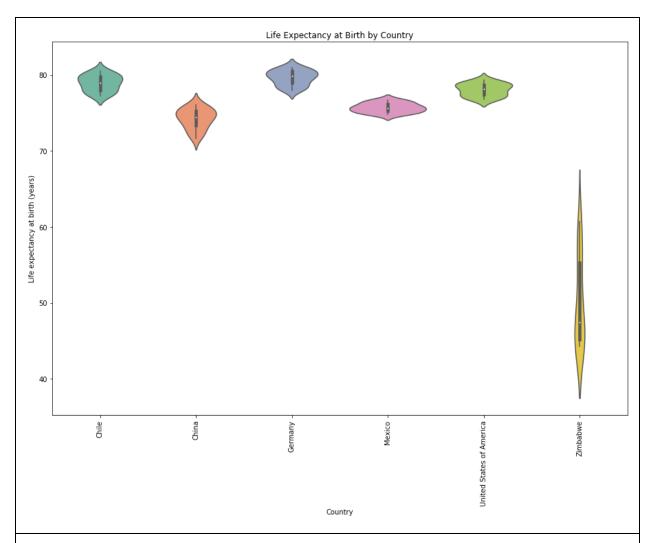
Growth of Life Expectancy in Zimbabwe mirrors GDP growth but root cause of both is closely aligned with political and economic changes in the region

# **Background**

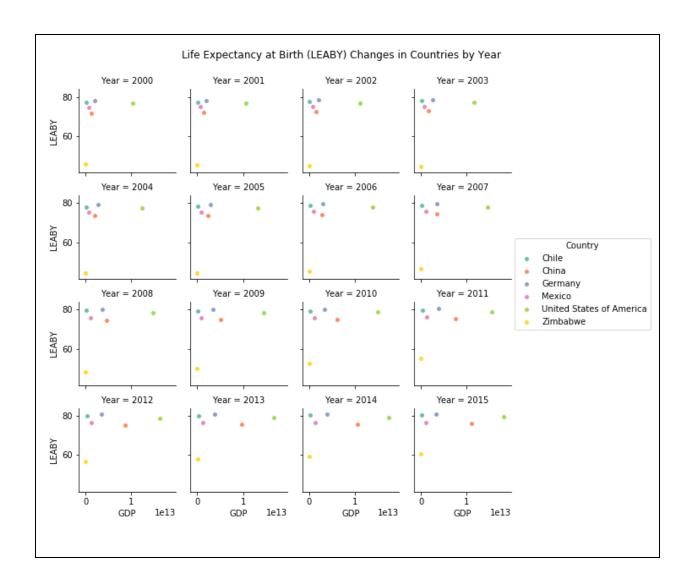
Zimbabwe is a <u>landlocked country</u> of roughly 16 million located in <u>southern Africa</u>, between the <u>Zambezi</u> and <u>Limpopo Rivers</u>, bordered by <u>South Africa</u>, <u>Botswana</u>, <u>Zambia</u> and <u>Mozambique</u>. Between 2000 and 2015, Zimbabwe was under the rule of President Mugabe who was recently placed under house arrest in 2017 after a yearlong protest and a coup d'etat. In recent years, Zimbabwe has undergone significant political changes and has weathered several public health crisis including hyperinflation, HIV/AIDS, and cholera.

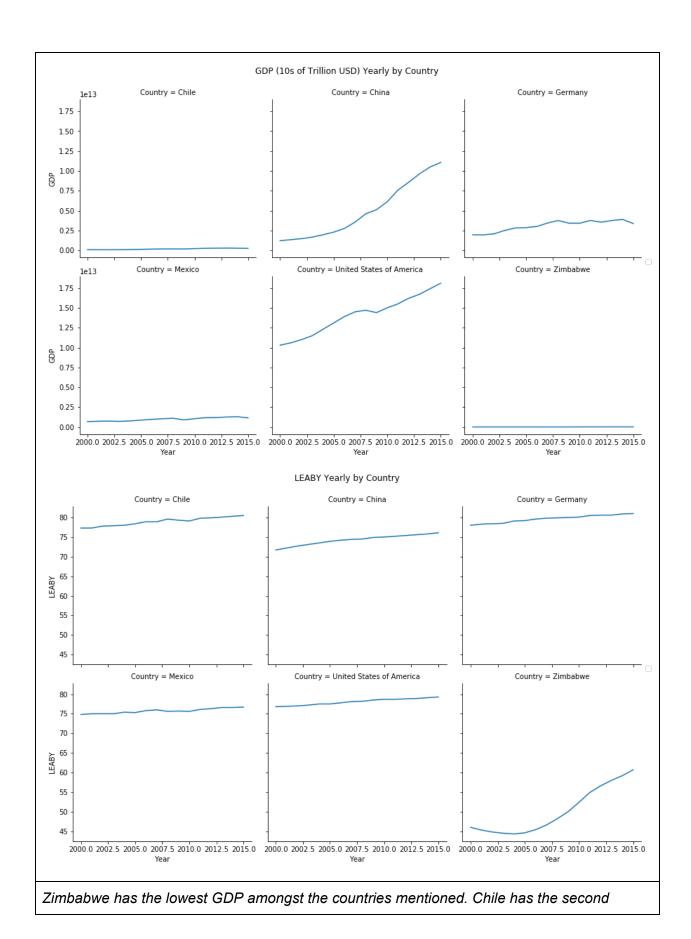
## **Findings**

Zimbabwe's Life expectancy has increased 131% in 2015 from 2000 based on numbers from the World Health Organization (WHO). At the same time, GDP in Zimbabwe has also risen from over 200%. This dramatic shift in both Life expectancy and GDP outpaces much of the world. Compared to countries like Chile, China, Germany, Mexico, and United States of America (USA), Zimbabwe has both lower life expectancy and GDP.

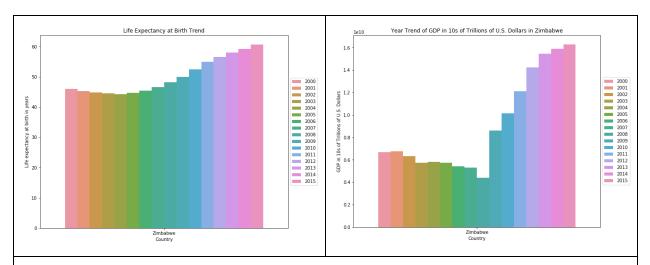


The Life Expectancy at Birth in Years (LEABY) changes for Chile, China, Germany, Mexico, USA shows a shift of 10 years increase between 2000s to 2015. However, Zimbabwe shows a range of over 20 years.





lowest GDP of the countries but have much higher LEABY than Zimbabwe. This suggests that LEABY is not directly related with GDP growth although there underlying reasons for both GDP and LEABY growth could be the same.



A more detailed look at the GDP trend (L) compared to LEABY (R) trend of Zimbabwe shows a drop in both GDP and LEABY between 2000 and 2008 and steady growth between 2009 to 2015.

Between 2000 to 2008, there were a continual drop of Life expectancy and GDP. Since 2008, Zimbabwe has been on the path of recovery. These changes are closely aligned with dramatic changes within the country and ongoing epidemics and crisis.

In the 1990s, Zimbabwe began experiencing a period of considerable political and economic upheaval. This was exacerbated in the mid-1990s in part due to worsening economic and human rights conditions brought about by crippling economic sanctions imposed by western countries led by Britain in response to land seizures from the White minority farmers. This continued into the 2000s as Zimbabwe continued to participate in the Second Congo War. Due to participation in the war and land mismanagement, Zimbabwe's economy was drained. Zimbabwe saw continued inflation until 2008 which peaked at 231 million percent inflation. 2009 was the first year in nearly a decade where Zimbabwe saw increase in their GDP as the country abandoned their currency and now utilize foreign currency.

During this time period, Zimbabwe also faced significant public health crisis including HIV/AIDS and a cholera outbreak in 2008.

The HIV/AIDS crisis is still ongoing although due to introduction of Anti-viral medication, has helped alleviate the death toll and spread. Based on World Bank data, about 9.41% of the population had HIV/AIDS in 2014.

Zimbabwe government has taken on significant role in battling the HIV/AIDS crisis. From <u>UNAIDS</u> - Since 2000, Zimbabwe has laid the foundations for accelerating response to

HIV/AIDS when they introduced an innovative levy on taxable income, where 3% would be dedicated to funding AIDS programs. Thanks to the tax levy, the country increased its domestic financing for HIV by 40% between 2011 and 2014 and together with international investment—which currently accounts for 85% of the total funding— the country is achieving positive results. Zimbabwe has seen a 60% reduction of HIV-related deaths since the peak of the epidemic in 1997 and a 75% reduction in new HIV infections among children in the past 10 years, according to national estimates.

2008 saw a sharp drop in life expectancy due to the cholera outbreak in addition to the ongoing HIV/AIDs crisis. The cholera outbreak impacted 1.0% of the entire population and the large impact was attributed to poor sanitation, limited access to healthcare, and insufficient healthcare infrastructure throughout Zimbabwe. The outbreak was also politicized by then President Mugabe's party which could have also slowed foreign aid.

However, identifying the need to improve sanitation and healthcare could be contributing factors to the steady increase of life expectancy since 2008.

### Conclusions

Zimbabwe's tumultuous history shows impact in both life expectancy and economic trends. While the two data points show correlation, it is not accurate to say that one begets the other. Compared to Chile's life expectancy, Zimbabwe's life expectancy trend shows much more significant fluctuation. While Chile's GDP is much lower, the life expectancy in Chile mirrors more closely the life expectancy of higher GDP countries such as Germany and USA. China's rapid economic growth did not see the same rapid increase in life expectancy as well. As such, the data shows that life expectancy in Zimbabwe is much more closely aligned with health crisis rather than economic output.

Limitations to this analysis include a tracking the historical timeline as well as the locality of life expectancy in Zimbabwe. A separation between urban and rural areas could further help identify shifts. Additionally, a comparative political investigation to countries with low GDP but high life expectancy was not made. Therefore, it is difficult to completely disregard the ties between economic and life expectancy.

### **Sources**

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