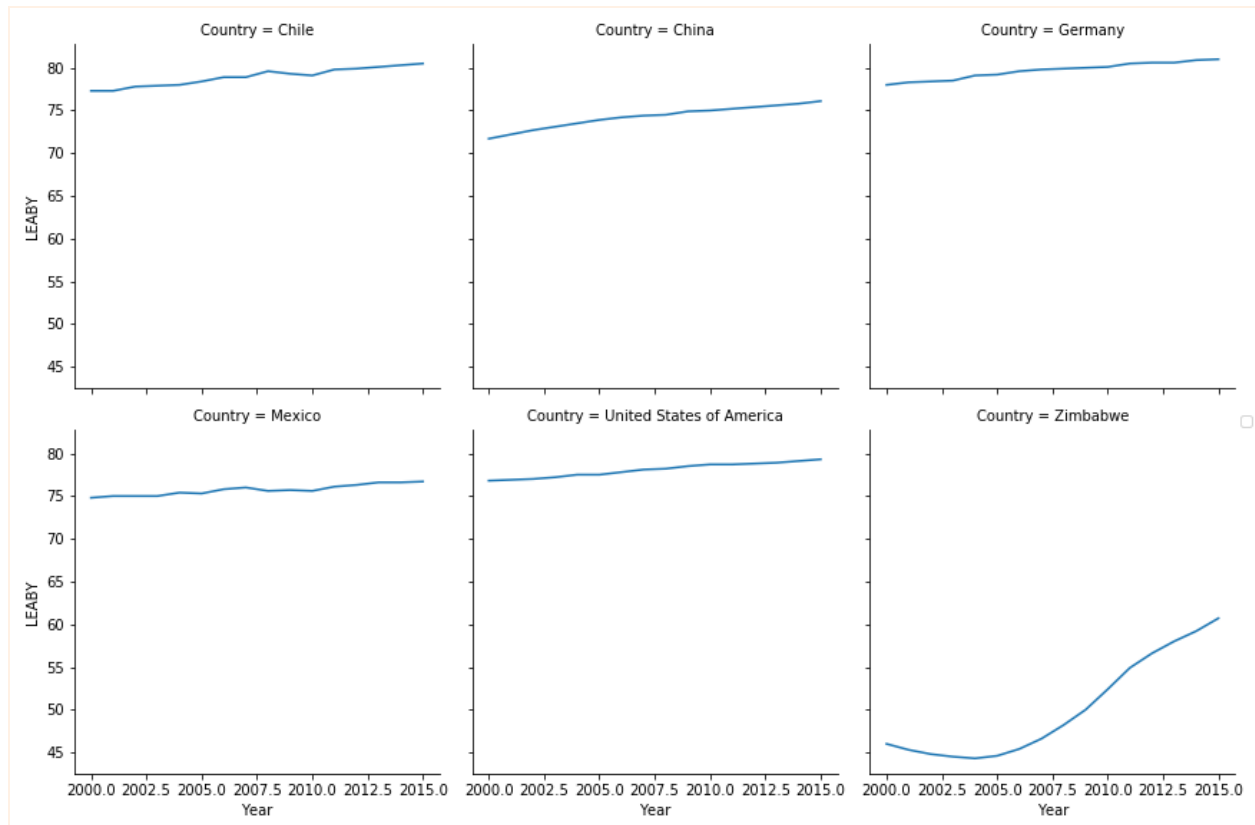


Life expectancy in many African countries saw a 20 - 42 per cent surge in life expectancy since 2000. Zimbabwe's life expectancy at birth saw an exponential jump from 2005 to 2015. Figure 1 shows a comparison of life expectancies between six countries around the world, representing 6 continents.



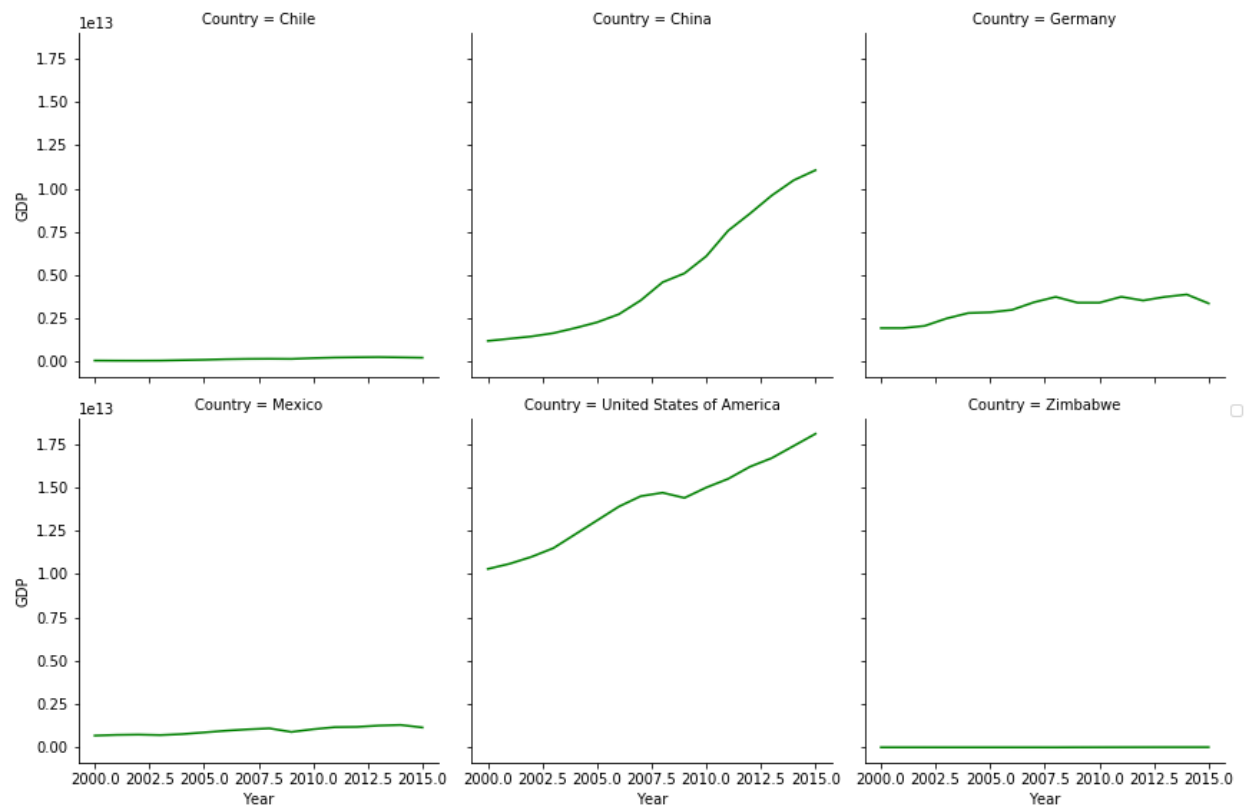
According to Charles Robertson, global chief economist at Renaissance Capital, a refocusing of international aid on areas such as education and healthcare are the cause for part of the gains. He states, "There have been significant rises in income across the region and more money for governments to spend on areas such as healthcare, as well as better medicine and better planning. Governance in Africa has improved quite significantly over the past decade."

(<https://www.ft.com/content/38c2ad3e-0874-11e6-b6d3-746f8e9cdd33>)

The commodities boom is partly responsible. In 2000-08 around a quarter of Africa's growth came from higher revenues from natural resources. Africa now found itself with a fast-growing middle class: according to Standard Bank, around 60m Africans have an income of \$3,000 a year, and 100m in 2015. The rate of

foreign investment soared around tenfold in the since 2001.
(<https://www.economist.com/leaders/2011/12/03/africa-rising>)

Figure 2 shows the relatively high GDP for the other 5 countries, and Zimbabwe's stagnant growth.



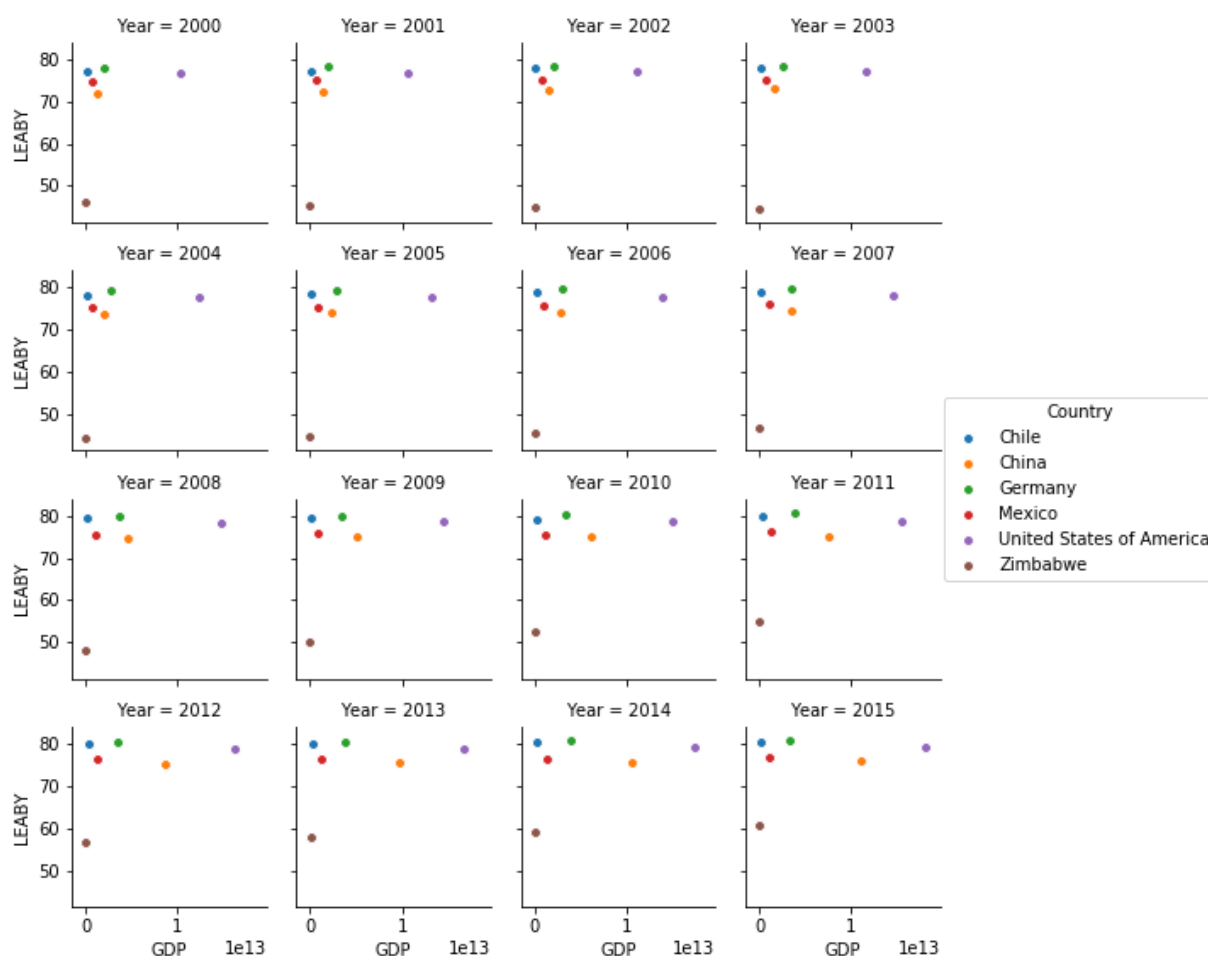
The increase in GDP affects life expectancy as a result of its correlation to the human development index (HDI). HDI is a summary indicator of human development and a composite measure of the three dimensions of human development, that is:

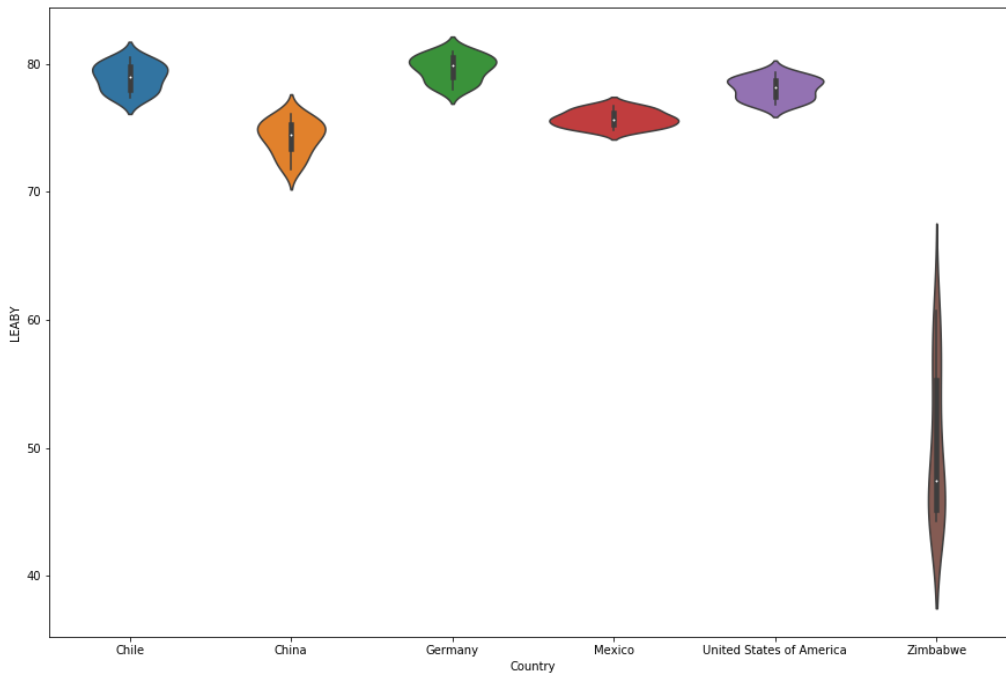
1. living a long and healthy life, measured by life expectancy;
2. being educated, measured by the mean years and expected years of schooling; and
3. having a decent standard of living, measured by income per capita.

Mathematically, a higher HDI points to a longer lifespan, higher level of education and a higher Gross Domestic Product (GDP) per capita. Zimbabwe's HDI improved from 0.427 in 2000, to 0.522 in 2015, despite the decline in the country's economic performance.

((http://hdr.undp.org/sites/default/files/reports/2842/undp_zw_2017zhdr_full.pdf)

Despite Zimbabwe's stagnant GDP, the HDI increased for its population due to foreign currency's stabilizing effects on the economy, and resulting increase in health, education, and infrastructure efforts. Figures three and four show the increase in life expectancy and lack of GDP growth.





In 1998, inflation rose from an annual rate of 32% to an official estimated high of 11,200,000% in August 2008 according to the country's Central Statistical Office. This represented a state of hyperinflation, and the central bank introduced a new 100 billion dollar note.

On 29 January 2009, in an effort to counteract runaway inflation, the acting Finance Minister announced that Zimbabweans will be permitted to use other, more stable currencies to do business, alongside the Zimbabwe dollar. In an effort to combat inflation and foster economic growth the Zimbabwean Dollar was suspended indefinitely on 12 April 2009. In 2016 Zimbabwe allowed trade in the United States dollar and various other currencies such as the rand (South Africa), the pula (Botswana), the euro, and the Pound Sterling (UK).

After the formation of the Unity Government and the adoption of several currencies instead of the Zimbabwe dollar in 2009, the Zimbabwean economy rebounded. GDP grew by 8–9% a year between 2009 and 2012. In November 2010, the IMF described the Zimbabwean economy as "completing its second year of buoyant economic growth". By 2014, Zimbabwe had recovered to levels seen in the 1990s: (<https://en.wikipedia.org/wiki/Zimbabwe#Economy>)

It would be interesting to also track the amount of spending Zimbabwe allocated to the HIV health crisis and follow-on education and health programs to fight the epidemic and keep the population aware of health risks.