

# **CHAPTER 15:17 PUBLIC HEALTH ACT**

Act 11/2018; G.N. 665/2018

[Assented to: 31 August, 2018.]

[Date of commencement: 31 August, 2018.]

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## **PUBLIC HEALTH ACT [CHAPTER 15:17]**

**TO PROVIDE for public health; to provide for the conditions for improvement of the health and quality of life and the health care for all people in Zimbabwe; to provide for the rights, duties, powers and functions of all parties in the public health system, to provide for measures for administration of public health; to repeal the Public Health Act [Chapter 15:09]; and to provide for matters connected therewith.**

WHEREAS the Constitution provides as follows-

### **"29. Health services**

(1) *The State must take all practical measures to ensure the provision of basic, accessible and adequate health services throughout Zimbabwe.*

(2) *The State must take appropriate, fair and reasonable measures to ensure that no person is refused emergency medical treatment at any health institution.*

(3) *The State must take all preventive measures within the limits of the resources available to it, including education and public awareness programmes, against the spread of disease."*

**"44. Duty to respect fundamental human rights and freedoms**

*The State and every person, including juristic persons, and every institution and agency of the government at every level must respect, protect, promote and fulfil the rights and freedoms set out in this Chapter."*

**"76. Right to health care**

(1) *Every citizen and permanent resident of Zimbabwe has the right to have access to basic health-care services, including reproductive health-care services.*

(2) *Every person living with a chronic illness has the right to have access to basic healthcare services for the illness.*

(3) *No person may be refused emergency medical treatment in any health-care institution.*

(4) *The State must take reasonable legislative and other measures, within the limits of the resources available to it, to achieve the progressive realisation of the rights set out in this section."*

**"81. Rights of children**

(1) *Every child, that is to say every boy and girl under the age of eighteen years, has the right-*

(f) *to education, health care services, nutrition and shelter;*

(2) *A child's best interests are paramount in every matter concerning the child."*

**"82. Rights of the elderly**

*People over the age of seventy years have the right-*

(b) *to receive health care and medical assistance from the State;*

*and the State must take reasonable legislative and other measures, within the limits of the resources available to it, to achieve the progressive realisation of this right.":*

NOW, THEREFORE, be it ENACTED by the Parliament and the President of Zimbabwe.

PART I

*Preliminary*

**1. Short title and date of commencement**

This Act may be cited as the Public Health Act [*Chapter 15:17*].

**2. Interpretation**

(1) In this Act-

**"adult"** means a person of eighteen years of age or over;

**"appropriate Minister"**, in relation to a local authority or a body or authority referred to in [subsection \(2\)](#), means the Minister responsible for administering the Act by or under which that local authority, body or authority was established;

**"approved veterinary surgeon"** means a veterinary surgeon approved by the Director of Veterinary Services;

**"assistant national health officer"** means a person appointed to be an assistant national health officer in terms of [section 8](#);

**"Board"** means the Public Health Advisory Board established under [section 4](#);

**"building"** includes any structure whatsoever for whatever purpose used;

**"burial"** means burial in earth, interment or any other form of sepulchre, or the cremation or any other mode of disposal of a dead body;

**"carcass"** includes any part of a carcass;

**"Chief Health Officer"** means the person referred to in [section 7 \(1\)](#);

**"child"** means a person less than eighteen years of age;

**"communicable disease"** means a disease that can be transmitted from one person to another;

**"cost"** or **"expenditure"**, when used in connection with the removal, detention, accommodation, maintenance or treatment of persons, means cost calculated in accordance with the tariff of charges approved by the Minister and based as nearly as may be on average cost or, if there is no such tariff, means actual cost;

**"Director health services"** means any health officer appointed by the local authority to head health services designated in terms of [subsection \(2\)](#) to be a local authority for the purposes of this Act;

**"district"**, in relation to-

- (a) a municipal council, town council or local board, means the municipal area, town area or local government area, as the case may be;
- (b) a rural district council, means the council area or, where the Minister has in terms of [subsection \(2\)](#) declared a greater or lesser area to be a district in relation to such rural district council, such greater or lesser area;
- (c) any other body or authority declared to be local authority in terms of [subsection \(2\)](#), means the area declared in terms of [subsection \(2\)](#) to be a district in relation to such body or authority;

**"dwelling"** means any house, room, shed, hut, cave, tent, vehicle, vessel or boat or any other structure or place whatsoever, any portion whereof is used by any human being for sleeping or in which any human being dwells;

**"environmental health officer"** means a person registered as an environmental health officer under any law relating to the registration of environmental health officers;

**"food"** or **"article of food"**, other than dairy produce as defined by the Dairy Act [*Chapter 18:08*], means any animal product, fish, fruit, vegetables, condiments, confectionery, beverages and any other article or thing whatsoever, other than medicines, in any form, state or stage of preparation which is intended or ordinarily used for human consumption;

**"guardian"** means any person having, by reason of the death, illness, absence or inability of the parent or any other cause, the custody of a child;

**"health impact assessment"** means assessing the health impacts of policies, for the promotion and protection of public health;

**"health institution"** means the whole or part of a public or private establishment, facility building or place, whether for profit or not, that is operated or designed to provide inpatient or outpatient treatment, diagnostic or therapeutic interventions, nursing, rehabilitative, palliative, convalescent preventive or other health service;

**"health practitioner"** means any person in respect of whose profession or calling a register is kept in terms of the Health Professions Act [*Chapter 27:19*];

**"hospital or place of isolation"** means any special hospital or any premises or portion thereof set apart and used solely for the admission and accommodation of persons suffering from infectious disease;

**"hostel"**, in relation to a school, means any building used for the boarding accommodation of pupils or students attending such school;

**"Human Rights Commission"** means the Zimbabwe Human Rights Commission established under section 242 of the Constitution;

**"infected"**, in relation to-

- (a) an infectious disease, means suffering from, or in the incubation stage or contaminated with the infection of that disease;
- (b) a sexually transmitted disease, means any form or stage of infection referred to in [paragraph \(a\)](#),

whether the disease was transmitted through sexual intercourse or not;

**"infectious disease"** means any communicable disease caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi that can be spread, directly or indirectly, from one person to another as specified in [section 46](#);

**"International Health Regulations"** means the International Health Regulations adopted by the Fifty eighth World Health Assembly at Geneva on the 15th June, 2007, to which the State is a party and any amendment thereto to which the State becomes a party;

**"isolated"** means the segregation, and the separation from and interdiction of communication with others, of persons who are or are suspected of being infected;

**"land"** includes any right over or in respect of land;

**"local authority"** means-

- (a) a municipal council or town council; or
- (b) any-

- (i) a local board, or
- (ii) a rural district council, or
- (iii) any other body or authority;

**"medical observation"** means the segregation and detention of persons under medical supervision;

**"medical officer of health"** means any medical officer of health appointed by a local authority;

**"medical practitioner"** means a person who is registered as such under any law relating to the registration of medical practitioners;

**"medical surveillance"** means the keeping of a person under medical supervision. Persons under such surveillance may be required by the local authority or any other duly authorised officer to remain within a specified area or to attend for medical examination at specified places and times;

**"Minister"** means the Minister responsible for health or any other Minister to whom the President may, from time to time, assign the administration of this Act;

**"national health officer"** means a person appointed to be a national health officer in terms of [section 8](#);

**"non-communicable disease"** means a disease which is not contagious or passed from person to person;

**"notifiable"**, in relation to any disease, means required to be notified to any person or authority in terms of this Act;

**"occupier"**, in relation to any premises, means-

- (a) any person in actual occupation of those premises; or
- (b) any person legally entitled to occupy those premises; or
- (c) any person having the charge or management of those premises,

and includes the agent of any such person when he or she is absent from Zimbabwe or his whereabouts are unknown. In the case of premises used as a school, the expression "occupier" includes the principal or person in charge of the school;

**"owner"**, in relation to any premises, means-

- (a) the person in whose name the title to those premises is registered, and includes the holder of the stand licence; or
- (b) if such a person or holder is dead, insolvent, mentally disordered or defective or a minor or under any legal disability, the person in whom the administration of that person's or holder's estate is vested, whether as executor, guardian or in any other capacity whatsoever; or
- (c) if the premises are under lease, the registration whereof is in law necessary for the validity of such lease, the lessee,

when an owner as herein defined is absent from Zimbabwe or his or her whereabouts are unknown, the expression;

**"owner"** includes an agent of such owner or any person receiving or entitled to receive rent in respect of the premises;

**"premises"** means any building or tent, together with the land on which the same is situated and the adjoining land used in connection therewith, and includes any vehicle, conveyance, ship or boat;

**"public building"** means-

- (a) any church, chapel, meeting-house or premises used for divine worship;
- (b) any theatre, opera-house, hall, exhibition buildings or premises open to members of the public, whether with or without payment;
- (c) any hotel or boarding-house, or lodging-house in which five persons or more, exclusive of members of the family or the servants of the owner or occupier, may obtain meals or sleeping accommodation for payment;
- (d) any hospital, school or institution, in which five persons or more are or are intended to be gathered at one time;

**"public health"** means the science and art of disease prevention, prolonging life and promoting health and wellbeing through organised efforts and informed choices of society, state and non-state organisations, communities and individuals for the sanitation of the environment, the control of communicable diseases and non-communicable diseases, the organisation of health services for the early diagnosis, prevention and management of disease, the education of individuals in personal health and the development of the social machinery to ensure everyone has living conditions adequate for the maintenance or improvement of health;

**"public health risk"** means-

- (a) an animal, structure, substance or other thing or conduct that-
  - (i) is, or is likely to become, a breeding ground or source of food for designated pests, or
  - (ii) harbours, or is likely to become something that harbours, designated pests;
- or
- (b) any substance that is, or is likely to be, hazardous to human health; or
- (c) that contributes to, or is likely to contribute to communicable or non-communicable disease in humans or the transmission of an infectious condition to humans;

**"rateable property"**, in relation to a local authority, means property which under any enactment is liable to be assessed by the local authority for any general rate leviable by it;

**"rural district"**, in relation to a rural local authority, means any area outside an urban district which is under the jurisdiction of that rural local authority, and "rural area" has a corresponding meaning;

**"sanitary convenience"** means any-

- (a) latrine, urinal, water-closet, aqua-privy, earth-closet, pit-closet, borehole-latrine or chemical-closet; or
- (b) other device approved by an environmental health officer,

which is being, has been or is intended to be used for the disposal of human waste;

**"Secretary"** means the Permanent Secretary of the Ministry;

**"school"** means any public or private establishment for crèches, nurseries, early childhood development centres, primary or secondary or higher education, and includes a hostel or boarding-house kept for housing the pupils at any such establishment, and includes a Sunday school;

**"school"** means a pre-school, primary school or secondary school;

**"sexually transmitted disease"** means any infectious and communicable disease that is normally transmitted through sexual intercourse and includes but is not limited to-

- (a) chancroid;
- (b) chlamydia;
- (c) gonorrhoea;
- (d) granuloma inguinale;
- (e) syphilis;
- (f) candidiasis;
- (g) viral hepatitis;
- (h) herpes simplex;
- (i) human immunodeficiency virus;
- (j) human papillomavirus;
- (k) molluscum contagiosum;
- (l) scabies;
- (m) trichomoniasis;

**"trade premises"** means any premises used or intended to be used for carrying on any trade or business;

**"urban district"**, in relation to an urban local authority, means the area under the jurisdiction of that urban local authority, and "urban area" has a corresponding meaning;

**"zoonotic disease"** means any infectious disease of animals that can cause disease when transmitted to humans.

(2) With the approval of the appropriate Minister, the Minister may by statutory instrument designate a rural district council or local board or any other body or authority to be a local authority for the purposes of this Act, and-

- (a) may, in the case of a rural district council, declare a greater or lesser area than the council area to be a district in relation to such rural district council;
- (b) shall, in relation to such other body or authority, specify the area which shall be a district in relation to such body or authority.



PART II

*Administration of the Public Health System*

SUB-PART A

*National health system administration*

**3. Ministry Responsible for public health**

- (1) The Ministry shall be under the control of the Minister.
- (2) The functions of the Ministry shall, subject to this Act be-
  - (a) to protect, promote, improve and maintain the health of the population; and
  - (b) to determine the policies and measures necessary to protect, promote, improve and maintain the health and well-being of the population; and
  - (c) to take measures to implement and monitor implementation of Zimbabwe's international obligations and commitments in the field of health; and
  - (d) to equitably prioritise and allocate resources to the health services that the State can provide; and
  - (e) to enhance collaboration among state and non-state actors and communities; and
  - (f) to inform educate and empower the population about health issues; and
  - (g) to take measures for the prevention, limitation or suppression of infectious, communicable and non-communicable diseases within Zimbabwe; and
  - (h) to advise and assist local authorities in regard to matters affecting public health; and
  - (i) to, within the limits of available resources, endeavour to-
    - (i) ensure the provision of appropriate essential health services and functions, which must at least include primary health care services, to the population,
    - (ii) prevent and guard against the introduction of disease from outside the Zimbabwean borders,
    - (iii) promote or carry out researches and investigations in connection with the prevention or treatment of human diseases;
- and
- (j) to provide for a competent public health workforce; and
- (k) to mobilise and allocate adequate funding and other resources from public and private sources to accomplish the objects of this Act; and
- (l) to prepare and publish reports and statistics or other information relative to the public health; and
- (m) to, with other state authorities, enforce laws and regulations that protect public health and safety; and
- (n) to administer the provisions of this Act.

**4. Advisory Board of Public Health**

(1) The Advisory Board of Public Health, established by [section 4](#) of the Public Health Act [*Chapter 15:09*], shall continue in existence under this Act subject to amendments made under this Act.

(2) The Advisory Board of Public Health shall consist of the following members, who shall be appointed by the Minister and who shall, subject to any regulations which may be made under [subsection \(11\)](#), hold office for three years and who shall be eligible for reappointment for only one more term-

- (a) a chairperson, who shall not be a medical practitioner and who shall preside at meetings of the Board;
- (b) a deputy chairperson, who shall not be a medical practitioner and who shall preside at meetings of the Board in the absence of the chairperson;
- (c) one member, who shall be a medical practitioner, to represent the Zimbabwe Medical Association;
- (d) one member to represent local authorities;

- (e) one member to represent bodies who perform the functions of medical aid societies;
- (f) one member, who shall be a medical practitioner, to represent missionary bodies carrying out activities in the field of public health;
- (g) one member, who shall be a registered nurse or mid-wife, to represent the Zimbabwe Nurses Association;
- (h) one member, who shall be a dental practitioner, to represent the Dental Association of Zimbabwe;
- (i) one member, who shall be a registered pharmaceutical chemist, to represent the Pharmaceutical Society of Zimbabwe;
- (j) one member to represent the Zimbabwe Red Cross, the Saint John Ambulance Association, the Saint John Ambulance Brigade and other similar bodies;
- (k) one member to represent trade unions;
- (l) one member to represent the women's voluntary associations carrying out activities in the field of public health;
- (m) one member to represent allied health practitioners as defined in [section 32](#) of the Health Professions Act [*Chapter 27:19*];
- (n) one member to represent veterinary public health professionals as defined in the Veterinary Surgeons Act [*Chapter 27:15*];
- (o) one member to represent environmental health practitioners or other similar personnel working in the field of environmental health;
- (p) one member to represent laboratory practitioners as defined in the Health Professions Act [*Chapter 27:19*];
- (q) one member to represent traditional health practitioners;
- (r) one member to represent the business community;
- (s) one member to represent people with disability;
- (t) such additional members, not exceeding two, as the Minister may appoint to represent non-state institutions, community members and users of public health services; and
- (u) a legal practitioner registered in terms of the Legal Practitioners Act [*Chapter 27:07*];
- (v) such additional members, not exceeding two, as the Minister may appoint to represent Government Ministries dealing with matters related to public health:

Provided that the Minister, in appointing members shall endeavour to ensure there is a balance in representation between men and women.

(3) The chairperson and deputy chairperson shall be of opposite genders.

(4) Before making an appointment in terms of [subsection \(1\)](#) the Minister may, in his or her discretion, call upon a body which, whether itself or in conjunction with other bodies, is entitled to be represented in terms of that subsection, to nominate such number of persons as the Minister may determine who, in its opinion, are suitable and available for appointment as members of the Board:

Provided that the Minister may, where he or she has called for nominations in terms of this subsection in respect of any appointment to the Board and no nominations have been made in respect of such appointment within such period as he or she may determine when calling for such nominations, appoint any person to be a member of the Board whether or not, in his or her opinion, the person so appointed is able to represent the views of the body whose nominations were called for.

(5) On the expiry of the period for which an appointed member has been appointed to the Board, he or she shall continue to hold office until he or she has been re-appointed or his or her successor has been appointed:

Provided that a member shall not continue to hold office in terms of this subsection for more than six months.

(6) A member may vacate his or her office and his or her office shall become vacant upon his or her-

- (a) death; and
- (b) resignation by notice to the Minister; and
- (c) separation from the organisation or constituency he or she represents on the board.

(7) Whenever a vacancy arises on the Board, the Minister may appoint a person to fill the vacancy in accordance with the provisions of [subsection \(1\)](#):

Provided that a person appointed in terms of this subsection may be appointed to hold office for such period, being less than three years, as the Minister may determine.

(8) The functions of the Advisory Board on Public Health shall be to-

- (a) advise the Minister on all matters relating to public health in Zimbabwe;
- (b) identify priorities for public health;
- (c) review progress on all matters of public health;
- (d) carry out or commission assessments and research;
- (e) review and provide input on laws, regulations and codes of practice on public health; and
- (f) host the Annual National Health consultative Forum.

(9) The Board shall hold an Annual National Health Consultative Forum bringing together public and private stakeholders to promote and facilitate interaction, communication and the sharing of information on national health issues and performance of the health system.

(10) The Board or any committee thereof shall have the power to conduct an inquiry into any matter relating to public health referred to the Board by the Minister and, for that purpose, the powers, rights and privileges of the Board or its committees shall be the same as those conferred upon commissioners by the Commissions of Inquiry Act [*Chapter 10:07*], other than the power to order a person to be detained in custody, and [sections 9 to 13](#) and [15 to 19](#) of that Act shall apply, with necessary changes, in relation to the conducting of such an inquiry and to any person summoned to give evidence, or giving evidence, before the Board or any of its committees and, in addition, the members of the Board and its committees shall be deemed to be persons authorised by the Minister in terms of the Act.

(11) It shall be the duty of the Board, either by itself or by a committee thereof, to make a full, faithful and impartial inquiry into any matter referred to it in terms of [subsection \(11\)](#) and the Board shall make recommendations to the Minister in accordance with the findings of the inquiry.

(12) The Minister may make such regulations as he or she may deem expedient to give force and effect to the provisions of this section and such regulations may provide for all or any of the following matters-

- (a) the procedure of the Board, the convening of its meetings and the quorum thereof;
- (b) the establishment of committees of the Board, their procedure and functions and the manner in which persons with special knowledge or skill may be co-opted to serve on such committees;
- (c) the allowances payable to members of the Board and of its committees.

(13) The Minister may appoint a person, who may be an officer in the Public Service, to be legal adviser to the Board.

(14) The Board may co-opt any person to attend its meetings and a person co-opted shall participate at the deliberations of the Board but shall have no vote.

(15) The [First Schedule](#) applies to the qualifications of members of the Board, their terms and conditions of office, vacation of office, suspension and dismissal, and the procedure to be followed by the Board at its meetings.

(16) The [Second Schedule](#) applies to the ancillary powers of the Board.

## **5. Annual National Health Consultative Forum**

(1) Pursuant to [section 4 \(9\)](#) the Board shall annually, on a date and at a venue to be notified not less than three months beforehand in the *Gazette*, organise, convene and host an Annual National Health Consultative Forum to discuss any issue or issues of concern.

(2) The notice of intention to organise, convene and host the Forum shall include the following-

- (a) the proposed venue or venues and the proposed date or dates for the Forum; and
- (b) the proposed agenda for the forum; and
- (c) an invitation to relevant stakeholder organisations and other persons interested in public health issues to submit-
  - (i) suggestions for topics to be included in the agenda for discussion at the Forum, and
  - (ii) lists of proposed participants at the Forum, specifying for each proposed participant what credentials he or she possesses that may be of benefit to the Forum's deliberations.

(3) The Secretariat of the Board shall have the following terms of reference-

- (a) to draw up a proposed agenda for the Forum; and
- (b) to advise the Board on the financial, organisational and logistical requirements for convening and hosting the Forum; and

- (c) to solicit financial support or sponsorship from the State, the private and parastatal sectors and civil society organisations to enable the forum to be convened.
- (4) After publishing a notice in terms of [subsection \(1\)](#) the Secretariat shall-
  - (a) draw up a proposed final agenda for the Forum; and
  - (b) select from the lists referred to in [subsection \(2\) \(c\) \(ii\)](#) a proposed final list of participants at the Forum; and
  - (c) transmit its proposals made under [paragraphs \(a\)](#) and [\(b\)](#) to the Board, whose decision on these issues shall be final.

## **6. Conduct of Annual National Health Consultative Forum**

(1) For the purpose of conducting an Annual National Health Consultative Forum the Secretariat of the Board shall have the following terms of reference-

- (a) to ensure the smooth and efficient conduct of the Forum; and
- (b) to keep minutes of or record the proceedings of the Forum, or to cause the proceedings of the Forum to be minuted or recorded.

(2) The conclusions of every Annual National Health Consultative Forum shall be embodied in written resolutions for presentation to the Board and the Minister.

## **7. Chief Health Officer**

- (1) The Permanent Secretary in the Ministry responsible for health shall be the Chief Health Officer.
- (2) No person shall be eligible for appointment as the Permanent Secretary for health unless he or she-
  - (a) is fully qualified for registration as a medical practitioner in terms of the Health Professions Act [*Chapter 27:19*]; and
  - (b) possesses a post graduate qualification in public health.
- (3) It shall be the responsibility of the Chief Health Officer to-
  - (a) prepare strategic plans for the Ministry annually; and
  - (b) ensure the implementation of the national health policy at the national level; and
  - (c) liaise with health authorities in other countries and with international bodies; and
  - (d) issue and promote adherence to norms and standards on health matters; and
  - (e) promote adherence to norms and standards for the training of human resources for public health; and
  - (f) identify national health goals and priorities and monitor the progress of their implementation; and
  - (g) co-ordinate health and medical services during public health emergencies; and
  - (h) participate in inter-sectorial and inter-ministerial collaboration; and
  - (i) promote health and healthy lifestyles; and
  - (j) promote community participation in the planning, provision and evaluation and management of health services.

## **8. National health officers and assistant national health officers**

(1) There shall be as many national health officers as may be determined by the Health Service Board, after consulting the Minister:

Provided that no person may be appointed as a national health officer unless he or she is a practitioner registered by any of the councils established by the Health Professions Act [*Chapter 27:19*].

(2) There shall be as many assistant national health officers as may be determined by the Health Service Board, after consulting the Minister:

Provided that no person may be appointed as an assistant national health officer unless he or she is a practitioner registered by any of the councils established by the Health Professions Act [*Chapter 27:19*].

(3) Every national health officer and assistant national health officer of the Ministry may, with the authority and on behalf of the Chief Health Officer, discharge any of the duties or functions of the Chief Health Officer.

(4) Any duties imposed or powers conferred by this Act on Government medical officers may be carried out or exercised by the Chief Health Officer or any national health officer of the Ministry.

(5) There shall be other national officers of health such as national pathologists and other officers as may be necessary for the purposes of this Act whose offices shall be public offices and form part of the Health Service.

## SUB-PART B

### *Provincial health system administration*

#### **9. Provincial Health Administration**

- (1) There shall be, for every province, a Provincial Health Officer appointed by the Health Service Board.
- (2) No person shall be eligible for appointment as a Provincial Health Officer unless he or she-
  - (a) is fully qualified for registration as a medical practitioner in terms of the Health Professions Act [Chapter 27:19]; and
  - (b) possesses a post graduate qualification in public health.
- (3) The Provincial Health Officer functions shall be as follows-
  - (a) to prepare strategic plans in conformity with the national health policy for the province annually; and
  - (b) to work in collaboration with the Provincial Council; and
  - (c) to plan and manage the provincial health information system; and
  - (d) to participate in interprovincial and inter-sectoral co-ordination and collaboration; and
  - (e) to co-ordinate and monitor health services during public health emergencies affecting the province; and
  - (f) to consult with communities in the province regarding health matters; and
  - (g) to control the quality of health services and facilities in the province; and
  - (h) to promote community participation in the planning, provision and evaluation of health services in the province.

#### **10. Other officers at provincial level**

The Health Service Board shall appoint the following officers for every province who together with the Provincial Health Officer shall constitute the Provincial Health Executive-

- (a) the Provincial Epidemiology and Disease Control Officer; and
- (b) the Provincial Environmental Health officer; and
- (c) the Provincial Nursing Officer; and
- (d) the Provincial Health Services Administrator; and
- (e) the Provincial Accountant; and
- (f) the Provincial Family and Child Health Officer; and
- (g) the Provincial Pharmacist; and
- (h) the Provincial Nutritionist; and
- (i) the Provincial Health Promotion officer; and
- (j) the Provincial Laboratory Scientist,

and any other provincial health officer as may be deemed necessary.

#### **11. Provincial or Metropolitan Health Team**

- (1) A Team to be known as the Provincial or Metropolitan Health Team must be established in every province.

(2) The Provincial or Metropolitan Health Team shall consist of the following persons-

- (a) the Provincial Health Officer; and
- (b) all members of the Provincial Health Executive appointed in terms of [section 10](#); and
- (c) the chairperson and in charge of the provincial hospital; and
- (d) all district health executives of the province; and
- (e) a nominee of every teaching hospital or college of medicine operating in the province; and
- (f) a nominee of every religious body sponsoring a mission hospital; and
- (g) nominees of civil society organisations operating in the province, as the Provincial health Officer may determine; and
- (h) one representative from each local authority in the province; and
- (i) any other persons deemed necessary by the provincial Health Officer,

whose costs shall be borne from the organisation from which the officers come from.

## **12. Functions of the Provincial and Metropolitan Health Team**

(1) The Provincial or Metropolitan Health Team must advise the Provincial health officer on-

- (a) policy concerning any matter that will protect, promote, improve and maintain the good health of the population within the province, including-
  - (i) responsibilities for health within the province by individuals, the public and private sector,
  - (ii) targets, priorities, norms and standards with the province relating to the equitable provision and financing of health services,
  - (iii) efficient co-ordination of health services within the province and neighbouring provinces,
  - (iv) human resources planning, production, management and development,
  - (v) development, procurement and use of health technology within the province,
  - (vi) equitable financial mechanisms for the funding of health services within the province,
  - (vii) the design and implementation of programmes within the province to provide for effective referral of users between health establishments or health care providers to enable integration of public and private health establishments,
  - (viii) financial and other assistance received by the province from foreign governments and intergovernmental or nongovernmental organisations:  
  
Provided that all such financial assistance must be received through the Ministry accounting officer;
  - (ix) the conditions applicable to receiving such assistance and the mechanisms which will come from the Ministry accounting officer,
  - (x) ensuring compliance with these conditions,
  - (xi) epidemiological surveillance and monitoring of provincial trends with regard to major diseases and risk factors for disease;
- (b) proposed legislation relating to health matters when it is introduced to Parliament;
- (c) norms and standards for the establishment of health institutions.

(2) The Provincial Health Officer shall determine the procedure on meetings, based on guidelines to be given by the Chief Health officer.

(3) All members must ensure they attend all meetings whenever they are called unless good cause shown as to why any members cannot attend.

### SUB-PART C

#### *District Health system Administration*

## **13. District health officer**

- (1) There shall be for every district, a District health officer appointed by the Health Service Board.
- (2) No person shall be eligible for appointment as a District health officer unless he or she-
  - (a) is fully qualified for registration as a medical practitioner in terms of the Health Professions Act [*Chapter 27:19*]; and
  - (b) possesses a post graduate qualification in public health.

#### **14. Functions of District health officer**

The district health officer must-

- (a) prepare strategic plans in conformity with the national health policy for the District annually;
- (b) work in collaboration with the District Health Team;
- (c) plan and manage the District health information system (DHIS);
- (d) participate in inter District and inter-sectorial co-ordination and collaboration;
- (e) co-ordinate and monitor health services during public health emergencies affecting the District;
- (f) consult with communities in the District regarding health matters;
- (g) control the quality of health services and facilities in the district;
- (h) promote community participation in the planning, provision and evaluation of health services in the District.

#### **15. Other officers at district level**

The Health Service Board shall appoint the following officers for every District together with the District Health Officer who shall constitute the District Health Executive-

- (a) Government Medical Officer;
- (b) District Environmental Health officer;
- (c) District Nursing Officer;
- (d) District Health Services Administrator;
- (e) District Accountant;
- (f) District Pharmacist;
- (g) District Nutritionist;
- (h) the District Health Promotion Officer;
- (i) the District Lab Scientist;
- (j) the Hospital Matron; and
- (k) any other District health officer as deemed necessary.

#### **16. District Health Team**

- (1) A team to be known as the District Health Team must be established in every district-
  - (a) The District Health Team shall consist of-
    - (i) the District Health officer, and
    - (ii) all members of the District Health Executive appointed in terms of [section 15](#),
    - (iii) the chairperson of the Community Health Council and in charge of the district hospital,
    - (iv) all EHT's and nurses in charge of rural health centre,
    - (v) a nominee of every religious body sponsoring a mission hospital,
    - (vi) nominees of civil society organisations operating in the province, as the District medical officer may determine,

(vii) one representative from the relevant local authority.

(2) The District Health Team functions shall be to-

- (a) advise the District medical officer in coming up with mechanisms for the involvement of communities in health at all levels of the health system;
- (b) raise awareness and identify needs and priorities for health;
- (c) act as a communication and information channel between communities and health systems;
- (d) mobilise, plan and monitor resource allocations for health;
- (e) mobilise community and social actions for health;
- (f) hold providers accountable for services;
- (g) support enforcement of public health laws and standards.

## **17. Health Centre committee**

(1) Every rural health centre, shall establish a health centre committee which shall include representatives of health workers and representatives of the communities in which they operate.

(2) The functions of the health centre committees shall be to-

- (a) inform, educate and empower members of the community on health matters;
- (b) use information gathered from the communities to plan, monitor and evaluate health programmes;
- (c) coordinate health programmes in the area serviced by the health centre;
- (d) represent communities and their interests before relevant authorities;
- (e) support local health care planning activities, including resource mobilisation;
- (f) support local community based workers in health;
- (g) perform such other functions and duties as the Minister may assign.

## **18. Local Authorities in rural areas**

(1) Where no local authority exists for the whole or part of a district, the district administrator, acting under the instructions of the Chief Health Officer shall be regarded for the purposes of this Act, as the local authority for that area and may, subject to [subsection \(2\)](#), exercise any powers which a local authority may exercise in terms of this Act.

(2) A district administrator acting in terms of [subsection \(1\)](#) may not-

- (a) make any permanent appointment; or
- (b) incur any capital expenditure,

without the express approval of the Minister.

## **19. Local authorities to appoint Director health services**

(1) Every local authority shall when required by the Minister, after consultation with the appropriate Minister, appoint a health practitioner as Director health services to the local authority, whose appointment shall be subject to the approval of the Minister.

(2) In the making of such appointment, preference shall be given, except in special circumstances in particular cases, to health practitioners holding degrees, diplomas or certificates in public health or state medicine granted after examination and registrable in Zimbabwe as well as in the country where they were obtained.

## **20. Duties of Director health services**

Every Director health services shall keep himself or herself informed as to the public health and sanitary circumstances of his or her district, and shall make such inspections and inquiries as may be necessary for this purpose. In addition, he or she shall furnish the local authority with all information in respect of such inspections and inquiries, and shall also furnish to the Chief Health Officer special reports, when required, relating to the public health or sanitation and hygiene of his or her district.



## **21. Government medical officers to be Director health services in rural districts**

In any area where no Director health services has been appointed, a Government medical officer designated by the Chief Health Officer by statutory instrument shall be the Director health services for the area specified in such statutory instrument and shall carry out the duties imposed by [section 20](#) on a Director health services, furnishing the information referred to in that section to the Chief Health Officer.

## **22. Local authorities to appoint environmental health officers**

Every local authority may, and when required by the Minister, after consultation with the appropriate Minister, shall appoint environmental health officers to assist in carrying out the provisions of this Act within its district, who shall be subject to the supervision of the Director health services.

## **23. Removal of Director health services and environmental health officers**

No Director health services or environmental health officer appointed by a local authority may, except with his or her own consent, or in conformity with any enactment relating to retirement on account of age or ill-health, or contract governing his or her appointment, be removed from office, or have his or her salary or his or her emoluments reduced, without the sanction of the Minister first being obtained:

Provided that it shall be competent for a local authority to suspend a Director health services or environmental health officer for incapacity, neglect or misconduct, pending the sanction of the Minister to dismiss and in the event of such sanction being granted, the said Director health services or environmental health officer shall be deemed to have been removed from office from the date of such suspension.

## **24. Local authorities failing to appoint Director health services or environmental health officer**

(1) If any local authority fails to appoint a Director health services or environmental health officer within six months after being required to do so by the Minister, the Minister may appoint a Director health services or environmental health officer, as the case may be, to the local authority, and may fix the remuneration to be paid by the local authority to such officer or environmental health officer and may, in case of default of payment of such remuneration by the local authority, direct that the same be paid out of the Consolidated Revenue Fund, and that the amount be recovered by deduction from any subsidy or other moneys payable out of the said fund to such local authority.

(2) Where the Minister appoints, in terms of [subsection \(1\)](#), a civil servant to be Director health services or environmental health officer, as the case may be, to a local authority, he or she may-

- (a) fix the remuneration to be paid to the officer in respect of such appointment;
- (b) in the case of default of payment of such remuneration by the local authority, direct that the amount be recovered by reduction from any subsidy or other moneys payable out of the Consolidated Revenue Fund to such local authority.

## **25. Combined appointments**

(1) Subject to [subsection \(2\)](#), nothing in this or any other Act contained shall be construed as precluding any person from holding at the same time an appointment as-

- (a) Government medical officer and Director health services to one or more local authorities; or
- (b) Director health services to two or more local authorities; or
- (c) Environmental health officer for the State and one or more local authorities.

(2) Despite [subsection \(1\)](#), no person shall hold any combination of appointments referred to in [subsection \(1\) \(a\)](#), [\(b\)](#) or [\(c\)](#) for more than three years without relinquishing any appointment that causes him or her to hold more than a single appointment.

## **26. Duties of local authorities**

Every local authority shall take all lawful and necessary precautions for the prevention of the occurrence, or for dealing with the outbreak or prevalence, of any infectious or communicable diseases, and shall exercise the powers and perform the duties conferred or imposed on it by this Act or by any other enactment.

## 27. Defaulting local authorities

(1) Whenever upon the report of the Chief Health Officer it appears to the Minister that the public health of any locality is in danger, by the failure or refusal on the part of any local authority to exercise the powers or perform the duties devolving upon it under any enactment, or to take the lawful and necessary steps to obtain powers to implement by-laws or regulations to avert the danger, the Minister may, after causing an inquiry to be held, at which the local authority shall have an opportunity of being heard, call upon the local authority forthwith to exercise any such powers or to perform properly any such duties to avert any danger and if the local authority fails to comply, the Minister may exercise such powers or perform such duties, and may authorise any person to take all necessary steps for that purpose in the same manner as if he or she were the local authority.

(2) Any expenditure incurred by the State under [subsection \(1\)](#) may be recovered-

- (a) by action in a competent court against the local authority in default; or
- (b) by levying a special rate upon all rateable property within the district of the local authority in default; or
- (c) by deduction from any subsidy, grant or other moneys payable by the State to the local authority in default; or
- (d) by all three or any two such methods of recovery.

## 28. Public Health Human Resources

(1) The Minister shall develop policies and guidelines for, and to monitor the provision, distribution, development and utilisation of, human resources within the public health system.

(2) The policies and guidelines contemplated in [subsection \(1\)](#) must among other things facilitate and advance-

- (a) the adequate distribution of human resources;
- (b) the provision of appropriately trained staff at all levels of the public health system to meet the population's health care needs; and
- (c) the effective and efficient utilisation, functioning, management and support of human resources within the public health system.

## 29. Regulations Relating to Human Resources

(1) The Minister may make regulations regarding human resources within the public health system in order to-

- (a) ensure that adequate resources are available for the education and training of health care personnel to meet the human resources requirements of the public health system;
- (b) ensure the education and training of health care personnel to meet the requirements of the public health system;
- (c) create new categories of health care personnel to be educated or trained;
- (d) subject to the Education Act [*Chapter 25:04*] and legislation relating to higher and tertiary education, identify shortages of key skills, expertise and competencies within the public health system and to prescribe strategies for the-
  - (i) recruitment of health care personnel from other countries, and
  - (ii) education and training of health practitioners or health workers to make up the deficit in respect of scarce skills, expertise and competencies;
- (e) prescribe strategies for the recruitment and retention of health care personnel within the public health system;
- (f) ensure the existence of adequate human resources planning, development and management structures at public, provincial and district levels of the public health systems;
- (g) ensure the availability of institutional capacity at public, provincial and district levels of the public health system to plan for, develop and manage provision of health care services;
- (h) ensure the definition and clarification of the roles and functions of the authorities at national, provincial and local levels with regard to the planning, production and management of human resources;

- (i) subject to the Immigration Act [*Chapter 4:02*], determine the circumstances under which health care personnel may be recruited from other countries to provide health services.

### PART III

#### *Health Services*

### **30. The obligation to report on implementation on rights in public health**

The Minister must report to Parliament annually on progress made on implementation of the rights in relation to public health set out in the Constitution.

### **31. Principles of public health and practice**

- (1) Subject to this Act, the following principles must guide public health policy and practice-
- (a) respect for human rights and adherence to both rights and responsibilities;
  - (b) promotion of justice, equity and gender equity;
  - (c) protection of the best interests of vulnerable groups of minors;
  - (d) promotion of health and of access to the social determinants of health as central to development;
  - (e) transparency, accountability and sustainability;
  - (f) precaution and protection of public health when there is uncertainty or incomplete information about a public health risk;
  - (g) promotion of partnership between state and non-state actors and community;
  - (h) ethical conduct of health service providers;
  - (i) community participation role in decisions and actions affecting their health;
  - (j) recognition, respect and promotion of indigenous and traditional knowledge, practices and systems;
  - (k) promotion of access to information and education for public health; and
  - (l) respect for international commitments in public health.
- (2) The public health principles of public health management set out in [subsection \(1\)](#) shall-
- (a) serve as the general framework within which plans for the management of public health shall be formulated;
  - (b) serve as guidelines for the exercise of any function concerning public health management in terms of this Act or any other enactment.

### **32. Duty to avoid harm to public health**

- (1) Every person has the duty to avoid harm to public health, that is to say-
- (a) every person has the duty to-
    - (i) exercise due diligence and take reasonable precautions under their control to avoid, control or mitigate a public health risk, and
    - (ii) provide public information on any harmful effects to health of any products he or she is promoting, and
    - (iii) report a suspected health risk to the relevant health authority as soon as he or she becomes aware of it, and
    - (iv) actively promote compliance with this Act, its regulations and related codes of practice, guidelines or administrative orders.
- (2) The Minister may, by statutory instrument, specify-
- (a) events, occurrences or things that constitute public health risks;
  - (b) the measures for application of the duty to avoid harm;
  - (c) the projects and activities which require a health impact assessment to be conducted prior to

licensing or implementation;

- (d) the procedure for conducting the health impact assessment;
- (e) the contents of a health impact assessment report;
- (f) the issue and registration of development certificates;
- (g) offences and penalties in relation to health impact assessments;
- (h) the time period within which any person who has acted in violation of this section must remedy the harm he or she has caused;
- (i) any other matter related to the foregoing.

(3) In the exercise of his or her powers in terms of this section, the Minister must act in consultation with the Minister responsible for environmental matters on co-ordination with environmental impact assessments as set out in Part XI of the Environmental Management Act [*Chapter 20:27*], and may consult any other relevant authority or person.

### **33. Emergency treatment**

(1) No health practitioner, health practitioner in charge of a health institution, health worker or health establishment shall refuse a person emergency medical treatment.

(2) Where a health facility realises a patient seeking medical services appears to be having a contagious infection such institution must ensure such person is placed in an isolation facility within the institution and must forthwith inform the relevant authorities where it is a case of public concern.

(3) Where a person receives treatment pursuant to [subsection \(1\)](#) such health institution must take necessary measures to ensure the patient settles their bill.

(4) Any health practitioner, health practitioner in charge and institution who fails to comply with [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding one year or both such fine and such imprisonment.

### **34. User to have full knowledge of services available**

(1) Every health practitioner shall inform a user of-

- (a) the user's health status except in circumstances where there is substantial evidence that the disclosure of the user's health status would be contrary to the best interests of the user;
- (b) the range of diagnostic procedures and treatment options generally available to the user;
- (c) the benefits, risks, costs and consequences generally associated with each option; and
- (d) the user's right to refuse health services and explain the implications, risks, obligations of such refusal.

(2) The health practitioner concerned shall, where possible, inform the user as contemplated in [subsection \(1\)](#) in a language that the user understands and in a manner which takes into account the user's level of literacy.

(3) Any health practitioner who fails to comply with [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding one year or both such fine and such imprisonment.

### **35. Consent of user**

(1) For the purposes of this section "informed consent" means consent for the provision of a specified health service given by a person with legal capacity to do so and who has been informed as contemplated in [section 34](#).

(2) A health service shall not be provided to a user without the user's informed consent unless-

- (a) the user is unable to give informed consent and such consent is given by a person mandated by the user in writing to grant consent on his or her behalf or authorised to give such consent in terms of any law or court order;
- (b) the user is unable to give informed consent and no person is mandated or authorised to give such consent, and the consent is given by the spouse or partner of the user or, in the absence of such spouse or partner, a parent, grandparent, an adult child or a brother or a sister of the user, in the specific order as listed;
- (c) the provision of a health service without informed consent is authorised in terms of any law or court

order;

- (d) failure to treat the user, or group of people which includes the user will, in the reasonable opinion of the health practitioner, result in a serious risk to public health; or
- (e) any delay in the provision of the health service to the user might result in his or her death or irreversible damage to his or her health and the user has not expressly or by conduct refused that service.

(3) A health practitioner shall take all reasonable steps to obtain the user's informed consent.

(4) Any health practitioner who fails to comply with [subsections \(2\)](#) and [\(3\)](#) shall be guilty of an offence and liable to a fine not exceeding level ten or imprisonment not exceeding one year or both such fine and such imprisonment.

### **36. Health service for experimental or research purposes**

(1) No person shall be subjected to medical or scientific experiments or the extraction or use human tissue without the informed consent of the user and the authorisation of the delegated authority set up for that purpose through an Act of Parliament.

(2) Any health practitioner who fails to comply with [subsection \(1\)](#) and [subsection \(4\)](#) shall be guilty of an offence and liable to a fine not exceeding level fourteen or imprisonment not exceeding five years or both such fine and such imprisonment.

(3) Before a health institution provides a health service for experimental or research purposes to any user and subject to [subsection \(4\)](#), the health institution must inform the user in the prescribed manner that the health service is for experimental or research purposes or part of an experimental or research project.

(4) A health institution may not provide any health service to a user for a purpose contemplated in [subsection \(3\)](#) unless-

- (a) the user;
- (b) the health practitioner primarily responsible for the user's treatment;
- (c) the head of the health institution in question and Health Service Board;
- (d) any other person to whom that authority has been delegated,

has given prior written authorisation for the provision of the health service in question.

### **37. Duty to disseminate information**

The Health Service Board established under [section 3](#) of the Health Service Act [*Chapter 15:16*] and every person to whom it has delegated its functions under [section 6](#) of that Act shall after consultation with-

- (a) the Minister; and
- (b) the Chief Officer of Health; and
- (c) where necessary other relevant Ministries,

ensure that appropriate, adequate and comprehensive information is disseminated on the health services for which it is responsible, which must include-

- (i) the types and availability of health services,
- (ii) the organisation of health services,
- (iii) operating schedules and timetables of visits,
- (iv) procedures for access to the health services,
- (v) other aspects of health services which may be of use to the public,
- (vi) procedures for laying complaints.

### **38. Obligation to keep records**

(1) The obligation to keep and maintain records imposed on Medical Aid Societies and private hospitals under [section 15](#) of the Medical Services Act [*Chapter 15:13*] shall apply with the necessary changes to all health institutions.

(2) Any health practitioner in charge and any officer directly responsible for the keeping of any such records in any such health institution that fails to keep and maintain records pursuant to [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level thirteen and imprisonment for a period not exceeding two years.

### **39. Confidentiality**

(1) All information concerning a user, including information relating to his or her health status, treatment or stay in a health establishment is confidential.

(2) Subject to [section 40](#), no person may disclose any information contemplated in this section unless provided for in law, or-

- (a) the user consents to that disclosure in writing; or
- (b) a court order or any law requires that disclosure; or
- (c) non-disclosure of the information represents a serious threat to public health.

(3) Where any person contravenes [subsection \(2\)](#) such person shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding one year or to both such fine and such imprisonment.

### **40. Access to health records by healthcare provider**

(1) A health practitioner may examine a user's health records for the purposes of-

- (a) treatment with the authorisation of the user; and
- (b) study, teaching or research with the authorisation of the user, head of the health establishment concerned and the relevant health research ethics committee.

(2) If the study, teaching or research contemplated in [subsection \(1\) \(b\)](#) reflects or obtains no information as to the identity of the user concerned, it is not necessary to obtain the authorisations contemplated in that subsection.

(3) Any health practitioner who does not comply with the provisions of this section shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding two years or to both such fine and such imprisonment.

### **41. Laying of complaints**

(1) Without derogating from the powers to investigate and adjudicate misconduct cases provided for under [section 17](#) of the Health Service Act [*Chapter 15:16*] or any other law-

- (a) any person aggrieved by the conduct of health care personnel has the right to complain and to have the matter investigated and redressed by an appropriate authority;
- (b) every health establishment shall formulate a procedure for the laying and redress of complaints against the conduct of any person associated with that establishment.

(2) The procedures for laying complaints must-

- (a) be displayed by all health establishments in a manner that is visible for any person entering the establishment and the procedure must be communicated to users on a regular basis;
- (b) in the case of a private health establishment, allow for the laying of complaints;
- (c) with the head of the relevant establishment, include provisions for the acceptance and acknowledgment of every complaint directed to a health establishment, whether or not it falls within the jurisdiction or authority of that establishment;
- (d) allow for the referral of any complaint that is not within the jurisdiction or authority of the health establishment to the appropriate body or authority.

(3) Any person who does not comply with the provisions of this section shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding six months or to both such fine and such imprisonment.

### **42. Compulsory immunisation of children and incapacitated persons**

Where there are compelling reasons of public health specifically regarding minors and legally incapacitated individuals, the Minister shall by notice in the *Gazette* declare the date on which compulsory immunisation shall take

place.

#### **43. Duties of users of health services**

- (1) A user must-
  - (a) adhere to the rules of the health establishment when receiving treatment or using health services at the health establishment;
  - (b) provide the health practitioner with accurate information pertaining to his or her health status and co-operate with health practitioners when using health services;
  - (c) treat health practitioners and health workers with dignity and respect.

#### **44. Participation in decisions**

- (1) A user has the right to participate in any decision affecting his or her personal health and treatment.
- (2) If the informed consent of the user is given by a person other than the user, such person must, if possible, consult the user before giving the required consent.
- (3) If a user is unable to participate in a decision affecting his or her personal health and treatment, he or she must be informed after the provision of the health service in question.

#### **45. Rights of health personnel**

- (1) Health care personnel may not be unfairly discriminated against on account of their health status.
- (2) Despite [subsection \(1\)](#) but subject to any applicable law, the head of the health establishment concerned may in accordance with any guidelines determined by the Minister impose conditions on the service that may be rendered by a health practitioner or health worker on the basis of his or her health status.
- (3) Subject to any applicable law, every health establishment must implement measures to minimise-
  - (a) injury or damage to the person and property of health care personnel working at that establishment; and
  - (b) disease transmission.
- (4) A health practitioner may refuse to treat a user who is physically or verbally abusive or who sexually harasses him or her.

### PART IV

#### *Infectious Diseases*

#### SUB-PART A

##### *Notification of infectious diseases*

#### **46. Notifiable diseases**

For the purposes of this Act, the term "infectious disease" includes any of the following diseases-

- (a) chicken-pox;
- (b) diphtheria;
- (c) erysipelas;
- (d) pyraemia and septicaemia;
- (e) scarlet fever;
- (f) typhus fever;
- (g) plague;
- (h) cholera;

- (i) typhoid or enteric fever (including para-typhoid fever);
- (j) undulant or Malta fever;
- (k) epidemic cerebro-spinal meningitis (or cerebro-spinal fever or spotted fever);
- (l) acute poliomyelitis;
- (m) leprosy;
- (n) anthrax;
- (o) glanders;
- (p) rabies;
- (q) trypanosomiasis (or sleeping sickness);
- (r) yellow fever;
- (s) viral haemorrhagic fevers,

and all forms of tuberculosis and such other infectious or communicable diseases including sexually transmitted diseases as the Minister may declare, by statutory instrument, to be infectious diseases either throughout Zimbabwe or in any part of Zimbabwe.

#### **47. Notification of infectious disease**

(1) Whenever any child attending any school, orphanage or other like institution, or any person residing in any hotel, boarding-house or other like institution, is known to be suffering from any infectious disease, whether such infectious disease is specified in this Part or not, the principal or person in charge of such school, orphanage or other like institution, or the manager or proprietor or person in charge of such hotel, boarding-house or other like institution shall forthwith send notice thereof to the local authority of the district, and shall furnish to the Director of health services, on his or her request, a list of scholars or residents thereat, together with their addresses.

(2) Any person who fails to give any notice required by [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level eight or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

(3) In any prosecution under this section the onus of showing that he or she was unaware that the patient was suffering from a notifiable infectious disease shall be on the person charged

#### **48. Notification by medical practitioners**

(1) If a patient suffering, to the knowledge of the medical practitioner attending him or her, from an infectious disease dies therefrom, such medical practitioner shall immediately furnish to the local authority of the district and District medical officer a written certificate containing the appropriate particulars relating to the patient's illness and cause of death.

(2) Any medical practitioner who fails to furnish a certificate of notification as required by this section shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment, and in any prosecution under this section the onus shall be on the medical practitioner charged to show that he or she was unaware that the patient was suffering from or the deceased had died of an infectious disease.

#### **49. Local authorities to transmit return of notifications**

(1) In the time of an outbreak, every local authority shall, at the end of each week and on the form prescribed, transmit to the Chief Health Officer particulars of all cases of infectious diseases and of all deaths from infectious diseases notified to it during the week, and all information which it may possess as to the outbreak or prevalence of any infectious, communicable or preventable disease in its district.

(2) Any Director of health services or local authority as the case may be who does not comply with the provisions of this section shall be guilty of an offence and liable to a fine not exceeding level eight or imprisonment not exceeding two years or to both such fine and such imprisonment.

#### **50. Regulations for notification of infectious diseases**

(1) The Minister may, in respect of the notification of diseases, make regulations as to-



- (a) co-ordination in the notification of diseases of zoonotic origin to the relevant veterinary authority;
- (b) providing clear circumstances under which information may be disclosed;
- (c) the duties of owners or occupiers of land, owners or managers of mines, employers of labour and all chiefs or headmen or others in regard to reporting the occurrence of such diseases, whether infectious or otherwise, as may be prescribed in the regulations;
- (d) the duties on patients to adhere to treatment and to prevent wilful and intentional transmission to others;
- (e) the hospitalisation, isolation and quarantine, of infected persons;
- (f) the duties of medical practitioners and other persons in regard to the reporting or notification of such disease, whether infectious or otherwise, as may be prescribed in the regulations;
- (g) the circumstances in which notification of particular infectious diseases shall not be required;
- (h) imposing a duty of confidentiality on persons involved in the administration of any notification where personal identifying information is included;
- (i) the duties of a local authority in respect of the keeping of registers and records of such notifications;
- (j) the duties of registrars of deaths in respect of furnishing the local authority with notification of returns of deaths notified with such registrars;
- (k) the creation of a notifiable diseases register containing non named data for monitoring, analysing and reporting on the incidence and patterns of notifiable conditions and evaluating the efficacy of management and treatments;
- (l) the creation of a contacts tracing mechanism;
- (m) providing for powers and measures for the response to notifiable diseases that set a continuum from small interventions to strong powers based on the level of threat to public health, including-
  - (i) contact tracing,
  - (ii) vaccination,
  - (iii) measures to isolate and address the sources of epidemics,
  - (iv) observed home treatment,
  - (v) medical counselling,
  - (vi) facility treatment services;
- (n) provision of adequate medical supplies;
- (o) the fees payable to medical practitioners in respect of such notifications, and the circumstances in which fees shall or shall not be payable; the forms to be used and the particulars to be furnished by medical practitioners when making such notifications;
- (p) the forms to be used and the particulars to be furnished by local authorities and other persons when transmitting returns and reports to the Chief Health Officer;
- (q) and, generally, for the better carrying out and attaining the objects and purposes of this Part.

(2) Regulation made under this section shall carry a penalty not exceeding level eight or to imprisonment for a period not exceeding one year or to both such fine and such imprisonment.

#### SUB-PART B

#### *Prevention and Suppression of Infectious Diseases*

### **51. Inspection of infected premises and examination of persons suspected to be suffering from infectious disease**

Director health services of any urban or rural area or any medical practitioner duly authorised thereto by the local authority may at any reasonable time enter and inspect any premises in which he or she has reason to believe that any person suffering or who has recently suffered from any infectious disease is or has recently been present, or any inmate of which has recently been exposed to the infection of any infectious disease, and may medically examine any person in such premises for the purpose of ascertaining whether such person is suffering or has recently suffered from any such disease.

## **52. Provision of isolation hospitals, mortuaries, disinfecting stations and ambulances by local authorities**

Any local authority may, and if required by the Minister after inquiry, at which the local authority shall have an opportunity of being heard, shall, provide and maintain either separately or jointly with another local authority or with a hospital authority or with the State-

- (a) suitable hospitals or places of isolation for the accommodation and treatment of persons suffering from infectious diseases;
- (b) mortuaries or places for the reception of dead bodies pending the carrying out of any post-mortem examination ordered by a lawful authority, or until removal for interment;
- (c) disinfecting and cleansing stations, plant and equipment for the cleansing of persons and the disinfection of bedding, clothing or other articles which have been exposed to, or are believed to be contaminated with, the infection of any infectious disease, or which are dirty or verminous;
- (d) vehicles for the conveyance of persons suffering from any infectious disease or for the removal of any infected bedding, clothing or other articles;
- (e) any other accommodation, equipment or articles required for dealing with any outbreak of an infectious disease.

## **53. Removal to hospital of infected persons**

Where, in the opinion of the medical officer of health, any person certified by a medical practitioner to be suffering from an infectious disease is not accommodated or is not being treated or nursed in such manner as adequately to guard against the spread of the disease, such person may, on the order of the Director of health services, be removed to a suitable hospital or place of isolation and there detained until the Director of health services or any medical practitioner duly authorised thereto by the local authority or by the Minister is satisfied that he or she is free from infection or can be discharged without danger to the public health:

Provided that the cost of the removal of such patient and of his or her maintenance at the hospital may be recovered by the local authority from the said patient or his or her estate or, in the case of a minor, from his or her parent or guardian, if it can be shown that the said patient or his or her estate or, in the case of a minor, his or her parent or guardian is in a position to defray such costs.

## **54. Infected persons sent for treatment from other districts**

In the case of any patient suffering from any infectious disease being sent into the district of any local authority for isolation and treatment in any hospital or place of isolation maintained by such local authority from any other district, whether urban or rural, the first-mentioned local authority may recover from the local authority of the district sending the patient the cost of maintenance, nursing and treatment of the patient, and the cost of burial in the event of the death of the patient.

## **55. Measures to be adopted by local authority in case of infectious disease**

Where a person suffering from an infectious disease is within the district of a local authority, it shall be the duty of that authority to ensure that adequate measures are taken for preventing the spread of the disease, including, where necessary, provision for the accommodation, maintenance, nursing and medical treatment of the patient in a hospital or place of isolation until he or she has recovered or is no longer a danger to the public or, in the event of the death of the patient, provision for the removal and burial of the body.

## **56. Power of local authority to make order in relation to disinfection and personal hygiene**

(1) When it appears from the certificate of the Director of health services or a health officer or any medical practitioner that the cleansing or disinfection of any premises or any article is necessary for preventing the spread or eradicating the infection of any infectious disease, or otherwise for preventing danger to health, the local authority may give written notice to the owner or occupier of such premises or to the owner or person in charge of such article requiring him or her to cleanse or disinfect such premises or article in such manner and within such time as may be specified by and to the satisfaction of the local authority giving such notice.

(2) If the person to whom such notice is given fails to comply therewith, the local authority shall cause such premises or articles to be cleansed or disinfected, and the costs incurred shall be deemed to be a debt due to the local authority by the person in default.

(3) Where the owner or occupier of any such premises, or the owner or person in charge of any such article, is indigent or otherwise unable, in the opinion of the local authority, to carry out properly the cleansing or disinfection of such premises or article, the local authority may itself carry out any necessary cleansing or disinfection free of charge.

(4) Where any article dealt with by a local authority under this section is of such a nature that it cannot be disinfected, the local authority may, on the order of a district administrator, district officer or justice of the peace, cause such article to be destroyed and no compensation shall be payable in respect of any article so destroyed.

(5) When any article is damaged during disinfection by the local authority, no compensation shall be payable by the local authority if suitable methods of disinfection have been employed and due care and all reasonable precautions have been taken to prevent unnecessary or avoidable damage.

(6) Compensation shall not be payable in respect of the deprivation of the occupation or use of any premises or the use of any article occasioned by disinfection if no undue delay has occurred.

(7) A Director of health services may order any person who has been certified by a Director of health services, or other health practitioner, or by an environmental health officer, to be in such condition of personal hygiene as to pose the risk of spreading disease or parasites, to take appropriate remedial action, including bathing or showering and cleaning of his her immediate surroundings, goods and effects.

(8) An order made under this section may be addressed to any duly authorised officer of a local authority or any police officer. Any person who wilfully obstructs the execution of, or fails or refuses to comply with, any such order shall be guilty of an offence and liable to a fine not exceeding level four or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

## **57. Exposure of infected persons or thing**

Any person who-

- (a) while knowingly suffering from any notifiable infectious disease, or such other infectious disease as the Minister may declare by statutory instrument to be a disease for the purposes of this section, wilfully or negligently exposes himself or herself in such manner as to be likely or liable to spread such disease in any street, public place, public building, shop, inn, hotel, church or other place used, frequented or occupied in common by persons other than the members of the family or household to which such infected person belongs; or
- (b) being in charge of any person, and knowing that such person is so suffering, so exposes such sufferer; or
- (c) knowingly gives, lends, sells, pawns, transmits, removes or exposes, or sends to or permits to be washed or exposed in any public wash-house or washing-place, or in any laundry or other place at which articles are washed, cleansed or dyed, without previous effective disinfection to the satisfaction of the local authority and in accordance with any regulations in force in the district, any clothing, bedding, rags or other articles or things of any kind whatsoever which have been exposed to or are contaminated with the infection of any such disease; or
- (d) while knowingly suffering from any such disease, handles, conveys or otherwise comes in contact with any food, dairy produce, aerated water or other articles intended for human consumption, or carries on any trade or occupation in such manner as to be likely or liable to spread such disease; shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment:

Provided that nothing in this section contained shall apply to any person transmitting with proper precautions and in accordance with the instructions of the local authority any bedding, clothing or other articles or things for the purpose of having the same disinfected.

## **58. Conveyance of infected persons in public conveyances**

(1) For the purposes of this section, "public conveyance" includes any railway coach, tramcar, omnibus, cab, motor car or any vehicle whatsoever, or any boat or other vessel, or any aircraft if the conveyance plies for hire or is used by members of the public.

(2) No person, knowing that he or she is suffering from any infectious disease which the Minister may declare by statutory instrument to be a disease for the purposes of this section, shall enter any public conveyance, and no person in charge of any person whom he or she knows to be so suffering, or of the body of any person who to his or her knowledge has died of any such disease, or in charge of anything which to his or her knowledge has been exposed to or is contaminated with the infection of any such disease, shall place in any such conveyance any such person, body, article or thing which to his or her knowledge has been so exposed or is so contaminated, except in the case of a hearse used for the removal of a dead body, without first informing the owner or driver or conductor of such conveyance of the fact of such infection and obtaining his or her consent.

(3) The owner, driver or conductor thereof shall, as soon as possible after such conveyance has been so used, and before permitting the use thereof by any other person, cause it to be efficiently disinfected to the satisfaction of the local authority and in accordance with any regulations in force in the district.

(4) Any person who contravenes [subsection \(2\)](#) shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such

imprisonment, and may in addition be ordered by the court to pay the owner or driver of the conveyance concerned the amount of any loss or expense necessarily entailed by the disinfection of such vehicle.

#### **59. Infected dwellings not to be evacuated or let without previous disinfection**

(1) No person shall cease to occupy or shall let any dwelling or premises or part thereof in which to his or her knowledge there is or has recently been any person suffering from any infectious disease without having the same, and all articles therein which are liable to retain infection, efficiently disinfected to the satisfaction of the local authority and in accordance with any regulations in force in the district. This section shall apply to any owner or keeper of a hotel or boarding-house who lets any room or part thereof to any person.

(2) Any person who fails or refuses to comply with, any such order shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

#### **60. Removal of bodies of persons who have died of infectious disease**

(1) In every case of death from a known infectious disease it shall be the duty of the occupier of the premises in which the death has occurred immediately to make the best arrangements practicable, pending the removal of the body and the carrying out of thorough disinfection, for preventing the spread of such disease.

(2) Any person who contravenes [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

(3) It shall be an offence against this Act for the occupier of any premises to keep any dead body in any room in which any person lives, sleeps or works, or in which food is kept or prepared or eaten, or to keep the body of any person who is known to the occupier to have died of an infectious disease for more than twenty-four hours in any place other than a mortuary or other place set apart for the keeping of dead bodies, except with the sanction in writing of the local authority first obtained.

(4) Where any person dies of an infectious disease it shall be an offence to remove the body except for the purpose of immediate burial and it shall be the duty of any person who removes the body to take it direct to the place of interment for burial.

(5) Any person who is guilty of an offence in terms of [subsection \(3\)](#) or [\(4\)](#) shall be liable to a fine not exceeding level eight or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

(6) Nothing in this section shall be deemed to prevent the removal by due authority of any dead body from a hospital to a mortuary.

#### **61. Removal and burial of bodies of persons who have died of infectious disease**

(1) When-

- (a) the body of a person who has died of an infectious disease is retained in a room in which any person lives, sleeps or works, or in which food is kept or prepared or eaten; or
- (b) the body of a person who has died of an infectious disease is retained without the sanction of the local authority for more than twenty-four hours elsewhere than in a mortuary or other place reserved for the keeping of dead bodies; or
- (c) any dead body is retained in any dwelling or place in circumstances which, in the opinion of the local authority, are likely to endanger health; or
- (d) any dead body found within the district is unclaimed or no competent person undertakes to bury it,

any district administrator, district officer, justice of the peace, medical officer of health or police officer of or above the rank of assistant inspector may, on a certificate signed by a medical practitioner, direct that the body be removed to a mortuary and be buried within a time to be specified in such order, or if the body is that of a person certified to have died of an infectious disease, may order that the body be buried immediately under the supervision of a competent health practitioner without removal to a mortuary:

Provided that the friends or relatives of the deceased have not made an under-taking to, and do, bury the body within the time so specified, the cost of so doing shall be defrayed by the local authority and may be recovered by it by action in any court of competent jurisdiction from any person legally liable to pay the expenses of interment.

(2) Any person who obstructs the execution of any order or direction given under [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

## 62. Regulations regarding infectious diseases

(1) The Minister may make regulations applicable to all infectious diseases or only to such infectious diseases as may be specified therein regarding the following matters-

- (a) the imposition and enforcement of quarantine or of medical observation and surveillance in respect of persons suffering or suspected to be suffering from infectious diseases who are not removed to a hospital or place of isolation, the premises in which such persons are accommodated, those in charge of or in attendance on such persons, and other persons living in or visiting such premises or who may otherwise have been exposed to the infection of any such disease;
- (b) the duties, in respect of the prevention of infectious diseases and in respect of persons suffering or suspected to be suffering therefrom, of employers of labour, and of chiefs or headmen and others;
- (c) the measures to be taken for preventing the spread of or eradicating cholera, typhoid fever, plague, acute poliomyelitis, tuberculosis or any other infectious disease requiring to be dealt with in a special manner;
- (d) the conveyance by rail or otherwise of persons suffering from, or the bodies of persons who have died of, an infectious disease;
- (e) the prevention of the spread from any animal, or the carcass or product of any animal, to man of rabies, glanders, anthrax, plague, tuberculosis, trichinosis or any other disease communicable by any animal, or the carcass or product of any animal, to man;
- (f) the prevention of the spread and the eradication of malaria, the destruction of mosquitoes and the removal or improvement of conditions permitting or favouring the multiplication or prevalence of mosquitoes and the provision and proper upkeep of mosquito nets in the sleeping apartments of hotels, boarding-houses, lodging-houses and all public buildings where persons are accommodated for payment;
- (g) the prevention of the spread of disease by flies or other insects and the destruction of and the removal or improvement of conditions permitting or favouring the prevalence or multiplication of such insects;
- (h) the destruction of rodents and other vermin and the removal or improvement of conditions permitting or favouring the harbourage or multiplication thereof;
- (i) the prevention of the spread of ancylostomiasis, schistosomiasis or other disease in man caused by any animal or vegetable parasite;
- (j) the prevention of the spread of any infectious, contagious disease by the carrying on of any business, trade or occupation;
- (k) the prevention of the spread of any infectious disease by persons who, though not at the time suffering from such disease, are "carriers" of and liable to disseminate the infection thereof, and the keeping under medical surveillance and the restriction of the movements of such persons;
- (l) the prohibition of spitting in public places or in public conveyances, except into receptacles provided for the purpose;
- (m) the regulation and restriction of any trade or occupation entailing special danger to the health of those engaged therein, whether from infectious disease or otherwise, and the institution of measures for preventing or limiting such danger;
- (n) the inspection of any process involved in the processing and marketing of food for human consumption;
- (o) inspection, hazard analysis at critical control points across the chain of production and marketing of food and other products for human consumption;
- (p) imposition of measures of risk abatement for food and other products;
- (q) the cleansing of persons in such conditions of personal hygiene as to pose the risk of spreading disease or parasites;
- (r) the disinfection or fumigation of premises, clothing or other articles which have been exposed to or are believed to be contaminated with the infection of any infectious disease, or which are in such state of sanitation as to be harbouring disease or parasites and prohibiting the carrying out of any fumigation which involves the use of poisonous gas except under licence;
- (s) rag flock manufacture and the trade in rags and in bones and in second-hand clothing, bedding or similar article, and requiring the disinfection of any such article before its importation, removal, sale or exposure for sale, or use in any manufacturing process;
- (t) the disposal of any refuse, waste matters or other matter or thing which has been contaminated with or exposed to the infection of any infectious disease;

- (u) the regulation or restriction and, where deemed necessary, the prohibition, of the keeping, transmission or use within, or the conveyance or transmission into or out of, Zimbabwe of cultures or preparations of pathogenic micro-organisms or other material capable of causing disease in man;
- (v) the giving compulsorily of any information or the production compulsorily of any documentary or other evidence required for the purpose of tracing the source or preventing the spread of any infectious disease,

and generally for the better carrying out of the provisions and the attaining of the objects and purposes of this Part.

(2) The Minister may make regulations-

- (a) prescribing forms of certificates, notices, orders or returns and books of record to be used in connection with any infectious disease, and defining the information to be furnished therein, and requiring the furnishing and prescribing the manner of use thereof by district administrators and district officers, Government medical officers, local authorities, medical officers of health and others;
- (b) conferring powers and imposing duties in connection with infectious disease on district administrators and district officers, Government medical or other officers, local authorities, medical officers of health, employers of labour and chiefs or headmen;
- (c) adapting, within such area as may be defined, this Part and the procedure thereunder to the understanding and special circumstances of different classes of persons;
- (d) providing for the effective enforcement of this Part as regards different classes of persons, and assigning, where deemed desirable, responsibility in connection therewith to local authorities or employers of labour;
- (e) as to the management, maintenance and inspection of hospitals or other institutions for the purposes of this Part and the appointment and duties of persons employed therein or otherwise in connection with the carrying out or enforcement of this Part;
- (f) as to the classification, treatment, control and discipline of persons treated or detained in such hospitals or institutions, and prescribing compulsory work for such persons where deemed desirable;
- (g) prescribing the precautions to be taken by persons infected with or attending on or having the care or charge of persons infected with infectious disease;
- (h) in connection with infectious disease providing for-
  - (i) opt in and opt out testing and counselling, and
  - (ii) case tracing, and
  - (iii) public information and education, and
  - (iv) health promotion, and
  - (v) co-ordination with relevant authorities and agencies dealing with gender and domestic violence and child sexual abuse, and
  - (vi) compulsory testing;
- (i) generally, for the better carrying out and the attaining of the objects and purposes of this Part.

(3) Notwithstanding the provisions of [subsection \(1\)](#), the Minister may after consultation with stakeholders make regulations specific to a particular infectious disease.

(4) The Minister shall act in consultation with the Minister responsible for Agriculture or other relevant Ministry to make regulations relating to-

- (a) the prevention and control of zoonotic diseases;
- (b) health screening of animals and animal products;
- (c) waste water use in agriculture.

(5) The Minister shall act in consultation with the minister responsible for labour issues to make regulations for the control of the spread of infectious diseases in the work place in public and private sector occupations and industries.

(6) Any person who contravenes any provision of regulations made in terms of [subsections \(1\)](#), [\(2\)](#) and [\(3\)](#) and [\(4\)](#) shall be guilty of an offence and liable to a fine not exceeding level twelve or to imprisonment for a period not exceeding one year or to both such fine and such imprisonment.

### **63. Reciprocal notification and consultation between Ministry and Veterinary Department**

(1) There shall be between the Ministry and the Department of Veterinary Services a system of reciprocal

notification as to outbreaks or threatened outbreaks of diseases liable to affect both man and animals, and of consultation as to the making of regulations or the taking of measures in connection therewith.

(2) Whenever under this Act it is necessary to determine the presence or absence of disease in any live animal otherwise than by the bacteriological examination of secretions, discharges or other material, only the certificate of an approved veterinary surgeon shall be evidence.

#### SUB-PART C

##### *Special Provisions Regarding Formidable Epidemic Diseases and Conditions of Public Health importance*

#### **64. Interpretation of sub-part**

(1) In this Act, unless otherwise expressed-

- (a) a formidable epidemic disease means cholera, epidemic influenza, typhoid, plague, viral haemorrhagic fevers and any other disease which the Minister may, by statutory instrument, declare to be a formidable epidemic disease for the purposes of this Act;
- (b) a condition of public health importance means-
  - (i) any disease which is not a formidable epidemic disease, syndrome, symptom, injury, or other threat to health that is identifiable on an individual or community level and can reasonably be expected to lead to adverse health effects in the community,
  - (ii) any unusual sickness or mortality among rats, mice, cats, dogs or other animals susceptible to plague or other formidable epidemic disease, not due to poison or other obvious cause,
  - (iii) any public health risk or event that can reasonably be expected to lead to adverse health effects in the community.

#### **65. Notification of suspected cases of formidable epidemic diseases and conditions of public health importance**

(1) Medical practitioners, principals of schools, heads of families or households, employers of labour, owners or occupiers of land or premises, chiefs, headmen and others shall report to the District medical officer, local authority or district administrator, as the case may be, the occurrence of-

- (a) any case of illness or death coming to their notice and suspected to be due to any formidable epidemic disease, or with a history or presenting symptoms or post-mortem appearances which might reasonably give grounds for such suspicion;
- (b) any condition of public health importance; or any occurrence which might reasonably lead to a condition of public health.

(2) Any person negligently failing to make such report shall be guilty of an offence and liable to a fine not exceeding level eight or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

#### **66. Local authorities to report notification of formidable epidemic diseases and conditions of public health importance by expeditious means**

Every local authority shall immediately report to the Chief Health Officer, by the most expeditious means, including instant messaging, text messaging or electronic mail, particulars of every notification received by such authority of-

- (a) a case or suspected case of any formidable epidemic disease; or
- (b) any condition of public importance.

#### **67. Powers of Minister where local authority fails adequately to deal with any formidable epidemic disease or condition or event of public health concern**

Whenever upon the report of the Chief Health Officer it appears to the Minister that an outbreak of a formidable epidemic disease or a disease suspected of being such, or a condition or event of public health concern has occurred or poses a threat within the district of a local authority and is not being investigated or dealt with efficiently and so adequately to safeguard public health, the Minister, notwithstanding any other provision of this Act, may inform the local authority of the measures which he or she considers should be taken in connection

therewith, and if the local authority fails or is for any reason unable forthwith to carry out such measures to his or her satisfaction, may authorise the Chief Health Officer or any other District health committee to take all necessary steps for dealing with the outbreak or condition or event and thereupon such officer or local authority shall, for the said purpose, possess all rights and powers of the local authority in default, subject to the obligations attaching to the exercise thereof, and any portion of the expenditure so incurred which is payable by the local authority may be recovered from the local authority in the manner described in [section 27 \(2\)](#).

#### **68. Regulations regarding formidable epidemic diseases and conditions or events of public health concern**

(1) Subject to the provisions of this Act, in the case of the occurrence or threatened outbreak of any formidable epidemic disease, condition or event of public health concern, the Minister may make regulations as to all or any of the following matters, namely-

- (a) the imposition and enforcement of quarantine and the regulation and restriction of public traffic and of the movements of persons;
- (b) the closing of schools or the regulation and restriction of school attendance;
- (c) the closing of churches and Sunday schools and restriction of gatherings or meetings for the purpose of public worship;
- (d) the regulation or restriction or, where deemed necessary, the closing of any place or places of public entertainment, recreation or amusement, or where intoxicating liquor is sold by retail, and the regulation or restriction, or, where deemed necessary, the prohibition, of the convening, holding or attending of entertainments, assemblies, meetings or other public gatherings;
- (e) the prevention and remedying of overcrowding or the keeping of any dwelling or other building or the contents thereof in a state of sanitation posing or likely to pose a public health risk;
- (f) the medical examination of persons who are suspected of being infected with, or who may have recently been exposed to the infection of, such disease, and of persons about to depart from any infected area, and the disinfection of their baggage and personal effects, and the detention of such persons until they have after such examination been certified to be free from any infectious disease and until their baggage and personal effects have been disinfected;
- (g) the keeping under medical observation or surveillance, or the removal, detention and isolation of persons who may have recently been exposed to the infection of, and who may be in the incubation stage of, such disease; the detention and isolation of such persons until released by due authority, the use of guards and force for that purpose, and, in case of absolute necessity, the use of firearms or other weapons, and the arrest with or without warrant of any person who has escaped from such detention or isolation;
- (h) the establishment of isolation hospitals and the removal and isolation of persons who are or are suspected to be suffering from any such disease, the accommodation, classification, care and control of such persons and their detention until discharged by due authority as recovered and free from infection, and the establishment, management and control of convalescent homes or similar institutions for the accommodation of persons who have recovered from any such disease;
- (i) inquiries into the cause of death of any person, apart from any inquiry by a magistrate under any other enactment; the ordering, when deemed necessary, of post-mortem examinations or of exhumations; the prohibition in special circumstances of the burial of any dead body except on a certificate by a medical officer appointed to grant such certificates or after compliance with any other specified conditions, the regulation of the mode of disposal, the times and places of burial of dead bodies and the manner of conducting removals and burials thereof;
- (j) the regulation and restriction and, if deemed necessary, the prohibition of the removal of merchandise or any article or thing into, out of or within any specified or defined area;
- (k) the provision of disinfecting plant and equipment, and the disinfection or, where disinfection is impossible, the destruction of any article or tiling, or the disinfection of any premises which are or are believed to be contaminated with the infection of such disease;
- (l) the inspection of premises and articles and the discovery and remedying of sanitary or other defects likely to favour the spread or render difficult the eradication of such disease;
- (m) the evacuation, closing, alteration or, if deemed necessary, the demolition or destruction of any premises the occupation or use of which is considered likely to favour the spread or render more difficult the eradication of such disease, and the definition of the circumstances under which compensation may be paid in respect of any premises so demolished or destroyed and the manner of fixing such compensation;
- (n) in the case of plague, the destruction of fleas and rodents and the removal or improvement of conditions likely to favour the harbourage or multiplication of rodents, and the disposal of the carcasses of rodents or other animals believed or suspected to have died of plague,

and such other matters as the Minister may deem necessary for preventing the occurrence of such disease or limiting or preventing the spread thereof or for its eradication, and, generally, for the better carrying out and



attaining the objects and purposes of this Part.

(2) Any person who contravenes any provision of regulations made in terms of [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level twelve or to imprisonment for a period not exceeding one year or to both such fine and such imprisonment.

(3) Regulations made under [subsection \(1\)](#) shall not apply to persons about to depart from Zimbabwe.

## **69. Appointment of epidemic committees**

(1) Where it is deemed desirable for the purpose of coordinating effort or otherwise for more effectively dealing with or preventing an outbreak of any formidable epidemic disease, the Minister may, by statutory instrument, constitute a committee to be known as "epidemic committee" for a defined area to discharge such functions and carry out such duties in connection with such outbreaks, and to administer so much of this Act as may be prescribed in such notice, and may, in like manner, make regulations regarding the appointment of officers of such committee, the conduct of its proceedings, the manner in which accounts shall be kept or any other matter relative to such committee.

(2) Where the area so defined includes wholly or partly the district or districts of one or more local authorities, the composition of an epidemic committee and the manner of allocating and defraying expenditure incurred by it shall be such as may be mutually agreed in advance between the Minister and local authority or authorities concerned or, failing such agreement, as the Minister may, subject to this Act, fix and determine.

(3) In the event of the occurrence or threatened outbreak of any formidable epidemic disease in any district for which the district administrator is the local authority, the Minister may constitute an advisory committee of three or more persons resident in the district to advise and assist the district administrator in connection therewith and such committee shall if the Minister declares by notice in the *Gazette* be responsible for-

- (a) organising the compulsory testing, screening and mandatory medical examination of targeted populations;
- (b) organising the notification and reporting of cases;
- (c) assisting partner disclosure;
- (d) providing proof of vaccination;
- (e) restricting movement; quarantine and contact tracing; and
- (f) providing vaccinations and treatment.

## **70. Advances to local authorities**

(1) The Minister may authorise the making of financial or material advances, on such terms and conditions as he or she may fix, to any local authority or epidemic committee for the purpose of dealing with any out-break of any infectious disease, and in default of repayment any such advance may be recovered from such local authority in the manner described in [section 27 \(2\)](#).

(2) The Minister may also authorise the making of financial or material advances, on such terms and conditions as he or she may fix, to any local authority to enable it to pay any proportion of the capital expenditure incurred by it in providing suitable hospitals or places of isolation for persons suffering from any infectious disease, and may in like manner recover any advances so made.

## **71. Refunds to local authorities**

The Minister may authorise-

- (a) the refund of one-half of the approved net cost actually and necessarily incurred by a local authority, or by two or more local authorities acting jointly, in providing and equipping an isolation hospital or other isolation accommodation for persons suffering from any infectious disease, or detained under medical observation because of exposure to the infection of any formidable epidemic disease:

Provided that the scheme as a whole and the plans, specifications and estimates in connection therewith shall be approved by the Minister before the expenditure or any liability thereof is incurred;

- (b) the refund of one-half of the approved net cost actually and necessarily incurred by a local authority, or by two or more local authorities acting jointly, in connection with the management and maintenance of an isolation hospital or other isolation accommodation and the maintenance and treatment therein or in any other hospital or place of isolation of persons suffering or suspected to be suffering from any infectious disease, or of persons detained therein under medical observation because of exposure to the infection of any formidable epidemic disease, such net costs being determined after deduction of any revenue;

- (c) the refund of two-thirds of the approved net cost actually and necessarily incurred by a local authority, or by two or more local authorities acting jointly or by an epidemic committee, in preventing, investigating, dealing with or suppressing any outbreak of any formidable epidemic disease or any outbreak suspected on reasonable grounds to be of any such disease, including, where necessary, the provision of temporary isolation hospital accommodation.

## PART V

### *Sexually Transmitted Diseases or Infections*

#### **72. Application of Part V**

This Part shall apply to all sexually transmitted diseases or infections except such diseases or infections as the Minister may specify by statutory instrument.

#### **73. Duties of medical practitioners**

(1) Every medical practitioner who attends or advises any patient in respect of any sexually transmitted disease or infection from which the patient is suffering shall-

- (a) direct the attention of the patient to the infectious nature of the disease and to the penalties prescribed by this Act for knowingly infecting any other person with such disease; and
- (b) counsel the patient to notify their sexual partner(s) and refer them for treatment; and
- (c) warn the patient against engaging in sexual activities unless and until he or she has been cured of such disease or is free from such disease in a communicable form; and
- (d) give to the patient such information relating to the prevention and treatment of sexually transmitted disease and to the duties and responsibilities of persons infected therewith as may be supplied to the medical practitioner by the Ministry; and
- (e) refer the person to any other person or authority able to provide services to treat the condition, including counselling services.

(2) Every medical practitioner who knows or has reason to believe that any person is infected with a sexually transmitted disease in a communicable form that is notifiable in terms of [section 46](#) and is not under treatment by a medical practitioner, or is not attending for medical treatment regularly and as prescribed by such medical practitioner, shall report the matter in writing to the Director health services or to the Government health officer.

(3) A medical practitioner who contravenes [subsection \(1\)](#) or [\(2\)](#) shall be guilty of an offence and liable to a fine not exceeding level four or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

#### **74. Duties of Director of health services and Government medical officers or health practitioners to report, and powers of district administrator**

(1) It shall be the duty of every Director health services and every Government medical officer or health practitioner in his or her official capacity who knows or has reason to believe that any person is infected with any sexually transmitted disease in a communicable form that is notifiable in terms of [section 46](#) and is not under treatment by a health practitioner, or is not attending for medical treatment regularly and as prescribed by such medical practitioner, to give written notice to such person of the requirements of this Act in regard to attendance for treatment of persons infected with sexually transmitted disease, and if thereafter such person does not comply with those requirements, to report the matter to the district medical officer.

(2) Upon receipt of any such report, the district medical officer shall make such further inquiry, or shall make such order or orders, or shall institute such proceedings, as he or she may deem necessary for the proper enforcement and for the attainment of the objects of this Part.

(3) An order under this section may require the person named therein-

- (a) to furnish a certificate by a health practitioner as to whether he or she is or is not infected with a sexually transmitted disease in a communicable form; or
- (b) to attend at a specified time and place for examination by a health practitioner named in the order; or
- (c) to attend regularly for medical treatment at times and at a place specified in such order for a specified time or until cured or free from the disease in a communicable form; or
- (d) to comply with such other requirements as the district administrator may deem necessary for the

proper safe-guarding of the health of such person and of the public health.

(4) Any person who fails to comply with any order made under this section shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

#### **75. Examination by medical practitioners**

(1) For any examination required to be carried out on a person in terms of this section, the person or, in the case of an incapacitated person, his or her representative, shall be informed that he or she has the right to elect to be examined only by a medical practitioner of a gender of his or her choice and his or her choice shall be respected.

(2) Where any order is made under this Part requiring the medical examination of any female over the age of twelve years and such female desires to be examined by a woman medical practitioner, such examination shall be made by a woman medical practitioner if one is reasonably available.

#### **76. Proceedings to be in camera and reports not to be published**

(1) Inquiries and proceedings before a district medical officer or any court of law under this Part shall be secret and conducted in camera, and the records thereof shall be kept in the manner and form prescribed, anything to the contrary notwithstanding in any other law.

(2) Any person publishing or divulging the name of any person dealt with under this Part or the nature of the charge or evidence or the results of such inquiries or proceedings or the contents of any report, certificate, document or order in connection therewith or any other matter coming to his or her knowledge in connection with anything arising under this Part to any unauthorised person, and any person who, without lawful justification or excuse, falsely alleges that any person is infected or has been infected with a sexually transmitted disease, shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

#### **77. Contributions and facilities for diagnosis and treatment of infectious diseases**

(1) The provisions of this section apply to the diseases provided for under Parts IV and V.

(2) The Minister, subject to regulations which he or she is hereby authorised to make, and which may deal with the procedure to be followed, the conditions to be complied with and any other matters necessary for the proper carrying out of this section, may-

- (a) provide in Government or other laboratories for the carrying out of bacteriological or other laboratory examinations for the purpose of ascertaining whether any person is infected with or is cured of any infectious disease, or is free from any such disease in a communicable form. Such examinations shall be free of charge;
- (b) make provision for the free treatment and, where necessary, the accommodation and maintenance of persons infected with an infectious disease. Such provision shall be made as far as practicable in connection with general or isolation hospitals or similar institutions by arrangement with the Minister or the hospital, local or other authority concerned;
- (c) supply, free of charge, such remedies as may be specified from time to time in the *Gazette* for use in the treatment of persons infected with infectious disease who are treated as free patients at any public institution;
- (d) refund to any local authority, or to two or more local authorities acting jointly, two-thirds of the net cost of any approved scheme for providing treatment, including maintenance and accommodation, where necessary, for persons who are infected with infectious disease;
- (e) establish and maintain special accommodation for the maintenance and treatment of persons infected with infectious disease who are liable to detention;
- (f) make grants-in-aid, subject to such conditions as the Minister may in each case fix and determine, to local authorities or other public bodies or voluntary societies or associations for the purpose of preventing the spread of or securing the proper treatment of persons infected with infectious disease.

### PART VI

#### *International Health Regulations*

## **78. Publication of International Health Regulations and amendments thereto**

(1) The International Health Regulations (2005), and any amendment thereto shall be published in a statutory instrument soon after Zimbabwe becomes a party to such amendment.

(2) Every amendment to the International Health Regulations to which Zimbabwe becomes a party shall be laid before Parliament for adoption or enactment on one of the thirty days on which Parliament next sits after the publication of the amendment in a statutory instrument.

## **79. Power to carry out and apply International Health Regulations**

The President may-

- (a) by statutory instrument, designate any airport or ground crossing in Zimbabwe in terms of the International Health Regulations and may, by like notice, cancel any such designation of an airport or ground crossing;
- (b) do such other acts as he or she may deem necessary or expedient for giving effect to the terms of the International Health Regulations or any regulations which have, in terms of [section 81](#), been applied to infectious diseases to which the International Health Regulations do not apply.

## **80. Regulations**

(1) The President may by regulation-

- (a) make such provision as appears to him or her necessary or expedient for the carrying out of and giving effect to the International Health Regulations;
- (b) subject to the International Health Regulations, impose fees and provide for the recovery of any expenditure incurred in giving effect to the International Health Regulations.

(2) Any regulations made under [subsection \(1\)](#) may prescribe penalties for any contravention thereof, but no such penalty shall exceed a fine of level eight or imprisonment for a period of one year or both such fine and such imprisonment.

## **81. Power to apply regulations to any infectious disease**

(1) The President may, by proclamation, apply to any infectious disease to which the International Health Regulations do not apply, any regulations made under [section eighty three](#) subject to such exceptions, adaptations and modifications as he or she may deem necessary or expedient and as shall be specified in such proclamation.

(2) A proclamation under [subsection \(1\)](#) may be amended or revoked by subsequent proclamation.

## **82. Jurisdiction**

An offence under any regulation shall, with regard to the jurisdiction of a court to try the offence, be deemed to have been committed in any place where the accused happens to be.

## **83. National Focal Point for International Health Regulations**

The Chief Health Officer shall be the National Focal Point for International Health Regulations, responsible for the functions set out in the regulations.

## PART VII

### *Non-Communicable Diseases*

## **84. Prevention and control of non-communicable diseases**

(1) For the purposes of this section, a "non-communicable disease" means a medical condition or disease which is not an infectious disease.

(2) The Minister must take measures to prevent and control non communicable diseases by-

- (a) working in partnership with all relevant stakeholders to reduce the incidence and mortality from non-communicable diseases;
- (b) introducing evidence based behavioral interventions to reduce the acquisition and increase health literacy amongst the population to reduce the main modifiable risk factors for non-communicable diseases;
- (c) developing multi-sectoral public policies that create sustainable health promoting environments that enable individuals, families and communities to make healthy choices and lead healthy lives;
- (d) developing and implementing policies, strategies, plans and evidence based guidelines at national, provincial and district levels in and across government departments to prevent and control non-communicable diseases through preventive, health promoting, curative, rehabilitative and palliative services;
- (e) increasing prevention screening and control programmes for non-communicable diseases;
- (f) establishing comprehensive surveillance mechanisms, health information systems and dissemination processes to assist policy, planning and management of prevention and control;
- (g) developing, encouraging and supporting research and innovation in non-communicable diseases to improve understanding of the burden, determinants, causes and consequences; prevention, screening and control of non-communicable diseases in all age groups;
- (h) increasing public awareness of the early signs and symptoms of non-communicable diseases in order to promote timely health seeking behavior;
- (i) improving the quality of food available in Zimbabwe by means of inter-sectoral collaborations;
- (j) developing and strengthening human capacity for chronic disease research and monitoring; and
- (k) increasing human resources for detection, management, prevention and control of non-communicable diseases and build links with traditional and complementary healers.

## **85. Minister to declare non communicable diseases and conditions of public importance**

The Minister may by statutory instrument declare any disease or condition to be a non-communicable disease or condition of public health importance and in respect of that disease or condition, prescribe special measures to achieve any of the things referred to in [section 84](#).

### PART VIII

#### *Water and Food Supplies*

## **86. Duty of local authority to furnish water supplies**

(1) Every local authority, shall provide and maintain, or cause to be provided and maintained as far as may be reasonably possible, a sufficient supply of wholesome water for drinking and domestic purposes, whether such supplies be derived from sources within or beyond its district, and for such purposes it may purchase or otherwise acquire any land, water works, springs, fountains, water rights and premises, or rights incidental thereto, within or outside its district, and may construct, equip and maintain any works necessary for collecting, pumping or storing water.

(2) Any local authority which fails or refuses to comply with, [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level fourteen.

(3) Where such water supply has been provided, the local authority may by regulation compel the owner of every occupied premises within its district to the boundaries of which the local authority has brought such water to lay on such water to any such premises, and may fix a minimum charge for such water, whether used by the occupier or not; such charges shall be payable by the occupier, except in cases where the water is not laid on, when such charges shall be payable by the owner of the premises.

(4) In the event of the water supply of any district being undertaken by any person or company other than a local authority under any lawful contract or legal agreement whatsoever, this Part shall apply, with necessary changes, to such person or company in respect of such water supply as if such person or company were the local authority.

(5) The standards of water portability under the Water Act [*Chapter 20:24*] and the Environmental Management Act [*Chapter 20:27*] shall apply to any question concerning the standards and potability of water for the purposes of this Part.

## **87. Water works not to be commenced until approved by State**

(1) No water works may be commenced and no property purchased or acquired by a local authority until estimates and plans have been submitted and approved by the Minister.

(2) Notice shall be given of any proposed scheme for the purpose of construction of works for the supply of water by the local authority by publication in the *Gazette*, and such notice shall describe such proposed scheme and state the hour and place where the plans, estimates and other particulars relating to the same may be inspected.

(3) If any person, who is injuriously affected by such scheme, objects to the same and transmits his or her objections in writing to the Minister within one month after the date of the last publication of the notice aforesaid, the Minister may appoint a committee to inquire into the expediency of sanctioning the proposed scheme and to hear any such objections thereto and to report to him or her thereon, and on receiving such report the Minister may make an order disallowing the proposed scheme or allowing it with such modification, if any, as he or she may think fit.

(4) Any local authority which fails or refuses to comply with, [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level fourteen.

## **88. Local authority to maintain existing water supplies in good order**

(1) All water works vested in any local authority shall be maintained by the local authority in a condition acceptable for the effective distribution and supply of potable water for drinking and domestic purposes.

(2) No local authority, assigned such function by any enactment, shall deny an institution or individual access to potable water for drinking and domestic purposes, for whatever reason.

(3) Any local authority who fails to comply with [subsections \(1\)](#) and [\(2\)](#) shall be guilty of an offence and liable to a fine not exceeding level fourteen or to imprisonment for a period not exceeding two years or to both such fine and such imprisonment.

## **89. Powers to inspect water supplies**

(1) The Chief Health Officer or any person duly authorised by him or her or any health practitioner of any local authority may at all times enter any water works or gathering ground and inspect and examine any sources of water supply or any such water works, and take such sample of water as he or she may deem fit.

(2) Any person who obstructs such health practitioner or any other person as aforesaid in such duty shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

## **90. Regulations**

(1) The Minister may make, and impose on local authorities and administrators, the duty of enforcing regulations in respect of defined areas-

- (a) prohibiting bathing in, and prohibiting or regulating the washing of clothes or other articles or of animals in, or in any place draining into, any such water supply as is in [section 89](#) mentioned;
- (b) prohibiting or regulating the erection of dwellings, sanitary conveniences, stables, cattle kraals, pig sties, ostrich pens, dipping tanks, factories or other works likely to entail risk of harmful pollution of any such water supply, or prohibiting or regulating the deposit in the vicinity of, or in any place draining into, any such supply of any manure, filth or noxious or offensive matter or thing;
- (c) and, generally, for preventing the pollution so as to endanger health of any supply of water which the public within its district has a right to use and does use for drinking or domestic purposes and for purifying any such supply which has become so polluted, and for preventing the pollution of streams so as to be a nuisance or a danger to health;
- (d) quality monitoring of potable water for drinking and domestic purposes.

(2) Regulations under [subsection \(1\)](#) shall be made with due regard to the interests of agricultural or any other industries.

(3) Any regulations made under [subsection \(1\)](#) may prescribe penalties for any contravention thereof, but no such penalty shall exceed a fine of level eight or imprisonment for a period of one year or both such fine and such imprisonment.

## **91. Sale of unwholesome, diseased or contaminated articles of food prohibited**

(1) No person shall sell, or shall prepare, keep, transmit or expose for sale, any milk, dairy produce, meat, water or other article of food which is not clean, wholesome, sound and free from any disease or infection or contamination; and no person shall collect, prepare, manufacture, keep, transmit or expose for sale any such article without taking adequate measures to guard against or prevent any possible infection or contamination thereof.

(2) Any person who contravenes [subsection \(1\)](#), shall be guilty of an offence and liable to a fine not exceeding level fourteen or to imprisonment for a period not exceeding two years or to both such fine and such imprisonment.

## **92. Regulations regarding sale of milk and articles of food**

(1) The Minister may make regulations regarding all or any of the following matters-

- (a) the inspection of animals intended for human consumption, and of slaughter-houses, and of factories, stores, shops and other places where any article of food is manufactured or prepared or kept;
- (b) the taking and examination of samples of meat or other articles of food, and the removal or detention, pending examination or inquiry, of animals or articles which are suspected of being diseased or unsound or unwholesome or unfit for human consumption, and the seizure and destruction or treatment or disposal so as not to endanger health of any such article which is found to be unwholesome or unsound or diseased or infected or contaminated, and of diseased animals sold or intended or offered or exposed for sale for human consumption; such regulations may empower a Director health services or an environmental health officer or, in the case of meat, an approved veterinary surgeon or an environmental health officer to detain, seize or destroy any diseased, unsound or unwholesome article of food, but shall not confer on any other person any power beyond that of detention of such article for the purpose of examination by a Director health services, an environmental health officer or, in the case of meat, an approved veterinary surgeon or environmental health officer;
- (c) the inspection and examination of, and the regulation, inspection and supervision of the manufacture, preparation, storage, keeping and transmission of, any article of food intended for sale or for export from Zimbabwe, and the prohibition of the manufacture, preparation, storage, keeping, transmission, sale or export from Zimbabwe of any such article which is, or contains an ingredient which is, diseased or unsound or unfit for human consumption, or which has been exposed to any infection or contamination;
- (d) the establishment, locality, supervision, equipment, maintenance and management of slaughter-houses and the disposal of the waste products of slaughtering and the inspection of slaughter-houses and the animals therein and prohibiting, restricting or regulating the slaughter of diseased animals: prescribing the methods which may be used for the killing or slaughter of animals intended for human consumption, whether such killing or slaughter takes place at slaughter-houses or elsewhere; and prohibiting the killing or slaughter of such animals except by such methods as may be prescribed; and such regulations may provide an exemption from the provisions thereof for the slaughter of animals by the Jewish or Islamic method, subject to such conditions as may be prescribed;
- (e) prohibiting the importation into Zimbabwe of any article of food which is not clean, wholesome, sound and free from any disease or infection or contamination, and the seizure and disposal by destruction or otherwise of any such article so imported;
- (f) the preparation, manufacture or importation and the storage and sale of or trade in articles of food which are packed in air-tight receptacles or otherwise preserved, and the marking of any such article with the date of manufacture or preparation;
- (g) prohibiting the importation, sale, possession or use of vessels which are intended to contain milk or any liquid or semi-solid article of food and which are rusty or defectively soldered or are made of material containing in any part likely to come in contact with the contents lead or other poisonous or injurious substance in such proportion as to be likely to cause injury or danger to health, and fixing the maximum proportions of such substances which may be used in such vessels;
- (h) the keeping of swine and the limitation and suppression of the disease known as cysticercus disease or pig measles or any similar disease in animals;
- (i) and, generally, for the better carrying out and the attaining of the objects and purposes of this Part.

(2) Any regulations made under [subsection \(1\)](#) may prescribe penalties for any contravention thereof, but no such penalty shall exceed a fine of level eight or imprisonment for a period of one year or both such fine and such imprisonment.

## **93. Minister's powers to make orders**

(1) The Minister may make orders-

- (a) requiring the medical examination and training of any person in any premises in which any article of

food intended for sale is collected, kept, sold or exposed for sale, or of any person who has been engaged in the collection, preparation, keeping, conveyance or distribution of any such article;

- (b) prohibiting the employment in connection with the collection, preparation, storage, distribution or sale of any article of food of any person who has proved to be a carrier of the infection of typhoid or enteric fever or other infectious disease.

(2) Any person who contravenes or fails to comply with an order made in terms of [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

## PART IX

### *Infant and Young Child Nutrition*

#### **94. Interpretation in Part**

In this Part-

**"designated product"** means any-

- (a) infant formula; (0-6 months); or
- (b) follow-up formula (6 months onwards), beverage, milk and other food for consumption by infants and young children whether industrially formulated or otherwise specifically targeted for infants and young children; or
- (c) any other product marketed or otherwise represented as being suitable for feeding infants and young children; or
- (d) feeding item; or
- (e) items generally known as pacifiers; or
- (f) other product which the Minister may, from time to time, declare to be a designated product;

**"feeding item"** means a bottle, teat, measuring device or other utensil or article designed to be used in preparing infant and young child food or feeding infant and young child food to infants;

**"health worker"** means a person who-

- (a) is employed in a hospital, nursing-home, clinic, surgery, creche, nursery or other institution wherein health care, treatment or attention is provided for pregnant women, mothers or infants; or
- (b) is a medical practitioner or is employed by a medical practitioner in connection with his practice as such; or
- (c) performs any work, whether as a professional or non-professional and whether paid or not, in connection with the health of pregnant women, mothers or infants;

**"infant"** means a child under the age of twelve months;

**"infant and young child food"** means any food, including dairy produce as defined in the Dairy Act [*Chapter 18:08*] which is-

- (a) sold for consumption by infants and or young children; or
- (b) represented by its manufacturer or seller as being suitable for consumption by infants and/or young children;

**"label"** means any brand, tag, mark, pictorial or other descriptive matter, written, printed, stencilled, marked, embossed, attached or otherwise that appears on or is otherwise attached to a container of a designated product;

**"marketing"**, in relation to a designated product, means any method of introducing or selling the designated product, including promoting, distributing, advertising, distribution of samples or providing public relations and informational services;

**"container or package"** means anything in or by which any designated product is covered, enclosed or packaged for sale as a retail unit;

**"sell"** includes for the purposes of sale-

- (a) to offer, keep, possess, expose, display, transmit, consign, convey; or
- (b) deliver; or



(c) to authorise, direct or allow a sale; or

(d) to barter, exchange, supply or dispose of for any consideration, direct or indirect;

"**youngchild**" means a child between the age of twelve and thirty six months.

## 95. Regulations in respect of infant and young child nutrition

(1) The Minister may make regulations in respect of all or any of the following matters-

- (a) encouraging and promoting the breast-feeding of infants;
- (b) standards of composition, quality or other properties of any infant or young child food or feeding item, which standards may be prescribed by reference to any publication or document, whether published inside or outside Zimbabwe;
- (c) the sampling and testing of infant and young child food and feeding items;
- (d) regulating or restricting the marketing and sale of infant and young child food and feeding items, and in that connection-
  - (i) regulating the packages or containers in which or from which any infant and young child food or feeding items may be sold,
  - (ii) regulating the labels that may be attached to or marked on packages or containers of any infant or young child food or feeding item, and prescribing the matter to be or not to be contained on such labels,
  - (iii) regulating, restricting or prohibiting the marketing of any infant or young child food or feeding item to the public generally or any section of the public,
  - (iv) restricting or prohibiting any method of marketing any infant and young child food or feeding item,
  - (v) regulating, restricting or prohibiting the giving or distribution of donations or samples of infant and young child food or feeding items;
- (e) regulating, restricting or prohibiting the production, sale, distribution or display of informational or educational material relating to infant and young child food, feeding items or the feeding and nutrition of infants and young children;
- (f) regulating or restricting the promotion by health workers of the use of any infant and young child food or feeding item;
- (g) regulating, restricting or prohibiting-
  - (i) the offering or giving, directly or indirectly, by manufacturers or sellers of infant and young child food or feeding items, of salaries, wages, gifts or other benefits to health workers, and
  - (ii) the receipt by health workers of salaries, wages, gifts or benefits referred to in [subparagraph \(i\)](#);
- (h) the establishment of one or more committees to approve labels, packages, informational, educational or promotional material and any other matter or thing that may be regulated or restricted in terms of this Part, and the prohibition of the marketing, sale or use of any such label, package or containers, informational, educational or promotional material, matter or thing that has not been so approved;
- (i) powers of entry, search, seizure, inspection and investigation for the purposes of preventing, detecting or investigating offences in terms of the regulations;
- (j) the furnishing of returns, particulars and other information by persons who manufacture, market or sell infant and young child food or feeding items;
- (k) generally, any matter which, in the opinion of the Minister, will encourage and promote the proper feeding and nutrition of infants and young children.

(2) Regulations made in terms of [subsection \(1\)](#) may provide penalties for contraventions thereof:

Provided that no such penalty shall exceed a fine of level eight or imprisonment for a period of one year or both such fine and such imprisonment.

## PART X

### *Slaughter Houses*

## 96. Interpretation in Part

In this Part-

"**slaughter-house**" includes any abattoir, knackers' yard, or place set apart for slaughtering animals, the meat of which is intended for human consumption.

#### **97. Licensing of slaughter-houses by local authorities**

(1) Subject to any regulations, a local authority may license such slaughter-houses as it from time to time thinks proper within its district.

(2) Every licence issued in terms of this section shall expire on the 31st December of the year for which it is issued.

(3) Nothing in this section contained shall affect the right of a municipal council or town council to establish, erect and maintain its own slaughter-house.

#### **98. Local authority may refuse licences and appeals against refusals**

(1) A local authority may refuse to grant or renew a licence for a slaughter-house.

(2) Any person who is aggrieved by the refusal of a local authority to grant or renew a licence for a slaughter-house may, within thirty days of such refusal, appeal in writing to the Minister.

(3) Upon such appeal the Minister may require the local authority to furnish him or her with the reasons for its action.

(4) When any such appeal is noted against the refusal of the local authority to renew a licence, the Minister may, in his or her discretion, authorise the continued use of the slaughter-house pending his or her decision on such appeal.

(5) The Minister may, after due inquiry, make such order in the matter as he or she may deem fit and the local authority shall comply with any such order.

#### **99. Licence required for use of premises as slaughter-house**

(1) No person shall use any premises as a slaughter-house within the district of a local authority unless he or she is personally licensed in respect of those premises.

(2) Any person who contravenes [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

#### **100. Cancellation of licence**

If the holder of a licence for a slaughter-house is convicted of contravening this Act, the local authority which issued the licence may forthwith cancel the licence held by such person.

#### **101. Prohibition against sale of meat which has not been slaughtered in a slaughter-house**

(1) No person shall sell meat or viscera obtained from animals and birds unless the animals and birds have been slaughtered in a registered abattoir and have been inspected by a meat inspector employed by a local authority and unconditionally passed as suitable for human consumption.

(2) Any person who acts in contravention of a prohibition issued in terms of [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

#### **102. Inspection of meat and fees for inspection**

(1) Subject to [subsection \(4\)](#), a local authority in co-ordination with the ministry of health and veterinary department may inspect any meat slaughtered at a slaughter-house licensed by it or any meat intended for sale within its district and may charge fees at a rate approved by the Minister for such inspection:

Provided that if inspection fees have been charged in respect of any inspection of meat by another local authority or inspector appointed in terms of regulations or by such competent authority outside the borders of

Zimbabwe as may be prescribed by regulation, no further inspection fees shall be charged.

(2) Subject to [subsection \(3\)](#), the Minister may in regulations-

- (a) provide for the compulsory inspection of-
  - (i) animals which are slaughtered at slaughter-houses specified in the regulations,
  - (ii) the carcasses of and the meat obtained from animals referred to in [subparagraph \(i\)](#);
- (b) provide for the appointment of officers of the Public Service as inspectors for the purposes of the regulations;
- (c) prescribe the fees which shall be payable to the State for the inspection of animals, carcasses and meat referred to in [paragraph \(a\)](#), the circumstances in which the fees shall be paid and the persons by whom the fees shall be paid.

(3) The Minister shall not in regulations made in terms of [subsection \(2\)](#) specify a slaughter-house in respect of which a municipal council or town council is exercising the powers of inspection conferred upon it by [subsection \(1\)](#) unless he or she is requested to do so by the municipal council or town council.

(4) No fees shall be charged for the inspection by a municipal council or town council in terms of [subsection \(1\)](#) of meat slaughtered at a slaughter-house specified in regulations made in terms of [subsection \(2\)](#).

## PART XI

### *Sanitation and Housing*

#### **103. Duties of local authorities**

(1) It shall be the duty of every local authority to take all lawful, necessary and reasonably practical measures for maintaining its district at all times in a clean and sanitary condition, and for preventing the occurrence therein of, or for remedying or causing to be remedied, any nuisance or condition liable to be injurious or dangerous to health, and to take proceedings at law against any person causing or responsible for the continuance of any such nuisance or condition.

(2) It shall be the duty of every local authority to take all lawful, necessary and reasonably practicable measures for preventing or causing to be prevented or remedied all conditions liable to be injurious or dangerous to health arising from the erection of or occupation of unhealthy dwellings or premises or the erection of dwellings or premises on unhealthy sites or on sites of insufficient extent, or from overcrowding, or from the construction, condition or manner of use of any factory or trade premises, and to take proceedings under the law or regulations in force in its district against any person causing or responsible for the continuance of any such condition.

(3) Any local authority which does not comply with this section shall be in default and liable to a level fourteen civil penalty.

#### **104. Nuisances prohibited**

(1) No person shall cause a nuisance, or shall suffer to exist on any land or premises owned or occupied by him or her or of which he or she is in charge, any nuisance or other condition liable to be injurious or dangerous to health.

(2) The following shall be deemed to be nuisances liable to be dealt with in the manner provided in this Part-

- (a) any dwelling or premises which is or are of such construction or in such a state or so situated or so unsanitary or so infected with pests and parasites as to be injurious or dangerous to health, or which is or are liable to favour the spread of any infectious disease;
- (b) any stream, pool, lagoon, ditch, gutter, watercourse, sink, cistern, sanitary convenience, urinal, cesspool, cesspit, drain, sewer, dung pit, slop-tank, ash pit or manure heap so foul or in such a state or so situated or constructed as to be offensive or to be injurious or dangerous to health; or any collection of water which may serve as a breeding pool for mosquitoes;
- (c) any well or other source of water supply or any cistern or other receptacle for water, whether public or private, the water from which is used or is likely to be used by man for drinking or domestic purposes or in connection with any dairy or milk-shop, or in connection with the manufacture or preparation of any article of food intended for human consumption which is polluted or otherwise liable to render any such water injurious or dangerous to health;
- (d) any stable, kraal, cow-shed or other building or premises used for the keeping of animals or birds which is so constructed, situated, used or kept as to be offensive or injurious or dangerous to health;
- (e) any accumulation or deposit of refuse, offal, manure or other matter whatsoever which is offensive or

which is injurious or dangerous to health;

- (f) any dwelling which-
  - (i) is so overcrowded as to be injurious or dangerous to the health of the inmates, or
  - (ii) does not conform with any regulations or by-laws made under any Act and in force in the area as regards-
    - (A) air space or floor space; or
    - (B) lighting or ventilation; or
    - (C) sanitary conveniences; or
    - (D) ablution facilities; or
    - (E) cooking facilities;
- (g) any public building which is so situated, constructed, used or kept as to be unsafe or injurious or dangerous to health;
- (h) any occupied dwelling for which such a proper, sufficient and wholesome water supply is not available within a reasonable distance as under the circumstances it is possible to obtain;
- (i) any trade premises not kept in a cleanly state and free from offensive smells arising from any drain, sanitary convenience or urinal, or not ventilated so as to destroy or render harmless and inoffensive as far as practicable any gases, vapours, dust or other impurities generated, or so overcrowded or so badly lighted or ventilated as to be injurious or dangerous to the health of those employed therein;
- (j) any trade premises causing or giving rise to smells or effluvia which are offensive or which are injurious or dangerous to health;
- (k) any area of land kept or permitted to remain in such a state as to be offensive or liable to cause any infectious, communicable or preventable disease or injury or danger to health;
- (l) any chimney, not being the chimney of a private dwelling, sending forth smoke in such quantity or in such manner as to be offensive or injurious or dangerous to health;
- (m) any cemetery, burial place or place of sepulchre so situated or so crowded or otherwise conducted as to be offensive or injurious or dangerous to health;
- (n) any other condition whatsoever, which is offensive, injurious or dangerous to health.

## 105. Notice to remove nuisance

(1) In this section-

**"author of a nuisance"** means the person by whose act, default or sufferance the nuisance is caused, exists or is continued, whether he or she is an owner or occupier or both owner and occupier, or any other person.

(2) The local authority, if satisfied of the existence of a nuisance shall serve a notice on the author of the nuisance, or if he or she cannot be found, then on the occupier or owner of the dwelling or premises on which the nuisance arises or continues, requiring him or her to remove it within the time specified in the notice and to execute such works and do such things as may be necessary for that purpose, and if the local authority thinks it desirable, but not otherwise, specifying any works to be executed to prevent a recurrence of the said nuisance:

Provided that-

- (i) where the nuisance arises from any want or defect of a structural character, or where the dwelling or premises are unoccupied, the notice shall be served on the owner,
- (ii) where the author of the nuisance cannot be found and it is clear that the nuisance does not arise or continue by the act or default or sufferance of the occupier or owner of the dwelling or premises, the local authority shall itself remove the same, and may do what is necessary to prevent the recurrence thereof.

(3) If the person on whom a notice to remove a nuisance has been served as aforesaid fails to comply with any of the requirements thereof within the time specified, or if the nuisance, although removed since the service of the notice, is in the opinion of the local authority likely to recur on the same premises, the local authority shall cause a complaint relating to such nuisance to be made before a magistrate, and such magistrate shall thereupon issue a summons requiring the person on whom the notice was served to appear before his or her court.

(4) If the court is satisfied that the alleged nuisance exists or that, although removed, it is likely to recur on the same premises, the court shall make an order on the author thereof, or the occupier or owner of the dwelling or premises, as the case may be, requiring him or her to comply with all or any of the requirements of the notice, or otherwise to remove the nuisance within a time specified in the order and to do any works necessary for that purpose, or an order prohibiting the recurrence of the nuisance and directing the execution of any works necessary

to prevent the recurrence, or an order both requiring the removal and prohibiting the recurrence of the nuisance.

(5) The court may by such order impose a fine not exceeding level seven on the person on whom the order is made, and may also give directions as to the payment of all costs incurred up to the time of the hearing or making of the order for the removal or prohibition of the nuisance.

(6) Before making an order the court may, if it thinks fit, adjourn the hearing or further hearing of the summons until an inspection, investigation or analysis in respect of the nuisance alleged has been made by some competent person.

(7) Where the nuisance proved to exist is such as to render a dwelling unfit, in the judgment of the court, for human habitation, the court may issue a closing order prohibiting the use thereof as a dwelling until in its judgment the dwelling is fit for that purpose; and may further order that no rent shall be due or payable by or on behalf of the occupier of that dwelling in respect of the period in which the closing order exists; and on the court being satisfied that it has been rendered fit for use as a dwelling, the court may determine the closing order, and by a further order declare the dwelling habitable, and from the date thereof such dwelling may be let or inhabited. Notwithstanding any such last-mentioned order, further proceedings may be taken in accordance with this section in respect of the same dwelling in the event of any nuisance occurring or of the dwelling being again found to be unfit for human habitation.

#### **106. Local authorities failing to deal with nuisances**

(1) The chief health officer or any environmental health officer of the Ministry, if satisfied that a local authority has caused or allowed to exist on any land or premises in its area of jurisdiction any nuisance or other condition that is or is likely to be injurious or dangerous to public health, shall serve a notice on the local authority concerned requiring it to remove the nuisance within the time specified in the notice and execute such works and do such things as may be necessary for that purpose.

(2) If the local authority on which a notice to remove a nuisance has been served fails to comply with any of the requirements thereof within the time specified, or if the nuisance, although removed since the service of the notice, is, in the opinion of the chief health officer or environmental health officer, likely to recur on the same land or premises, the chief health officer or environmental health officer shall cause a complaint relating to such nuisance to be made before a magistrate and such magistrate shall thereupon issue a summons requiring the Director health services of the local authority on which the notice was served to appear before his or her court on behalf of the local authority, and 105 (4) to (7) shall apply to the local authority as they apply to a person referred to in [subsection \(1\)](#) of that section.

#### **107. Penalties in relation to nuisances**

(1) Any person who fails to obey an order to comply with the requirements of the local authority, or otherwise to remove the nuisance, shall, unless he or she has satisfied the court that he or she has used all diligence to carry out such order, be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment; and any person wilfully acting in contravention of a closing order issued under [section 105](#) shall be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

(2) The local authority may in such a case enter the premises to which any such order relates and remove the nuisance and do whatever may be necessary in the execution of such order, and recover in any competent court the expenses incurred by it from the person on whom the order is made.

(3) Any local authority that fails to obey an order to comply with the requirements of the Secretary or health inspector or otherwise to remove the nuisance, shall, unless it has satisfied the court that it has used all diligence to carry out such order, be guilty of an offence and liable to a fine not exceeding level ten for every day during which the default continues.

(4) The Chief Health Officer or health inspector may in such a case enter the premises to which any such order relates and remove the nuisance and do whatsoever may be necessary to effect such order and recover the expenses incurred by him or her from the local authority on whom the order was served.

#### **108. Court may order local authority to execute works in certain cases**

Whenever it appears to the satisfaction of the court that the person by whose act or default the nuisance arises or that the owner or occupier of the premises is not known or cannot be found, the court may at once order the local authority to execute the works thereby directed, and the cost of executing the same shall be a charge on the property on which the said nuisance exists.

#### **109. Examination of premises**

The local authority or any of its officers or, on the order of a district administrator, any police officer may at all reasonable times enter any building or premises for the purpose of investigating as to the existence of any nuisance therein; and the local authority or any of its officers may, if necessary, open up the ground of such premises and cause the drains to be tested or such other work to be done as may be necessary for the effectual examination of the said premises:

Provided that if no nuisance is found to exist the local authority shall restore the premises at its own expense.

#### **110. Persons making complaint of nuisance**

(1) Any three persons who allege that a nuisance exists may notify the allegation to the local authority, supported by certificates of two medical practitioners, if two or more are resident in the district, otherwise by the certificate of one medical practitioner, and if the local authority fails within a reasonable time to cause the nuisance to be removed such persons may notify the Chief Health Officer or any health inspector of the Ministry to cause the nuisance to be removed in terms of [section 105](#), and if the chief health officer or environmental health officer fails within a reasonable time to cause the nuisance to be removed shall cause the complaint relating to such nuisance to be made before a magistrate in terms of [section 105 \(4\)](#), thereupon the like proceedings shall be had with the like incidents and consequences as to making of orders, penalties for disobedience of orders and otherwise as in the case of a complaint relating to a nuisance made by the local authority:

Provided that the court may authorise any police officer or any other person to do all the necessary acts for executing an order made under this section, and to recover the expenses from the person on whom the order is made in a summary manner.

(2) Any police officer or other person authorised under this section shall have the like powers as if he or she were an officer of the local authority.

(3) Where the court is satisfied that the person making a complaint under this section had reasonable grounds for doing so, the court may, when making an order for the removal of the nuisance, also order the local authority to pay any expenses or costs incurred by such person instead of ordering the author of the nuisance to pay the same. The court may likewise order any person whose complaint appears to it to be frivolous or vexatious to pay the costs and expenses incurred by the person who has answered the complaint.

#### **111. Demolition of unfit dwellings**

(1) Where under [section 103 \(2\)](#) a nuisance is proved to exist with respect to a dwelling and if the court is satisfied that such dwelling is so dilapidated, or so defectively constructed, or so situated, that repairs to or alterations of the same are not likely to remove the nuisance and make such dwelling fit for human habitation, the court may order the owner thereof to commence to demolish the dwelling and any other structures on the premises on or before a specified day, being at least one month from the date of issuing the order, and to complete the demolition and to remove the materials which comprised the same from the site before another specified day.

(2) The court shall give notice to the occupier of a dwelling in respect of which such an order has been issued requiring him or her to move there from within a time to be specified in such notice, and if any person fails to comply with such notice or enters the dwelling or premises after the date fixed by the court for the commencement of the demolition thereof, except for the purpose of demolition, he or she shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

(3) If any person fails to comply with such an order for demolition he or she shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment, and the local authority may cause the dwelling and any other structures on the premises to be demolished, and may recover from the owner the expense incurred in doing so after deducting the net proceeds of the sale of the materials which the local authority may sell by auction.

(4) No compensation shall be payable by the local authority to the owner or occupier of any dwelling or other structure in respect of the demolition thereof as aforesaid, and from the date of the demolition order no rent shall be due or payable by or on behalf of the occupier in respect of such dwelling or structure.

#### **112. Prohibitions in respect of back-to-back dwellings and rooms without through ventilation**

(1) Within every urban area, and also within any rural area to which the Minister may, by statutory instrument, apply this section, it shall not be lawful for any person-

- (a) to erect any dwelling constructed on the back-to-back system; or
- (b) to erect any room intended to be used as a sleeping or living or work room which is not sufficiently lighted by a window or windows of a total area of not less than one-twelfth of the floor area, and sufficiently ventilated by two or more ventilation openings or by windows capable of being wholly or

partly opened, such windows or openings being so placed as to secure through or cross ventilation;  
or

- (c) to erect any dwelling on made ground containing street sweepings, refuse, rubbish or other matter liable to decomposition until the approval of the local authority has been obtained and until also such measures for safeguarding health have been taken as the local authority may require; or
- (d) to let or use for habitation any dwelling or room erected anywhere in contravention of [paragraph \(a\)](#), [\(b\)](#) or [\(c\)](#).

(2) Any person who contravenes [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level six or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

### **113. Health care waste management**

(1) The Ministry shall prescribe for the management of healthcare waste in all health care delivery institutions.

(2) Pursuant to [subsection \(1\)](#) the Minister may make regulations on health care waste management with regard to hazardous substances and articles of public health importance.

### **114. Sanitation technologies**

The responsibility to approve and monitor the implementation of sanitation technologies for disposal of human excreta and other hygiene enabling technologies shall be with the Ministry responsible for health.

### **115. Regulations**

(1) The Minister may make regulations, and may confer powers and impose duties in connection with the carrying out and enforcement thereof on local authorities, district administrators and district officers, owners and others, as to-

- (a) the inspection of land, dwellings and buildings, and for securing the keeping of the same clean and free from nuisance and so as not to endanger the health of the inmates or the public health;
- (b) the construction of buildings, including matters relating to-
  - (i) proper lighting and ventilation,
  - (ii) measures for excluding insects and vermin,
  - (iii) sanitary conveniences,
  - (iv) other matters necessary or desirable to safeguard the health of the inmates or the public health;
- (c) the prevention of overcrowding in any dwelling or building, including the prohibition of the use of any dwelling or building or any part of a dwelling or building for sleeping purposes;
- (d) the regulation, prohibition or control of the cooking, preparation or storage of food in any building or part of a building where the facilities therefor are inadequate;
- (e) the periodical cleansing and whitewashing or other treatment of dwellings and the cleansing of land attached thereto and the removal of rubbish or refuse therefrom by the owners of the dwellings;
- (f) the drainage of land or premises, the disposal of offensive liquids and the removal and disposal of rubbish, refuse, manure and waste matters;
- (g) the standard or standards of purity of any effluent liquid containing waste, sewage or other offensive matter which might be a danger to the public health and the conditions whereunder such effluent may be used for domestic, agricultural, industrial or other purposes so as not to endanger the public health;
- (h) the keeping of animals or birds and the construction, cleanliness and drainage of places where animals or birds are kept;
- (i) the establishment and carrying on of factories or trade premises which are liable to cause offensive smells or effluvia or to discharge liquid or other material liable to cause such smells or effluvia or to pollute streams or which are otherwise liable to be a nuisance or injurious or dangerous to health, and prohibiting the establishment or carrying on of such factories or trade premises in unsuitable localities or so as to be a nuisance or injurious or dangerous to health.

(2) Any person who contravenes any provision of regulations made in terms of [subsection \(1\)](#) shall be guilty

of an offence and liable to a fine not exceeding level ten or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

## PART XII

### *Public Health Emergencies*

#### **116. Declaration of a State of Public Health Emergency**

Whenever the President has declared a state of public emergency in terms of section 113 of the Constitution, and he or she has certified it to be of a public health nature, the Minister may make regulations specifying the measures to be taken to deal with the emergency in consultation with the Minister responsible for administering the Civil Protection Act [*Chapter 10:06*].

## PART XIII

### *Public Health Funds*

#### **117. Establishment and objects of public health funds**

(1) The Minister shall establish one or more funds for public health purposes (hereinafter referred to as "the Fund").

(2) Subject to this Act, the object of the Fund shall be to ensure that public health services objectives and requirements are met.

(3) The purpose scope, service and benefits of any fund created pursuant to this Act shall be provided for in the constitution of the Fund.

#### **118. Contributions to and use of public health funds**

(1) The Minister, subject to such conditions as he or she may in each case fix and determine, may use resources from the Public Health Funds to-

- (a) contribute towards the cost of construction, or maintenance of laboratories or other institutions engaged in carrying out researches or investigations regarding human diseases or towards the cost of any such researches or investigations;
- (b) contribute towards the costs incurred by any local authority or educational institution or any public voluntary society or association in connection with maternal or child health, the training of environmental health practitioners and other cadres or any other matter relating to public health;
- (c) allocate grants from central government budgets to local authorities, provincial health offices and non-state health agencies based on service contracts.

(2) The Minister, subject to such conditions as he or she may in each case fix and determine to raise resources for the Public Health Funds, may-

- (a) require those who cause harm to health including through products, emissions, processes or activities, to pay from their own resources for the ensuring and sustaining interventions to remedy them;
- (b) identify companies that may be offered tax incentives or rebates for taking actions that reduce public health risks or promote health;
- (c) raise charges or fees for licences, assessments; inspections, penalties and other public health service charges and for services such as for health impact assessment, public health inspections and other services;
- (d) require contributions from companies, including those with high health risks;
- (e) impose financial penalties at prevailing market rates, for contraventions of health laws for financial gain;
- (f) recover funds spent on public health emergencies and public health events from the Consolidated Revenue Fund.



### **119. Composition of the public health funds**

(1) The Funds shall consist of-

- (a) any moneys that may be payable to the Fund from moneys appropriated for the purpose by an Act of Parliament; and
- (b) any moneys that the Funds may obtain, with the approval of the Minister and the Minister responsible for finance, by way of levies, earmarked portions or surcharges on existing state appropriations; donations, loans or other financial assistance; and
- (c) charges levied or levies on activities or products consumed or sold that raise particular public health burdens, together with any interest or surcharge payable thereon, paid in terms of Part V; and
- (d) any moneys that may vest in or accrue to the Funds, whether in terms of this Act or otherwise.

### **120. Administration of the public health funds**

(1) Subject to this Act, the Funds shall be administered by a statutory body.

(2) With the approval of the Minister, the statutory body shall open one or more banking accounts into which all moneys received on behalf of the Funds shall be paid.

(3) Regulations shall be made with regard to the administration of the Funds.

## PART XIV

### *General*

### **121. Domicile of persons for purposes of this Act**

Where any question arises as to the domicile of any person for the purposes of this Act, it shall be referred to the Minister, but the Minister's decision may be reviewed by the high court on application by the affected person.

### **122. Contracts in respect of dwellings not to be affected**

Except as specially provided in [section 105 \(5\)](#) and [section 112](#), nothing in this Act shall prejudice the remedies of any owner or occupier of a dwelling or premises for the breach, non-observance or non-performance of any contract entered into by an owner or occupier in respect of which dwelling or premises an order has been made by the court or a local authority under this Act.

### **123. Savings as to recovery of damages**

Subject to [section 124](#), nothing in this Act shall be construed as depriving any person of any right which he or she may possess to institute legal proceedings and to obtain damages in any court of law for loss or injury sustained through the neglect of any local authority or any person to perform any duty imposed by this Act or otherwise.

### **124. Protection of State and local authorities**

Whenever, in the exercise of any power conferred or in the performance of any duties imposed upon the State or any officer thereof or a local authority or any officer thereof under this Act or any other law relating to public health, he or she or it is alleged to have caused injury to any person or damage to any property or otherwise to have detrimentally affected the rights of any person, whether in respect of property or otherwise, it shall be a defence in any legal proceedings founded on such an allegation and brought against the State or its officer or a local authority or its officer that the defendant or respondent has used the best known or the only or most practicable and available methods in the exercise of the power or the performance of the duties aforesaid. In the case of such proceedings against a local authority a certificate signed by the Chief Health Officer that the defendant or respondent has, when regard is had to all the circumstances, used the best known or the only or most practicable and available methods shall be accepted by the court as *prima facie* evidence of that fact.

### **125. Accountability and Protection of officers**

(1) Any individual, acting alone or with others may report to any relevant authority any products, activities or events that pose an immediate public health risk.

(2) Any person who becomes aware of cases where any of the provisions of this Act have been breached must report the matter as soon as practicable to the relevant authorities.

(3) The relevant authority to whom a report has been made in terms of [subsections \(1\)](#) and [\(2\)](#) must take appropriate steps to investigate and address the report and must, within reasonable time, inform the person making the report of the findings of the investigations and the actions taken.

(4) No report made or action taken or thing done by the Minister or by a Government health officer or Director of health services or approved veterinary surgeon or environmental health officer or any generally or specially authorised officer of the State or of a local authority in the exercise of any power conferred or the performance of any duty imposed by this Act shall subject him or her in his or her personal capacity to any legal proceedings whatsoever, provided such report was made or action was taken or thing was done in good faith and without negligence.

## **126. Powers of entry and inspection of premises and penalties for obstruction**

(1) In this section-

**"authorised person"** means health officer or medical or environmental health practitioner of the Ministry, or any district administrator or district officer, or any police officer or any other person generally or specially authorised by the Minister, and any Director health services or environmental health practitioner or other person generally or specially authorised by the local authority.

(2) Any authorised person, may, at any hour reasonable for the proper performance of the duty, enter any land or premises to make any inspection or to perform any work or to do anything which he or she is required or authorised by this Act or any other law to do if such inspection, work or thing is necessary for or incidental to the performance of his duties or the exercise of his powers.

(3) The Minister may instruct an authorised person when carrying out his or her duties as set out under subsection (2), to take measures that may limit individual freedoms in terms of section 86 of the Constitution-

- (a) in order to prevent wilful and intentional harm to health; or
- (b) in order to protect minors and people with limited legal capacity; or
- (c) where there is an endangerment to public health.

(4) Any person who fails to give or refuses access to any officer, inspector or person mentioned in or authorised under [subsection \(2\)](#) if he or she requests entrance on any land or premises, or obstructs or hinders him or her in the execution of his duties under this Act, or who fails or refuses to give information that he or she may lawfully be required to give to such officer, inspector or person, or who gives to such officer, inspector or person false or misleading information knowing it to be false or misleading, or who prevents the owner or any of his or her servants or workmen from entering any land or dwelling or premises for the purpose of complying with any requirement under this Act, shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment.

## **127. Penalties for fraudulent conduct in connection with certificates under this Act**

Any person who-

- (a) for the purpose of obtaining any certificate under this Act, makes any false statement or is a party to any false pretence or conduct, knowing it to be false; or
- (b) forges or falsifies any certificate under this Act or utters any such forged or falsified certificate, knowing it to be forged or falsified; or
- (c) uses or attempts to use any document as a certificate under this Act, knowing it to be a forged or falsified document or certificate,

shall be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding two years or to both such fine and such imprisonment.

## **128. The duty to remedy breach**

The Minister may, by order, require any person who has acted in contravention of this Act to implement measures as specified by the Minister to remedy any harm caused within a prescribed time period.

### **129. Penalties were not expressly provided**

Any person guilty of an offence against, or contravention of, or default in complying with, any provision of this Act shall, if no penalty is expressly provided for such offence, contravention or default, be liable to a fine not exceeding level four or to imprisonment for a period not exceeding three months or to both such fine and such imprisonment.

### **130. Burden of proof as to knowledge of infection or risk**

In any legal proceedings, criminal or civil, under this Act relating to-

- (a) an infectious or communicable disease, or to any article or thing alleged to have been exposed to or contaminated with the infection thereof, whenever it is an issue in the proceedings that the accused or the defendant knew that he or she or any other person was infected with such disease, or that such article or thing had been so exposed or was so contaminated;
- (b) a condition of public health importance or public health risk, whenever it is an issue in the proceedings that the accused or defendant knew of the existence of the condition,

he or she shall be deemed to have had such knowledge unless he or she satisfies the court to the contrary.

### **131. Defect in form not to invalidate**

No defect in the form of any notice given or order made under this Act shall invalidate or render unlawful the administrative action, or be a ground for exception to any legal proceedings which may be taken in the matter to which such notice or order relates, provided the requirements thereof are substantially and intelligibly set forth.

### **132. Service of notices**

Whenever under this Act any notice, order or other document is required to be given to any person, the same shall be deemed to be sufficiently served if sent by registered post addressed to him or her at his or her last known place of abode or left thereat with him or her personally or with some adult inmate thereof; and in the case of a notice, order or other document required to be given to an owner or occupier of land or premises whose abode, after inquiry, is unknown, the same shall be deemed to be sufficiently served if posted up in some conspicuous place on such land or premises. It shall not be necessary in any notice, order or other document given to an owner or occupier of land or premises to name him or her, but the notice, order or document shall describe him or her as the owner or occupier of the land or premises.

### **133. Powers of local authority outside its district**

Nothing in any law specially governing any local authority shall be construed as preventing such local authority from exercising any power or performing any duty under this Act by reason only that in exercising such power or performing such duty it must do some act or thing or incur expenditure outside its district.

### **134. Provisions of this Act in relation to other laws**

Save as is specially provided in this Act, this Act shall be deemed to be in addition to and not in substitution for any provisions of any other law which are not in conflict or inconsistent with this Act:

Provided that where any other law, apart from the constitution, is in conflict or inconsistent with this Act, this Act shall prevail.

### **135. Scope and application of proclamations and regulations**

(1) Any proclamation, regulation, notice or order issued under this Act may be expressed to be in addition to or in substitution for any like document issued by any local authority.

(2) Any proclamation, regulation, notice or order issued under this Act may be expressed to apply throughout Zimbabwe or any specified or defined part thereof.

(3) Any proclamation, regulation, notice or order issued under this Act may be amended or rescinded by the authority which issued it.

### 136. Application of Act to State

(1) Except as otherwise explicitly provided for, this Act is applicable to the State.

(2) Nothing contained in this Act shall be construed as conferring any powers or imposing any duties upon a local authority in respect of any land or premises owned or occupied by the State for military purposes.

### 137. Regulations

(1) The Minister may make regulations providing for-

- (a) public health standards and guidelines;
- (b) the conduct and performance of community health workers and non-state actors in matters of public health;
- (c) discontinuing processes or activities that cause public health risks;
- (d) measures to be taken to rectify harm to public health;
- (e) standards for specific risks including the sale of meat of small livestock;
- (f) the requirements for health impact assessments;
- (g) control measures to be implemented before certain high risk activities can take place;
- (h) codes of practice for specific industries, services, activities, undertakings, products or practices where public health is concerned.

(2) Any person who contravenes any provision of regulations made in terms of [subsection \(1\)](#) shall be guilty of an offence and liable to a fine not exceeding level seven or to imprisonment for a period not exceeding two years or to both such fine and such imprisonment.

### 138. Savings and Transitional Provisions

(1) Any regulations, by laws or notices which, immediately before the fixed date, were in force under the Public Health Act [*Chapter 15:09*] shall continue in force, *mutatis mutandis*, as if they had been in terms of this Act.

(2) Any licence, certificate, authority or permit which was issued in terms of the Act referred to in [subsection \(1\)](#) and which had effect, immediately before the fixed date shall continue to have effect, *mutatis mutandis*, for the remainder of its period of validity as if it had been issued under the appropriate provision of this Act.

(3) Any price, levy, charge, surcharge or fee which, immediately before the fixed date was chargeable within any area in respect of public health shall on and after the fixed date and until alternative provision is made in terms of this Act, continue to be chargeable.

(4) Subject to this Act, any right in or over land or water which immediately before the fixed date, vested in any undertaking in terms of the former Act or any enactment repealed by the former Act shall, on and after the fixed date, continue to vest in the undertaking concerned as if it had been acquired in terms of this Act.

(5) Subject to this Act, any permission granted, direction or order given or other thing whatsoever made, done or commenced which immediately before the fixed date, had or was capable of acquiring force and effect in terms of the former Act shall, on and after the fixed date, continue to have, or, as the case may be, to be capable of acquiring, force and effect as if it had been granted, given, made, done, ordered, or commenced, as the case may be, in terms of this Act.

### 139. Repeal of Chapter 15:09

The Public Health Act [*Chapter 15:09*], is hereby repealed.

#### First Schedule PROVISIONS APPLICABLE TO BOARD

##### ([Section 4](#))

- [1.](#) Interpretation in [First Schedule](#).
- [2.](#) Disqualification for appointment as member.
- [3.](#) Expiry of membership and re-appointment of members.
- [4.](#) Vacation of office by appointed members of Board.

5. Dismissal of office by members of the Board.
6. Filling of vacancies of Board.
7. Meetings and procedure of Board.
8. Committees of Board.
9. Minutes of proceedings of Board and committees.
10. Validity of decisions and acts of Board and committees.

## 1. Interpretation in [First Schedule](#)

In this Schedule-

### "member"-

means a member of the Board;

in relation to a statutory body, includes a person who is appointed to a Commission or other authority which is a statutory body or which is responsible for the administration of the affairs of a statutory body;

### "statutory body" means-

any Commission established by the Constitution;

any body corporate established directly by or under any Act of Parliament for special purposes specified in that Act.

## 2. Disqualification for appointment as member

(1) Subject to this Act, a person shall not be qualified for appointment as a member if-

he or she not is a citizen of Zimbabwe or ordinarily resident in Zimbabwe; or

he or she has, in terms of a law in force in any country-

been adjudged ~~(i)~~ otherwise declared insolvent or bankrupt and has not been rehabilitated or discharged, or

made an assignment ~~(ii)~~ or composition with his or her creditors which has not been rescinded or set aside;

or

within the period of five years immediately preceding his or her proposed appointment, he or she has been sentenced in any country by a competent court to a term of imprisonment imposed without the option of a fine, whether or not any portion thereof has been suspended, and has not received a free pardon; or

he or she is a member of Parliament.

(2) A person shall not be qualified for appointment as a member, nor shall he or she hold office as a member, if he or she is a member of two or more other statutory bodies.

## 3. Expiry of membership and re-appointment of members

(1) On the expiry of the period for which a member has been appointed, he or she shall continue to hold office until he or she has been re-appointed or his or her successor has been appointed:

Provided that a member shall not continue to hold office in terms of this subsection for more than six months.

(2) A person who ceases to be a member shall be eligible for re-appointment for only one more term.

## 4. Vacation of office by members

(1) A member shall vacate his or her office and his or her office shall become vacant-

one month after the date he or she gives notice in writing to the Minister of his or her intention to resign his or her office or after the expiry of such other period of notice as he or she and the Minister may agree; or

on the date he or she begins to serve a sentence of imprisonment, whether or not any portion has been suspended, imposed without the option of a fine-

in Zimbabwe, in ~~(i)~~ respect of an offence, or

outside Zimbabwe ~~(ii)~~, in respect of conduct which, if committed in Zimbabwe, would have constituted an offence;

or

if he or she becomes disqualified in terms of [paragraph 2](#) to hold office as a member.

(2) The Minister may require an appointed member of the Board to vacate his or her office if the member- has been guilty of conduct which renders him or her unsuitable to continue to hold office as a member; or

has failed to comply with any condition of his or her office fixed in terms of [section 4 \(8\)](#); or

is mentally or physically incapable of efficiently performing his or her duties as a member.

(3) The Minister, on the recommendation of the Board, may require a member to vacate his or her office if the

Minister is satisfied that the member has been absent without the consent of the chairperson from three consecutive meetings of the Board, of which he or she has been given due notice in terms of [paragraph 7](#), and that there was no just cause for the member's absence.

## **5. Suspension of members**

The Minister may suspend from office a member against whom criminal proceedings are instituted for an offence involving dishonesty and, whilst that member is so suspended, he or she shall not carry out any duties or be entitled to any remuneration or allowances as a member.

## **6. Filling of vacancies on Board**

On the death of, or the vacation of office by, a member his or her office shall be filled within three months.

## **7. Meetings and procedure of Board**

(1) The Board shall hold its first meeting on a date and place fixed by the Minister, and thereafter shall meet for the dispatch of business and adjourn, close and otherwise regulate its meetings and procedure as it thinks fit:

Provided that the Board shall meet at least once every three months.

(2) Written notice of an ordinary meeting convened in terms of the proviso to [subparagraph \(1\)](#) shall be sent to each member not later than seven working days before the meeting, together with an agenda for the meeting.

(3) The chairperson-

may convene a special meeting of the Board at any time; and

shall convene a special meeting of the Board on the written request of the Minister or not fewer than two members, which meeting shall be convened for a date not sooner than seven days and not later than thirty days after the chairperson's receipt of the request.

(4) Written notice of a special meeting convened in terms of [subparagraph \(3\)](#) shall be sent to each member not later than forty-eight hours before the meeting and shall specify the business for which the meeting has been convened.

(5) No business shall be discussed at a special meeting convened in terms of [subparagraph \(3\)](#) other than-

such business as may be determined by the chairperson, where he or she convened the meeting in terms of paragraph 3 (a); or

the business specified in the request for the meeting, where the chairperson convened the meeting in terms of paragraph 3 (b).

(6) The chairperson or, in his or her absence, the vice-chairperson shall preside at all meetings of the Board:

Provided that, if the chairperson and vice-chairperson are both absent from any meeting of the Board, the members present may elect one of their number to preside at that meeting as chairperson.

(7) A majority of members shall form a quorum at any meeting of the Board.

(8) All acts, matters or things, authorised or required to be done by the Board may be decided by a majority vote at any meeting of the Board at which a quorum is present.

Provided that in the event of an equality of votes the chairperson or person presiding at the meeting shall have a casting vote in addition to his or her deliberative vote.

(9) With the Board's approval, the chairperson of the Board may invite any person to attend a meeting of the Board or a committee, where the chairperson considers that the person has special knowledge or experience in any matter to be considered by the Board or the committee, as the case may be, at that meeting.

(10) A person invited to attend a meeting of the Board or of a committee in terms of [subparagraph \(8\)](#) may take part in the proceedings of the Board or the committee as if he or she were a member thereof, but he or she shall not have a vote on any question before the Board or committee, as the case may be.

(11) Any proposal circulated among all members and agreed to in writing by a majority of them shall have the same effect as a resolution passed at a duly constituted meeting of the members and shall be incorporated into the minutes of the next succeeding meeting of the Board:

Provided that if a member requires that such a proposal be placed before a meeting of the Board, this subparagraph shall not apply to the proposal.

## **8. Committees of Board**

(1) For the better exercise of its functions the Board may establish one or more committees in which the Board may vest its functions as it considers appropriate:

Provided that the vesting of any function in a committee shall not divest the Board of that function, and the Board may amend or rescind any decision of the committee in the exercise of that function.

(2) On the establishment of a committee in terms of subsection (1), the Board-

shall appoint at least one member of the Board as a member of the committee, and that member or one of those members, as the case may be, shall be chairperson of the committee; and

may appoint as members of the committee persons who are not members of the Board and may fix terms and conditions of their appointment.

(3) Meetings of a committee may be convened at any time and at any place by the chairperson of the Board.

(4) If the chairperson of a committee is absent from any meeting of the committee, the members present may elect one of their number to preside at that meeting as chairperson.

(5) A majority of members of a committee shall form a quorum at any meeting of a committee.

(6) Anything authorised or required to be done by a committee may be decided by a majority vote at a meeting of the committee at which a quorum is present.

(7) At all meetings of a committee each member present shall have one vote on each question before the committee:

Provided that in the event of an equality of votes the chairperson or person presiding at the meeting shall have a casting vote in addition to his or her deliberative vote.

(8) Subject to this paragraph, the procedure to be followed at any meeting of a committee shall be as fixed by the Board.

### **9. Minutes of proceedings of Board and committees**

(1) The Board shall cause minutes of all proceedings of and decisions taken at every meeting of the Board and of every committee to be entered in books kept for the purpose.

(2) Any minutes referred to in [subparagraph \(1\)](#) which purport to be signed by the person presiding at the meeting to which the minutes relate or by the person presiding at the next following meeting of the Board or the committee concerned, as the case may be, shall be accepted for all purposes as *prima facie* evidence of the proceedings and decisions taken at the meeting concerned.

(3) The Board and any committee of the Board shall cause copies of all minutes that have been signed as provided in [subparagraph \(2\)](#) to be sent to the Minister for his or her information.

### **10. Validity of decisions and acts of Board and committees**

No decision or act of the Board or a committee or act that is authorised by the Board or a committee shall be invalid solely because there was a vacancy in the membership of the Board or the committee or because a disqualified person purported to act as a member of the Board or the committee, as the case may be, at the time the decision was taken or the act was done or authorised.

## **Second Schedule ANCILLARY POWERS OF BOARD**

### **[\(Section 4 \(2\)\)](#)**

1. To acquire premises necessary or convenient for the exercise of its functions and for that purpose to buy, take on lease or in exchange, hire or otherwise acquire immovable property and any interest therein and any rights concessions, grants, powers and privileges in respect thereof.
2. To buy, take in exchange, hire or otherwise acquire movable property necessary or convenient for the exercise of its functions.
3. To maintain, alter or improve property acquired by it.
4. To mortgage any assets, or part of any assets and, with the approval of the Minister, to sell, exchange, lease, dispose of turn to account or otherwise deal with any assets or part of any assets which are not required for the exercise of its functions for such consideration as it may determine.
5. To open bank accounts in the name of the Board and to draw, make, accept, endorse, discount, execute and issue for the purposes of its functions promissory notes, bills of exchange, securities and other negotiable or transferable instruments.
6. To insure against losses, damages, risks and liabilities which it may incur.
7. With the approval of Minister, to establish and administer such funds and reserves not specifically provided for in this Act as the Board considers appropriate or necessary for the proper exercise of its functions.
8. To pay such remuneration and allowances and grant such leave of absence and to make such gifts, bonuses and the like to staff of the Board as it considers fit.

9. To provide pecuniary benefits for staff of the Board on their retirement, resignation, discharge or other termination of service or in the event of their sickness or injury and for their dependants, and for that purpose to effect policies of insurance, provident funds or make such other provision as may be necessary to secure for its staff and their dependants any or all of the pecuniary benefits to which the provisions of this paragraph relate.
10. To purchase, take on lease or in exchange or otherwise acquire land for residential purposes or dwellings-houses for use or occupation by staff of the Board.
11. To construct dwellings, outbuildings or improvements for use or occupation by members of the Board.
12. To provide or guarantee loans made to members of the Board for the purchase of dwelling-houses or land for residential purposes, the construction of dwelling-houses and the improvement of dwelling houses or land which are the property of its members, subject to any conditions that may be imposed by the Board from time to time.
13. To provide security in respect of loans by the deposit of securities, in which the Board may invest such money as it may consider necessary for the purpose.
14. Subject to any conditions that may be imposed by the Board from time to time, to provide loans to any members of the Board-
  - (a) for the purpose of purchasing vehicles or other equipment to be used by the members in carrying out their duties; or
  - (b) not exceeding six months' salary or wages payable to the members concerned, for any purpose on such security as the Board thinks adequate.
15. To do anything for the purpose of improving the skill, knowledge or usefulness of members of the Board, and in that connection to provide or assist other persons in providing facilities for training, education and research, including the awarding of scholarships for such training.
16. To engage in any activity, either alone or in conjunction with civil society organisations and other organisations or international agencies, to promote better understanding of gender issues.
17. To do anything which by this Act or any other enactment is required or permitted to be done by the Board.
18. Generally to do all such things that are conducive to the performance of the functions of the Board in terms of this Act or any other enactment.