Zimbabwe

Medical Summary

The health risk information presented here is summarized from Shoreland Travax[®], a decision-support tool used by health care providers to perform a detailed health risk analysis based on specific locations, individual travel styles, and traveler risk behaviors. Travax provides practitioners current, independently researched malaria risk and prevention recommendations in a map-based format that goes beyond the annual WHO and US CDC statements included here. Not included here are current reports from Travax of disease outbreaks or environmental events that may pose elevated risks to travelers' health and safety. The Providers section of this site offers a directory of health care providers who utilize Shoreland Travax for travel health counseling. Learn more about the detailed reports and maps available from these practitioners (includes links to samples).

General Information

Zimbabwe is a developing nation classified as low income. Located in southern Africa (north of South Africa and south of Zambia), the climate is classified as tropical dry winter in the east and dry (semi arid) in the west.

Vaccinations

Yellow Fever

Although yellow fever does not occur in Zimbabwe, an official yellow fever vaccination certificate may be required depending on your itinerary.

Requirement: A certificate proving yellow fever vaccination is required for travelers aged ≥ 9 months coming from countries
with risk of YF transmission. This also applies to airport transit stops (no exit through immigration checkpoint) longer than 12
hours in risk countries.

Other Vaccines

Depending on your itinerary, your personal risk factors, and the length of your visit, your health care provider may offer you vaccination against chikungunya, cholera, COVID-19, hepatitis A, hepatitis B, influenza, measles, mumps, rubella, rabies, typhoid fever, or a one time polio booster if you haven't previously received one for travel. Routine immunizations, such as those that prevent tetanus/diphtheria or "childhood" diseases, should be reviewed and updated as needed.

Malaria

The following is current information as reported by the World Health Organization (WHO) and the US Centers for Disease Control (CDC):

WHO—International Travel and Health (current online update, Country List)

(2019) Malaria risk due predominantly to *P. falciparum* exists from November through June in areas below 1200 m and throughout the year in the Zambezi valley. In Bulawayo and Harare, risk is negligible.

- Recommended prevention in risk areas: C Risk of P. falciparum malaria, in combination with reported chloroquine and sulfadoxine–pyrimethamine resistance. Mosquito bite prevention plus atovaquone–proguanil or doxycycline or mefloquine chemoprophylaxis (select according to reported side effects and contraindications) a
 - ^aAlternatively, for travel to rural areas with low risk of malaria infection, mosquito bite prevention can be combined with stand–by emergency treatment (SBET).

WHO Country List footnote: When available, the date of the most recent update or confirmation is indicated in parentheses in the country list. If no date is indicated, the most recent update or confirmation was provided before 2013.

CDC—Health Information for International Travel (current online edition)

Areas with malaria: All.

- Drug resistance³: Chloroquine.
- Malaria species: P. falciparum >90%, P. vivax up to 5%, P. ovale up to 5%.

- Recommended chemoprophylaxis: Atovaquone-proguanil, doxycycline, mefloquine, or tafenoquine.⁴
 - ³ Refers to *P. falciparum* malaria unless otherwise noted.
 - ⁴ Primaquine and tafenoquine can cause hemolytic anemia in people with G6PD deficiency. Patients must be screened for G6PD deficiency before starting primaquine or tafenoquine. See *Tafenoquine Approved for Malaria Prophylaxis and Treatment* for more information.

Other Concerns

Travelers' Diarrhea

High risk exists throughout the country, including in deluxe accommodations. Community sanitation and food safety measures are generally inadequate. Some itineraries (e.g., remote destinations, austere accommodations) and activities (e.g., ecotourism, eating street or local-market food) further increase risk.

Travelers should observe food and beverage precautions, which reduce the likelihood of illness.

Travelers should carry loperamide for self-treatment of diarrhea and, if risk is moderate to high, an antibiotic to add if diarrhea is severe. Consult a knowledgeable health care provider regarding which antibiotic is appropriate for you and most effective for your destination.

Other Food-Borne Illnesses

Precautions to prevent brucellosis may be needed.

Insect- and Arthropod-Borne Diseases

African trypanosomiasis, tick-bite fever, West Nile virus may pose a risk. Personal protective measures are important.

Other Disease and Health Risks

Additional concerns include anthrax disease, helminths, leptospirosis, plague, schistosomiasis, sexually transmitted infections, tuberculosis.

Consular Advice

The material below includes information from the US Department of State (DOS), the UK Foreign, Commonwealth & Development Office (FCO), Global Affairs Canada (GAC), and Australia's Department of Foreign Affairs and Trade (DFAT), as well as from additional open-source material. Standard safety precautions that apply to all international travel can be found in the Library article Safety and Security.

Terrorism Risk

No intrinsic risk of attack by terrorist groups exists, but unforeseen attacks are possible.

Crime

High risk of violent crime (armed robbery, home robbery, and carjacking) and high risk of petty crime exist throughout the country, especially on the roads to and from Harare International Airport, in Harare and other cities, and in areas frequented by tourists (including Victoria Falls and safari camps in national parks).

Theft of valuables from unattended vehicles is common.

Civil Unrest

Protests and demonstrations occur throughout the country and have the potential to turn violent without warning. Bystanders are at risk of harm from violence or from the response by authorities. Disruption to transportation, free movement, or the ability to carry out daily activities may occur.

Unsafe Areas

Restricted areas exist near the Maragne diamond mining fields.

Water Safety

Basic safety standards for recreational water activities (including rafting, kayaking, and tubing) may not be in place. Rent water sports equipment from reputable operators.

Outdoor Safety

Basic safety standards for adventure activities (including activities in the Victoria Falls area) may not be in place. Travelers should only use reputable adventure-sport operators for activities and equipment rentals.

Other Safety Threats

Risk exists for fatal wildlife attacks on safaris and in game parks and reserves. Travelers should closely follow park regulations, always maintain a safe distance from wildlife, and should not exit vehicles or protected enclosures.

Transportation Safety

Significant risk of traffic-related injury or death exists. The road traffic death rate is more than 24 per 100,000 population, the highest risk category. Carefully assess the safety of transportation options before any road travel.

Drunk driving laws are poorly enforced.

Structural standards for vehicles may not meet international standards.

Natural Disasters

The rainy season is from November through March. Floods, mudslides, and landslides may occur.

Consular Information

Selected Embassies or Consulates in Zimbabwe

- United States: [+263] 4-250-593; zw.usembassy.gov
- Canada: [+263] 24-2252-181; www.zimbabwe.gc.ca
- United Kingdom: [+263] 242-8585-5200; www.gov.uk/world/organisations/british-embassy-harare
- Australia: [+263] 242-853-235-55; www.zimbabwe.embassy.gov.au

Zimbabwe's Embassies or Consulates in Selected Countries

- In the U.S.: [+1] 212-980-9511
- In Canada: www.zimembassyottawa.com
- In the U.K.: [+44] 020-7836-7755
- In Australia: www.zimembassycanberra.org.au

Visa/HIV Testing

HIV testing is not required to obtain a tourist, work, or residence visa.

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