

IMPLICATIONS OF ILLICIT FINANCIAL FLOWS ON DOMESTIC RESOURCE MOBILISATION AND PROVISION OF HEALTH CARE IN ZIMBABWE

STANELY CHISHAMBA, JEFFREY KUREBWA *

ABSTRACT: *This research sought to examine the effects of Illicit Financial Flows (IFFs) on the mobilization of domestic resources and the delivery of healthcare services in Zimbabwe. Employing a qualitative research design, data was gathered through key informant interviews and a review of relevant documents. Participants were selected purposefully from various sectors, including the Ministry of Health and Child Care, the Procurement and Regulatory Authority of Zimbabwe, Non-Governmental Organizations, media representatives, and academic institutions. The findings revealed that IFFs in Zimbabwe's healthcare sector take multiple forms, particularly through fraudulent billing practices such as the inflation of invoices, charging for unnecessary medical procedures, and billing for services that were not provided. Additionally, the research identified that cross-border financial transactions, tax evasion, and the exploitation of healthcare organizations for money laundering are consistent with the intricate and international dimensions of IFFs in the healthcare domain. The study concluded that IFFs pose a significant barrier to the mobilization of domestic resources, especially in the context of health service provision. It recommended the implementation of specific and targeted interventions within the healthcare procurement and regulatory systems to combat financial misconduct.*

KEY WORDS: *health sector, resource mobilization, illicit financial flows, fraud, transfer pricing.*

JEL CLASSIFICATIONS: *H51, H26, D73, F38, I18, O55.*

1. INTRODUCTION

Illicit Financial Flows (IFFs) have emerged as a significant global issue, crossing national boundaries and representing a considerable risk to economies around the world. According to Remeikienė and Gaspareniene (2023), these clandestine

* Bindura University of Science Education, Bindura, stanelychishamba@gmail.com
Bindura University of Science Education, jeffkurebwa2015@gmail.com

financial operations, which encompass tax evasion, money laundering, and corruption, have profound effects on economic disparity and jeopardize vital services such as healthcare and education. The repercussions of IFFs on healthcare systems are particularly alarming, as they occur within a context of increasing global awareness regarding the extensive impact of these financial irregularities on health services worldwide (Burri, 2023). IFFs represent a complex network of unlawful financial activities that siphon off critical resources from essential public services, notably healthcare.

The international scope of this issue is emphasized by the reality that IFFs cross national boundaries and involve complex financial operations often enabled by tax havens, offshore accounts, and shell corporations. This complexity renders detection and regulation within individual nations particularly difficult. Global economic collaboration is essential due to the ramifications of IFFs, which require synchronized regulations and the sharing of information. Various regions are facing significant annual losses attributed to IFFs, resulting in fiscal difficulties and placing considerable strain on healthcare systems (Waaghals & Pereira, 2022). The misallocation of financial resources through illegal means has considerably diminished government's ability to execute targeted health initiatives, with marginalized communities bearing the brunt of these impacts. It is crucial to foster cooperative efforts across multiple sectors to devise effective strategies aimed at reducing IFFs and promoting a more equitable, transparent, and sustainable financial framework, particularly in developing nations.

The ramifications of IFFs are profoundly impactful, influencing not only the economic stability of a nation but also the welfare of its populace (Ndikumana & Boyce, 2021). Zimbabwe has faced annual financial losses reaching millions of dollars due to IFFs, particularly within the mining sector (Matambo, Moyo, Mukonza, Zendera, & Uwizeyimana, 2022). These financial detriments have intensified the country's fiscal difficulties, leading to budgetary shortfalls and significant constraints on funding critical sectors, notably healthcare. The repercussions of IFFs on the health sector are especially acute. The health system, which serves as a vital foundation for societal health and progress, has been severely impacted (Makoni, 2023). The decline in government revenue, stemming from tax evasion and trade mispricing, has resulted in diminished healthcare financing, which in turn has caused deteriorating infrastructure, insufficient medical supplies, and a shortage of personnel in healthcare facilities (Chikore & Maravanyika, 2023).

The misallocation of financial resources through illegal channels has considerably undermined the Zimbabwean government's ability to prioritize and execute essential health initiatives (Ministry of Finance, 2021). Programs aimed at disease prevention, maternal and child health, and combating infectious diseases have faced significant obstacles due to IFFs. The repercussions of these challenges are particularly severe for vulnerable groups, notably those living in rural and marginalized areas, where access to quality healthcare is increasingly limited. To address these issues, it is crucial to foster collaborative efforts among stakeholders in the finance, governance, and health sectors to devise effective strategies for reducing IFFs and establishing a more equitable, transparent, and sustainable financial framework.

(Ministry of Health and Child Care, 2020). Like many developing nations, Zimbabwe is increasingly susceptible to the adverse impacts of IFFs, which intensify existing socio-economic difficulties and impede the country's advancement towards sustainable development (Akinboade, Oye, & Aremu, 2020).

2. LITERATURE REVIEW AND THEORETICAL FRAMEWORK

This research further developed the theories of Political Economy of Corruption and Economic Structuralism, as articulated by Rose-Ackerman (1999) and Prebisch (1950), respectively, serving as the foundational theoretical frameworks for this investigation. The subsequent subsections will provide a comprehensive analysis of the relevance and effectiveness of each of these theories to the objectives of this study.

2.1. The Political economy of corruption theory

The theory of the political economy of corruption was introduced by Susan Rose-Ackerman in 1999. This theory posits that IFFs are frequently facilitated by corrupt activities, such as bribery and embezzlement, often perpetrated by government officials (Adesina & Shugaba, 2019). It underscores the systemic characteristics of corruption and its detrimental impact on the allocation of funds to essential sectors, particularly healthcare, which in turn reduces government revenue designated for medical supplies, infrastructure, and the training of healthcare professionals (Mauro, 2016). Central to this theory is the argument that corruption is both systemic and structural, with IFFs being enabled by corrupt practices that divert vital resources from critical areas like healthcare. Furthermore, the theory highlights the significant influence of weak governance and a lack of transparency in fostering an environment conducive to corruption, allowing individuals to exploit systemic weaknesses for personal benefit, thereby promoting the proliferation of IFFs. Such conditions, characterized by inadequate governance and transparency, create opportunities for corrupt individuals to take advantage of existing vulnerabilities (Gupta, Davoodi & Tiongson, 2017). As a result, the capacity of the health sector to deliver equitable and high-quality services, particularly to marginalized groups, is severely undermined due to the scarcity of resources (Cobham & Janský, 2019).

The Political Economy of Corruption theory, like all theoretical frameworks, is not without its limitations. A notable deficiency is its lack of a comprehensive guide for practical application. Although it clarifies the systemic characteristics of corruption and its repercussions, the theory does not provide specific policy recommendations that could effectively tackle the issue (Nash, Scharbatke-Church, & Toribio, 2023). Furthermore, it may be critiqued for prioritizing structural elements, which could lead to an underestimation of the role of individual actors in corrupt practices. Despite these limitations, the Political Economy of Corruption theory is considered the most suitable framework for this research due to its thorough approach. It delivers an integrated perspective on the complexities of corruption and IFFs, especially within the healthcare sector. Concentrating on the systemic and structural dimensions of corruption, yields

critical insights into the underlying causes of IFFs, which are vital for developing effective policy interventions. Additionally, its acknowledgment of weak governance and insufficient transparency resonates with the study's focus on these issues. This theory thus provides a solid theoretical basis for examining how these factors influence the delivery of healthcare services, rendering it a pertinent and enlightening framework for the investigation.

2.2. Economic structuralism

Economic Structuralism serves as a significant theoretical framework within the domain of international economics. Central to this theory is the assertion that international trade, especially between nations at different levels of development, inherently contributes to inequality and reinforces structural disparities within the global economic landscape. Proponents of Economic Structuralism argue that countries reliant on the export of primary commodities experience declining terms of trade and increasing income inequality due to the existing inequitable trade conditions (Fajardo, 2023). While the limitations of Economic Structuralism are a matter of ongoing scholarly discussion, critics contend that the theory often oversimplifies the complexities of international trade, neglecting critical elements such as technological progress, the influence of multinational corporations, and the potential advantages associated with trade liberalization. Additionally, the theory has faced scrutiny for its static perspective on development and its failure to provide specific policy guidance (Alenda-Demoutiez, 2022).

Economic Structuralism continues to hold significance in this study due to its capacity to illuminate enduring global economic disparities and the obstacles that developing nations encounter in their pursuit of sustainable development (Fajardo, 2023). The theory's focus on rectifying structural inequities in international trade, along with its advocacy for diversification and industrialization within developing economies, is of paramount importance (Smith, 2015). Additionally, this research posits Economic Structuralism as the most suitable theoretical framework, drawing insights from the seminal contributions of scholars such as Prebisch (1950) and Singer (1950). This framework offers a robust basis for examining the intricacies of international trade and its ramifications for national development and economic prosperity, particularly in relation to IFFs and their effects on healthcare service provision. By recognizing and addressing the structural disparities it identifies, policymakers can strive for more equitable and sustainable development, especially in regions that are rich in resources yet economically marginalized (Rodrik, 2018; Chang, 2019).

2.3. Patterns and extent of IFFs in the health sector in Zimbabwe

A comprehensive understanding of the patterns and magnitude of illicit financial flows (IFFs) within Zimbabwe's health sector is essential for formulating effective interventions to address this challenge. Research indicates that IFFs in this sector exhibit several recurring characteristics, often linked to corrupt activities such as

bribery, embezzlement, and fraudulent procurement practices (Kar & Cartwright-Smith, 2016). Frequently, funds are misappropriated through inflated contracts related to medical supplies, pharmaceuticals, and equipment, thereby diverting resources that ought to enhance healthcare services (Adeleke, 2019). Furthermore, the absence of transparency in financial dealings, combined with inadequate governance frameworks, creates a conducive environment for the proliferation of IFFs (Cobham & Jansk, 2019). The scale of these financial outflows is considerable, as supported by empirical evidence. Reports suggest that Zimbabwe has suffered substantial financial losses due to IFFs, with estimates reaching into the billions of dollars (Kurebwa, 2021). These losses adversely affect government revenue, thereby undermining the health sector's ability to deliver quality healthcare, particularly to marginalized and vulnerable groups (Chilunjika, Zimano & Chilunjika, 2022).

2.4. Shell companies

The utilization of shell companies constitutes a widespread and complex manifestation of illicit financial flows (IFFs), facilitating the obfuscation of true asset ownership and enabling the transfer of funds without detection (Karim, Mohamed, Ahmad, Prabowo, & Suffian, 2022). These entities are generally characterized by a lack of substantial operational activities and are created primarily to disguise financial transactions. According to Shaxson (2018), shell companies can be established in jurisdictions known for their favorable tax conditions or lenient financial regulations, rendering them appealing to individuals involved in unlawful financial practices. Such companies serve to conceal both the origins and destinations of funds, thereby complicating efforts by authorities to trace IFFs back to their original sources. This phenomenon is notably prevalent in both affluent and impoverished nations, with significant adverse effects on the healthcare sector (Kaplinsky & Kraemer-Mbula, 2022). For instance, studies have demonstrated that shell companies have been instrumental in redirecting funds away from public health systems, thereby compromising their ability to deliver essential services to the community.

2.5. Transfer pricing manipulation

Transfer pricing manipulation constitutes a sophisticated form of IFFs, primarily executed by multinational enterprises. This strategy entails the strategic allocation of profits among subsidiaries or affiliated entities to diminish tax obligations, consequently limiting the resources available for public services, such as healthcare (Kutzin, Yip & Cashin, 2016). The process is intricate, involving intentional overpricing or under-pricing of goods, services, or intellectual property exchanged among entities within the same corporate structure. Research indicates that such manipulation can substantially deplete tax revenues, thereby hindering governments' capacity to adequately finance healthcare systems. This phenomenon of IFFs poses a global challenge, necessitating robust regulatory measures to mitigate its negative implications for healthcare funding (Patel, Burns, Dhingra, Tarver, Kohrt & Lund, 2018). Numerous studies have highlighted the widespread occurrence of transfer

pricing manipulation and its adverse effects on healthcare systems across various regions, underscoring the imperative for international collaboration to effectively tackle this issue.

2.6. Trade mispricing

Trade mispricing represents a widespread occurrence of IFFs, characterized by the manipulation of the value of goods and services in international trade transactions, either by underreporting or over reporting their actual worth (Chamisa, 2020:17). The primary aim of such practices is to influence tax revenues and trade balances, facilitating the unlawful transfer of funds across national borders. This phenomenon has garnered considerable scholarly attention due to its profound economic ramifications. By engaging in mispriced trade transactions, companies can alter their tax obligations, resulting in diminished government income, which subsequently affects the healthcare sector (Cobham & Janský, 2020). Research conducted across various nations has shed light on the magnitude and repercussions of trade mispricing on healthcare funding and accessibility. These studies illustrate how trade mispricing can divert resources, weaken healthcare services, and exacerbate health disparities.

2.7. Bribery and corruption

Bribery and corruption represent widespread manifestations of IFFs, characterized by the provision of bribes or kickbacks to public officials or private organizations to secure financial benefits and facilitate unlawful financial operations (Hope Sr, 2023). Although this form of IFF is frequently linked to corrupt activities, it carries significant repercussions for healthcare systems. Research has consistently demonstrated that corruption within the healthcare sector can result in considerable resource depletion, thereby diminishing the funds available for essential service delivery. According to Marquette & Peiffer (2020), elevated levels of corruption in healthcare environments foster conditions that are favorable to IFFs, complicating the ability of governments to implement and enforce regulations effectively. A variety of empirical studies, including those by Patel et al. (2018) and Kutzin, Yip & Cashin (2016), have investigated the connections between bribery, corruption, and IFFs in healthcare, underscoring the urgent need for comprehensive anti-corruption strategies to protect healthcare resources.

2.8. Tax havens

The utilization of tax havens represents a prevalent trend in IFFs, marked by the creation of financial accounts or entities in regions that offer low tax rates and stringent confidentiality regulations (Integrity, 2015). These jurisdictions afford a layer of financial secrecy, complicating the process of tracing funds and assets back to their legitimate owners. Although tax havens can serve as legitimate financial instruments for certain purposes, they are frequently exploited for unlawful activities, such as tax evasion and IFFs (Ishola, Olateju, Ayodeji & Olubunmi, 2022). A considerable amount

of scholarly work has highlighted the function of tax havens in facilitating IFFs, illustrating their role in concealing wealth and redirecting funds away from essential public services. The repercussions of tax havens on healthcare financing are profound, as they diminish the resources available for healthcare systems to operate effectively (Integrity, 2015). Research has shown that governments around the globe forfeit significant revenue due to the employment of tax havens, which in turn adversely impacts the delivery of healthcare services.

2.9. Money laundering

Money laundering represents a complex manifestation of IFFs, characterized by the deliberate obscuring of the illegal origins of funds through intricate financial maneuvers (Chauhan, 2021). This methodology complicates the tracing of the money's source, as it is rendered seemingly legitimate after undergoing a series of financial operations designed to 'clean' it. Integral to the framework of IFFs, money laundering allows individuals involved in unlawful financial practices to utilize their gains without attracting scrutiny (Reuter, 2017). The intricate nature of money laundering poses significant challenges for both researchers and regulatory bodies. In the healthcare sector, this form of IFFs is particularly harmful, resulting in the diversion of resources that ought to be allocated for public health initiatives (Martin-Carrasco et al., 2016). Investigations into money laundering within healthcare environments underscore the urgent necessity for robust monitoring and regulatory frameworks to effectively detect and mitigate this form of illicit financial activity.

2.10. Embezzlement and misappropriation

Embezzlement and misappropriation constitute a significant manifestation of IFFs, frequently involving the unlawful appropriation of public funds or assets by individuals in positions of authority. This misconduct results in the misdirection of resources from their designated uses, often resulting in funds being transferred to offshore accounts or utilized for personal benefit (Kane, 2021). The diversion of healthcare funds through embezzlement and misappropriation poses a grave risk to the integrity of healthcare systems, jeopardizing their capacity to deliver essential services to the community (Couffinhal & Frankowski, 2017). A considerable body of research has been dedicated to examining the prevalence and implications of these financial crimes within healthcare environments (Couffinhal & Frankowski, 2017). Embezzlement and misappropriation are recognized as critical forms of IFFs, characterized by the illegal theft of public resources, often executed by public officials (African Union Commission, 2019). Numerous academic inquiries and empirical analyses have explored the intricate dynamics of embezzlement and misappropriation in healthcare, revealing the detrimental effects on healthcare financing and the quality of services provided. The improper allocation of funds designated for healthcare undermines the accessibility and efficacy of these services, particularly in low- and middle-income nations (Naher et al., 2020). Such financial misconduct not only damages the reputation of healthcare systems but also has far-reaching consequences

that extend beyond mere financial losses. These patterns of IFFs threaten the health and welfare of populations, highlighting the urgent necessity for robust regulations, accountability frameworks, and ethical standards to effectively combat these illicit financial practices (Schlenter, 2018).

2.11. Corrupt procurement practices

Corrupt procurement practices represent a significant manifestation of IFFs, marked by the evasion of transparent procurement protocols through means such as bribery, nepotism, and other unethical practices (Binions, 2019). These corrupt activities misappropriate funds that should be allocated for healthcare, ultimately compromising the integrity of healthcare systems. The academic literature is abundant with studies aimed at elucidating the complex interactions of corrupt procurement practices and their repercussions on healthcare financing (Sukhtankar & Vaishnav, 2015). Such practices can result in considerable financial losses, misallocation of resources, and the procurement of inferior medical supplies or services, thereby threatening the overall quality of healthcare available to the populace (Apenkro, 2020). Research has highlighted that the ramifications of corrupt procurement extend to worsening health inequalities and diminishing public confidence in healthcare systems. In many nations, practices such as bribery and kickbacks severely disrupt the effective distribution of healthcare resources, underscoring the urgent need for robust measures, transparency initiatives, and anti-corruption strategies to alleviate the effects of these illicit financial practices (Nahe et al., 2020).

3. RESEARCH METHODOLOGY AND DESIGN

To achieve a comprehensive understanding of issues related to IFFs and to appropriately contextualize them, this research employed a qualitative research methodology, which included key informant interviews and documentary analysis. The qualitative approach proved effective in identifying patterns, trends, and the impacts of IFFs within the health sector, which are crucial for a thorough exploration of the subject matter. The sample for this study was sourced from the Ministry of Health and Child Care, the Procurement Regulatory Authority of Zimbabwe, various non-governmental organizations, the media, and academic institutions. A purposive sampling technique was utilized to select five participants for in-depth interviews. These individuals were specifically chosen due to their direct engagement in healthcare procurement processes, making them particularly relevant to the study. Their expertise and experience provide significant insights into the intricate dynamics and associated consequences of IFFs in healthcare procurement practices in Zimbabwe.

The research seeks to obtain comprehensive insights from essential stakeholders, with the goal of elucidating the complexities of healthcare service procurement in Zimbabwe. The Ministry of Health and Child Care contributed valuable information regarding the procurement processes within the healthcare sector, including financial transactions, obstacles to achieving transparency, and strategies to combat IFFs. Additionally, it highlighted the effects of procurement practices on

healthcare services, the challenges presented by IFFs, and suggestions for improving procurement efficiency. The Procurement Regulatory Authority of Zimbabwe provided an overview of the regulatory framework that governs procurement, the difficulties encountered in enforcing these regulations, and the organization's efforts to prevent and address IFFs in healthcare procurement. The media, particularly Business and Economics Investigative Journalists, play a crucial role in disseminating information about cases or investigations related to IFFs in the healthcare sector, the challenges associated with reporting such incidents, and their function in fostering awareness and promoting transparency. An academic selected as a key informant offered scholarly perspectives on the broader implications of illicit IFFs on global healthcare systems, insights into theoretical frameworks that address financial misconduct in the health sector, and research-based recommendations for policy interventions.

The contributions of the Non-Governmental participant shed light on the ramifications of IFFs on healthcare services, the obstacles faced in promoting transparency, and the potential strategies or interventions that Non-Governmental Organizations might employ to tackle these issues. This research employed a documentary review methodology, which proved effective in gathering reliable white and grey data regarding the influence of IFFs on the healthcare sector in Zimbabwe and beyond. The study also incorporated reports specifically addressing IFFs within the health sector, which are submitted quarterly. These reports scrutinized the prevalence of IFFs in Zimbabwe's public procurement system, particularly within the healthcare domain, and identified various manifestations of IFFs, including bid rigging, bribery, and corruption. The analysis of IFFs in the health sector utilized reports from the Reserve Bank of Zimbabwe (RBZ), including the Financial Intelligence Unit (FIU) Annual Report 2022, which offers a comprehensive overview of IFFs affecting Zimbabwe, with a focus on the health sector. This report highlights various forms of IFFs, such as trade mis-invoicing, money laundering, and tax evasion. Additionally, the Risk Assessment report from RBZ (2021) evaluates the risks associated with IFFs in the health sector, identifying contributing factors such as the intricate nature of the healthcare supply chain, the high value of pharmaceuticals, and the lack of transparency in certain procurement processes. The Guidelines for Combating IFFs in the Health Sector (Reserve Bank of Zimbabwe, 2020) provide strategic recommendations for addressing IFFs, encompassing areas such as risk assessment, customer due diligence, reporting of suspicious transactions, and fostering international cooperation. Furthermore, the study referenced the Thabo Mbeki Report (2015), the United Nations FACTI Panel Report (2020), and the Addis Ababa Action Agenda (2015), with the Thabo Mbeki report anticipated to deliver a thorough evaluation of the volumes and sources of IFFs originating from Africa.

4. DISCUSSION OF FINDINGS

This section provides an analysis and presentation of the results derived from the collected data, focusing on the patterns and prevalence of IFFs within Zimbabwe's health sector. Following this, the impact of IFFs on domestic resource mobilization and the associated challenges in addressing these flows in the context of health service

provision were also examined and discussed. The next segment delved into the critical obstacles faced in the fight against IFFs in Zimbabwe's healthcare system. Finally, the last analytical segment reviewed and presented data concerning strategies aimed at alleviating the adverse effects of IFFs on health service delivery.

4.1. Patterns and prevalence of IFFs in Zimbabwe's health sector

A participant from the Ministry of Health and Child Care stated that: *There have been instances of healthcare providers engaging in fraudulent billing practices, such as inflating invoices; as has been the case with the Drax scandal, billing for unnecessary procedures, or even billing for services not rendered. This can lead to substantial financial losses within the sector. Furthermore, in my role, I've observed instances of over-invoicing in procurement contracts for medical supplies. This practice artificially inflates the cost, leading to financial losses and diverting funds from essential healthcare services. Additionally, there are cases of collusion between suppliers and internal staff, compromising the fairness of the procurement process and contributing to IFFs within the Ministry of Health and Child Care.*

The above sentiments were echoed by the participant from the Procurement Regulatory Authority of Zimbabwe who stated:

We've identified a pattern of non-compliance with procurement regulations in the healthcare sector. Some entities involved in healthcare procurement engage in transfer pricing, manipulating prices to shift funds illicitly. We're actively working on strengthening our regulatory measures to curb these practices and ensure financial integrity within the healthcare sector.

A journalist who participated in the study mentioned that: *Through investigations, we've uncovered instances of corruption in the procurement process within the Ministry of Health and Child Care. Kickbacks, bribery and fraudulent billing practices have been exposed, leading to substantial financial losses. Our role is to bring these issues to light, holding those involved accountable and contributing to increased transparency within the healthcare sector.*

A representative from one Non-Governmental Organization was of the view that: *Our organization has observed a concerning trend of funds intended for health projects being diverted for personal gain. This not only affects the financial integrity of the healthcare sector but also hampers the delivery of essential services. We work towards advocating for greater transparency and accountability to address these challenges and ensure that funds reach their intended purposes.*

An academic who participated in the study argued that: *I've noted a significant impact of transfer pricing on the healthcare sector's financial integrity. The manipulation of prices in cross-border transactions and the use of complex financial structures contribute to substantial revenue losses. Understanding these economic intricacies is crucial for implementing effective policies that safeguard the financial integrity of the healthcare sector.*

The existing literature largely corroborates the key informant's assertion regarding the prevalence of fraudulent billing practices among healthcare providers within the Ministry of Health and Child Care in Zimbabwe. The patterns identified in

the literature concerning IFFs in the healthcare domain are consistent with the informant's accounts. Specifically, practices such as billing for unnecessary procedures, over-invoicing, and opaque pricing mechanisms, as highlighted by the informant, are recognized in scholarly works as significant contributors to IFFs, resulting in financial detriment and the misallocation of resources away from critical healthcare services (Binions, 2019; Kaplinsky & Kraemer-Mbula, 2022). The Drax scandal, which the informant specifically referenced, aligns with documented cases of over-invoicing that occurred during the COVID-19 pandemic, thereby illustrating the considerable financial repercussions of such fraudulent billing practices on the healthcare system (Kurebwa, 2021). Furthermore, the literature emphasizes embezzlement and misappropriation as pivotal forms of IFFs, reinforcing the informant's reference to billing for services not rendered as a manifestation of misappropriation. Additionally, the literature highlights the influence of inadequate governance frameworks and a lack of transparency in enabling IFFs, which aligns with the informant's observations regarding governance deficiencies within the healthcare sector (Cobham & Janský, 2019). Overall, the literature offers a coherent framework that supports and resonates with the key informant's insights on IFFs in the Ministry of Health and Child Care. The insight that healthcare funds can be laundered through various entities, thereby concealing the illicit origins of the money, resonates with Chauhan's (2021) analysis of money laundering in the healthcare sector, highlighting the intricate nature of these operations that involve elaborate financial transactions. Furthermore, the engagement of healthcare professionals in tax evasion contributes to a decline in the overall tax revenue allocated for public healthcare, which corresponds with academic discussions regarding the effects of tax havens and the resulting diminishment of resources for essential health infrastructure (Akintoye et al. 2022).

The key informant's reference to cross-border financial flows, which are enabled by inadequate regulatory frameworks, aligns with existing literature that addresses the global characteristics of IFFs and the impact of regulatory shortcomings in facilitating these transactions. The informant's emphasis on the difficulties in tracing funds due to tax evasion and international transfers corresponds with scholarly discussions regarding the complex challenges of monitoring illicit financial activities (Shaxson, 2018). Participants acknowledge the transnational dimensions of IFFs and underscore the necessity for international cooperation, involving organizations such as the International Monetary Fund (IMF) and the United Nations (UN). Furthermore, the emphasis on enhancing domestic resource mobilization and decreasing dependence on external funding sources is consistent to fortify healthcare systems against IFFs.

4.2. Effects of IFFs in the health sector on domestic resource mobilization

A participant from the Ministry of Health and Child Care was of the view that: *IFFs have significantly hampered domestic resource mobilization for healthcare at by distorting procurement processes. Unethical practices, such as overpricing and embezzlement, divert funds away from essential health projects. This compromises our ability to allocate resources efficiently and deliver quality healthcare services as intended. Furthermore, IFFs may exacerbate human resource challenges within the*

health sector as has been witnessed by the shortage of staff particularly at major referral hospitals like Parirenyatwa and Harare Hospitals. Insufficient funds can lead to inadequate salaries and benefits for healthcare professionals, making it difficult to attract and retain skilled personnel. We have seen a massive brain drain of skilled personnel particularly to the UK in the last 2 years. This, in turn, affects the overall effectiveness of healthcare delivery.

In support of the above sentiments, a participant from the Procurement and Regulatory Authority of Zimbabwe stated that: *From a regulatory standpoint, IFFs have posed a substantial challenge to our efforts in ensuring transparent and accountable procurement. The complex nature of these flows often circumvents existing regulations, allowing for financial malpractices. Strengthening regulatory frameworks and collaboration with key stakeholders are imperative to curb the adverse impact of IFFs on domestic resource mobilization for healthcare furthermore, IFFs can lead to reduced budgetary allocations for the health sector; jeopardizing the country's adherence to the Abuja Declaration on health spending. When funds are siphoned off through various illicit means, the government has less revenue to allocate to crucial areas like drugs and medical equipment, affecting the Health Ministry's ability to fund essential services, infrastructure and personnel.*

A journalist mentioned that: *IFFs in healthcare procurement have severe consequences for domestic resource mobilization. The diversion of funds through fraudulent practices compromises the government's ability to allocate sufficient resources to critical health programs. Transparency and accountability are crucial to expose and address these IFFs, ensuring funds are directed towards the enhancement of healthcare services.*

A participant from a Non-Governmental Organization argued that: *As an NGO, we witness the direct impact of IFFs on domestic resource mobilization for healthcare. These flows undermine the effectiveness of health programs, limiting the resources available for our initiatives. Advocacy for transparency, collaboration with government bodies and public awareness campaigns are essential to address the root causes of IFFs and protect the integrity of healthcare financing. In addition, IFFs may result in the underfunding of health programs and initiatives. This can limit the Health Ministry's capacity to implement and sustain vital health projects, such as disease prevention campaigns, vaccination programs and the improvement of healthcare infrastructure and equipment.*

The academic was of the view that: *The repercussions of IFFs on domestic resource mobilization in healthcare are profound. These financial leaks compromise the government's ability to implement robust health policies and invest in infrastructure. Addressing the economic root causes, implementing rigorous oversight mechanisms, and investing in capacity building are essential steps to mitigate the impact of IFFs on healthcare financing and ultimately improve health outcomes.*

The existing literature aligns closely with the insights offered by key informants, collectively highlighting the significant and complex effects of IFFs on Zimbabwe's healthcare system. The identified issues related to skewed procurement practices, unethical conduct, and subsequent disruptions in resource distribution within the Ministry of Health and Child Care resonate with the arguments presented by

Mazibuko (2017) and James et al. (2018), who discuss the detrimental consequences of IFFs on health budget allocations. The literature corroborates the concerns raised by key informants regarding the diminished capacity to finance critical services, infrastructure, and personnel, thereby reinforcing the notion that IFFs obstruct domestic resource mobilization for healthcare. Additionally, the literature reflects the key informants' focus on the global and regional implications of IFFs, advocating for comprehensive international strategies and regional collaboration to effectively tackle this issue. The consistent themes emerging from both key informants and academic sources highlight the pressing necessity for coordinated initiatives to combat IFFs and protect healthcare resources in Zimbabwe. The alignment between the literature and the perspectives of key informants underscores the seriousness of the IFF issue within the healthcare sector in Zimbabwe.

4.3. Challenges in curbing IFFs in the provision of services in the health sector

The study solicited information on the challenges of combating IFFs in the provision of services in health.

An academic responded to the issue of challenges by mentioning that: *The main challenge is probably just the lack of or weak cooperation between countries. I mean, these IFFs often involve moving money across borders, and without international collaboration, it's challenging to track and stop them. In addition to that, a fundamental challenge lies in the economic complexities of the healthcare sector. IFFs often exploit gaps in financial management, pricing structures, and reimbursement systems. The lack of a robust economic framework makes it challenging to quantify the actual impact of IFFs on healthcare provision. An interdisciplinary approach that integrates health economics principles is essential for a more nuanced understanding and effective counteraction.*

In view, of the above sentiment the participant from the Ministry of Health and Child Care argued that: *One significant challenge in curbing IFFs in healthcare procurement is the lack of a comprehensive monitoring system. The intricate nature of transactions and the diverse actors involved often make it challenging to track and identify suspicious financial activities. This hampers our efforts to ensure transparency and accountability in the procurement processes in addition, the lack of technological expertise is a significant challenge. Many countries, including Zimbabwe, face difficulties in tracking financial transactions due to limited access to advanced technology. Without proper technology, it's hard to detect and prevent IFFs.*

A participant from the Non-Governmental Organization stated that: *One of the major challenges we encounter is the limited collaboration between NGOs and governmental bodies. The fragmented nature of efforts and information silos impede a holistic approach to address IFFs. NGOs can offer valuable insights, but without a coordinated effort with government agencies, it's difficult to implement comprehensive solutions that encompass both prevention and intervention strategies. I believe corruption is the primary obstacle. In many countries, especially in Africa, corruption within government institutions facilitates IFFs. It diverts substantial revenue away*

from essential services like healthcare, compromising the ability to combat illicit financial activities effectively

A journalist mentioned that: Reporting on IFFs in healthcare faces obstacles due to the lack of transparent information. Procurement deals are often shrouded in secrecy, making it challenging to access crucial data. Additionally, there's a fear of reprisals, hindering potential whistle-blowers from coming forward. Media plays a critical role, but without open access to information, exposing IFFs becomes an uphill battle. Furthermore, the vulnerability of healthcare systems, especially in resource-constrained settings like ours, exacerbates the consequences of IFFs. When healthcare systems are already facing funding challenges due to limited fiscal resources, the depletion of crucial financial resources through illicit dealings and flows further hinders their ability to provide essential health services.

In support of the above, a participant from the Procurement Regulatory Authority of Zimbabwe was of the view that: From a regulatory perspective, one of the key challenges is the limited capacity to enforce compliance across the entire healthcare procurement ecosystem. Existing regulations might not be stringent enough and the sheer volume of transactions makes it difficult to conduct thorough reviews. Strengthening regulatory frameworks and enhancing collaboration with other oversight bodies are crucial for effective IFF prevention.

The perspectives offered by the key informants closely correspond with existing academic literature, highlighting the intricate challenges posed by IFFs within the healthcare domain. The call for international cooperation, as articulated by Johansson & Svensson (2019), is echoed by the key informant, who underscores the complex transnational dimensions of IFFs and the urgent need for a coordinated global response. The recognition of corruption as a major barrier aligns with findings from Makoni (2020) and Taruvinga (2016), which stress the role of corruption in enabling IFFs and misappropriating critical resources from healthcare services. Furthermore, the technological challenges identified by Zimunya et al. (2022) and Sebele-Mpofu et al. (2021) reflect the key informant's comments regarding the difficulties faced by nations, such as Zimbabwe, in monitoring financial transactions due to inadequate technological infrastructure. The susceptibility of healthcare systems, as examined by McGuire and O'Sullivan (2018) and Doherty and Ryan (2017), resonates with the key informant's acknowledgment of the severe consequences of IFFs on regions already struggling with limited healthcare resources. Additionally, the significance of political will and accountability, as highlighted in the literature, aligns with the key informant's observation regarding the crucial role of political commitment in strengthening the healthcare sector against illicit financial activities. The alignment between the insights of key informants and scholarly research emphasizes the complex challenges and the necessity for a holistic, collaborative strategy to effectively combat IFFs in the healthcare sector.

4.4. Strategies for mitigating the effects of IFFs on the provision of services in the health sector

In response to the strategies that can be used to combat IFFs in the healthcare sector effectively, a Non-Governmental Organization argued that: *Improving financial transparency through the implementation of robust reporting and monitoring systems is crucial. This involves ensuring that financial transactions within the healthcare sector are traceable, accountable, and subject to regular audits, thereby discouraging illicit activities. NGOs should intensify advocacy efforts for transparency in healthcare services. This includes engaging with policymakers, healthcare providers, and the public to raise awareness about the consequences of IFFs. NGOs can also propose and support the implementation of policies that promote openness and accountability in healthcare procurement.*

In response, a participant from the Ministry of Health and Child Care stated that: *Develop and enforce robust internal controls within the procurement processes of the health sector. This includes implementing stringent oversight mechanisms, enhancing transparency in financial transactions and conducting regular audits to identify and prevent potential avenues for IFFs.*

The participant from the Procurement and Regulation Regulatory Authority of Zimbabwe stated that: *Investing in financial forensics and technological solutions is key. Developing the capacity to analyze financial data and employing advanced technologies, such as data analytics and block chain, can enhance the ability to detect and prevent illicit financial activities within the healthcare sector. Foster closer collaboration between regulatory bodies, such as PRAZ and healthcare procurement entities. Establish mechanisms for seamless information sharing to ensure that regulatory compliance is consistently maintained. Strengthening this partnership can help identify and address irregularities more effectively.*

The above sentiments were also echoed by the journalist who mentioned that: *Advocating for increased support for investigative journalism focused on exposing instances of IFFs within the healthcare sector. Implementing measures to protect whistle-blowers who play a crucial role in bringing such issues to light. Transparency in reporting can act as a deterrent and prompt corrective actions. The sector should have enhanced international collaboration and information sharing as a crucial step, considering the cross-border nature of IFFs. Zimbabwe can work with other countries and international organizations to share intelligence, investigate transnational financial activities and collectively combat IFFs. Implementing asset recovery initiatives has helped reclaim funds that have been illicitly siphoned off. This involves legal processes to seize and return assets obtained through corrupt practices, contributing to both punishment and deterrence but the processes are winding and can take a lot of time before actual seizure happens.*

An academic was of the view that: *Political will and accountability are critical factors in fighting IFFs. If there is a lack of commitment at the political level to address IFFs, efforts to curb these activities within the healthcare sector may be undermined. We have seen that former Health minister Dr Obadiah Moyo was acquitted after facilitating dubious procurement deals during a medical emergency. Ensuring accountability and commitment from all stakeholders is essential. In addition, engage health economists in the design and evaluation of healthcare procurement policies. Their expertise can contribute to the development of economically sound*

strategies that not only prevent IFFs but also optimize the allocation of resources within the healthcare sector. This interdisciplinary approach can lead to more effective and sustainable solutions. Furthermore, strengthening and updating regulatory frameworks is essential in curbing IFFs. This includes introducing and enforcing laws that specifically target IFFs within the healthcare sector and the establishment of the anti-corruption court is a good stepping stone. Clear and stringent regulations can act as a deterrent and provide a basis for legal action against those involved in illicit financial activities.

Furthermore, securing political commitment to combat IFFs is critical. Leadership support is essential for the successful implementation of anti-corruption measures and regulatory reforms. Ensuring accountability at all levels of government reinforces the commitment to curbing IFFs. The perspectives obtained from key informants closely correspond with academic viewpoints regarding the reduction of the effects of IFFs on healthcare services. The focus on enhancing financial transparency, traceability, and accountability in healthcare transactions, as advocated by these informants, aligns with the findings of scholars such as Stiglitz and Pieth (2016) and Madhombiro and Marchal (2019). The insistence on stringent financial regulations and tax laws to combat IFFs, as noted by the informants, reflects recommendations found in the literature (Stiglitz & Pieth, 2016; Schlenther, 2016). The promotion of open contracting in healthcare procurement, highlighted by the informants, is in agreement with scholarly arguments emphasizing the necessity of transparent procurement practices (Jitong, 2019). The call for strong regulatory frameworks, regular audits, and legal enforcement, emphasized by both key informants and researchers such as Bhatia and Skovgaard (2018), Chinoda, Muchabaiwa, and Mudyahoto (2020), and Chikanda and Tawodzera (2019), illustrates a mutual focus on establishing a robust regulatory environment. Additionally, the informants' emphasis on international collaboration and information sharing aligns with academic discussions regarding the transnational characteristics of IFFs and the critical need for global cooperation (Persson & Gustavsson, 2019; Tornquist & Holmgren, 2019). This convergence between the insights of key informants and scholarly research highlights a holistic strategy for addressing IFFs within the healthcare sector.

5. CONCLUSIONS

The research identified that IFFs within Zimbabwe's healthcare system manifest in multiple ways, particularly through deceptive billing practices such as the inflation of invoices, charging for unnecessary medical procedures, and billing for services that were not provided. The investigation also uncovered instances of over-invoicing in procurement contracts for medical supplies, as well as collusion between suppliers and internal personnel, which further undermines the financial integrity of the healthcare sector. The findings highlighted significant financial losses and the misallocation of funds away from critical healthcare services due to these practices. Additionally, the study pointed out patterns of non-compliance with procurement regulations, issues related to transfer pricing, and corruption within the procurement process, including kickbacks, bribery, and fraudulent billing. These results are

consistent with existing literature on IFFs in Zimbabwe's healthcare sector, underscoring the urgent need for robust anti-corruption initiatives, transparent procurement practices, and enhanced regulatory oversight.

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