SIMPLIFIED EARLY ACTION PROTOCOL
OPERATIONS UPDATE #4

Zimbabwe | Cholera

17 July 2026

Figure 1: Volunteer deployment in Sakubva, Mutare City, Zimbabwe, Photographer: Addmore Nyawasha, Project Coordinator, ZRCS

sEAP №: **sEAP2025ZB02**	Operation №: **MDRZW026**	sEAP approved: **16/10/2025**
sEAP approved: **16/10/1025**	Early action timeframe: **6 Month**	Timeframe covered by this update: **16/10/2025-17/07/2026**

Budget: 108,450 CHF
To assist: 61,780 people

SIMPLIFIED EARLY ACTION PROTOCOL

Summary of revisions to the operation

The Zimbabwe Red Cross Society (ZRCS) requests a no-cost extension of the Cholera Simplified Early Action Protocol (sEAP) implementation period until 30 September 2026. No changes are proposed to the approved budget, geographical coverage, target population, intervention strategy, or planned activities. The requested extension is solely intended to provide sufficient time to complete critical operational learning and review processes that are essential for strengthening the current and future effectiveness of the Cholera anticipatory action.

The current implementation period concludes before the planned Cholera sEAP Operational Review, which has been scheduled for the last week of August 2026. This review will bring together the NS, PNSs and IFRC to assess the implementation of the sEAP, review operational performance, identify good practices and operational challenges, and document recommendations for strengthening future anticipatory action for cholera.

Immediately following the Operational Review, ZRCS will conduct a Lessons Learnt Workshop to consolidate findings from the review, capture experiences from volunteers, staff, government counterparts and partners, and identify practical recommendations for improving the design, activation triggers, implementation arrangements, coordination mechanisms, monitoring systems and operational readiness of the future Cholera sEAPs. The requested no-cost extension will therefore ensure that both the Operational Review and Lessons Learnt Workshop are completed within the implementation period, allowing their findings to be formally incorporated into the final operational documentation and future revisions of the Cholera sEAP. These activities are consistent with ZRCS commitments to learning, accountability, and continuous improvement of anticipatory action programming. No additional funding is being requested. All activities associated with the extension will be implemented using the existing approved budget.

Operations Update 4 represents a transition from implementation of early actions to consolidation, learning and institutionalisation of the Cholera sEAP experience. While Operations Update 3 documented significant delivery of preparedness and response actions, Update 4 focuses on ensuring that these achievements are reviewed, lessons are captured and the model is strengthened for future activations.

Key achievements

- Early action implementation was successfully advanced from preparedness to operational delivery. In the previous update, ZRCS established and strengthened community-level RC-CATI capacity, including volunteer training, community engagement, surveillance and preparedness activities. Update 4 confirms that ZRCS has continued implementing preparedness and early actions in close coordination with MoHCC and IFRC, demonstrating continuity from the initial activation through to the finalisation phase.
- The operation has progressed from immediate response readiness to consolidation of operational experience. Operations Update 3 demonstrated strengthened frontline capacity through RC-CATI volunteers, prepositioning of cholera supplies, water safety interventions and community-level activities. Update 4 now shifts the emphasis toward documenting performance, validating lessons and identifying improvements for future activations, indicating that the operational experience generated through these interventions is being deliberately converted into institutional learning.
- The sEAP has generated sufficient operational experience to support a structured review of the anticipatory action approach. The planned Operational Review (24-28 August 2026), will assess implementation performance, identify good practices and challenges, and develop recommendations for future cholera anticipatory action. This builds directly on the operational achievements reported in the earlier updates, including early detection, RC-CATI deployment, WASH interventions, coordination and preparedness.
- Learning will be broadened beyond ZRCS to include key operational stakeholders. The planned Lessons Learnt Workshop will capture experiences from volunteers, ZRCS staff, government counterparts and

partners. This provides an opportunity to consolidate lessons from the community-level and institutional interventions implemented during the operation and translate them into practical recommendations.

- The operation is strengthening the future design of the Cholera sEAP. Lessons from implementation will inform improvements to activation triggers, implementation arrangements, coordination mechanisms, monitoring systems and operational readiness.
- Operational continuity has been maintained without additional funding. ZRCS requested a no-cost extension to allow the Operational Review and Lessons Learnt Workshop to be completed within the implementation period. Importantly, there are no proposed changes to the approved budget, geographical coverage, target population, intervention strategy or planned activities, and the extension will use the existing approved budget.

Early Action Overview

PLANNED OPERATIONS

Health & Care	Female > 18:	Female < 18: **1,108**	**26,971 CHF**
	Male > 18:	Male < 18: **1,024**	AP Code: **107,108, 109**
Indicator:	1. # of people trained in ORP approach (198F 184M). 2. # of people covered by Oral Rehydration Points (910F 840M).		
Priority Early Actions:	**1.** Deployment of the Surge Team to target district: The Surge Team will be deployed immediately to the affected district outside of Harare to conduct rapid assessments in areas with suspected cases in coordination with CoHHD and MoHCC. The team will be composed of national RRT members and BORT Trainers, who will support district-level structures in investigating cases. The teams will be equipped to support rapid assessments, including RDT kits to allow for quick confirmation of results.		

Water, Sanitation and Hygiene	Female > 18:	Female < 18: **1**6,250	**42,416CHF**
	Male > 18:	Male < 18: **15,000**	AP Code: AP111
Indicator:	Number of people with access to improved water quality.		
	Number of people reached with cholera messaging to reduce spread		

Priority Early Actions:	**1. Accelerated installation of inline chlorinators:** Fast-track procurement, installation, and commissioning of inline chlorinators at all contaminated boreholes as a sustainable, long-term water treatment solution. **2. Enhanced water quality monitoring:** Continue regular water testing and sanitary surveillance to track contamination levels, assess intervention effectiveness, and guide scale-up to additional high-risk sites where necessary. 3. **Targeted RC CATI:** Intensify community awareness on safe water handling, hygiene practices, and the purpose and correct use of chlorinated water to improve acceptance and compliance. **4. Strengthening coordination with local authorities:** Engage city health departments and WASH stakeholders to align interventions, support installation of chlorination systems, and ensure sustainability through shared ownership.

Enabling approaches

Coordination and Partnerships	Female > 18:	Female < 18: N/A	**1,081CHF**
	Male > 18:	Male < 18: N/A	AP Code: **118, 119, 127, 128**
Priority Early Actions:	**1. *Development of DREF submission package:*** Informed by the activation of phase two early actions (confirmation of cases in Harare) ZRCS will call a meeting to inform the IFRC of their intention to develop a DREF which will address outbreaks which occur outside of Harare. The DREF document will be informed by the findings of the mobile Surge Teams deployments in additional districts and will leverage the existing prepositioned stocks. The DREF document will support the sustained interventions which will be required as a result of a multi- district cholera outbreak. **2. *Lessons learned workshop:*** Following the completion of the Early Actions the ZRCS AA Working Group will host a lesson learned workshop which will assess the effectiveness and appropriateness of the trigger and actions undertaken in the EAP and will support resubmission and informing lessons for the development of a full EAP.		
Achievements under Early Actions	The Technical Working Group has been active and engaged supporting the review of the SEAP from the triggering process and the changes that have occurred in the activation phase		

Secretariat Services	Female > 18:	Female < 18: **4**	**9,259 CHF**
	Male > 18:	Male < 18: 3	AP Code: **122**
Priority Early Actions:	1. Bank Charges.		

	2. Contribution of Salary to CCD Ops Mgt. 3.Travel costs for cluster supervision.		
Achievements under Early Actions	The CCD has continued with technical and supervisory support to the NS in the execution and review of the SEAP. The CCD is part of the technical working group and has even linked the NS to several platforms to showcase lessons in the execution of the SEAP like the IFRC Cholera TWG and the Health Monthly meetings		
National Society Strengthening	Female > 18:	Female < 18: **190**	**28,723 CHF**
	Male > 18:	Male < 18: 190	AP Code: **124,125,126**
Priority Early Actions:	**1.** Cholera Preparedness Project Coordinator 50%: The project coordinator will guide the activation process, ensuring that required data is shared from the target districts, notifications are developed and submitted, and that planning, funding and implementation of interventions are conducted according to the agreed schedule of the sEAP. **2.** Mobile District Field Officer 100%: During an activation, the NS will allocate a DFO to support the assessments, training and activities under the early action segments. The DFO will need to be allocated to the protocol rapidly to ensure that actions are implemented according to the planned schedule. **3.** Finance Assistant 40%: The Finance assistant will support all financial processes during the activation period. **4.** PMER Officer 20%: The PMER officer will support monitoring of all project activities following an activation, ensuring the protocol achieves its set goals and objectives		

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Reference

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