

Programme Update



International Federation
of Red Cross and Red Crescent Societies

Zimbabwe

Appeal No. MAAZW001

31 December 2008

This report covers the period
01/07/2008 to 31/12/2008.



ZRCS care facilitators distributing food at Rimuka Primary School in Kadoma, Mashonaland West Province

In brief

Programmes purpose:

Zimbabwe Red Cross Society (ZRCS) programmes are focused on reducing the suffering of the most vulnerable people and communities by contributing to the reduction of numbers of deaths, injuries and impact from disasters, diseases and public health emergencies, increasing local community, civil society and Red Cross capacity to address the most urgent situations of vulnerability and reducing intolerance, discrimination, social exclusion and promoting respect for diversity and human dignity. Zimbabwe is currently facing a deepening humanitarian crisis with adverse socio-economic repercussions, which have a direct impact on the wide population, at the same time making the work of Red Cross even more pertinent. The demand for humanitarian services is on the increase due to the on-going social, political and economic crises in the country.

Programme(s) summary:

ZRCS activities are mainly on community home-based care (HBC), water and sanitation (WatSan), disaster preparedness and response, food security and sustainable livelihoods programmes. The National Society continues advocating for the needs of the vulnerable people in order to fulfil its commitment to Humanitarian Principles and action. There has been increased effort on institutional capacity development and financial management such that the ZRCS is progressing towards financial self reliance. With Red Cross volunteers being the core resource in community-based activities, more resources have been directed towards branch development and volunteer management.

One of its vibrant long-term programme is the HIV and AIDS, which has 2010 targets of reaching 1.3 million people with prevention activities, 34,000 with treatment, care and support while 75,000 orphans and vulnerable children (OVC) are provided with a holistic care and support programme encompassing educational and psychological support, nutrition and provision of hygiene material. The WatSan programme provides sustainable environmental services, including safe water supply, sanitation facilities and hygiene promotion set to benefit 100,000 people in targeted area, and with support of the African, Caribbean and Pacific – European Union (ACP/ EU) WatSan initiative.

In response to the deteriorating food supply in the country, ZRCS launched a food security emergency operation through the International Federation of Red Cross and Red Crescent (IFRC); a preliminary appeal ([MDRZW003](#))¹ for CHF 27,755,314 (USD 26,837,020) to support 260,100 beneficiaries mostly beneficiaries of the community HBC programme.

In November 2008, Zimbabwe recorded its worst cholera outbreak and by end of December, cumulative total of suspected cases was 29,000 and 1,500 deaths, with case fatality rate of 5.4 percent. At the request of the ZRCS, the IFRC released Disaster Relief Emergency Funds (DREF) of CHF 403,302) to initiate the cholera operation ([MDRZW004](#))². The emergency appeal was launched on 23 December and targets 1.5 million people through a budget of CHF 10,170,233 and to be implemented within seven months. The disaster management department is currently focused on the cholera intervention in all ten provinces through assistance of ZRCS volunteers, and in collaboration with the Ministry of Health and Child Welfare, Civil Protection Unit, UN agencies, MSF, and other non-governmental organisations.

ZRCS budget and activities for 2008 have therefore been revised to reflect the current and envisaged humanitarian needs in the country, and focus is on disaster response and capacity building at local level.

Financial situation: The total budget for 2008 was CHF 3,033,867 of which 75 percent is covered. The budget was revised for 2008 to CHF 2,343,021 as indicated in the table below.

Programmes	2008 Budget in CHF	Revised 2008 Budget in CHF	Revised 2008 Budget in CHF (less contributions received)
Disaster Management	732,236	1,062,300	1,200,000
Capacity Building	364,599	167,446	364,599
Coordination, Principles and Values	778,422	665,164	778,422
TOTAL	1,875,257	2,343,021	858,722

[Click here to go directly to the attached revised budget](#)

No. of people we help:

- 73,136 clients have been reached under the community-based HIV and AIDS programme including HBC clients (17,614), OVC (53,000), care facilitators (1,455), peer educators (623) and youth advisers (444).
- Over 30,000 (6,000 households) people have been provided with safe water, sanitation facilities, and reached through health and hygiene education activities under the ACP/EU supported water and sanitation (WatSan) programme in Mount Darwin district in Mashonaland Central Province. It is expected that by the end of the project in 2009, a total of 100,000 people (20,000 households) will have benefited from the intervention.
- 260,787 beneficiaries have received 6,059.54 MT of maize, 908.49 MT of pulses and 302.84MT of oil, so far distributed under the emergency food security operation.
- 20,186 households are being targeted for agriculture recovery and 25, 000 households are being targeted for livelihoods.

¹ <http://www.ifrc.org/docs/appeals/annual08/MDRZW003pa.pdf>

² <http://www.ifrc.org/docs/appeals/annual08/MDRZW004.pdf>

- The disaster management programme is targeting 50,000 people with long-term activities on preparedness and response.
- Food Security emergency operation is targeting 260,100 people.
- Cholera operation is targeting 1.5 million people for a period of seven months.
- The promotion of Humanitarian Values and Fundamental Principles is targeted at one million people throughout the country.

Our partners:

ZRCS long-term programmes are implemented through bilaterally and multilaterally support from Government line Ministries, United Nations agencies (WFP, UNICEF, WHO), ECHO, EuropeAid, 35 community-based organisations, plus the support of six Partner National Societies (British, Danish, Finnish, Japanese, Norwegian and Swedish Red Cross Societies). Technical support is provided by the IFRC through the Country Representation Office and ICRC delegation in Harare.

Context

The political situation has remained tense in the aftermath of the presidential elections and the subsequent run-off held in March and June 2008 respectively. Socio-economic decline is deepening and the humanitarian situation is aggravated. The harsh economic environment with inflation at the beginning of the reporting period reaching 231 million percent had a negative impact on the programmes being carried out by humanitarian agencies and directly on the already vulnerable communities.

The nationwide unavailability and limited access to food and other essential goods and service has distressed livelihoods and constrained the implementation of humanitarian activities. Compounded by rising food prices on the world market, it has reduced purchasing power of the people. The effects of the climate change (droughts and flooding) have also contributed to the increased vulnerability, evidenced by the current food crisis. The Food and Agricultural Organization (FAO) and WFP joint crop and food supply assessment (CFSAM) of June 2008, estimated that the total number of food insecure people in rural and urban areas would be 3.8 million between October and December 2008. This figure is expected to rise to 5.1 million between January and March 2009, representing just under half of the total population of Zimbabwe.

Related to the deplorable state of water supply, hygiene and depleted health services, a cholera outbreak was recorded in November. The cholera outbreak has spread to all ten provinces of Zimbabwe and on 23 December 2008, Matebeleland North province which had been spared of the outbreak, reported cholera in Binga district. The latest cumulative figures as of 28 December are 29,131 suspected cases and 1,564 deaths with a case fatality rate (CFR) of 5.4 percent. The cholera is expected to spread further with the intensifying rainy season as well as population movement during the holiday and festive season, where many people leave towns for their rural homes.

The main contributing factors to the countrywide cholera outbreak are reported as weakened health and municipal services with local authorities unable to provide adequate reticulation of the water system, waste collection and adequate sanitation facilities in urban centres due to unavailability of water treatment chemicals: irregular refuse collection and inadequate sanitation facilities in addition to lack of materials for repairing damaged sanitation infrastructure; and thus spillage of sewerage within residential areas is a significant contributing factor. This situation is further exacerbated by the deteriorating economic situation and food insecurity in the country.

Despite numerous challenges in the operation environment, ZRCS remained operational and focussed on assisting the most vulnerable people. Assisted by the IFRC Country Representation office, the National Society consistently reviewed its budgets based on the pledges, its absorption capacity and humanitarian situation on the ground, which has enabled achieving the targets.

Progress towards outcomes

Disaster Management

Outcome(s)/Expected Result(s):

- Communities are aware of disaster hazards and have capacity to respond to emergencies.
- Vulnerability of communities in disaster prone areas reduced from impact of disaster through timely information dissemination, capacity building and resilience to disaster risk.
- Availability and access to food at household level is increased and their capacity to produce food for consumption is strengthened.

Achievements:

- At the request of ZRCS, IFRC launched a preliminary emergency appeal on Food Security in August, which is in full scale operation. Consolidated output reports from the eight provinces indicated that, for the first month of food distributions, the targeted 260,787 beneficiaries all received food.
- Out of the targeted 1,000 beneficiaries to benefit from livestock management training, 400 (40%) were trained, and 200 (40%) of the targeted 500 goats, were distributed.

Constraints or Challenges

- World Food Programme (WFP) priorities in loading relief items shifted several times, thus some Red Cross trucks were not loaded on time resulting in late dispatches. The WFP warehouses maintained strict opening hours with little flexibility based on loading needs.
- ZRCS has stopped food operation in Buhera and Zvishavane districts in order to avoid double dipping with other agencies such as Africare.
- The volatile Zimbabwean economy, changes in national financial policies and rising inflation reduced the numbers and quantities of actual commodities that could be purchased for the food security operation.
- There were also challenges in accessing cash from the bank to facilitate the smooth implementation of relief activities.

Health and Care

Outcome(s)/Expected Result(s):

- Access to clean and safe water and sanitation services improved in eight provinces of Zimbabwe.
- Increased hygiene awareness and change in behaviour according to the Participatory Hygiene and Sanitation Transformation (PHAST) practices amongst the 60,000 beneficiaries by 2009.

Achievements:

Despite the efforts made in carrying out health and hygiene education through planned long-term programmes, outbreaks of cholera began in the fourth quarter of the year. In response, ZRCS provided two cholera kits 60,000 water purifiers, 500 half a kilogramme bars of soap, 500 20-litres jerry cans and 500 bottles of bleach in Mashonaland Central provinces. In Midlands, the NS provided volunteers at the cholera treatment centres and also provided 500 pairs of latex gloves, 200 disposable masks, 500 water purifiers, ten jerry cans, 20 buckets and 680 pieces of information, education and communication (IEC) material. ZRCS is also conducting health and hygiene promotion, water disinfection, distributing IEC materials, 1,000 pairs of latex gloves and 12 bottles of bleach to CTCs in Matebeleland South Province. In Masvingo, Manicaland and Mashonaland West Province, the NS is conducting health and hygiene promotion as well as distributing IEC material.



Japanese Red Cross nurse teaching the nurses at Nyamunga clinic in Kariba how to use a protective gear

In complementing the effort of the National Society, The IFRC and Partner National Societies deployed Emergency Response Units (ERUs) as agreed by the Ministry of Health and Child Welfare. The ERU assets include three Basic Health Care (BHC) ERUs from the Finnish, Japanese and Norwegian Red Cross, operating as Cholera Treatment Centres and acting as hubs for volunteer activities; two Mass Sanitation ERUs from the British and Spanish Red Cross facilitating sanitation and hygiene promotion activities and two Water Supply ERUs from the German/Austrian and French Red Cross providing clean water for up to 55,000 people. The Canadian and

Australian Red Cross are also contributing with staff to support the ERU deployment. The ERUs are working in close coordination with the local ZRCS provinces and the communities they serve. As of 24 December, ERU moved in greater Harare, Manicaland, Mashonaland West and Midlands Provinces, accompanied by technical counterparts from ZRCS. The IFRC Southern Africa Zone office has also seconded technical staff until the operation team is in place.

ZRCS continues implementing the five-year integrated HIV and AIDS programme (2006 to 2010), which is funded under the Southern Africa Regional HIV and AIDS programme ([MAA63003](#))³ and a component of the Federation Global HIV and AIDS Alliance. The following progress was recorded under the HIV and AIDS programme:

- 5,000 youths were reached with prevention messages.
- 480 people were referred for voluntary counselling and testing (VCT) and prevention of mother-to-child transmission (PMTCT).
- 17,614 HBC clients and 53,000 OVC are benefiting from the programme.
- Anti-retroviral therapy (ART) outreach programmes started in the two pilot project areas namely Chivi in Masvingo Province and Mount Darwin in Mashonaland Central Province. A total of 234 clients (49 males and 162 females) in Mount Darwin and 55 clients (14 males and 41 females) in Chivi attended the opportunistic infection clinics. Plans are underway to launch the roll out of antiretroviral drugs (ARVs).
- 27 volunteers and eight prevention field officers attended training on basic OVC programming and the Hero Work trainer of trainers, facilitated by the IFRC Zone office in Southern Africa.
- Anti-stigma campaigns have been on-going during awareness campaigns conducted by Red Cross volunteers. The involvement of male volunteers and care facilitators has increased particularly in support groups. Currently, there are 678 males to 1,876 females in support groups.

Water and sanitation (WatSan) activities addresses the deficiencies in water supply and sanitation facilities, in contribution to the [Millennium Development Goals](#)⁴ and Federation [Global Agenda](#)⁵. The three year programme (2006 – 2009) is to provide safe drinking water to more than 100,000

³ <http://www.ifrc.org/appeals/annual06/MAA63003.pdf>

⁴ **Millennium Development Goals** – The UN Millennium Goals charter – states that by the year 2015, all 191 United Nations Member States have pledged to meet eight goals, thus, eradication of extreme poverty and hunger; achievement of universal primary education; promotion of gender equality and empowerment of women; reduction of child mortality; improvement of maternal health; combating HIV and AIDS, malaria and other diseases; ensuring environmental sustainability; development of a global partnership for development.

⁵ **Federation Global Agenda** - <http://www.ifrc.org/who/fof.asp#globalagenda>

people in Mt Darwin district, including HBC clients and OVC. To date, over 30,000 people have benefited from the project through the provision of safe water, sanitation facilities, and health and hygiene education. A media tour on WatSan programmes consisting of print and electronic media agencies in Zimbabwe was carried out to the project site focusing on impression of stakeholders including the community members. The following progress was recorded in the period July - November 2008 under the ACP/EU WatSan Project.

Water supply

- 62 water points have been rehabilitated bringing the cumulative total to 130 water points (over 100 percent of planned 110 for the implementation period).
- 68 out of the targeted 70 new boreholes have been successfully drilled of which 36 of the newly drilled boreholes were fitted with hand pumps.

Hygiene promotion

- 3,479 Participatory Hygiene and Sanitation Transformation (PHAST) groups were trained and over 14,137 people were reached with health and hygiene messages.

Latrine construction

- A total of 249 latrines were constructed, bringing the total number of latrines to 599 (86 percent of the overall target of 700).

Constraints or Challenges

- There was generally low community participation observed during the WatSan activities, presumed to be caused by hunger and limited time needed to source for basic commodities. Communities members are pre-occupied with fending for their families through local market and cross boarder trading, as well as other income-generating activities

Capacity Building/Organisational Development

Outcome(s)/Expected result(s):

- ZRCS has functional and strengthened structures in governance, management and volunteer management according to the characteristics of well functioning NS (WFNS).
- ZRCS has in place well defined policies and guidelines in programming and human resources development.
- Capacity of vulnerable communities in disaster preparedness, mitigation, response and recovery is strengthened through ZRCS community-based programmes.

Achievements:

In response to the need for capacity building at branch level, the IFRC Country Representation office conducted basic training at branch level. So far 180 branch and district leaders have been trained on governance issues, safer access (by ICRC) and branch and district development issues. Provincial and headquarters staff members also attended the workshops. The first and second Branch Development Workshops were held in Mutare and Harare in October and November respectively drawing a total of 89 ZRCS leaders from Manicaland, Mashonaland East, Mashonaland Central and Mashonaland West. Although the four provincial chairpersons and four other members of the provincial governing board were included as workshop participants, the focus was on district and branch leaders. The participating districts were: Mutare, Mutasa, Buhera, Chipinge, Mukuni, Chimanimani (Manicaland); Chikomba, Goromonzi, Murehwa, Mudzi, and Marondera (Mashonaland East).

Constraints or Challenges

- Like other programmes, capacity building initiatives, particularly at community level has little progress due to limited participation of community members.

Principles and Values

Outcome(s)/Expected result(s):

- To keep ZRCS humanitarian actions neutral, independent and ensuring that the NS is neither used nor perceived as being part of a wider political agenda, while promoting the International Humanitarian Law (IHL) and spreading knowledge on the Movement's Fundamental Principles and Humanitarian Values.

Achievements:

- ZRCS' participation in national and provincial agricultural shows provided an opportunity to increase outreach on promoting the Humanitarian Values and Fundamental Principles. The NS volunteers interacted with a wide range of people in terms of origin, age and sex thus discussing issue on HIV prevention, anti-stigma and discrimination and sexual gender based violence. The activities at the show also enhanced the visibility and image of the Red Cross, particularly profiling its work in the country.
- The NS has also entered into a partnership with the Zimbabwe Olympic Committee, and subsequently contracted to provide First Aid services during the Olympic Day Run.

Co-ordination

Expected Outcomes

- Improved role of the IFRC Country Representation in fostering the humanitarian agenda in Zimbabwe.

Achievements:

The IFRC Country Representation office has been very active in technical assistance at the call of the ZRCS. Precisely, support became handy during the development of emergency operations, as well as the implementation, monitoring and stakeholder management. Other activities coordinated by the country office include, contingency planning, donor relations management, resource mobilisation and capacity building initiatives.

Working in partnership

Partner

Ministry of Health

Ministry of Agriculture

Other government ministries and local authorities

National Aids Council

UNICEF

World Food Programme

World Health Organization

ECHO

European Union

ICRAF

Area of Cooperation

HIV and AIDS and general health issues e.g. cholera and malaria

Technical support for agricultural activities, policy and coordination

Food security and livelihoods, WatSan and disaster related issues.

Community HBC programme

OVC and CHBC programming

Food distributions

Assists technically on disease trends and outbreaks in collaboration with the Ministry of Health and Child Welfare

Disaster management

WatSan

Technical support for the livelihoods

CYMMIT	programme Technical support for the livelihoods programme
Agritex	Technical support for agricultural activities, policy and coordination
Zimbabwe Olympic Committee	Provision of first aid
Civil Protection Unit	Disaster management
British, Danish, Finnish, Japanese, Norwegian and Swedish Red Cross Societies	Food security, organisational development, disaster management
ICRC	Principles and values, Organisational development
IFRC	Technical support in all programme areas, also resource mobilisation

Contributing to longer-term impact

Collaboration and joint efforts with other humanitarian organisations greatly improved the implementation, coordination and management of health, nutrition, livelihoods and gender mainstreaming initiatives. In the long-term the expected outcome is poverty reduction and improved livelihoods within ZRCS project areas.

As mentioned earlier, ZRCS programmes are designed to contribute towards the achievement of the Millennium Development Goals and Federation Global Agenda Goals. As such, there has been measurable progress in the development of activities in sustainable food security initiatives at household level, educational support, health education and promotion and awareness campaigns, working in close collaboration with other Red Cross Movement components and key external stakeholders.

Looking ahead

With support of the IFRC Country Representation and the resident Partner National Societies, ZRCS is working at enhancing its capacity at branch level in order to increase absorption capacity particularly in disaster response. The current humanitarian situation, scale of the programmes and partnerships form the basis for planning in 2009. The IFRC Country Representation office will continue its support to the ZRCS programmes by tallying its mechanism with the needs on the ground.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
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BUDGET 2008

PROGRAMME BUDGETS SUMMARY

Appeal no.: MAAZW001

Name: ZIMBABWE APPEAL

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	0	206,395	0	0	0	0	206,395
Construction	0	0	0	0	0	0	0
Clothing & Textiles	0	13,960	0	0	0	0	13,960
Food	0	0	0	0	0	0	0
Seeds & Plants	0	0	0	0	0	0	0
Water & Sanitation	20,000	135,445	0	0	0	0	155,445
Medical & First Aid	0	287,120	0	0	0	0	287,120
Teaching Materials	0	0	0	3,000	0	0	3,000
Utensils & tools	0	14,000	0	0	0	0	14,000
Other Supplies & Services	0	0	0	0	0	0	0
SUPPLIES	20,000	656,920	0	3,000	0	0	679,920
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	15,000	0	0	0	0	15,000
Computers & Telecom	0	37,260	0	0	35,000	0	72,260
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
LAND, VEHICLES & EQUIPMEN	0	52,260	0	0	35,000	0	87,260
Storage	0	0	0	0	3,600	0	3,600
Distribution & Monitoring	0	89,794	0	0	0	0	89,793
Transport & Vehicles cost	0	60,480	0	7,800	25,608	0	93,888
TRANSPORT & STORAGE	0	150,274	0	7,800	29,208	0	187,281
International Staff	0	48,000	0	14,100	168,000	0	230,100
Regionally Deployed Staff	0	0	0	0	0	0	0
National staff	0	4,800	0	0	0	0	4,800
National Society Staff	0	35,600	0	21,418	108,720	0	165,738
Consultants	0	0	0	0	0	0	0
PERSONNEL	0	88,400	0	35,518	276,720	0	400,638
Workshops & Training	0	5,001	0	74,494	10,000	0	89,494
WORKSHOPS & TRAINING	0	5,001	0	74,494	10,000	0	89,494
Travel & related expenses	0	0	0	12,750	17,000	0	29,750
Information & Public Rela	0	0	0	0	6,000	0	6,000
Office Running Costs	0	3,000	0	3,300	134,000	0	140,300
Communication Costs	0	6,198	0	5,400	60,000	0	71,598
Professional Fees	0	0	0	5,000	35,000	0	40,000
Other General Expenses	0	443,071	0	9,300	19,000	0	471,370
GENERAL EXPENDITURE	0	452,269	0	35,750	271,000	0	759,018
Asset Depreciation	0	0	0	0	0	0	0
DEPRECIATION	0	0	0	0	0	0	0
Contributions & Transfers	0	0	0	0	0	0	0
CONTRIBUTIONS & TRANSFERS	0	0	0	0	0	0	0
Programme Support	1,390	97,682	0	10,884	43,236	0	153,192
PROGRAMME SUPPORT	1,390	97,682	0	10,884	43,236	0	153,192
TOTAL BUDGET:	21,390	1,502,806	0	167,446	665,164	0	2,356,805