

PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

ZIMBABWE

29 December 2003

Appeal No. 01.23/2003

Appeal Target: CHF 526,122 (USD 261,000, EUR 357,709)

Programme Update No. 2

Period covered: May - October 2003

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 180 countries. For more information: www.ifrc.org

In Brief

Appeal coverage: 107.7% [Click here to go to attached Contributions List](#) or refer to the Federation's website.

Outstanding needs: None

Related Emergency or Annual Appeals:

Southern Africa: Food Security and Integrated Community Care, Emergency Appeal 15/2003

Programme Summary: The [Zimbabwe Red Cross Society](#) is operating in a highly unstable economy characterized by high inflation, shortage of basic commodities, lack of foreign currency and shortages of food. Consequently, the national society has struggled in implementing activities not directly aimed at alleviating this situation. The HIV/AIDS pandemic is a menace and has significantly crippled means of livelihood. More emphasis has been placed on operations to secure food for communities in disaster prone areas. The national society has shown signs of a well prepared national society through spontaneous response to disasters. It has taken lead in responding to cholera outbreaks in northern Zimbabwe. The integrated food component has greatly benefited the vulnerable especially those in home-based care structures. The southern part of Zimbabwe which is drought prone is benefiting from the water and sanitation interventions which are underway.

Operational developments

During the reporting period, the socio-economic climate in Zimbabwe has been characterized by rapidly rising inflation, shortage of essential commodities and lack of foreign currency negatively affecting livelihood and the business environment. While food distributions under the emergency appeal 15/03 have continued, many aspects of Zimbabwe Red Cross long-term programming have slowed down with the rate of implementation falling below expectations. This was mainly due to changes in staff at the headquarters. Zimbabwe Red Cross is in the process of recruiting to fill key positions by the end of the year.

The HIV/AIDS epidemic continues to be the main area of concern for the national society and programmes are targeting people and households affected by HIV/AIDS and the activity is gathering momentum. While some key programmes such as youth and disaster preparedness continue to be implemented nationwide, other programme areas such as WatSan¹ inputs, and efforts to control malaria, are being focussed on the communities from which the home-based care (HBC) clients are drawn.

Health and care

Health and care programme objectives are being delivered through programming in three main areas: HIV/AIDS programming including home-based care (HBC), community-based first aid (CBFA) and WatSan.

Goal: A sustainable improvement in the general health and reduction in HIV/AIDS transmission of the targeted vulnerable communities through the provision of community-based health and care interventions.

Objective: The Federation supports the Zimbabwe Red Cross capacity to implement community-based health care programmes including HIV/AIDS and water and sanitation programming, thereby improving the general health situation in targeted communities and increasing the communities' coping capacity in disaster situations.

Health

Progress/ Achievements

A proposal for malaria and tuberculosis was developed by Zimbabwe Red Cross and submitted to Global Fund for HIV/AIDS, Tuberculosis and Malaria

A comprehensive proposal has been placed with the global fund for HIV/AIDS, tuberculosis and malaria to allow the national society to contribute to Zimbabwe's national malaria control programme. This covers the key areas of household spraying, provision of mosquito nets and drugs for treatment. These areas have been negatively affected by the serious decline in the economic situation in 2003.

Communities in target areas are able to respond to common health conditions

Community-based malaria training was completed for 240 Zimbabwe Red Cross volunteers in Matabeleland North province.

Zimbabwe Red Cross actively involved in the prevention and response to cholera outbreaks

Zimbabwe Red Cross with support from the Federation provided coordinated support during an outbreak of cholera in Kariba and Binga districts in the Mashonaland West province in the northern part of Zimbabwe. Working in close coordination with the Ministry of Health and Save the Children (UK), an assessment team and Red Cross volunteers provided cholera kits and tents to the rural clinics and health posts in the affected area, allowing isolation of cholera cases and supporting treatment.

HIV/AIDS

Progress/Achievements

Zimbabwe Red Cross HBC project for persons living with HIV/AIDS (PLWHA) is expanded to reach out to 8,000 clients

The project numbers exceeded 11,500 people at the end of November 2003. This growth, despite a tighter target regime, is attributed to the "magnet" effect of the food aid component, which made more HIV/AIDS infected and affected people come out.

¹ WatSan – Water and sanitation

Zimbabwe Red Cross HIV/AIDS programme is expanded to reach and additional 7,000 orphans supported materially and psychologically

The registered numbers of orphans receiving emergency food aid and other support elements through the HBC programme rose to 27,701 at the end of November.

The capacity of Zimbabwe Red Cross to manage, implement monitor and evaluate its HIV/AIDS programme is strengthened

A baseline survey has been undertaken in Midlands province in support of HBC work in that area. The structures for the coordination of HBC funding between the Federation, Danish Red Cross and Japanese Red Cross have been strengthened. Provinces have submitted plans for training of new care facilitators to reduce the workload created by increased number of clients.

Zimbabwe Red Cross has created new partnerships with other organizations

Coordination between HIV/AIDS programming, and other sectors, primarily WatSan and food security has been strengthened both institutionally at the headquarters and operationally in the field. A partnership has been developed between Zimbabwe Red Cross and UNICEF supporting further development of HBC work in Zimbabwe, with a special focus on orphans and vulnerable children (OVC).

Impact

In addition to the 23 HBC sites initially included in the programme, a HBC project in Chipinge has been operating outside the main programme structures, and food distributions to this site began in November. The opportunity was taken to undertake a comprehensive survey of the status of the HBC clients at this point, and this survey will be repeated in February 2003. This will help Zimbabwe Red Cross and the Federation to measure the impact that the food component has on the health, mobility and livelihoods of HBC clients, and will examine factors such as school attendance and access to food and services for OVC.

A new HBC project is opening in Nkayi district in Matabeleland North. A similar survey is being undertaken there amongst the clients identified for inclusion, to assess the impact of the HBC project itself. This baseline will provide valuable information especially when combined with the food impact specific data being collected in Chipinge.

Constraints:

The national HBC officer left the Zimbabwe Red Cross and this has created a gap in technical support and a replacement is being recruited. Slow procurement and distribution of the medical and hygiene items has meant that the quality of service to clients has been below expectations.

Water and Sanitation

There are three WatSan projects in Zimbabwe and all the objectives of the projects have been revised downwards after the 2003 annual Appeal due to increase in prices.

1. Mudzi/Rushinga water, supply, sanitation and hygiene promotion project

Establishment of sound, sustainable environmental services for 17,000 vulnerable persons in Mudzi and Rushinga districts by 2004 in water supply, sanitation and hygiene promotion.

Indicators

Targeting 20,000 beneficiaries, 200 latrines were constructed, 10 new boreholes were dug, 30 hand pumps were rehabilitated, and 40 village water committees were trained in the management of new and rehabilitated community water points as well as hygiene promotion.

2. Matobo water supply, sanitation and hygiene promotion project

Establishment of sound, sustainable environmental services for 20,000 vulnerable persons in Matobo district Matabeleland South by 2005 in water supply, sanitation and hygiene programme

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Indicators:

Targeting 20,000 beneficiaries, 400 latrines were constructed, 25 new boreholes were dug, 15 hand pumps were rehabilitated, and 40 village water committees were trained in management of new and rehabilitated community water points as well as hygiene promotion.

3. Masvingo sanitation and hygiene promotion

Establishment of sound, sustainable environmental services for 3,000 vulnerable people in Matobo District, Matebeleland South by 2005 in sanitation and hygiene programme.

Indicators

Targeting 3,000 beneficiaries, 500 latrines constructed to promote hygiene.

4. Beitbridge water supply and hygiene promotion project

Establishment of sound, sustainable environmental services for 7,000 vulnerable population in Matobo District, Matebele land South by 2005 in water supply, sanitation and hygiene programme.

Indicators

Targeting 7,000 beneficiaries, 80 latrines were constructed, 4 new boreholes were dug, ten hand pumps were rehabilitated, and 14 village water committees were trained in the community management of new and rehabilitated water points as well as hygiene promotion.

Progress/Achievements

Progress has been slow on all projects. The projects spent CHF 50,000 out of CHF 300,000 which had been allocated. The projects will run into the first quarter of 2004. For further financial information please contact the regional WatSan delegate.

Mudzi/Rushinga water, supply, sanitation and hygiene promotion project is established.

Working with the target population are 20 hygiene promoters and training of further 20 hygiene promoters is planned. Latrines numbering 179 have been constructed. Seven new boreholes fitted with hand pumps have been completed and three more will be drilled in December.

Matobo water supply, sanitation and hygiene promotion project is established

Over 180 latrines have been completed, 15 hygiene promoters are working in those villages targeted for latrines, new boreholes and hand pump rehabilitation. Hygiene promoters numbering 25 will be trained. The team performing the geophysical investigation (to site places in the villages to drill the borehole) is doing the work at present.

Masvingo sanitation and hygiene promotion established

There are over 50 hygiene promoters active in the project area. About 150 of the expected 500 latrines have been constructed.

Beitbridge water supply and hygiene promotion project established

The sites for rehabilitation are being selected.

Impact

WatSan and hygiene promotion projects lead to improvement in health, and save beneficiaries time and energy, thus enhancing livelihoods. The long term impact can only be measured a period of time after the end of the project or if there has been an initial baseline survey. This process has not been systematically applied in Zimbabwe Red Cross WatSan projects to date. Starting 2004 projects will start with a baseline survey and will be evaluated one year after project completion. Evaluations will check if latrines are being used and maintained hygienically, and if hand pumps are functioning.

Constraints

The difficult working environment due to the economic problems in Zimbabwe has had a negative impact on implementation of projects. For example, lack of fuel and cement, difficulties in implementing to budget due to price increases and shortage of competent drilling contractors.

An incidence of fraud in the Mudzi Rushinga WatSan project has considerably slowed down implementation. Legal options are being explored for possible recovery and the Watsan officer responsible has been dismissed. More effective monitoring and control measures are being implemented. Zimbabwe Red Cross has recruited a temporary project manager. A WatSan engineer is being recruited on contract to start work on 1 January 2004. It is expected that the projects will be completed in the first quarter of 2004.

The regional WatSan delegate was replaced in September and the regional office has now scaled up support and monitoring of projects significantly. For example, supervising the drilling and rehabilitation works are being contracted out despite limited resources. The regional office is developing systems for project implementation these will assist in building the capacity of the national society.

The wide geographical spread of the projects further constrains effective project implementation. In 2004, the new projects will be concentrated in areas where the HBC programme is located, in line with the integration agenda, and will allow for more effective and efficient projects.

Disaster Management

Goal: Implementation of the characteristics of a well prepared national society has improved the Zimbabwe Red Cross in the following key areas; know how, capacity and performance

Objective: Zimbabwe Red Cross has developed mechanisms for empowering and strengthening communities in disaster management so as to alleviate suffering.

Progress/Achievements:

2,640 staff and volunteers trained in disaster management by the end of 2004

In July and August, Zimbabwe Red Cross and the Federation held a disaster management workshop for 38 staff and volunteers, which was followed by training for 400 volunteers in the Harare region. A two-day workshop on community-based disaster management was held in Muzarabani for 30 participants. This was followed by community implementation of the action plan developed at the workshop.

A pilot vulnerability capacity assessment (VCA) has been conducted in Matobo district in Matabeleland South province, with the support of the regional disaster management and organizational development departments.

Improved disaster preparedness, response capacity and emergency stocks available in vulnerable districts by end of 2004

A Zimbabwe Red Cross response team was mobilized and deployed to make an assessment of a cholera outbreak in November to December 2003 in the Mashonaland West province. The team prepared a cholera kit and this was handed over to Ministry of Health posts and six volunteers were deployed to support nursing activities in the area. Zimbabwe Red Cross staff and volunteers worked in close cooperation with the Ministry of Health and with Save the Children (UK), which has long-term programmes in the area, throughout their engagement.

Constraints:

The disaster management department of the Zimbabwe Red Cross has continuously been preoccupied with food distribution and recently with cholera outbreak in Mashonaland West province resulting in few planned activities being completed. The current consolidation of the disaster management, youth and branch development roles within Zimbabwe Red Cross reduces the management support available in each of these sectors.

Organizational Development

Goal: Implementation of the characteristics of a well functioning national society has improved the Zimbabwe Red Cross in three key areas: foundation, capacity and performance.

Objective: Secretariat support to the national society has led to volunteer branch and financial resource development.

Zimbabwe Red Cross increased capacity to design and implement their strategic directions.

Under the direction of the new National Strategic Planning Officer, a week-long national planning workshop was held in Kadoma, and programme level strategies are being developed in all sectors.

Zimbabwe Red Cross has increased its financial resource base in both value and diversity

Zimbabwe Red Cross staff has attended a resource development-training workshop in Tunisia.

Impact:

Zimbabwe Red Cross has increased capacity to design and implement their strategic directions.

Constraints:

Although the reporting period has been characterized by a shortage of staff at headquarters, plans are in place to recruit for vacant positions and two key roles have been created in programme coordination and strategic planning. Late transfer of funds from the Federation regional delegation has slowed down implementation in most organizational development initiatives.

Coordination

The recruitment of a programme coordinator at headquarters has strengthened internal coordination and is beginning to provide a degree of synergy between programmes that was previously absent. Monthly coordination meeting between the national society, the Federation and bilateral partners has strengthened Zimbabwe Red Cross coordination structures within the Movement. This meeting considers strategic and funding issues, and ensures complementary programming. An operational meeting across all programming areas is held every two weeks, and Federation and bilateral programme delegates as well as the national society's headquarters programme staff attend. A single joint meeting as opposed to individual programme meetings reduces demands on the headquarters and enhances the integration of programming.

In the health sector, Zimbabwe Red Cross coordinates with relevant government department at national and local levels. Sectoral liaison occurs at national level in health, disease control, disaster mitigation and management, food relief operations, HBC and several specialist groupings related to the emergency, with government, UN agencies and other organizations.

During the reporting period the food security country office has been upgraded to a delegation and supports Zimbabwe Red Cross across all programme sectors. A relief delegate continues to provide technical support to distributions, while other technical support comes through the regional delegation. The country delegation also provides support to the coordination of bilateral programming, donor liaison and support to reporting.

For further information please contact:

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All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.

For support to or for further information concerning Federation programmes or operations in this or other countries, please access the Federation website at <http://www.ifrc.org>

<Contributions list below- [Click here to return to title page](#)>

APPEAL No. 01.23/2003

PLEDGES RECEIVED

17/12/2003

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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CASH

					TOTAL COVERAGE	
REQUESTED IN APPEAL CHF ----->				526,123		107.7%
CASH CARRIED FORWARD						
REALLOCATIONS FROM AP.01.24/2003				324,136		HIV/AIDS
AMERICAN - GOVT/USAID		25,000	USD	33,288	12.09.03	
AUSTRIAN - RC		25,000	EUR	38,475	21.10.03	WATER SUPPLY, SANITATION & HYGIENE PROMOTION PROJECT IN BEITBRIDGE
FINNISH RC/GOVT				17,253	18.11.03	REALLOCATIONS - WATSAN
BRITISH RC				39,436	18.11.03	REALLOCATIONS - WATSAN
SWEDISH RC				76,738	18.11.03	REALLOCATIONS - WATSAN/HEALTH
SWEDISH RC/GOVT				10,000	20.11.03	REALLOCATIONS - VARIOUS
NORWEGIAN RC/GOVT				7,500	20.11.03	REALLOCATIONS - OD
NORWEGIAN RC/GOVT				20,000	20.11.03	REALLOCATIONS - DM
SUB/TOTAL RECEIVED IN CASH				566,826	CHF	107.7%

KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED IN KIND/SERVICES						
				0	CHF	0.0%

ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED						
				0	CHF	