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# DREF Operations update

## Zimbabwe: Floods

 International Federation  
of Red Cross and Red Crescent Societies

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| <b>DREF Operation</b>  | <b>Operation n° MDRZW009; Glide n° ° FF-2014-000015-ZWE</b>                        |
| <b>Date of issue: 17.05.2014</b>   | <b>Date of disaster 09.02.14</b>   |
| <b>Operation manager: Oforbuike Nwobodo, Country representative, IFRC, Zimbabwe</b>  | <b>Point of contact: Oforbuike Nwobodo, Country representative, IFRC, Zimbabwe</b> |
| <b>Operation start date: 18 Feb 2014</b>   | <b>Expected timeframe: 5 months</b>  |
| <b>Overall operation budget: CHF 263,518</b>   |  |
| <b>Number of people affected: 20,000</b>   | <b>Number of people to be assisted: 5,000</b>                                      |
| <b>Host National Society presence: 20,000 volunteers, 120 staff members , 8 provincial branches</b>  |  |
| <b>Red Cross Red Crescent Movement partners actively involved in the operation:<br/>Danish Red Cross, Norwegian Red Cross, Finnish Red Cross, ICRC, IFRC country office.</b> |  |
| <b>Other partner organizations actively involved in the operation: UNOCHA</b>  |  |

### Summary:

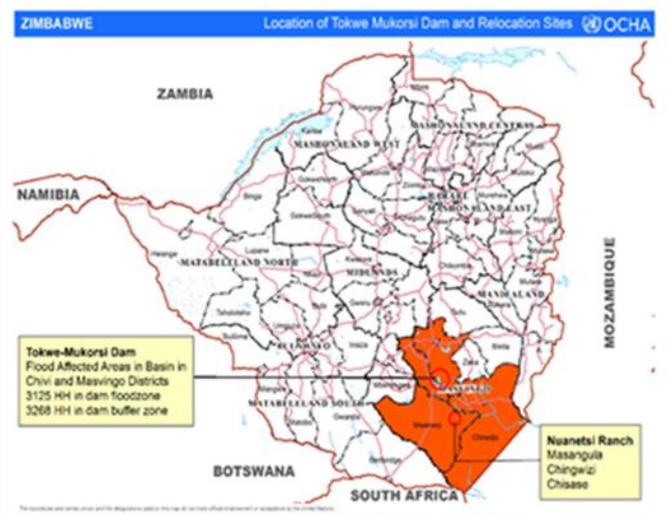
Zimbabwe was affected by floods, landslides and hailstorms on the 09.02.2014 affecting approximately 20 000 people. The government of Zimbabwe declared the flooding in Tokwe Mukosi, Masvingo province a national disaster. The affected population was relocated to Chingwizi transit camp.

CHF 263,518 was allocated from the DREF funds on the 18 February 2014 to support the National Society over a period of three months to deliver assistance to 3,500 people affected by the floods in Zimbabwe's three provinces; Masvingo, Midlands and Matabeleland North. The DREF operation was envisaged to support the affected population with emergency shelter, water supply, sanitation and hygiene promotion.

Through the DREF support, significant achievements have already been recorded in these sectors as follows,

- **Emergency shelter:** 540 households have received emergency shelter in Chingwizi and 22 families in Tsholotsho. The NS has also provided shelter for the District Administrator (DA), clinic and registration center in the camp.
- **Water, sanitation and hygiene promotion:** 3 boreholes have been drilled and equipped. 80 emergency latrines have been constructed. Over 7,000 people reached with hygiene promotion messages.
- **Health and care:** 209 people have received first aid services, 5 pieces of child play centre equipment have been provided for psycho-social support activities while under RFL 60 people have been reunited with their families

However, over the last one month, the situation has changed from the original response plan for the Masvingo operation (Tokwe - Mukosi flood



disaster), necessitating the revision of the scope and budget. This change is as a result of the yet to be started relocation of the affected people from Chingwizi transit camp to their permanent relocation plots. 2,800 families (14,000 people<sup>1</sup>) had been temporarily settled in the Chingwizi reception centre. With no outward movement to permanent sites, the reception center has become a transit camp with a high possibility of prolonged stay exceeding 5 months as indicated by the central government authorities at the district level. The change of scenario is expected to increase the DREF timeframe by an additional two months and necessitate a change in the intervention scope and budget as detailed below;

### Scope and strategy

- Exclusive focus on the in-camp needs such as construction of semi-permanent latrines, provision of emergency shelter, increased monitoring needs of the displaced families currently in the camp, post camp needs will be determined later as the intervention progresses. This means reallocating all resources earlier planned for the post camp needs such as procurement of squatting plates and shelter tool kits for the post-reception centre to the emerging in-camp needs as indicated above.
- Increase of shelter beneficiaries in Masvingo (Tokwe-Mukosi) from the 500 to 1000 families. This increased shelter needs is as a result of an increased number of displaced populations coming into the camp and with no out flow of people from the camp to the final re-settlement centre.
- Change in the interventions' overall objectives to include the emerging sector needs, such as psycho-social support (PSS), first aid and restoration of family links (RFL).
- Change of strategy, prioritizing focus on in-camp needs of the affected population owing to the expected prolonged stay at the camp.

### Budget

- Reorganizing the budget by reallocating post-camp budget lines to increase coverage of existing and emerging sector specific in-camp needs. The reallocation remains within the original EPOA budget.
- Increase of targeted households from originally planned 500 to 1,000
- Increase of operational support services (human resources). The magnitude and nature of needs in the camp now requires increased volunteer driven support services. This in turn increased Red Cross personnel visits to support the volunteers and to monitor the operation.

### Schedule/time frame

The proposed revision seeks to change the DREF time frame from **three to five months** with no extra costs. This extension is sought to allow consolidation and completion of the planned activities which may not be completed within the original EPOA such as :-

- Finalizing sanitation facilities in the resettlement areas and construction and completion of additional shelter.
- Lead time required by the Regional Logistics Centre in Dubai to procure materials to replenish those used, such as tarpaulins and shelter tool kits and delivery to Zimbabwe.

The European Commission Humanitarian Aid and Civil Protection (DG ECHO) contributed towards replenishing the DREF allocation made for this operation. The major donors and partners of DREF include the Australian, American and Belgian governments, the Austrian Red Cross, the Canadian Red Cross and government, Danish Red Cross and government, DG ECHO, the Irish and the Italian governments, the Japanese Red Cross Society, the Luxembourg government, the Monaco Red Cross and government, the Netherlands Red Cross and government, the Norwegian Red Cross and government, the Spanish Government, the Swedish Red Cross and government, the United Kingdom Department for International Development (DFID), the Medtronic and Z Zurich Foundations, and other corporate and private donors.

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<sup>1</sup> UNOCHA report of 5-14 March 2014

The IFRC, on behalf of Zimbabwe Red Cross Society, would like to extend thanks to all for their generous contributions.

Details of all donors can be found on <http://www.ifrc.org/docs/appeals/Active/MDR00001.pdf>

## Coordination and partnerships

### Red Cross Red Crescent Movement

IFRC country, regional and zone offices at various levels, provided ZRCS support in the drafting of the DREF plan of action budget which was approved by Geneva on 18 February 2014. Continuous support has been provided by IFRC to profile ZRCS work and the plight of the flood affected people in Chingwizi reception camp. In the first week of March, there was a joint monitoring mission of ZRCS, ICRC and IFRC to Chingwizi.

ZRCS was able to launch a timely response through the use of IFRC regional stocks prepositioned in country. At national level, IFRC and ZRCS attend biweekly UNOCHA coordination meetings which provide periodic updates on the relief activities in the Chingwizi camp. The meetings are also attended by other in country humanitarian actors and embassies.

In addition to this DREF operation, the National Society also launched a cash and in-kind national appeal to assist the displaced populace in Chingwizi camp. In order to raise the profile of the National Appeal, the ZRCS Humanitarian Ambassador conducted a visit to the Chingwizi Camp. The objective of the visit was to influence the private sector and individuals to provide relief services to the affected households. The endeavor yielded positive results as a number of individuals and local organizations, together, donated 200 litres of cooking oil, 5,000kg of maize meal and 70kgs kapenta fish which have been distributed to the displaced persons in the camp.

The National Society's response capacity has been strengthened by the presence of trained CDRT members through the support of the Netherlands Red Cross, Norwegian Red Cross, Finnish Red Cross, and ICRC, and most recently by the Danish Red Cross. The pool of 23 ZRCS volunteers who in 2013 underwent IFRC emergency shelter training of trainers' course and the 100 volunteers they later cascaded the training to in Beit bridge with Netherlands Red Cross funding enabled the National Society to provide timely response to the flood disaster in emergency shelter construction.

### Overview of Non-RCRC actors in country

Ever since the government declaration of the disaster in Tokwe Mukosi, the Civil Protection Department has been the designated coordinator of all response actions. At provincial level, the Provincial Civil Protection Committee holds coordination meetings three times a week.

At the district level, daily meetings co-chaired by the district administrator and UN Office for the Coordination of Humanitarian Affairs (UN OCHA) and attended by the sectorial subcommittees on health, water, sanitation and hygiene promotion (WASH), food, logistics, education, shelter and NFIs are held. All the subcommittees are chaired by the relevant government departments. OCHA is responsible for the establishment of coordination structures and inter-sector coordination while camp coordination is led by IOM.

**Figure 2: Summary of Non-Red Cross Red Crescent actors support and gaps** as of 10 March 2014

|     |   |   |
|-----|---|---|
| IOM | 100 family tents, 1000 Tarpaulins, 200 NFI kits, 200 aqua Tablets, 400 blankets, 400 mosquito nets. Support translates to about 300 families. Camp coordination | <ol style="list-style-type: none"> <li>1. Inadequate shelter for 1000 households at the reception camp, teachers and learners.</li> <li>2. Malaria diagnosis and treatment</li> </ol> |
|-----|---|---|

|                                 |  |   |
|---------------------------------|--|---|
|                                 | and support of the registration and profiling of households.   | 3. Risk of communicable diseases and epidemic outbreaks |
| UNICEF ,Plan International      | Mobilizing supplies and equipment for the camp school.   | 4. Risk of increased violence within the camp           |
| WFP                             | Is finalizing plans for food support for four months   | 5. Supplementary feeding for children and people on ART |
| GAA                             | Supporting wash initiatives  | 6. In adequate and unsustainable sanitation facilities  |
| WHO, National health Care Trust | Provision of medical supplies, equipment and diarrheal kits  | 7. Inadequate water infrastructure                      |
| UNICEF, Care international      | Providing, portable water at the reception center. Unicef have been providing 60,000 litres of water daily to the affected community | 8. Behavior change communication IEC material           |
| ACF                             | Provided 121,000 litres storage tanks. Provided also provided emergency latrines   |   |

## Operational implementation

### Overview

The ZRCS was among the first responders to the crisis in Masvingo, Tsholotsho and Gokwe. In Masvingo Chingwizi camp, the National Society provided relief items as per figure 3, Gokwe district 41 households received 82 tarpaulins and Tsholotsho district received 22 family tents and 13 tarpaulins. In addition to the relief items, a generator for lighting and a play centre for children with five pieces of play equipment were also provided by ZRCS. The play centre brings relief to children as the camp environment does not provide adequate shelter to separate them from their parents.

**Figure 3: Summary of ZRCS provisions distributed as of 14 March 2014**

| Need            | Type of intervention                        | Actual   |
|-----------------|---|----------|
| Shelter         | Family tents                                | 202      |
|                 | Tarpaulins                                  | 863      |
|                 | Plastic Sheeting rolls                      | 8        |
|                 | Shelter Toolkits                            | 350      |
|                 | Shelter construction volunteers (Mat South) | 10       |
| Households NFIs | Blankets                                    | 250      |
|                 | Clothes                                     | 6 Bales  |
|                 | Kitchen sets                                | 10 Boxes |
| Sanitation      | San Plats                                   | 100      |
|                 | Provision Temporary toilets                 | 32       |
| Water           | Drilling of Borehole                        | 3        |

**Figure 4: Areas Common to all Sectors**

| Activities planned   | Progress to date | Changes Proposed | Justification/ Comment                           |
|--|------------------|------------------|--|
| Needs assessment survey which show beneficiaries are consulted | 100% completed   |                  | This process is ongoing during monitoring visits |
| Revision of Plans of action                                    | On going         | Increase latrine | Latrine needs have                               |

|  |  |   |                                      |
|--|--|---|--------------------------------------|
| <b>based on consultation with beneficiaries, assessment and analysis</b> |  | construction Increase monitoring visits | not been fully met by other partners |
| <b>Beneficiary satisfaction survey</b>                                   | Carried out on 1 April 2014            |   |                                      |
| <b>Monitoring visits</b>   | Ongoing                                |   |                                      |
| <b>DREF review workshop</b>  | To be done at the end of the operation |   |                                      |

### Water, sanitation and hygiene promotion

|  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
|--|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|
| <b>Outcome 1: Outcome 1 Immediate reduction in risk of waterborne and water related diseases in targeted communities.</b>                              |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 1.1 Continuous assessment of water, sanitation, and hygiene situation is carried out</b>   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| Water sanitation and hygiene assessment  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 1.2 Daily accesses to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population.</b> |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| Distribution of 1,000 plastic buckets with lids to 500 HH in Masvingo  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 1.3 Community managed water sources giving access to safe water is provided to target population.</b>  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Training of community water point committees   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Drilling of 3 boreholes  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 2.1 Improved access to and use of adequate sanitation by the target population</b>   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| Construction of 40 emergency temporary latrines toilets at the camp  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Support construction of household temporary pit latrines for 700 households  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 2.2 Hygiene promotion activities are provided to the entire affected population</b>  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| Promotion of simple hand washing facilities (tippy-tap)  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Hygiene promotion through Mobile Cinema  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Distribution of IEC material   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Output 2.2 Hygiene-related goods (NFIs) which meet Sphere standards are provided to the target population</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Activities planned   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Week / Month   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Distribution of hygiene kits   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Output 1.2 Daily accesses to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population.**

- ZRCS has drilled all the planned 3 (three) boreholes and they are the only sustainable water sources in the camp. 1 borehole is located in the camp while the other two are at the satellite school which is about 3 km away from the camp. The boreholes managed to ease off the water challenges but the rapid ballooning of the camp population is visibly overwhelming them, thereby resulting in long winding queues at the water sources. The support is however not meeting the WHO standards on time needed to fetch water/ distance from the sources.
- UNICEF and ACF are also contributing to the provision of clean water in Chingwizi camp. UNICEF has been trucking in 60,000 litres of drinking water daily while ACF provided 121,000 litres of storage facilities.



One of the boreholes drilled at Tokwe Mukosi.  
Photo: ZRCS

**Output 1.3 Community managed water sources giving access to safe water is provided to target population.**

- Water point committee members have been trained. The committee is responsible for ensuring the maintenance of the water point in order to prevent contamination. 14 members of the committee were selected from across the camp with a gender representation of 60% in favor of women.



Some of the 80 emergency sanitation facilities provided by ZRCS. Photo: ZRCS

**Output 2.1 Improved access to and use of adequate sanitation by the target population**

- Red Cross volunteers have been providing materials and installation support for the setting up of 80 emergency sanitation facilities as against the earlier planned 40. The increased number of latrines was necessary to deal with the increased population and also the fact that the camp is located in an area with higher rock outcrop and digging deeper pits was not possible, hence the necessity to replace pits which were getting full in a shorter time frame. The increased budgetary needs for the temporary latrines has been catered for under increased plastic sheeting requested for under the shelter component.
- However with the unforeseen long duration of the displaced persons stay in the camp, semi-permanent upgradable structures seem more apt and durable for the current scenario. The

continuous decommissioning of the rapidly filling up 1metre deep toilets, poses a serious health risk to the community and the volunteers involved in the process.

- There are other 351 latrines provided by other agencies such as UNICEF, OXFAM and ACF.

#### **Output 2.2 Hygiene promotion activities are provided to the entire affected population:**

- Hygiene promotion is also being spearheaded by Red Cross volunteers in conjunction with village health workers. Despite the random reports of resistance incidents among some of the community members, ZRCS hygiene promotion activities have reached approximately 7,000 people. A cinema ground was set up by the ZRCS is one of the most popular platforms for health and hygiene promotion in the camp. Videos on disease prevention have been viewed with key messages on cholera, malaria and diarrhea prevention. The health messages are interspaced with entertainment videos which are part of the general psycho-social support. It has been attracting a remarkable turnout of the displaced persons. On daily basis, the average attendance is estimated at +500 people (60% children and 40% adults).

#### **Output 2.2 Hygiene-related goods (NFIs) which meet Sphere standards are provided to the target population**

- The procurement process of the hygiene kits is ongoing and delivery by the local suppliers is being awaited. Due to the malaria causing mosquito infestation in the areas, mosquito repellants are also included in the kits' contents.

| <b>Activities planned Week / Month</b>                                     | <b>Progress to date</b>           | <b>Proposed changes</b>                            | <b>Justification/ Comment</b>  |
|--|-----------------------------------|--|--|
| <b>Water sanitation and hygiene assessment</b>                             | 100%                              | Increase/improve latrine construction intervention | The needs of the camp have increased   |
| <b>Procurement of 1,000 buckets</b>  | Procurement process has begun     |  |  |
| <b>Training of community water point committees</b>                        | One of three has been trained     |  | Two of three to be trained during the operation  |
| <b>Drilling of 3 boreholes</b>   | 100% achieved                     |  |  |
| <b>Construction of 40 emergency temporary latrines toilets at the camp</b> | 80 latrines have been constructed | 130 semi-permanent latrines constructed            | The transit camp now accommodates people for more than the initially planned 7 days. To date, no permanent relocation has been made. The demand for tarpaulins increased due to the increase of toilets. Besides the toilets are being decommissioned and reconstructed the moment there are full which requires additional plastic. |
| <b>Construction of household pit latrines for 100 households</b>           |                                   | Cost proposed to be moved to meet in camp needs    |  |
| <b>Promotion of simple hand washing facilities (tippy-tap)</b>             | On going                          |  | 7,000 beneficiaries have been reached.   |
| <b>Hygiene promotion through Mobile Cinema</b>                             | On going                          |  | 7,000 beneficiaries have been reached.   |

|                                     |                         |  |
|-------------------------------------|-------------------------|--|
| <b>Distribution of IEC material</b> | Ongoing process         | 3,500 people have been reached with IEC materials. |
| <b>Distribution of hygiene kits</b> | Procurement in progress | Hygiene kits to include mosquito repellent jelly.  |

### Shelter and settlements (and household items)

| <b>Outcome 1: The immediate shelter and settlement needs of the target population are met</b>         |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|
| <b>Output 1.1 Emergency shelter assistance is provided to the target population</b>                   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Activities planned Week / Month   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| Set up of transit camp with 100 shelter kits and timber   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Procurement and transport of shelter kits and timber complementing the shelter kit                    |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Procurement and Distribute of Shelter kit with timber for the families moving out of the transit camp |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| In parallel of the distribution sensitisation session on setting up shelter or using shelter kit      |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Procurement and distribution of 700 kitchen sets  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| <b>Output 2.1:</b>  |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |
| Shelter Construction Training   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |

- To date, the NS has provided 180 family tents in Chingwizi, 863 tarpaulins and 350 shelter toolkits for 540 households in the camp. 876 tarpaulins are for replenishment while the 1890 will support 630 families. Each family will have 3 tarpaulins.
- 22 family tents and 13 tarpaulins were also provided by the NS in Matabeleland North Tsholotsho flash floods emergency relief operations.
- 876 tarpaulins are for replenishment while the 1890 will support 630 families. Each family will have 3 tarpaulins.
- 20 shelter construction trained volunteers have been working in the camp. Their services are continuously required as new arrivals need their assistance in temporary shelter construction.
- Repair works are constantly required in the camp due to incessant rains which continuously pulled tents down exposing families to the harsh weather.
- It has been noted that diversity of nutrition/dietary diversity, and nutrition support for persons on ART remain the major gap at the camp during the recent UN OCHA coordination meeting held on 28 April 2014, it has been noted that WFP, UNICEF has been supporting all families affected with nutritional support working closely with the Ministry of Health. Christian Aid has also secured resources to support over 2,500 children, pregnant and lactating mothers with nutritional support through distribution of CSB.

- The recent rains have destroyed substantial quantities of donated food aid after the collapse of the covering tents, but food supplies continue to come to the camp through various stakeholders.

| Activities planned   | Progress to date  | Proposed changes   | Justification/Comments  |
|--|---|--|---|
| <b>Transit camp of 100 family tents established</b>  | 202 Family tents were provided from the IFRC Regional stock                     |  | The shelter gap is still there with 1,500 people are without shelter.<br><br>876 tarpaulins are for replenishment while the 1890 will support 630 families. Each family will have 3 tarpaulins. |
| <b>Procurement and transportation of shelter kits/tents and timber complementing the shelter kits</b>          | Procurement in progress   |  |   |
| <b>Procurement and distribution of Shelter kits and timber for the families moving out of the transit camp</b> |   | 350 shelter kits are to be procured.<br><br>320 kitchen sets appropriate for local use to be procured locally. |   |
| <b>In parallel of the distribution sensitisation session on setting up tents or using shelter kit</b>          | Training of community members on setting up of temporary shelter has been done. |  |   |

## Health and Care

**Outcome 1** The immediate risks to the health of affected populations are reduced

### **Output 1.2 Target population is provided with rapid medical management of injuries and diseases**

- A Red Cross first aid tent was established in the camp. A total of 209 first aid cases have been recorded to date. 116 of the attended cases were male whilst 93 were females. Most of the treated cases were as a result of injuries sustained during an evacuation process when tents collapsed due to a violent storm that swept the camp. Replenishment of the first aid kits is required to sustain the service and the cost has been included in the revised budget. 20 FA kits that have been used will be replenished.
- ZRCS provided a tent for the temporary camp's clinic which the government has equipped and provided a nurse.
- 2 NS staff members were seconded to the National Rapid Response team under the Ministry of Health and Child Care. The team is currently assessing the health needs of the camp community.

### Output 1.3 Psychosocial support provided to the target population

ZRCS also provided PSS for the traumatized people. Established also is a children's play centre being manned by the Red Cross volunteers. Makeshift gaming equipment including soccer, volley, and net balls were also put in place.



Picture 3 Visibly distressed child (left), children playing at the RC established play center (right)

The cinema is another popular PSS strategy under which high turnout has been recorded as people find it very therapeutic to their idleness/uncertainties. The fun-films which are interspaced with hygiene messages are deemed suitable for people of all ages. The play centre however needs to be relocated to a new site where a preschool has been established.

**Outcome 1 Contacts are re-established and maintained between family members separated by the disaster, within and outside the affected areas.**

**Output 1.1 People in affected areas and relatives outside these areas have access to appropriate means of communication to re-establish and maintain contact with loved ones.**

Red Cross has responded to cases of family separation during the displaced persons' evacuation to the camp. Three cases of missing children (two boys and one girl) were handled. With the involvement of the police, ZRCS managed to reunite the missing children with their families. Some of the temporary separations occurred due to the fact that some family members had to remain behind guarding their livestock before they were transported.

ZRCS also ensured communication of the separated families through cellphone assistance. This was after the ZRCS Masvingo provincial office spearheaded the advocacy for Econet, a local telephone company to establish a temporary network signal receptor at the camp. As at the time of this update, the ZRCS had recorded **60 telephone calls** made in facilitating maintenance of family links.

### Exit Strategy

The exit is more of a process which is inbuilt in the response activities. First, recruitment and capacity building of local volunteers from the affected population ensures that the affected community along with the local government structures will be self-sufficient to carry out activities post DREF period. Second, as we move out of the emergency mode, the government will be increasingly getting more in control of the situation hence sustaining the activities. Third, the Ns is mooting mobilizing resources for recovery programs as part of the eventual exit from the communities. These strategies have been shared with both governments at the sector stakeholder's coordination forum at camp, provincial and at national level. Key activities such as hygiene promotion activities which ZRCS is involved in will be sustained by communities themselves and also supported by government structures such a Village Health Workers and other organization which have a medium term plans to carry on with camp management activities.

### Conclusion

The prospects of permanent relocation remain uncertain as there has been no official communication from the authorities. In collaboration with other stakeholders, the ZRCS has continued to provide

varied in-camp services to the displaced persons. The change of scenario will be addressed as and when a concrete decision regarding permanent relocation is taken by the authorities. For the time being, the ongoing sanitation services of the NS in the camp will be maintained.

## Contact information

### For further information specifically related to this operation please contact:

- **Zimbabwe Red Cross Society:** Maxwel Phiri: Secretary General; phone: tell:+263.4.332638; +263.4.332197; email: [phirim@redcrosszim.org.zw](mailto:phirim@redcrosszim.org.zw)
- **IFRC Country Representation:** Oforbuike Nwobodo; Country Representative; Harare; phone: +263.4.705166; +263.4.720315, fax +263.4.708784; mail:[oforbuike.nwobodo@ifrc.org](mailto:oforbuike.nwobodo@ifrc.org)
- **IFRC Regional Representation:** Alexander Matheou Regional Representative for Southern Africa; Gaborone; phone: +267 3712700, mob: +267 71395340, fax: +267 3950090: email:[alexander.matheou@ifrc.org](mailto:alexander.matheou@ifrc.org)
- **IFRC Zone:** Daniel Bolanos Gonzalez, Disaster Management Coordinator, Phone +254202712777 email: [daniel.bolanos@ifrc.org](mailto:daniel.bolanos@ifrc.org)
- **IFRC Zone Logistics Unit:** Rishi Ramrakha, Nairobi; Phone +254 20 283 5142, Fax +254 20 271 2777 [rishi.mamrakha@ifrc.org](mailto:rishi.mamrakha@ifrc.org)
- **In Geneva:** Christine South, Operations Support, Phone: +41.22.730.4529, email: [christine.south@ifrc.org](mailto:christine.south@ifrc.org)

### For Resource Mobilization and Pledges:

- **In IFRC Zone:** Martine Zoethouthamaar, Resource Mobilization Coordinator for Africa; phone: +254-721 486 953; email: [martine.zoethoutmaar@ifrc.org](mailto:martine.zoethoutmaar@ifrc.org)

### For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

**In IFRC Zone: IFRC Africa Zone:** Robert Ondrusek, PMER/QA Delegate for Africa; Nairobi; phone: +254731 067277; email: [robert.ondrusek@ifrc.org](mailto:robert.ondrusek@ifrc.org)



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## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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**Saving lives, changing minds.**



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.