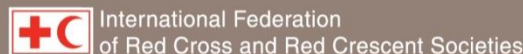


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# Emergency Plan of Action Final Report

## Zimbabwe: Floods



<b>DREF operation</b>	<b>Operation n° MDRZW009</b>
<b>Date of Issue: 23 October 2014</b>	<b>Glide number: FF-2014-000015-ZWE</b>
<b>Date of disaster: 9 February 2014</b>	
<b>Operation start date: 18 February 2014</b>	<b>Operation end date: 17 July 2014</b>
<b>Host National Society: Zimbabwe Red Cross Society</b>	<b>Operation budget: CHF 263,518</b>
<b>Number of people affected: 20,000</b>	<b>Number of people assisted: 9,678</b>
<b>N° of National Societies involved in the operation: 5</b>	
<b>N° of other partner organizations involved in the operation: 13</b>	

## A. Situation analysis

### Description of the disaster

Zimbabwe was affected by floods, landslides and hailstorms in January and early February 2014, affecting approximately 20,000 people. Hailstorms and unprecedented widespread flooding occurred in most low lying areas of Zimbabwe with significant proportions in catchment area streams of Tokwe-Mukosi dam of Masvingo District, Tsholotsho district and Gokwe district. In Masvingo, the partially completed Tokwe-Mukosi dam unexpectedly and rapidly filled up, inundating 2,514 households (20,000 people) awaiting the three year phased Government of Zimbabwe (GoZ) relocation plan. Widespread loss of property, livestock and food stocks occurred during the hasty efforts to relocate the affected population.

The crisis situation arose when the 20,000 displaced people were hastily relocated to Chingwizi camp, causing serious shortages of basic living needs, including food, water, sanitation, shelter, security, livelihoods, and access to health services. The magnitude of this disaster prompted the government to declare a National Disaster and launched an international appeal of USD 20 million to aid the affected population. At the same time, the flooding in other parts of the country had affected 40 households in Gokwe and 400 households in Tsholotsho, bringing a total of nearly 3,000 households requiring urgent humanitarian assistance.

DG ECHO contributed towards partial replenishment of the DREF allocated towards this operation. The major donors and partners of the DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Canada, Denmark, Ireland, Italy, Japan, Luxembourg, Monaco, the Netherlands, Norway, Spain, Sweden and the USA, as well as DG ECHO, the UK Department for International Development (DFID), the Medtronic, Zurich and Coca Cola Foundations and other corporate and private donors. Details of all donors can be found <http://www.ifrc.org/docs/appeals/Active/MDR00001.pdf>. The IFRC, on behalf of the Zimbabwe Red Cross Society, would like to extend thanks to all partners for their generous contributions.

<click [here](#) to go directly to the final financial report or [here](#) to view the contact details>

### Summary of response

#### Overview of Host National Society

The Zimbabwe Red Cross Society (ZRCS) closely monitored the unfolding humanitarian situation since the first alert by the provincial office (29 January 2014), and action team members in and around the affected areas were alerted. Immediately after the escalation of the crisis, ZRCS response teams were deployed to carry out the initial assessments and to distribute the emergency non-food items following formal requests from the National Civil Protection Department (NCPD), which were replenished through the DREF once it was launched. Even prior to the alert from the government on the 29th, ZRCS was the first to respond to the disaster on the 3rd of January. Initially 700 households were targeted with support for immediate and most urgent humanitarian sector specific needs

(shelter, clean water, sanitation). Two National Disaster Response Teams (NDRT) (five members in each team<sup>1</sup>) were deployed to carry out further assessments and kick start response actions on the ground, in support of the provincial teams and Community Based Disaster Response Team (CBDRT). Another ZRCS team was deployed to the other provinces in Zimbabwe, providing 200 households affected by the floods in Tsholotsho, Gokwe and Chipinge with temporary shelter and kitchen sets. These preliminary response actions were replenished upon approval of the DREF and included costs for assessments, logistics costs and other initial response costs incurred.

The DREF was launched on 18 February 2014 and initially the support was planned for three months, partly focusing on the immediate needs in the transit camp. However, the bulk of support was planned to go towards beneficiaries upon reallocation to permanent resettlement sites. The expectation was that families would spend no more than three days in the reception centre before being allocated their permanent relocation sites.

However, two months later, the ZRCS was prompted to launch an update to the Emergency Plan of Action (EPoA) based on information received through continuous monitoring of the operation, including a beneficiary satisfaction survey that was conducted. It became apparent that there was zero outward movement of people from the camp and the central government authorities at the district level had indicated a prolonged stay exceeding five months. This prompted a change of strategy around the timeframe, beneficiary target, scope and budget of the operation. The change was as a result of the delayed relocation of the affected people from Chingwizi transit camp to their permanent relocation plots. 2,800 families (14,000 people) had been temporarily settled in the Chingwizi reception centre. With no outward movement to permanent sites, the reception centre became a transit camp, with prolonged stay exceeding five months. The change in scenario increased the DREF timeframe by an additional two months and necessitated changes in the intervention scope and budget as detailed below;

### Scope and strategy

- Activities focusing on the in-camp needs were implemented, such as construction of semi-permanent latrines and provision of emergency shelter. Furthermore, the national society continued to monitor the needs of the displaced families in the camp. Thus, resources earlier planned for after relocation, such as procurement of squatting plates and shelter toolkits for the post-reception centre, were reallocated to the emerging in-camp needs.
- The number of shelter beneficiaries in Masvingo (Tokwe-Mukosi) increased from 500 to 1,000 families. The increase in shelter needs was as a result of an increased number of displaced populations coming into the camp and a lack of outward movement of people from the camp to the final resettlement centre.
- There was also a change in the interventions' overall objectives to include the emerging sector needs, such as psycho-social support (PSS), first aid and restoring family links (RFL).



ZRCS volunteers are providing technical guidance on temporary shelter for beneficiaries. Photo: ZRCS

### Budget and financial situation

- A revision of the budget was done by reallocating post-camp budget lines to increased coverage of emerging sector specific in-camp needs. The reallocation, however, remained within the original EPoA budget. Unfortunately the revised budget was not uploaded to the finance system and hence, the final financial report shows expenditure versus the original EPoA budget. This has caused some variances between budget and expenditure.
- Transportation and storage cost of relief items were over-budgeted, which has created an underspend on the Shelter budget line.
- The Water, Sanitation and Hygiene budget was revised down following the operations update, but as the budget revision was not finalized internally, this budget line shows an underspend.
- The Utensils and Tools budget line was revised during the operation. However, a variance remains as the revised budget was not uploaded into the finance system.
- One first aid training that was budgeted for was not carried out, which led to a variance on the budget line for Medical and First Aid activities.
- An overspend on the budget line for Storage and Warehousing was caused by unexpected delays in receiving the relief items from the IFRC warehouse in Dubai, leading to delays in distribution of items.
- Expenditure for logistics services was budgeted for under Transport and Vehicle Costs, which has created variances on both budget lines.

<sup>1</sup> The teams comprised of 1 WATSAN/ Health specialist, 1 shelter specialist, 1 DRR specialist, 1 PSS specialist and 1 communication officer. Out of the ten people deployed, five were also Regional Disaster Response Team (RDRT) trained.

- The budget for international staff was not used as the national society was able to mobilize national RDRT and NDRT trained staff members. This also reduced expenditure on the travel budget line as no in-country support from the IFRC regional and zone offices was required.
- National staff (hired by IFRC) was not budgeted for, but an IFRC driver was used for monitoring purposes during the operation, which caused a variance on that budget line.
- The budget lines for office costs and financial charges were over budgeted, which has led to variances there.
- A balance of CHF 28,484 will be returned to the DREF.

**Schedule/ timeframe**

Approval was sought to change the DREF timeframe from three to five months with no additional costs. Thus, the extension allowed consolidation and completion of the planned activities within the EPoA.

The NS response capacity was strengthened by the presence of trained Community Based Disaster Response Team (CBDRT) members through the support of the Netherlands Red Cross, Norwegian Red Cross, Finnish Red Cross, the International Committee of the Red Cross (ICRC), and most recently by Danish Red Cross. 123 shelter construction trained volunteers soon became critical local surge capacity for the shelter construction for the Chingwizi emergency. Availability of a wider pool of RDRT trained staff was evidently a major strength in the realisation of this operation, as this critical capacity was utilised in response to the multi-sectoral needs characterising the emergency. The NS experience in implementing DREF and other emergency operations, most recently responding to the 2013 floods and food security emergencies, also positively impacted the response. For example, the 2013 DREF review process that was facilitated by the IFRC regional staff, built the capacity of the national society to conduct the review of this operation.

**Overview of Red Cross Red Crescent Movement in country**

Strong coordination and cooperation among in-country RCRC movement partners, such as Norwegian Red Cross, Danish Red Cross, Finnish Red Cross, ICRC and the IFRC country office, enabled a coordinated planning of the response to the disaster. As such, the movement partners convened an emergency steering committee for the purpose of information sharing and developing recommendations for response actions. Constant updates of the situation were shared with all partners as the crises unfolded. Furthermore, in-country movement partners' coordination was done through the movement coordination meetings (MCMs).

These coordinated efforts saw in-country movement partners providing the required technical and material support to ZRCS in planning for the operation. This is evidenced by the support received from ICRC, which supported logistics in Tsholotsho, and Norwegian Red Cross, which is currently funding a CBHFA – DRR project in Manicaland, also supporting the preliminary response activities by the national society.

**Overview of non-RCRC actors in country**

The government's Department of Civil Protection (DCP) played a key role in coordinating response actions of all civil societies and Non-Governmental Organizations (NGOs). The minister of Local Government Rural and Urban and Planning did daily press briefings on the developing situation to keep the local and international community updated. At the provincial level, the provincial civil protection committee chaired by the Resident Minister also convened daily briefings with all local agencies.

ZRCS, as mandated by the 1981 Act and fulfilling its auxiliary role as a member of the Civil Protection Committee, attended the coordination meetings at all levels. The DCP requested Red Cross to do joint assessments together with the provincial civil protection committee and other humanitarian actors, such as ECHO, Cesvi (an Italian NGO), and International Organisation for Migration (IOM).



The White City in Chingwizi Transit Camp, established by the Red Cross for the most vulnerable in camp. Photo: ZRCS

The national society also participated in the humanitarian cluster coordination meetings with the United Nations OCHA, alongside other NGOs and humanitarian actors to determine the response actions of each player, as well as to enable information flow for a well-coordinated response. While there was no geographical delineation of operational boundaries, the below table visualizes the response actions of the non-government actors:

Sector Needs	Non-Governmental Organization	Type of support	Quantity	No. of HH/people assisted
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Shelter	IOM	Tarpaulins	2,195	731 H/H
	Shelter Box	Tents	804	804 H/H
Water , Sanitation and Hygiene	ACF, OXFAM	Water tank, Water trucking		
	Batanai, Care International	Hygiene promotion (joint, ZRCS, MoHCC involved)		9,425 people
	ACF, GAA Oxfam	Temporary toilets	300	
Education	Save the Children Fund	Wooden cabins (teachers quarters)	10	10
	UNICEF, Plan International	Classroom tents	14	
PSS and Protection	Save the Children Fund	Trained facilitators for child friendly spaces	75	
	Child line	PSS		255
Health	CARE	Log cabins for a temporary clinic	2	
	Save the Children	Maternal care bed kits	40	
Food Security	WFP	Tent/ storage facility	2	
	Private sector companies and well wishers	Food stocks( cereal	360 MT	1,900 HH

### Government actions

The Government of Zimbabwe launched a US\$ 20 million appeal, calling for local and international community assistance. The appeal was to cover the following sector needs; US\$ 660,000 for food, US\$ 401,400 for tents, US\$ 314,876 for NFIs, US\$ 230,000 for medical supplies and US\$ 2.6 million for logistical support. A further US\$ 9.8 million was required for schools and US\$ 5.3 million for clinics, boreholes and dip tanks. However, very little funding was received and information on the budget and expenditure is not readily available.

Through DCP, the government mobilized preliminary logistics to evacuate families from the catchment areas. Zimbabwe Defence Force helicopters carried out search and rescue operations for displaced community members. The Ministry of Health and Child Care (MoHCC) also provided health staff for the clinic and health promotion activities, as well as providing police officers to maintain law and order.

### Needs analysis and scenario planning

#### Needs Analysis

The rapid assessments carried out by ZRCS head office and provincial teams, in cooperation with the CBDRTs, coupled with secondary information from other agencies, such as OCHA and the DCP, was the main source of beneficiary statistics and the needs on the ground.

This preliminary information gathered showed that 2,231 households were affected and needed to be evacuated to safer grounds. The government, IOM and other non-state actors were expected to reach out to 1,731 households (8,655 beneficiaries) with temporary shelter and non-food items (NFIs). ZRCS had then identified the need to support 500 households (2,500 beneficiaries) displaced by the Tokwe Mukosi Dam disaster. These 500 households (2,500 beneficiaries) constituted people who had not received any support from government and other non-governmental agencies, and were in urgent need of humanitarian assistance.



The temporary latrines established by ZRCS. Photo: ZRCS

The NS also planned to support 200 households affected by flash floods in Matabeleland North province (Tsholotsho district), Midlands Province (Gokwe North and South Districts) and Manicaland province (Chipinge District). The needs identified included shelter and NFIs. It was also noted that much of the government and humanitarian actors' efforts and attention was exclusively focused on the Tokwe-Mukosi area, overlooking the needs of communities being affected by floods elsewhere.

However, two months into the operation, the plan was revised based on the assessments, as well as the change in the government's position with regard to the period of stay in the reception centre prior to relocation to permanent sites. The prolonged stay of affected communities in the reception centre resulted in increased shelter needs and the emerging of new camp settlement needs. Despite the pledges made at the onset of the emergency, it became clear that a huge gap remained, particularly in shelter provision, as many families continued to live without any shelter. Against this background the revision of the Emergency Plan of Action resulted in the following changes:

- DREF timeframe increased to five months
- Beneficiary targets increased to 1,200 households
- Change in the interventions' overall objectives, including the emerging sector needs, such as psycho-social support (PSS), First Aid and restoration of family links (RFL)
- Reorganizing the budget by reallocating post-camp budget lines to increase coverage of existing and emerging sector specific in-camp needs

### **Beneficiary Selection**

The beneficiaries of this operation were drawn from four affected provinces Masvingo (Tokwe Mukosi), Manicaland province (Chipinge district), Midlands and Matabeleland North. The operation prioritized the most vulnerable populations in critical need of assistance that were not targeted by other humanitarian agencies. The targeted beneficiaries included the most vulnerable groups, i.e. widows, persons with disabilities, orphans, women, children and the chronically ill, including those living with HIV and AIDS.

### **Risk Analysis**

The affected populations that were homeless were at risk of epidemic outbreaks due to contaminated water sources, lack of sanitation facilities, lack of shelter, and exposure to the elements. There were growing fears of disease outbreaks and malnutrition, owing to a shortage of clean water and food. The entire targeted population was in dire need of food assistance, as their food stocks were depleting fast, and were destroyed by rain and floods. Furthermore, their coping mechanisms had been severely disrupted due to the displacement. This scenario caused Red Cross to do an internal call for local well-wishers who provided food to be handed out to beneficiaries to complement the support from other agencies and the DCP mobilized food stocks.

Authorities also expressed deep concerns for a possible catastrophe in the event of the dam wall collapsing under the strain of huge water levels, with the worst case scenario potentially affecting 40,000 people downstream of the dam in Ngundu, Gororo, Nyahombe, Tokwane and Triangle. However, the contractor working on the dam moved in faster to buttress the wall, effectively averting the disaster.

## **B. Operational strategy and plan**

### **Overall Objective**

The overall goal of the project was to have the disaster affected population's immediate needs met through the provision of food, shelter, safe water and sanitation for 1,200 households.

- The operation's target was 1,200 affected households in Masvingo, Midlands, Matabeleland North, Manicaland province (Chipinge district) and Manicaland province, who were in dire need of shelter, water and sanitation.
- The operation prioritized the most vulnerable populations who were in critical need of life saving emergency support and who were not targeted by other humanitarian agencies (widows, persons with disabilities, orphans, women, children and the chronically ill).

### **Proposed strategy**

Over the five months, ZRCS:

- Provided for the critical needs of the affected communities around emergency shelter, safe water hygiene promotion and sanitation for 1,200 affected households.
- Implemented an assessment based response as it continuously carried out needs assessments that informed the strategy change.
- Carried out a beneficiary satisfaction survey and a DREF lessons learnt workshop for improvement in quality of emergency responses.
- Supported the replenishment of stocks already utilized and expenses incurred prior to the DREF application.

The beneficiary satisfaction survey was one of the structured platforms for consultation with beneficiaries. As such the process managed to uncover emerging needs and risks that required immediate action.

In all aspects of the response, the national society sought to provide an enabling environment for community recovery, therefore focusing on participation of the affected communities. ZRCS recognised the therapeutic benefit for beneficiaries of participating in the activities, which countered stigma and helplessness associated with non-involvement. Trainings were done for the local volunteers on shelter construction and hygiene awareness, both of which created essential skills that will be useful also post-relocation of the communities.

Throughout the operation the national society continued to prioritize the needs of the special interest groups, such as chronically ill, disabled and child headed households. These were prioritized in the distribution of non-food items by Red Cross. An example of this was the creation of a specific section in the camp where these special interest groups were allocated safer and durable Red Cross family tents, whereas less at risk populations received tarpaulins and/ or plastic sheeting.

## Operational support services

Key support services for the successful operation included the following:

Support Service	Function
PMER	Support with evidence based reporting, upholding accountability and compliance
Finance	Availing financial resources, financial accountability, control mechanisms, financial reporting
Communications	Profiling and documentation of the response, public relations
IT	Communication systems set up and maintenance
Human Resources	Organizing personnel for the operation, volunteers, staff, surge capacity

## Human resources (HR)

This operation was implemented by national society staff and volunteers.

- a. 65 dedicated and trained volunteers were mobilized to carry out shelter construction, distributions, assessments, loading, offloading, first aid and hygiene promotion activities. Volunteers were paid travel costs, allowances and refreshments during the operation, as stipulated in the ZRCS volunteer policy. The EPoA had planned for mobilization of 100 volunteers and hence, expenditure on volunteer costs was lower than anticipated. 20 volunteers were active in shelter construction, 40 volunteers were providing support on WASH and health activities, including hygiene promotion, first aid and psycho-social support, and five volunteers were supporting community members on restoring family links.
- b. 20 national society staff members at provincial and headquarters level participated in rotation for the operation. NDRT and RDRT trained staff carried out different multi-sectoral activities required at the beginning of the operation and were reduced as the operation continued. Some staff members part of the NDRT participated in the operation as required and in rotation. They were paid per diems, accommodation costs, and travel costs, as determined by the NS per diems policy. An RDRT trained officer was assigned as the project officer to manage the operation.

## Logistics and supply chain

The procurements for smaller items, such as kitchen sets, hygiene items, and some first aid replenishment pharmaceuticals were done by ZRCS using the procurement policies and requirements for the national society. However, there were also larger consignments, for example for the tarpaulins, which were procured by the IFRC country office.

## Communications

Social media platforms such as Facebook and Twitter were frequently used by ZRCS during the operation and were critical in informing the public of the operation and generating visibility for Zimbabwe Red Cross Society. Updates on activities were also posted on the ZRCS website. Communication material gathered during the operation was shared with IFRC for posting on the recently launched Africa web page [www.ifrc.org/africa](http://www.ifrc.org/africa). The IFRC Communications Manager for Africa and the Regional Communications Officer for southern Africa, who were already in-country, travelled to the affected areas to gather communication materials in the form of photos, videos, interviews and beneficiary profiles. Furthermore, the national society featured on the local radio stations to promote the work being done in the operation. The humanitarian ambassador for ZRCS was also engaged and he visited the affected communities, thus reaching out to the media, as well as his fans. A documentary of the operation was produced by the national society for future references and lessons learned.

## Security

The only security concerns during this operation were relating to warehousing. ZRCS therefore availed its security personnel to man the warehouses. Moreover, the Government of Zimbabwe had already deployed huge numbers of security forces in the affected area and particularly at the reception centre. Hence this risk was significantly reduced.

## Planning, monitoring, evaluation, & reporting (PMER)

The Zimbabwe Red Cross Society PMER Officer was key to the implementation and monitoring of the planned operation and ensured evidence based reporting, upholding accountability and compliance to the established standards and assessment-based programming. The fluid nature of the disaster required regular monitoring to track the impact of response actions, progress of activities and the achievement of outputs below, and to understand beneficiary perceptions on the assistance being rendered. PMER's role was very crucial in ensuring adherence to the EPoA and eventually informed the revision of the strategy.

### DREF review

A beneficiary satisfaction survey was done in March 2014, and most of the beneficiaries interviewed highlighted that the response to the disaster implemented ZRCS was suitable for their needs. A lesson learned/ review workshop was held in July 2014 with participation of in-country partner national societies (PNSs) and IFRC country office staff, and provided recommendations for future interventions. The lessons learned discussed per outcome are shown in the tables below.

During the DREF review, the following recommendations were made for future operations:

- The tents provided by ZRCS were more appropriate than the tarpaulins as they were spacious and allowed the households to demarcate them into two rooms to separate the parents and their children. During the planning phase of future operations, sufficient attention needs to be paid to the appropriateness of the material to be provided during the intervention to prevent social concerns such as these from arising.
- Various communication channels were used during the operation. However, it was found that beneficiaries prefer to be contacted directly either at community meetings or through personal visits by traditional leadership and Red Cross volunteers. In this respect, it is recommended that in future scenarios, Red Cross volunteers have to be assigned in each beneficiary community as a contact person.
- Red Cross staff and volunteers on the ground implemented the operation without sufficient knowledge of the intervention framework and important standards and guidelines, such as SPHERE and WHO. It is recommended for future operations that the volunteers are trained to obtain a better understanding of SPHERE standards to ensure consistency in the implementation of the operation.
- It was found that additional volunteers need to be trained in psycho-social support (PSS) as it is an important aspect of any emergency operation.
- Through the use of promotional materials, e.g. showcasing of the documentary, the national society can improve its image and visibility. While this is important, the NS should maintain a balance with the actual service delivery as it is more important to be present in the hearts and minds of people than focusing on branding and visibility.
- Although the response to the Tokwe-Mukosi disaster was swift and appropriate, the national society still identified room for improvement. The recommendation was made to build up a sufficiently resourced disaster response team to make the ZRCS response to disasters even faster and more efficient. This may be complemented by the national society having local stocks to be better able to respond to localized disasters that do not require DREF appeals.

## C. DETAILED OPERATIONAL PLAN

### Shelter and Settlements

<b>Shelter and settlements</b>
<b>Outcome 1: The immediate shelter and settlement needs of the target population are met</b> Output 1.1: Emergency shelter assistance is provided to the targeted population
<b>Achievements</b>
<ul style="list-style-type: none"><li>• The NS provided 180 family tents, 2,766 tarpaulins and 350 shelter toolkits. Of these, 22 family tents and 13 tarpaulins were distributed in Matabeleland North Tsholotsho flash floods emergency relief operations to 40 households. All other tents, tarpaulins and shelter toolkits were distributed to 540 households in the camp in Chingwizi. The total number of households reached with shelter distributions was therefore 580 households. Although the revised Emergency Plan of Action increased the targeted number of households to 1,000, the decision was made to distribute according to the needs identified. Therefore, certain households were given several items, which reduced the number of households reached.</li><li>• 700 kitchen sets were procured and distributed to 700 households (one kitchen set per household).</li><li>• 20 shelter construction trained volunteers worked in the camp. Their services were continuously required as new arrivals needed their assistance in temporary shelter construction. The 20 volunteers sensitized community members, which led to 123 community members supporting shelter construction activities.</li><li>• Shelter trained volunteers provided construction support and repair works as incessant rains continuously pulled the tents down exposing families to the harsh weather.</li></ul>

## Challenges

- Delays were experienced around the procurement and shipment of the tarpaulins from the IFRC warehouse in Dubai, which affected the timely provision of the support. IFRC is working to reduce lead times in the procurement and delivery of NFIs through the pre-positioning of additional non-food items in the region.
- The support to some extent failed to meet the shelter standards of gender as some families required more shelter owing to their household sizes.
- Due to the beneficiaries staying in the camp longer than was anticipated, the NS was faced with the challenge of having to use temporary shelter in a situation that ended up requiring semi-permanent upgradable structures that would have been more apt and durable for the scenario.

## Lessons learned

- In the future, there is a need for critical consideration of the family sizes and gender in assessing and planning the shelter support.

## Water, Sanitation and Hygiene Promotion

### Water, sanitation and hygiene promotion

#### Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Output 1.1 Continuous assessment of water, sanitation and hygiene situation is carried out

Output 1.2 Daily access to safe water, which meets SPHERE and WHO standards in terms of quantity and quality, is provided to targeted population

Output 1.3 Community managed water sources, giving access to safe water, are provided to targeted population.

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

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

Output 2.3 Hygiene-related goods (in form of NFIs), which meet SPHERE standards, are provided to the targeted population

### Achievements

- ZRCS drilled all planned three boreholes and, for a considerable amount of time, they were the only sustainable water sources for the camp. One borehole was located in the camp while the other two were at the satellite school, which is about three kilometres away from the camp. The boreholes managed to ease off some of the water challenges, although they did not meet the SPHERE standards in terms of queuing time and distance to the water source. This gap was partly addressed by other humanitarian organizations, including Oxfam and ACF, who provided a water storage tank in the middle of the camp and brought in water trucks to replenish the tank.
- 42 committee members were trained for three water point committees (14 members per committee). The committees were responsible for ensuring the maintenance of the water points to prevent contamination. The members were selected from across the camp with a gender representation of 60% women and 40% men.
- The national society also supported the communities in constructing 100 latrines using the 3-bag model where the super structure was plastic sheeting.
- 100 sanitation plats were provided and five rolls of polythene plastic paper were delivered for the construction of 100 emergency sanitation facilities against the earlier planned 40 temporary latrines. The increased number of latrines was necessary to deal with the increased population and shows the national society's responsiveness to the needs of the beneficiaries on the ground. Red Cross volunteers were involved in the construction of these temporary latrines with material support from various organizations such as Action Contre La Faim and Oxfam GB, and also supported the safe decommissioning of the filled toilets.
- Hygiene promotion was spearheaded by 40 Red Cross volunteers in conjunction with the Ministry of Health and Child Care (MoHCC) village health workers. Despite reports of resistance among some community members, ZRCS hygiene promotion activities reached 9,678 people (of which 3,439 were female and 6,239 were male) against the target number of 7,000 people in the initial plan.
- A cinema ground was set up by the national society and it was one of the most popular platforms for health and hygiene promotion in the camp. Videos on disease prevention were viewed with key messages on cholera, malaria and diarrhoea prevention. The health messages were interspersed with entertainment videos that were part of the general psycho-social support (PSS). On a daily basis, the average attendance was estimated at +500 people (60% children and 40% adults). As a result of the health and hygiene activities implemented by Red Cross, the following were put in place:

Type	Quantity
Bathrooms	215
Pot racks	882
Rubbish Bins	1,056
Hand washing tippy-taps	77

- 700 hygiene kits were procured locally and distributed to the most vulnerable households. Due to mosquito infestation in these areas, mosquito repellents were also included in the kits' contents.

### Challenges



- The water access provided did not satisfy the SPHERE standards in terms of queuing time to fetch water and distance from the water sources. This was due to other agencies making pledges to support water provision as well, but taking long to avail the support, which resulted in long winding queues.
- Due to the unforeseen long duration of the displaced persons' stay in the camp, semi-permanent upgradable structures seemed more appropriate and durable for the scenario. The continuous decommissioning of the one-metre deep toilets posed a serious health risk to the community and the volunteers involved in the process. However, the government insisted on the temporary structures.

### Lessons learned

- Hygiene promotion activities were implemented by Red Cross volunteers in conjunction with village health workers. A lesson learned from this cooperation was that by aligning goals and objectives with other humanitarian players, Zimbabwe Red Cross Society opened avenues for cooperation and collaboration that led to improvement of the situation of the beneficiaries.
- Although the SPHERE standards guided the design and implementation of the DREF operation, much of the planning of the operation was done at headquarters level in cooperation with IFRC, while Red Cross staff and volunteers on the ground implemented the operation without sufficient knowledge of the intervention framework. It would add value in future operations if the volunteers on the ground have a better understanding of SPHERE standards so that everyone will be on the same page when implementing these interventions.

## Health and Care

### Health and Care

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

Output 1.1 Targeted population is provided with rapid medical management of injuries and diseases

Output 1.2 Psycho-social support is provided to the targeted population

#### Achievements

- Although the activities implemented on health and care were not planned in the initial Emergency Plan of Action, the need for these interventions became clear and support was provided from the onset of the disaster, as described in the DREF update that was published in May 2014. The above outcome and outputs were drafted for the purpose of this final report to clarify the aim of these additional activities implemented.
- A Red Cross first aid tent was established in the camp. A total of 209 first aid cases were recorded during this operation, in which 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 was also done.
- One first aid training that was budgeted for was not carried out, which led to a variance on the budget line for Medical and First Aid activities. The training was deemed no longer appropriate as at this stage the end of the emergency operation was near and the needs of the communities around first aid had been met.
- ZRCS provided a tent for the temporary camp clinic which the government equipped and provided a nurse.
- Two national society staff members were seconded to the National Rapid Response team under the MoHCC. The team was responsible for assessing the health needs of the camp community.
- ZRCS also provided psycho-social support (PSS) to the traumatized population. The national society also established a children's play centre that was managed by the Red Cross volunteers. Makeshift sports and gaming equipment, including soccer, volleyball, and netball, were also put in place.
- The 40 volunteers who were active on rotation in hygiene promotion in cooperation with the Ministry of Health also provided support on first aid activities and psycho-social support to affected community members.
- The cinema was another popular strategy with a high turnout (7,000 people reached). This activity was considered to be supporting people's psycho-social situation as people found it very therapeutic to watch the videos due to their idleness and uncertainties. The fun films which were interspersed with hygiene messages were deemed suitable for people of all ages.

#### Challenges

An inadequate number of PSS trained volunteers reduced the reach of the highly required support.

#### Lessons learned

Nationwide training of Community Based Disaster Response Teams (CBDRT) in PSS will in the long term build the capacity of the NS in PSS activities and response.

## Restoring Family Links

### Restoring family links

#### 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

#### Achievements

Although the activities implemented on restoring family links were not planned in the initial Emergency Plan of Action, the need for these interventions became clear and support was provided from the onset of the disaster, as described in the DREF update that was published in May 2014. The above outcome and output were drafted for the purpose of this final report to clarify the aim of these additional activities implemented.

Five volunteers were supporting community members to restore links with their families. Red Cross 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 stay behind during evacuations to guard their livestock before they were transported.

ZRCS also ensured communication of the separated families through cell phone assistance. This was after the ZRCS Masvingo provincial office advocated with Econet, a local telephone company to establish a temporary network signal receptor at the camp. The ZRCS recorded 60 telephone calls made in facilitating maintenance of family links.

#### **Challenges**

No major challenges were experienced under this output.

#### **Lessons learned**

Due to positive response from beneficiaries to this activity, the national society has found that it needs to ensure that restoration of family links is included in the planning process for future interventions of this nature.

## Contact information

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

- **Zimbabwe Red Cross Society:** Maxwell Phiri, Secretary General; phone: +263.4.332638; +263.4.332197; email: [phirim@redcrosszim.org.zw](mailto:phirim@redcrosszim.org.zw)
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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 (NGOs) 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.

[www.ifrc.org](http://www.ifrc.org)  
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.

**Disaster Response Financial Report**

MDRZW009 - Zimbabwe - Floods

Timeframe: 18 Feb 14 to 18 Jul 14

Appeal Launch Date: 18 Feb 14

Final Report

**Selected Parameters**

Reporting Timeframe	2014/2-2014/9	Programme	MDRZW009
Budget Timeframe	2014/2-2014/7	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

**I. Funding**

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>		263,518				263,518	
<b>B. Opening Balance</b>							
<b>Income</b>							
<u>Other Income</u>							
<i>DREF Allocations</i>		263,518				263,518	
<b>C4. Other Income</b>		263,518				263,518	
<b>C. Total Income = SUM(C1..C4)</b>		263,518				263,518	
<b>D. Total Funding = B +C</b>		263,518				263,518	

\* Funding source data based on information provided by the donor

**II. Movement of Funds**

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>							
<b>C. Income</b>		263,518				263,518	
<b>E. Expenditure</b>		-235,034				-235,034	
<b>F. Closing Balance = (B + C + E)</b>		28,484				28,484	

## Disaster Response Financial Report

### MDRZW009 - Zimbabwe - Floods

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#### Selected Parameters

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Budget Timeframe	2014/2-2014/7	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>263,518</b>			<b>263,518</b>		
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief	60,400		53,885			53,885	6,515	
Water, Sanitation & Hygiene	56,510		52,812			52,812	3,698	
Utensils & Tools	23,600		13,804			13,804	9,796	
<b>Total Relief items, Construction, Sup</b>	<b>140,510</b>		<b>120,501</b>			<b>120,501</b>	<b>20,009</b>	
<b>Logistics, Transport &amp; Storage</b>								
Storage	400		1,226			1,226	-826	
Distribution & Monitoring	28,535		28,495			28,495	40	
Transport & Vehicles Costs	19,830		16,236			16,236	3,595	
Logistics Services			6,207			6,207	-6,207	
<b>Total Logistics, Transport &amp; Storage</b>	<b>48,765</b>		<b>52,164</b>			<b>52,164</b>	<b>-3,399</b>	
<b>Personnel</b>								
International Staff	2,500						2,500	
National Staff			570			570	-570	
National Society Staff	16,190		16,348			16,348	-158	
Volunteers	4,800		4,778			4,778	22	
<b>Total Personnel</b>	<b>23,490</b>		<b>21,695</b>			<b>21,695</b>	<b>1,795</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	8,900		8,337			8,337	563	
<b>Total Workshops &amp; Training</b>	<b>8,900</b>		<b>8,337</b>			<b>8,337</b>	<b>563</b>	
<b>General Expenditure</b>								
Travel	8,880		2,146			2,146	6,734	
Information & Public Relations	8,440		8,589			8,589	-149	
Office Costs	600		289			289	311	
Communications	2,150		2,156			2,156	-6	
Financial Charges	5,700		4,790			4,790	910	
Other General Expenses			21			21	-21	
<b>Total General Expenditure</b>	<b>25,770</b>		<b>17,991</b>			<b>17,991</b>	<b>7,779</b>	
<b>Indirect Costs</b>								
Programme & Services Support Recove	16,083		14,345			14,345	1,739	
<b>Total Indirect Costs</b>	<b>16,083</b>		<b>14,345</b>			<b>14,345</b>	<b>1,739</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>263,518</b>		<b>235,034</b>			<b>235,034</b>	<b>28,485</b>	
<b>VARIANCE (C - D)</b>			<b>28,485</b>			<b>28,485</b>		

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Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

**IV. Breakdown by subsector**

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
<b>BL2 - Grow RC/RC services for vulnerable people</b>							
Disaster response	263,518		263,518	263,518	235,034	28,484	
Subtotal BL2	263,518		263,518	263,518	235,034	28,484	
<b>GRAND TOTAL</b>	<b>263,518</b>		<b>263,518</b>	<b>263,518</b>	<b>235,034</b>	<b>28,484</b>	