Walking a thin line

Cover photo: Zanu PF in Parliament as a minority for the first time in 28 years

The political and humanitarian challenges facing Zimbabwe’s GPA leadership – and its ordinary citizens

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“The MDC is in government but we are not the government. These are the limitations of a marriage of convenience. Those in government will tell you this government is walking on a thin thread.”

[Prime Minister Tsvangirai, May 2009]

“The government must give as much attention to securing human rights reforms as they are to seeking economic resources. There seems to be no sense of real urgency to bring about human rights changes on the part of some government leaders. Words have not been followed by effective action.”

[Amnesty Sec Gen Irene Khan, 18 June 2009]

“I have never seen such suffering in my life. I am preparing to die - the clinic is on strike, my wife and daughter died last year, after May there will be no food hand outs at the clinic and then I will starve.”

[Bulawayo resident, Feb 2009]

“Someone died last month as he went to two clinics with no drugs and could not afford R70 bus fare to St Lukes. People have to pay bus fares in chickens - even to make a phone call for an ambulance costs one chicken. Going to clinics is useless.”

[Lupane resident, Feb 2009]
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Abbreviations

AREX Agricultural Rural Extension Services
ARVs Anti Retroviral medication
AU African Union
CISSOM Civil Society Monitoring Mechanism
COMESA Common Market for Eastern and Southern Africa
CZI Confederation of Zimbabwean Industries
GNU Government of National Unity
DPT Diptheria/Pertussis/Tetanus vaccination
ESAP Economic Structural Adjustment Programme
EU European Union
FEWSNet Famine Early Warning System Network
GMB Grain Marketing Board
GPA Global Political Agreement
ICRC International Committee for the Red Cross
IDASA Institute for Democracy in Southern Africa
IFI International Financial Institutions
IMF International Monetary Fund
MACRA Matabeleland Constitutional Reform Agenda
MDC Movement for Democratic Change
MDC-MMDC Mutambara faction
MDC-T MDC Tsvangirai faction
MSF Medics Sans Frontieres
MIC Media and Information Commission
MOU Memorandum of Understanding
NCA National Constitutional Assembly
NGO Non governmental organisation
UN OCHA United Nations Office for the Coordination of Humanitarian Assistance
Radio VOP Radio Voice of the People
RBZ Reserve Bank of Zimbabwe
SA South Africa
SADC Southern African Development Community
SPT Solidarity Peace Trust
STERP Short Term Economic Recovery Programme
TB Tuberculosis
UNICEF United Nations Children’s Fund
US United States
USD Unites States Dollar
WFP World Food Programme
WHO World Health Organisation
WOZA Women of Zimbabwe Arise
ZANU PF Zimbabwe African National Union – Patriotic Front
ZAPU Zimbabwe African People’s Union – Patriotic Front
ZCTU Zimbabwe Council of Trade Unions
ZIMVAC Zimbabwe Vulnerability Assessment Committee
ZINASU Zimbabwe National Students Union
Executive Summary

The Global Political Agreement signed on 15th September 2008 was an uneasy compromise between the two MDCs and Zanu PF, and was the result of a combination of factors: the weakening of both Zanu PF and the opposition, together with the social and civic forces that supported the MDCs; the disastrous economic and humanitarian descent in the country; pressure from SADC; and growing international isolation of the Mugabe regime. Moreover while for Zanu PF the GPA was a modality to claw its way out of the economic crisis and to begin a normalisation of international relations, the MDCs accepted the agreement as their only viable route to power, and a vital opportunity to begin a process of national political and economic revival.

The Transitional Government will continue to manifest the challenges of the Zimbabwe crisis, demonstrating the complexity of the national, regional and international dimensions of the situation. The new government has to face the challenges of dealing with overlapping legacies of colonial inequalities and post-colonial authoritarian rule, while attending to the post Cold War demands of North-South relations. In such a context the wrong forms of international interventions could well encourage divisions in the democratic movement, as well as a new convergence around nationalist questions of sovereignty across party lines, in the face of mounting frustrations caused by limited international support. In the absence of sound alternatives to the current political arrangement, the slow international response to the needs of the new government could strengthen the hand of the more regressive elements of the ruling party in the military and security, while frustrating the democratic forces within the transitional state. This risks around limited engagement with the transitional arrangement are much greater than a more substantive engagement by the international community.

A major obstacle to the GPA has been the continued failure of the new government to create a situation in Zimbabwe where there is total respect for human rights and the rule of law, notwithstanding the fact that the scale of harassment of civic and opposition members has been reduced from the extreme repression of 2008. The international community is unlikely to engage with any meaningful financial assistance until there is a clear return to the rule of law, respect for property rights and the genuine opening up of the media. However, the failure of the international community to engage could well threaten the fragile state of the GPA, which if it were to collapse, would lead to another round of violence and repression.

An uneasy calm prevails in some parts of the country, while in others tensions remain high in the wake of the horrific violence of 2008. This serves to underline the need for healing in Zimbabwe and it is commendable that a Ministry of National Healing has been established. There is need for this organ to allow for the encompassing of a variety of approaches. It is unlikely that the compromised space of the GPA will allow for high level prosecutions or for the establishment of an effective truth commission, but debates about the future possibility of such processes should
To facilitate such processes and to deepen democratic debate in the country media reform needs to be speeded up.

**Access to Humanitarian resources and coping strategies in Matabeleland.**

In focusing on the access to humanitarian resources and the coping strategies in one part of the country, Matabeleland, the following major findings were recorded:

- In 2008 families were largely excluded from access to both health and education. While over the last six months there has been some improvement in access to education, and some erratic improvement in rural clinic delivery, the situation in rural Zimbabwe in 2009 remains generally dire.

- The majority of families interviewed (65%) have not harvested more than a few months of grain, and will be in need of donor food relief again by September 2009. This food security is already being undermined by the fact that families in rural Zimbabwe do not have access to foreign exchange, meaning that they are being forced to pay school fees, bus fares and grinding mill fees with their meager harvests. Bartering and the loss of able-bodied people to the Diaspora continue to impoverish rural Zimbabweans, increasing the already heavy burden on female-headed households.

- Because most rural families have little or no access to foreign exchange, it is not financially viable for small business owners in rural business centres to restock, given the limits of the local market.

- Political violence is not apparent in rural Matabeleland. Democratic spaces have opened up and people are able to meet more freely and debate contentious issues without interference. However in Bulawayo itself problems persist, with students and members of WOZA arrested and assaulted this year when conducting peaceful demonstrations.

**Recommendations**

1. One of the central factors in ensuring the success of the GPA is to put in place economic policies that will provide more security of livelihoods for Zimbabwean citizens. This can only be done though a combination of effective mobilisation of national resources, with support from SADC and the international community.

2. It is vital for the international donor community to carefully calibrate its interventions with the transitional government. The current humanitarian interventions must be complemented by key developmental support in order to assist in developing the material basis for a national reconciliation process in Zimbabwe.
3. Conditions for international support must be based on the benchmarks set by the transitional government itself, which must in turn be based on the central democratic demands of the GPA.

4. There must be a more open debate within the democratic forces in the country over the continued basis for Sanctions in the current context. There are too many mixed messages emerging around this problem.

5. Continued ways must be found to fund the transitional government without at the same time perpetuating the dual authority in the current state structures, which have the potential to provide the more regressive actors in Zanu PF with basis to derail the GPA.

6. Strong steps must be taken by the guarantors of the GPA, SADC and the AU, to ensure that the democratic and human rights reforms of the GPA are implemented with greater speed. The continued abrogation of the elements of the GPA by the ruling party must come under censor.

7. All parties to the agreement must ensure the constitutional review process is not hindered by the obstructive interventions of any party to the agreement, and that, as much as possible within the framework of the GPA, the concerns of civil society are attended to around this process.

8. From the findings of the Diaspora study it is clear that many families in the rural areas are not being sustained by remittances. This adds urgency to the need for sustainable economic reforms that will provide greater security for the livelihoods of the majority of Zimbabweans.

Photo 1: crowds outside Harvest House waiting for Morgan Tsvangirai to address them (Feb 09)
A: Introduction and political overview

On the 15th September 2008 the three major political parties in Zimbabwe, MDC (Tsvangirai), Zanu PF and MDC (Mutambara), signed a Global Political Agreement (GPA) in Harare, Zimbabwe. The agreement was the culmination of the SADC mediation begun in 2007 and was designed to bring an end to the political impasse in the country, particularly after the universal non-recognition of Mugabe’s violent and fraudulent June 2008 presidential election. The Declaration of Commitment by all parties to the agreement read:

The parties hereby declare and agree to work together to create a genuine, viable, permanent, sustainable and nationally acceptable solution to the Zimbabwe situation, and in particular to implement the… agreement with the aims of resolving once and for all the current political and economic situations and charting a new political direction for the country.1

The agreement was an uneasy compromise between the two MDCs and Zanu PF and was the result of a combination of factors: the weakening of both Zanu PF and the opposition, together with the social forces and civic groups that supported the MDC; the disastrous economic and humanitarian descent in the country; pressure from SADC; and growing international isolation of the Mugabe regime. Moreover while for Zanu PF the GPA was a modality to claw its way out of the general economic malaise and to begin a normalisation of international relations, the MDCs accepted the agreement as their only viable route to state power, and a vital opportunity to begin a process of national political and economic revival.2 At the heart of the GPA is the battle for state power as the competing parties struggle for political spaces and levers to shift the terrain ahead of a new election that it is hoped will settle the issue of legitimacy of the next government in Zimbabwe. While the GPA has forced Zanu PF to share state power, the ruling party has nevertheless retained control of the key security ministries. In this battle the major political players have called on different allies to bolster their positions. Given the weakened position of the internal social base of the opposition, it has had to continue to rely on international pressure, and the promise of international economic assistance has been a key source of leverage in the transitional government. For the ruling party, as its national legitimacy has consistently been eroded, reliance on the security sector has formed the major pillar of its power base. Moreover both the SADC and the AU have utilized the language of sovereignty to provide cover for the Mugabe regime, and to paper over their limited capacity to deal with such authoritarian regimes.

Early Outcomes of the GPA.

It is still too early to make a major assessment of the GPA, but in the interim it can be said that the trends have been mixed and the agreement remains a source both of potential and continued threats. After the September signing of the agreement there remained several outstanding issues that delayed

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the formal inauguration of the new government. In January 2009 Morgan Tsvangirai outlined the following issues that required resolution:

- National Security Council Legislation to determine the management of all the security departments of the country.
- Allocation of Ministries between the various parties.
- Appointment of Senior Government officials such as the Provincial Governors, the Reserve Bank Governor, the Attorney General, and Ambassadors.
- Continued breaches of the MOU and the GPA through the abductions and illegal detentions of civil society activists, the unilateral appointment of senior civil servants and the persistence of hate speech in the public media.
- The passing of Constitutional Amendment No 19 that would define by law the roles of the President and the Prime Minister in the GPA.³

On the 13th February, with these issues still outstanding, the new government was inaugurated after the intervention by an extraordinary summit of SADC on January 26-27th 2009 stating that these issues should be dealt with once the new government was in place. Moreover the summit agreed that the GPA would be reviewed after six months. By May 2009 while there had been some progress on issues such as the sharing of ministries, the passing of Constitutional Amendment No 19 and National Security legislation, problems of non-compliance persisted in the agreement. The problematic areas included: continued farm invasions; the failure to swear in Roy Bennett as Deputy Minister of Agriculture; the shifting of ministerial mandates; failure of the security council to meet; the continued politicization of state institutions; the partial and unequal reporting by the state media; the selective application of the law and the persecution of MDC Members of Parliament and civic activists.⁴ On the 21st May the Prime Minister Morgan Tsvangirai announced that while there had been progress on some of the outstanding issues, others remained outstanding. More specifically progress had been made on the following areas:

- **Governors:** The governors would be divided as follows: 5 for MDC-T; 4 for Zanu PF; 1 for MDC-M. Moreover the six governors whose tenure is to be terminated will be paid an agreed compensation.

- **Ambassadors:** The MDC will submit names of individuals to be trained as Ambassadors, while an audit will be conducted to identify potential openings for new Ambassadors. Moreover the five Ambassadorial posts currently available will be filled by the two MDC formations with 4 going to MDC-T and 1 to MDC-M.

³ Tsvangirai’s Speech on power-sharing deal. www.zimonline.co.za Accessed on 15/01/09.
⁴ MDC National Council Resolutions. www.zimonline.co.za Accessed on 19/05/09. For more details on problems with the GPA see the April and May 2009 issues of the GNU Watch Zimbabwe, published by SITO, IDASA.
• **Ministerial Mandates**: The functions of the disputed communications mandate to be shared among the three Ministries: The Ministry of Information Communication and Technology, the Ministry of Media Information and Publicity and the Ministry of Transport and Infrastructural Development. The key to this division of responsibilities is that Mugabe has retained control over the Interception of Communication Act. Further controversy in the area of the media relates to the accreditation of journalists. On the 23rd May the Prime Minister announced that the Media and Information Commission (MIC) no longer had a legal existence, and that accordingly there was no need for journalists to apply for accreditation until the new Zimbabwe Media Commission was duly constituted. A few days later the President’s spokesperson contradicted this position maintaining the position of the requirement for MIC accreditation, and through an order from the Ministry of Media, Information and Publicity, ordered journalists wishing to cover the COMESA conference in Zimbabwe in June 2009 to have such accreditation. This position was challenged in the High Court and Justice Bharat Patel overruled the Ministerial position and ordered the Minister and Permanent Secretary to retract their statements about having to register with the MIC. However in spite of this ruling independent journalists were prevented from reporting on the COMESA conference, and the restraints on the media remain very serious.

• **Roy Bennett**: Mr Bennett will be sworn in at the same time as the new Governors.5

However while there has been some progress on the above, two major issues remained outstanding, namely the appointments of the Reserve Bank of Zimbabwe (RBZ) Governor and the Attorney General. Both these position have played a central role in Zanu PF’s authoritarian project over the last decade, the first in conduction of the quasi fiscal activities that maintained the military/political patronage network of the Mugabe regime, and the second in retaining repressive judicial pressures against the political and civic opposition during the same period. It was not surprising therefore that Zanu PF would oppose changes in this area, and in June 2009 the MDC referred the matter back to SADC for resolution.

Since the inauguration of the new government, the new Minister of Finance, Tendai Biti has persistently criticized the past role of the Reserve Bank Governor Gideon Gono. In May Biti noted that the RBZ “has been operating outside of the law” and “our challenge is to make the RBZ a credible institution consistent with best practices.”6 In response to the position of the MDCs, Mugabe, the service chiefs and the war veterans have affirmed their support for Gono and vowed that he will not be moved. In characteristically threatening language the war veteran leader, Joseph Chinotimba, stated that, “if the inclusive government insists on Gono’s removal, we are determined to throw every white farmer off their farms and install blacks on those farms.”7 Gono responded, in the most self-serving manner, by attempting to justify his ‘sanctions busting’ activities as RBZ Governor:

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A lot more ‘kiya-kiyaring’ was and had to be done to sustain the economy, sustain life and everything else this inclusive Government found in place. Without such gymnastics including the so-called printing of money or ‘quantitative easing’ as they are now calling it in Europe and elsewhere, this country could have easily degenerated into unprecedented chaos with no opportunity ever for anyone in the inclusive Government to be in the comfortable positions from where they are now calling the “shots” today.8

Gono’s disingenuous response to criticisms of his tenure combined a great deal of self serving pomposity with accusations of externalization of foreign currency against Tendai Biti, to produce the kind of document that only an individual and institution unaccustomed to accountability could manufacture. As a way of dealing with the continued presence of Gono and the determined support for him by Mugabe and the military, the unity government has proposed to put in place a Multi-Donor Trust Fund, under the Ministry of Finance, that will sideline the Reserve Bank from handling loans and financial aid coming into the country. Moreover the Minister of Finance has announce that he will introduce one bill to reform the Reserve Bank Act and another to replace the Audit and Exchequer Act, in order to put in place more stringent measures of accountability for the Reserve Bank and government spending. As we will discuss below this method of channeling donor funds and the financial reforms envisaged is likely to cause serious tensions in the unity government.

In terms of constitutional reform, another central plank of the GPA, parliament has appointed a Select Committee composed of representatives of the parties in government. According to the GPA, the terms of reference for this Committee shall be:

- “To set up subcommittees chaired by a member of Parliament and composed of members of Parliament and representatives of civil society as may be necessary to assist the Select Committee in performing its mandate”;
- “To hold such public hearings and such consultations as it may deem necessary in the process of public consultation over the making of a new constitution for Zimbabwe”; 
- “To convene an All Stakeholders Conference to consult stakeholders on their representation in the sub-committees referred to above and such related matters as may assist the committee in its work”;
- “To table the draft constitution to a 2nd All Stakeholders Conference”;
- “To report to Parliament on its recommendations over the content of a New Constitution for Zimbabwe”;

The draft constitution recommended by the Select Committee will then be submitted to a referendum.9

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8 “Gono’s Letter to Tsvangirai”. www.newzimbabwe.com Accessed on 21/05/09. ‘Kiya-kiyaring’ refers to wheeler-dealing activities.
9 Global Political Agreement, op cit p6.
The process agreed in the GPA has however not been well received by some key civic groups and has caused a great deal of tension between the MDCs and their civic allies in the NCA, ZCTU and ZINASU, in particular. For the NCA the issue of the process of constitutional reform has once again become the central bone of contention as it did in the constitutional review process between 1998-2000. In the words of the Chair of the NCA Lovemore Madhuku:

The 2000 process is no different from the current one in fact the current one is worse than that 2000 one. In 2000 we had Constitutional Commission which was chaired by a judge of the High Court Justice Chidayausiku…. The problem then in 2000 was that the President at the end of the process did change some provisions of the draft from the Commission. In the current process there are so many opportunities, not just for the President but for other people who now sit in a group of three, they are called the Principles - who have a lot of power.10

From the MDCs’ perspective it is clear that they are concerned that the NCA and others, in objecting to the process, have not taken into account the changed political context of constitutional reform in 2009, compared to the period 1998-2000. Clearly the political circumstances have changed in the country compared to the earlier period. In the late 1990s the constitutional reform process driven by the unified MDC and the NCA was riding the momentum of hope not just for changes in the constitution but in state power. Moreover, social forces driving this process were much stronger, and the political spaces more open than the decade of authoritarian rule that followed this period. The current process is a part of the political compromise that resulted after an extended period of state repression, electoral violence, international isolation and regional intervention.11 Moreover, in the mediation that gave rise to the GPA, while there was an attempt to find a compromise over the issue of process, the question of content was a more immediate concern. This position has been emphasised by Prime Minister Tsvangirai who noted that there “is no point in emphasizing the importance of process instead of content at this strategic moment; this could be suicidal”.12 The point was reinforced by the Minister of Constitutional and Parliamentary Affairs, Eric Matinenga:

We will never be able to agree on the definition of people-driven. My view is that at the end of the day what is important is what we do in the process as compared to the process itself.13

With regard to other players in the civic movement there are clearly differences of opinion on the current process, best reflected in the Declaration of the Civic Leaders Conference on Constitutional Reform in June 2009. While the conference acknowledged the opportunity for constitutional reform under Article 6 of the GPA, it also noted that this process “does not satisfy our long-held conception of what a constitutional reform process ought to be like.” The conference thus set out three positions that would be held by the civic movement on the GPA process:

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1. Those that are willing to engage and be part of the sub-committees envisaged under the Article 6 process.

2. Those who will not be part of the sub-committees but are intent on doing civic education work on the reform process.

3. Those that believe the Article 6 process cannot yield a meaningful and legitimate outcome hence will not participate in it.14

Reflecting on the of position of civil society groups on constitutional reform in the period 1998-2000 and that in 2009, the major point of difference is that while there were certainly divisions in the civic movement in the earlier period, the strongest part of the civic movement was allied to an emerging political opposition, with an alternative political vision. That is clearly not the case in the present moment and there is a danger of the NCA position turning into a form of abstract constitutionalism that refuses to confront both the possibilities and limitations of the current political context. Such a limitation has already emerged in the form of Zanu PF’s Parliamentary caucus attempt to postpone the public hearings of the Article 6 process, in a protest over allowances. Nevertheless such tactics, while of deep concern, do not detract from the broader processes for constitutional reform that are now part of the political landscape.

The discussion thus far on the politics of the GPA reveals the contradictory and tentative nature of this process and battle to make the state more accountable to the citizenry. Even as small progress has been made in areas such as the release of political detainees and the initiation of processes for media and constitutional reform, civic activists continue to face the threat of trial, restrictions on journalists persist and obstructions to constitutional reform remain. The GPA is first and foremost a political settlement and all aspects of the agreement will be driven by the balance of forces between the political parties and other forces at national, regional and international levels. As this fight ensues, Zimbabweans can expect more obstructive moves from the retrogressive forces in the ruling party. In Tsvangirai’s words:

The MDC is in government but we are not the government. These are the limitations of a marriage of convenience. Those in government will tell you this government is walking on a thin thread.15

Moreover the dynamics of transitional politics is likely to change the make-up of individual political parties and alliances between parties. Defections from the smaller and increasingly weaker MDC-M formation have already begun as the stronger MDC-T becomes a growing force in the state, with the possibilities of increased access to resources that this promises.16 At the other end of the political spectrum, the revived Zimbabwe African People’s Union (ZAPU), decisively marginalised by the

14 www.thezimbabwean.co.ok Accessed 11/06/09.
MDC as a political opposition since 2000, and effectively emasculated in the terms of the GPA, formerly withdrew from the Unity Accord signed with Zanu PF in 1987, on the 16th May 2009.17

The Economy, International Assistance and the Sanctions Debate.

The outcome of the GPA and the political struggles in this transition will be decisively influenced by developments in the economy and relations with the donor nations and the International Financial Institutions. Presently the Zimbabwean economy remains in dire straits with most of the indicators still pointing towards a critical situation. Over the past 8 years there has been a cumulative decline of GDP by 40%,18 with the 2008 Confederation of Zimbabwe Industries (CZI) Manufacturing Sector Survey indicating that industrial capacity utilization declined from 35.8% in 2005 to a mere 18.9% in 2007. In terms of incomes, real average earning declined from an average index of 94 between 1986-90, to 10 by 2004, while employment levels dropped from 1.4 million in 1998 to 1,067,900 by 2004. All these indicators are likely to have deteriorated substantially since then.19 This decline combined with the crisis in agriculture resulting from the Fast Track Land Reform process has had a severe impact on the livelihoods of working people. One major result of this was that food insecure households sold their assets to purchase food creating a “vicious cycle of impoverishment”.20

Critically Zimbabwe’s external debt amounts to about US$5 billion, with the arrears of about US$2.7 billion amounting to above 50% of the debt. As a recent study shows the debt accumulation can be attributed to three factors: The failed ESAP policies of the 1990’s; the international isolation from 1997 during which the build-up of expensive debt has not benefited from any programmes of refinancing; and the post 2000 period of fiscal delinquency.21 Amongst the most notorious examples of this delinquency were the extended quasi fiscal activities of the Reserve Bank of Zimbabwe and the accompanying voluminous increase in the printing of money. Money supply (M3) rose from an average of 19.2% during the period 1986-90 to 278.3% by 2000-5, rising sharply to 528% in February 2008, to 1,416.5 by December 2006 and 17,806.8% by August 2007.22 With the record breaking level of inflation in existence by the end of 2008 (230 million per cent), the national currency, in the words of Finance Minister Tendai Biti, had “become moribund” with the working currencies in the land being predominantly US dollars and SA Rands. One major positive result of this currency change has been the immediate drop in the inflation rate. However on the negative side, this policy shift has further marginalized the large sections of the population with little or no access to foreign currency, and while this situation continues, undermines the capacity of a government to set interest rates, control financial flows or direct credit to re-industrialisation strategies.23

17 “Zapu Congress votes to withdraw from Zanu”. www.newzimbabwe.com Accessed on 19/05/09.
22 Zimbabwe National Economic Employment Policy” op cit.
In an attempt to respond to these huge economic challenges the new government introduced the **Short Term Emergency Recovery Programme (STERP)** in March 2009, the key goals of which are to stabilize the macro and micro-economy, recover the level of savings, investment and growth, and “lay the basis of a more transformative and mid-term to long-term economic programme that will turn Zimbabwe into a progressive developmental state.”

Moreover since the inauguration of the interim government in February there have been small improvements in the economy. In his speech to the MDC Annual Conference on the 30th May 2009 Morgan Tsvangirai identified several areas in which some progress was registered:

- The reduction of inflation for 500 billion to minus 3% at the end of March 2009, largely because of the dollarization/randisation of the economy and the cessation of the RBZ’s profligate printing of money.

- The provision of a monthly allowance of US$100/month to civil servants allowed for small steps to be taken in the return to normalcy in the public sector.

- Increased humanitarian assistance.

- The return of basic necessities on the market.

However it was always clear that these measures were merely a holding operation and that substantial development assistance (estimated by the government at US$8.5 billion) would be required to put the country on its feet. For the MDC the bringing of such assistance into the GPA process constituted a key point of leverage for the party in the negotiations and in the political struggles during the transition period. However the central task for both MDCs has been to convince the West of the need to move away from the sanctions imposed on the Mugabe regime, such as the Provisions of the US Zimbabwe Democracy and Recovery Act (ZDERA) 2001, which amongst other measures instructs the director of the international financial institutions to oppose any loan, credit or guarantee to, as well as any cancellation or reduction of debt by, the Government of Zimbabwe. The GPA agreed that “all forms of measures and sanctions against Zimbabwe be lifted in order to facilitate a sustainable solution to the challenges that are currently facing Zimbabwe.”

Following Mugabe’s plea for “friends of Zimbabwe to come to our aid” and the removal of “inhumane, cruel and unwarranted sanctions,” key leaders of the MDC’s made their own appeals. Tsvangirai message to the West was:

> Zimbabweans should not have to pay a further price for their determination to stand by their democratic ideals because the new government does not meet or match the ‘clean slate’ or ‘total victory’ standards expected by the West…. this new government is not perfect, but it does

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26 As Tsvangirai noted in an interview, “I am very much conscious of the leverage we have over the unity government.” ‘Unity Government making good progress’, [www.zimonline.co.za](http://www.zimonline.co.za) Accessed on 25/05/09.

27 GPA op cit.

Tsvangirai repeated this call during his visit to the US in June 2009 when he called for all parties to work for the end to the restrictions against officials of the “prior government”. The Finance Minister Tendai Biti also warned against continued sanctions:

The consequences of it (unity government) not working are drastic. It will lead to a failure of the state, a collapse of the state and all the civil unrest that follows the failure of a state.

In an even more strident critique of the West, the Deputy Prime Minister and President of the smaller MDC formation, Arthur Mutambara exclaimed:

Here is our message to the US, the British and the Europeans; you must remove all sanctions, any type of measures, call it what you may, that you have imposed on our country. You cannot adopt a wait and see attitude. You cannot give us conditions, such as signs of progress, inclusiveness and entrenchment of democracy and the rule of law. While these are our targets, to achieve them we need financial resources and assistance.

In response, both the EU and the US have continued to insist on various guarantees around governance, the rule of law, and the protection of property. More specifically these conditionalities include:

- “Full and equal access to humanitarian assistance.”
- “Commitment to macro-economic stabilization in accordance with guidance from relevant regional and international agencies.”
- “Restoration of the rule of law, including enforcement of contracts, an independent judiciary, and respect for property rights.”
- “Commitment to the democratic process and respect for internationally accepted human rights standards, including commitment to freedom of expression, freedom of print and broadcasting media, freedom of assembly, and freedom of association.”
- “A commitment to timely elections held in accordance with international standards, and in the presence of international election observers.”

31 Charles Tembo, “Zim will slide into total anarchy if unity govt collapses: Biti.” www.zimonline.co.za Accessed on 27/03/09.
These conditions were reinforced by the decision by the US Senate in June 2009 to maintain the sanctions on development assistance and targeted individuals while providing humanitarian assistance and support for civil society struggles for democratization. The US Senate thus voted to:

- Continue to provide humanitarian assistance to meet the urgent needs of the people of Zimbabwe.

- Make available increased resources for nongovernmental entities to provide assistance to pay salaries or fees to appropriately qualified people in Zimbabwe to enable progress to be made in the critical areas of education, health, water and sanitation.

- Welcome and encourage responsible efforts by the international community to support, strengthen, and extend reforms made by ministries within the Government of Zimbabwe, especially the Ministry of Finance.

- Provide concrete financial and technical assistance in response to requests from the people of Zimbabwe and civil society organisations in their efforts to draft a new constitution based on democratic values and principles that would enable the country to hold free and fair elections.

- Work with and encourage regional governments and leaders to promote human rights, the restoration of the rule of law, and economic growth in Zimbabwe.

- Maintain the existing ban on the transfer of defense items and services and the suspension of most non-humanitarian government-to-government assistance until there is demonstrable progress towards restoring the rule of law, civilian control over security forces, and respect for human rights in Zimbabwe.

- Support the continuation and updating of financial sanctions and travel bans targeted against those individuals responsible for the deliberate breakdown of the rule of law, politically motivated violence, and other ongoing illegal activities in Zimbabwe.

Thus both the US and the EU have confined their support for this transition to humanitarian assistance, funding for essential drugs and retention allowances for health workers and civil society work on democratization, while the IMF has offered Targeted Fund technical assistance to strengthen capacity which “would increase the chances of resolving Zimbabwe’s arrears” to the IFI’s. A key aspect of donor funding during this period is to ensure that funds do not pass through the RBZ and to develop parallel structures, such as the Multi Donor Trust Fund, through which to channel donor money. Zanu PF has opposed such structures because it is a clear threat to the patronage system within the party. However this issue is likely to increase tensions in the transitional government. Moreover the sanctions debate will continue to pitch SADC against the West, placing the MDC in an increasingly difficult

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position over this issue. This dilemma was expressed by former SA Minister of Finance Trevor Manuel:

Zimbabwe’s foreign friends are opposed to the notion that Prime Minister Morgan Tsvangirai and his ministers are just puppets. But if you just have outside agencies running the show, then that notion is amplified. And people will say Tsvangirai is not even trusted by his friends.37

Conclusion.

The transitional government will continue to manifest the challenges of the Zimbabwean crisis, demonstrating the complexity of the national, regional and international dimensions of the situation. The new government has to face the challenges of dealing with the overlapping legacies of colonial inequalities and post-colonial authoritarian rule, while attending to the Post Cold War demands of North-South relations. In such a context the wrong forms of interventions could well encourage divisions in the democratic movement, as well a new convergence around nationalist questions of sovereignty across party lines, in the face of mounting frustrations caused by limited international support. In the absence of strong alternatives to the current political arrangement, the slow international response to the needs of the new government could strengthen the hand of the more regressive elements of the ruling party in the military and security, while frustrating the democratic forces within the transitional state. The risks around limited engagement with the transitional arrangement are much greater than a more substantive engagement by the international community.

Photo 2: Jestina Mukoko and 6 others remanded on bail, 4 March 2009

B: The Human Rights and Humanitarian context in Zimbabwe

January to June 2009

A major obstacle to the GPA has been the continued failure of the new government to create a situation in Zimbabwe where there is total respect for human rights and the rule of law. As pointed out in the previous section, the international community is unlikely to engage with any meaningful financial assistance until there is a clear return to the rule of law, respect for property rights and the genuine opening up of the media. However, the failure of the international community to engage could well threaten the stability of the GPA, which if it were to collapse, would undoubtedly lead to vicious violence and repression. There is a need for this to be borne in mind, and for some balance to be achieved in the current carrot and stick approach so that lack of funds does not precipitate a worse human rights crisis.

There have been substantial reports by civic society produced in the last three months, listing the violations and lack of progress on human rights since the GPA was implemented in February 2009, the most recent being the statement by Irene Kahn, Secretary General of Amnesty International, on 18 June. These outstanding issues will therefore not be re-evaluated in depth here, but are worth reiterating in brief, to make the point that Zimbabwe’s current relative stability is fragile and could be easily reversed. Coercive elements in the security sector continue to aggravate and oppose the GPA, which, if it should ultimately result in an election in which the MDC wins outright, is a threat to their status, personal security and wealth.

The continued harassment of the 15 activists, who were initially abducted last year and then spuriously charged with banditry, has continued to flag the difficulties that the MDCs face in influencing the security sector and returning the nation to the rule of law. It has taken months of behind the scenes discussions, and day after day of court appearances, re-detentions and legal battles, for these political detainees to all finally achieve bail. This was eventually accomplished on 15 May 2009, with the release of the last three detainees including Andrisson Manyere, the journalist. However, all continue to face charges and a long battle remains before this matter is resolved – yet in terms of the GPA, it is difficult to understand why this obviously politically engineered case cannot be speedily and impartially brought to a close through the courts.

Journalists, lawyers and members of civil society continue to be intimidated and denied their rights. It must be acknowledged that the scale of the harassment is considerably reduced from the extreme repression of this time last year, but in view of the GPA and the undertaking of all political parties to

38 Amnesty International UK, statement posted 18 June; Civil Society Monitoring Mechanism (CISSOMM), January to March 2009, Harare; Bill Watch, weekly updates which track events in Parliament; Media Monitoring Project of Zimbabwe, weekly updates of press abuses; Zimbabwe Lawyers for Human Rights, multiple releases on legalities pertaining to detainees and harassment of their own lawyers; Zimbabwe Human Rights NGO Forum, monthly violence reports tracking human rights abuses; Commercial Farmers Union, statements on farm invasions, daily releases.
put an end to persecution and create sufficient democratic space for a free and fair election, all such violations need to cease. Peaceful demonstrations have resulted in assaults and violent arrests.39 Farm invasions have continued, accompanied by abductions, assaults and theft of property, and again, invaders and the police have defied very direct requests from Deputy Prime Minister Arthur Mutambara and others to allow the matter of the land to be settled within the terms of the existing law, and without further violence and destruction of property.

An uneasy calm prevails in some parts of the country, while in others, tensions remain high in the wake of last year’s widespread and extreme violence. There have been intermittent reports this year of retributive violence in some rural areas, and of the politicization of access to resources.40

This serves to underline the need for healing in Zimbabwe, if we are to begin to build a more free and non-violent society in the next decade. It is commendable that a Ministry of Healing has been established. There is a need for this organ to be sincerely guided by communities and civic society, including the churches, and to allow for the encompassing of a variety of approaches. It is unlikely that the compromised space of the GPA will allow for high-level prosecutions or for the establishment of an effective truth commission, but debates about the future possibility of such processes could begin. Prosecutions at the level of community perpetrators are likely to be possible and should be encouraged. There have already been reports of criminal charges being pursued against those who stole livestock during last year’s political violence. In other areas, local traditional leadership has tried to intercede to bring redress at the village level. Conflict resolution and peace building initiatives are slowly finding space and these need full support from government and the donor community.

Information – and the lack of access to information, particularly in rural Zimbabwe – is a fundamental issue. The setting up of a new media commission in terms of the GPA may help with redressing decades of media control, but this remains to be seen. Community radio and alternative news sources of all descriptions are urgent ahead of any further elections, as an essential part of a free and fair environment.

On the humanitarian front, Zimbabweans have been battered by the total collapse of the economy over the last decade, and by the rampant inflation of the last year. Basic services such as health and education almost ceased to function at any level by the end of 2008, with Medicins Sans Frontieres (MSF), UNICEF and the International Committee of the Red Cross (ICRC) having to step in to curb the biggest cholera outbreak in Africa in fifteen years. 2008 ended with schools closed, with stores once more empty of essential goods, and with five million Zimbabweans surviving on donor food. The pressure of the humanitarian crisis was a major factor in forcing the MDCs to enter into the GPA, and certainly, this situation has eased as a result of the MDC taking over key service delivery Ministries, including health and education.

39 Most recently, a peaceful march by WOZA in Bulawayo on 17 June 2009, resulted in assaults and five arrests.
40 CISSOM, ibid.
Photos 3 and 4: riot squads and water cannons on the streets on the day the new government is sworn in – Feb 2009.
C: Case study

Access to humanitarian resources and coping strategies in Matabeleland during 2008-9

I. INTRODUCTION

“Three of my children are now dead. My daughter who supported us died this year because of the strike. I am ill and fear it may be diabetes or TB but am now too sick to walk to the clinic. We could not get a death certificate for my daughter as they wanted R200 for it.”

[Bulawayo, March 09]

As a great deal has been written about political violence and oppression in Zimbabwe in 2008-9, it was decided that in this report it could be useful to focus on the how the impact of the more general humanitarian crisis has been felt at the level of rural Zimbabweans on a day to day basis. How have communities coped – or failed to cope – in relation to access to food, health and education, particularly in the context of last year’s politically repressive environment, and has the arrival of the GPA brought any substantive shift in such access?

This study has taken place in Matabeleland and it must be stated that the findings here are not necessarily typical of all of rural Zimbabwe in 2009. While Matabeleland has a very violent and oppressed past, particularly pertaining to the 1980s massacres, in 2008 this region was comparatively spared the violence that affected much of the rest of rural Zimbabwe. This means that in 2009 Matabeleland is not as badly affected by the community divisions that intra community violence has left in rural Mashonaland, Midlands, Masvingo and Manicaland – although it is also not entirely unaffected by this. However as far as the authors are aware, there have been no new incidents of political violence in rural Matabeleland this year and in our experience the democratic space is genuinely opening up in this region. This may not be the case in other parts of Zimbabwe.

Five rural Matabeleland districts and Bulawayo were included in this survey. The authors set out to gain some insight into how the new political dispensation, including the adoption of foreign exchange and the demise of the Zimbabwe dollar, has impacted on the 70% of Matabeleland residents who reside in rural contexts, as well as to assess urban poverty in two wards of Bulawayo.

Families were largely excluded from access to both health care and education throughout 2008. While ordinary villagers suffered and even died as a result, nurses and teachers also struggled to maintain themselves and their families in an impossible situation where they were being expected to work effectively for nothing, and with no resources to deliver services. Nurses in some clinics resorted to illegally charging fees, and illegally selling drugs, thus further reducing access to the very limited health resources available for patients. Teachers abandoned schools in some areas, leading to termites and livestock damaging infrastructure. Some nurses and teachers resorted to vending and farming,
meaning that they were therefore not performing their duties. Families with ill relatives resorted to prophets and traditional healers in desperate attempts to deal with disease, or bartered precious assets to travel to mission hospitals in an effort to receive treatment. Some children were sent to South Africa to attend school, while some stayed home and became pregnant. Most simply lost a year of education, and even now they sit in grossly underequipped classrooms and try to learn without access to a single textbook.

In spite of generally good rains, harvests have been diminished by lack of access to proper seed and fertilizer during 2008. Among our sample families, most planted only a portion of their fields, only 25% have a year’s harvest – and 27% harvested nothing. Access to water remains a problem in some villages, with up to 75 families being serviced by a single borehole.

2009 thus began on a poor note for Matabeleland’s rural residents. While this case study shows that over the last six months there has been a definite improvement in access to education, and some erratic improvement in rural clinic delivery, in June 2009 life remains generally dire in rural Zimbabwe. The majority of families we interviewed – 65% - have not harvested more than a few months of grain, and will be in need of donor food relief again by September 2009. Their food security is already being undermined by the fact that families in rural Zimbabwe do not have any access to foreign exchange, meaning that they are being forced to pay school levies, bus fares and grinding mill fees with their meager harvests. Bartering and the loss of able-bodied people to the Diaspora continue to impoverish rural Zimbabweans.41

Democratic space

On the positive side, there have been very few indications of political violence in the two rural western provinces this year, although tensions remain high in some areas in the wake of last year’s violence. In Bulawayo itself, the state continues to show no tolerance for peaceful demonstrations, and in mid June assaulted and arrested several women from WOZA during a peaceful march. Student protests have also been brutally suppressed. But the democratic space in rural areas has noticeably widened, and we have observed that robust debates in relation to the new constitution are currently taking place in rural Matabeleland; meetings to discuss the constitution are drawing crowds numbering several hundred on a regular basis, and these public gatherings are taking place without harassment. Members of all political parties, chiefs and traditional leaders, war veterans, and in some cases senior government officials including District Administrators are attending these discussions, which are taking place frankly and without fear among those participating.

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41 Diasporisation and bartering are dealt with as separate and extremely important aspects of the current rural economy – see separate report by SPT, entitled “Gone to Egoli”, 30 June 2009.
II. METHODOLOGY

Two questionnaires were devised by nine experienced interviewers, who also administered the interviews in the targeted areas. The first questionnaire was for key informants and the second for community members [see appendices]. Interviews were administered during February to April 2009, and selected key informants were re-approached in May to ascertain any shifts in health, education and cost of maize meal. Interviewers asked the questions in SiNdebele and recorded answers in English on the interview form. Each interview took between one and two hours to complete.

Selection of key informants

Six key informants were targeted per district. In each district, key informants were drawn from the following categories:

- a headmaster or senior teacher;
- a nurse or health professional;
- a traditional leader, either a chief or headman;
- a political leader, if possible the elected councillor for that ward;
- a pastor or other religious leader;
- any other person known to be a key informant in the ward, such as a businessman or other influential person.

These key informants provided the detailed background to the functioning of schools and clinics in their wards, and how that has changed during the course of 2009 so far, including survival strategies of staff. They also provided background on the local informal economies, food security and political context.

Selection of community members

Two wards in each of five rural districts were selected, and two villages in each ward. In Bulawayo, two wards were chosen encompassing Nkulumane and Magwegwe, which are both high-density suburbs. The districts were:

- **Matabeleland North**: Tsholotsho (wards 6 and 9); Lupane (wards 2 and 12), Nkayi (wards 19 and 16)
- **Matabeleland South**: Insiza (wards 11 and 15); Gwanda (wards 6 and 8)
- **Bulawayo urban**: wards 24 and 29

There are 20+ wards per rural district, and each pair of wards was chosen partly for its relative accessibility, as interviewing was done during the rainy season, when some areas can become unreachable, and partly on the basis that the interviewers already had some contacts on the ground in these wards, which would make introduction and acceptance of the research unproblematic.
Sample: 20% cover of 4 villages per district.

In Matabeleland, a rural village usually consists of around 25 families, who fall under the administration of one headman. Interviewers therefore targeted *every fifth homestead in each of two villages*, resulting in approximately 5 interviews per village, or a sample of 20% of homesteads per village. This means there were 10 interviews per ward (2 villages), and 20 per district, amounting to approximately a *20% cover of 4 villages per district*. Slightly fewer interviews were conducted in Nkayi for logistical reasons,\(^{42}\) so that the total number of interviews was 114 and not 120. In addition, there were six key informant interviews per district. *As the average size of a family was 8.5, this study provides background to the living conditions of 969 residents of Matabeleland.*

### III. FINDINGS

#### 1. Community interviews – demographics

The head of each household was interviewed.

- 57% of household heads were women (n=65).
- Of these women, 45% were either widowed (18) or single with children (11), with the remainder on their own because their husband was in town or – more usually - the Diaspora.
- Male headed households (n=49).
- 8% of men were either widowed (2) or single (2). The other 92% of men had wives supporting them in maintaining the home.
- The average age of household heads was 50.6 years, with men’s average age at 54.4 years, and women’s at 47.8 years.
- Only 2 households were headed by men aged 20 to 30 years, while 10 households were headed by women aged 20 to 30 years – five times as many women-headed households in this age group.
- 10 households were headed by men aged over 70 years, while 4 households were headed by women over 70 years: in this upper age group, there are more than twice as many male as female headed households.
- Average number of people residing at a homestead was 8.5
- 70% of households had between 5 and 10 people residing at the homestead.
- 15% of households had 4 or fewer and 15% had more than 10 residents.
- Three homesteads reported 20 household members, in all cases largely orphans being raised by elderly female relatives (Lupane, Tsholotsho and Bulawayo).

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\(^{42}\) Rain made one ward inaccessible for several weeks, preventing completion of interviews here.
2. **Gender and age**

These demographic findings indicate the absence of able-bodied young men in the community. It has become usual in Zimbabwe in recent years to find a preponderance of women-headed households, but even so, the finding that there were five times as many women heading households in the under 30 age group, indicates the degree to which young men in particular have left rural areas. When one takes into account the average size of households (8.5), and the finding that 57% of women head households, women of all ages are clearly shouldering a large burden of care in rural Matabeleland, trying to provide on a daily basis for large numbers of children effectively on their own or with the support of other women. Male-headed households by comparison had the support of a wife, with the exception of only 4 households (2 widowers, 2 single men), and two of these men lived in Bulawayo urban, meaning that they were not facing the strain of maintaining crops and livestock.

3. **Food security**

"Hunger is the worst problem, everything is too expensive and families are divided by poverty."

i. **Inputs during 2008/9 season**

The majority – 65% - of families interviewed will remain generally food insecure in 2009. Only 3% of families reported having had enough seed to plant, while 40% reported no proper seed maize at all. Out of families interviewed in Bulawayo urban, 14 out of 20 did not plant anything, while the remaining 6 families have small plots in town and planted. All rural families planted at least some area of their fields. However, only 30% of families (34) reported planting all their available land, while 31% planted between 25% and 50% of their land. This was owing to shortages of seed and fertilizer, and also shortages of human/animal labour.

It is shocking to note that 71% of families received NO fertilizer, with only 5% reporting “enough” fertilizer. Government, which is usually relied upon by communal farmers as a major distributor of inputs, was last year the source of inputs for only 4% of families, who were by and large left to source inputs from their own resources – 75%. Even donors reportedly only reached 21% of families with inputs.

Families desperate to plant at least something, therefore resorted to planting maize kernels intended for human consumption. The lack of proper seed maize has meant that families have tended plants to maturity that have given them a low return in yields. Matabeleland is not good cropping country, but the 2008/9 rainy season was a very good one in this region, and it is a tragedy that lack of inputs has meant that most families will once more be donor dependent by September 2009.\(^{43}\)

\(^{43}\) Harvests countrywide were affected by poor preparation, farm invasions and lack of inputs, and a large maize deficit is expected again. M. Zigomo, Reuters; “Zimbabwe crops to fall despite good season”, 16 April 2009. FEWSNET reports and
ii. Harvests

FEWSNET and UN OCHA are predicting this year’s harvest will be between 1.2 and 1.5 million tonnes, or around three times last year’s harvest of 565,000 tonnes. This will nonetheless leave a shortfall of around 670,000 tonnes. OCHA has issued a renewed appeal for over USD 800,000 in order to provide emergency relief to Zimbabwe in the second half of 2009.

Chart 1: Months of harvest per family, 2009

Matabeleland is perennially a food shortage area, and in spite of the good rains, this is once more going to be the case for many families, bearing in mind the findings from our case study. Among our interviewees:

- Only 25% of families have harvested enough to see them through to the next harvest.
- 27% have harvested nothing at all.

12% of families, all in Bulawayo, did not plant, but this means that an additional 15% of families have harvested nothing in spite of planting. This was owing to a long dry spell followed by very heavy rains that caused leaching in some areas.

38% have harvested between 1 and 6 months supply of maize.

This means that 65% of families could be considered to have very little or no food security. As most of these families had little or no maize meal on hand, and were already eating their green maize in March, even those with six months of harvest will be without grain by September.

UN OCHA appeal for food aid for Zimbabwe, updated May 2009 are predicting maize shortages in the region of 650,000 tonnes.

Impact of bartering on likely food security

Interviewees were agitated by the fact that in the absence of foreign exchange, they now have to barter their hard won harvests in order to pay for all other resources. While rural education is supposedly free, schools charge levies; bus fares and medical fees have to be paid, and grinding mills charge an exorbitant 5kg of maize in return for grinding 12-20kg. Media reports indicate that some rural families are being charged up to 16 buckets of maize (200kg) per child in lieu of district council school fees\(^45\). This is the equivalent of 4 months’ maize supply for most families. To pay this per child per term is clearly an unsustainable fee structure for parents: having three children in this school will cost the equivalent of an entire year’s harvest per term.

Even in government schools, levies of between R10 and R50 per term are being charged, to allow for the purchase of chalk and other basic commodities, and parents are paying in buckets of maize as they don’t have the money.

The dependence of rural Zimbabweans on their harvests as a substitute for hard currency, will dramatically decrease the number of months most families will actually survive before their harvests are gone.

iii. Food security on day of interview

“We have been three weeks with no maize meal in the house - we get from neighbours when they are kind. I have nowhere to go, and no money for school fees or blankets.”

“I sleep hungry most days as I have no forex. My aunt gave me some maize meal which is all I have.”

Interviewers checked on availability of maize meal and other food stuffs in the homestead on the day of interview.

- 34% of families had either nothing at all (19%) or less than 3 days supply of food (15%).
- 46% of families had one to two weeks of maize meal on hand
- 20% had 3 to 8 weeks of maize meal on hand.

While it may be taken as a good sign that 41% of families had at least some cushion in terms of maize meal (2 – 8 weeks), the interviews were conducted during the period of the year when families are most food secure: the situation will only become worse as the year progresses and harvests are eaten. Families were also relying on the last of donor food given in the previous weeks: donors have now scaled right back on deliveries and this will adversely impact on those families that harvested little or nothing.

\(^{45}\) R Katunga, “Schools demand maize, chickens as fees”, *The Sunday News*, 7-13 June 2009. This states that Sojini Secondary School in Mbembei, Matabeleland North is charging between 10 and 16 buckets of maize per child per term, in lieu of the R500 to R800 in fees. This is a rural district council school so is not subject to government fee structures. Such schools may be marginally better resourced than a government school, but not much, and may also be the only secondary school in the vicinity for families.
iv. Source of maize meal on hand

“I am looking after 3 orphans and my daughter's children and cannot pay fees. We survive from hand-outs from relatives.”

- 47% of families reported that maize meal on hand was from a donor
- 38% had sourced it themselves
- 4% reported maize meal was from the Diaspora
- 2% had purchased maize meal from the GMB
- 19% had no maize meal on hand

v. Cost of maize meal over time

On the positive side, the price of maize meal came down dramatically during the four months of this study:

- In February, 73% of families reported paying between R100 and R150 for 10 kg maize meal.
- In March, 70% of families reported paying less than R80 for 10 kg maize meal.
- By May, informal price checks showed that buckets of maize (12kg) were being sold for R30-40 in many rural business centres.

There remain some marked differences over districts in terms of the price of maize meal. In April, 30% of families were still reporting that maize was selling at R 100 or R120 for 10 kg. These families were all in Lupane and Tsholotsho, while in Bulawayo the same maize meal was selling for R55. By May, prices had dropped in these districts too, as harvests came in.
Prices: now too low?

By May, there was a glut of locally harvested maize in rural areas, which was in turn having a negative impact on rural households, who are at the moment dependant on bartering for survival. Maize, their current preferred currency substitute, has a low value in local business centres right now. Our interviewers have observed people who desperately need money offering buckets of maize (12kg) for R30 – and finding no takers. This means families are sulpting buckets of maize for next to nothing, and this is hastening the depletion of harvests and setting families up for food insecurity within the next few months.

**Graph 1: Percentage families reporting specific price paid for 10 kg maize by month**

vi. Availability of commodities in rural districts

Follow up interviews in June have confirmed that most families in rural areas continue to have little or no access to foreign exchange. This means that it has not become financially viable for small business owners in rural business centres to restock, as there is not a sufficient market for them to make this profitable. Our interviewers observed that by and large, most stores have not re-opened in rural business centres, meaning that even those who have money cannot find most commodities locally. In some major rural business centres, stores are officially open, but have no more than one or two goods on the shelves.
Photos 5 and 6: a hungry woman, too weak to stand, as starving villagers in Tsholotsho resort to wild fruit: November 2009
vii. Season 2009-10: inputs needed now!

It is imperative that the GPA and donors have a strategy that should be enacted immediately to ensure adequate seed and fertilizer for the next season, so that small scale and communal farmers have the best chance of harvesting something. Seed maize should be imported as soon as possible, ready for distribution by October. The winter wheat harvest will be pitiful in October, with less hectarage planted this year than ever before, jeopardizing bread production for the next year. This is simply poor planning, exacerbated by continuing disruptions on commercial farms. Farm invasions, if not brought to a halt, will continue to undermine Zimbabwe’s food security – and the perception of Zimbabwe as a nation that does not respect property rights will continue to undermine international re-engagement and investment.

viii. Cattle dipping must resume

Interviewees were asked to add any comment they wanted in terms of the difficulties they experienced last year – the three most frequent categories of comment related to:

- The extreme hunger experienced during 2008, when families frequently went days without eating
- The terrible hardship caused by having no access to foreign exchange
- Most families lamented the lack of agricultural inputs ahead of the last growing season, and implored for this to improve. In addition - from men interviewees – there is an urgent need to resume cattle dipping in rural areas. Many reported livestock deaths during 2008 as a result of the collapse of AREX and veterinary outreach services. There has been no government-organized cattle dipping for a year.46

4. Access to Education

i. School closure from August 2008 to March 2009

Zimbabwe has previously been considered as one of the best nations in Africa in providing blanket access to education for children, including in rural areas. This position has been drastically undermined in the last ten years, and in the last two years in particular. Hyperinflation and the ridiculous situation where teachers were effectively earning R2 a month by the end of last year, led to nationwide closures of schools in August 2008, as teachers went on indefinite strike. Throughout 2008, there were only 24 days of effective teaching, meaning that children lost an entire year of education.

Apart from the lack of teachers, schools have fallen into dramatic disrepair, and textbooks are now in a ratio of one book to more than 30 pupils.47 There are entire schools without a stick of chalk, no exercise books to write in, and little in the way of classroom furniture.

ii. Collapse of rural school infrastructure

Our interviewers witnessed for themselves the shocking disrepair of some rural schools by January and February of this year. Classrooms were left unmaintained for six months or more, while teachers were on strike, and in many instances termites have eaten doors, door frames, roofing timber, desks and chairs. Some classrooms are now literally falling down. Others had been left open to goats and other livestock who came in and ate materials and defecated on the floors. In a few instances, there were reports that community members had helped themselves to school furniture, or even removed doors and window frames from the classrooms! Sadly, in a situation where schools were already under resourced, there has been a dramatic loss in terms of functioning school infrastructure in the last year as a result of all these factors. However, this is not true of all schools, and in some villages, head teachers took steps to protect the school resources from vandalism and animals during the closure.

iii. School attendance

In January and February, 98% of school children were OUT of school, with the only exceptions being 2 children attending a Catholic school, St Patrick’s, in Bulawayo.

Teenage pregnancy: it was reported that teenage pregnancies have soared during the lack of supervision resulting from the school closure of 2008 – in Insiza, one secondary school alone, reported 22 pregnancies between August and February! Many secondary school children who dropped out when schools closed are now unlikely to ever return, having been roped in to providing labour for the family in the fields or herding livestock. Others have left for the diaspora to seek work.

Diaspora pupils

At the beginning of 2009 there was also a notable phenomenon of families sending their school age children into the Diaspora to attend school. In the families we interviewed, there were 18 school children, average age 11 years, who had been sent to South Africa to live with older relatives and attend school there. Most of these came from a village in Insiza and one in Tsholotsho, where several families had come together and organized themselves to do this. This is a relatively new phenomenon, but Zimbabwean families put a high premium on education and in January, when faced with another year of possibly no education, some families adopted this solution.

Changes to education between January and May

Staffing

The financial position of civil servants has improved under the GPA, with all civil servants including teachers now receiving allowances of USD 100 per month. While this is far from the minimum living wage of USD 437 per month required to meet basic expenses, this amount is vastly more than the less

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than USD 1 per month that was being paid previously. The Minister of Education has managed to avert further major teachers’ strikes on several occasions in the last few months, and has persuaded them to continue teaching in good faith on the promise that the allowance will be upwardly revised in steps, as the liquidity of the government gradually improves. This has meant a return to the classroom of many teachers, including in rural schools.

However, at the end of the first term in April, according to our key informants, teacher shortages in rural schools were in the vicinity of 50%. By the end of May in the second term, some schools were fully staffed while most were still reporting staff shortages, although these shortages were now down to a few teachers per school. Secondary schools remain the most poorly staffed, particularly bearing in mind the demands of public O level and A level examinations, and the number of specialist subjects that are required to be taught at this level.

School attendance

This situation improved dramatically by April, when it was reported that:

- 93% of junior school children were in school
- 70% of secondary school children were in school

Confusion around fee structures remained in the first term, with relatively high fees being gazetted for urban schools. This was combined with a policy that parents who could not afford the fees could apply for a reduction or waiver, but the mechanism for this was not clearly and timeously conveyed owing to logistical constraints with the Ministry of Education – such as lack of facilities to produce and circulate the memo! Some children were denied the right to return to school as a result. In the second term, fees were slashed to token amounts, and this was positive for enrolment. However, high levies instituted by individual schools continue to cause confusion, particularly around whether they are compulsory or not, and whether children can be excluded if they fail to pay.

Teaching

There is a difference between a teacher being in a classroom and teaching taking place. In general, the situation with regard to access to education has improved hugely between January and May 2009 - from zero to considerably more than zero - but rural schools (and urban schools) still remain dramatically under resourced in terms of teaching materials, furniture, buildings, specialist teachers. Education requires so much more than simply a teacher with no books or chalk, facing 50 or more pupils in a room with little furniture.

Extra Fees: in Bulawayo it was reported to our interviewers in June that while teachers are in school, they are still boycotting actual teaching in some instances, and insist that their pupils attend extra lessons with them after hours in return for additional payments. These teachers argue that they cannot survive on the USD 100 per month, and are therefore justified in this strategy. In some urban schools, children are being sent home if they do not pay the levies, which are charged by the school itself rather than by government. This is depriving poor families of access to education.
Photos 7 and 8: Secondary school in Gwanda District: Forms 3 and 4 share one classroom (above): Form 4 does geography facing south while Form 3 does history facing north – and next door, the entire Form 2 class shares ONE English text book as they do a comprehension exercise. (June 2009)
Photos 9 and 10: ...and Form Ones at the same school sit under the trees – no classroom, no teacher – waiting their turn to be taught later in the morning. Below, the entire text book allocation for all subjects for this high school of 118 pupils sits on the headmistress’s table in her “office” – six books. Children are taught to O Level under these conditions. (June 2009)
In rural schools, head teachers report that it is hard to motivate teachers to teach for such a small salary, and that morale is low. Parents are battling to raise even R10 per child for school levies, which means that rural schools cannot afford to buy chalk for their teachers. Some newly deployed rural teachers were subsequently summoned back to Bulawayo for bureaucratic reasons, which has left schools short of staff again, and these teachers are also not being paid, further demotivating them.

There have also been problems with teachers who left in the last few years, and who have come back in response to the promise of an amnesty by the Ministry of Education. Contrary to expectation, these teachers are facing resistance from bureaucrats and practical hurdles to resuming their posts.

It is clear that a generation of school children are losing out on their possibility of a future. Children who began their “O” Level syllabus in January 2008, and who are supposed to write “O” Levels in November of this year, will cumulatively have had at most about six or seven months of useful teaching over two years, if schools remain open from now until then. It is difficult to imagine that many will pass the exams this year.

The challenges that remain if the educational system is to become fully functional are enormous – 30,000 ghost teachers have to be removed from the books, some of the 25,000 highly qualified and experienced teachers who left the country in 2008 alone, need to be encouraged to return and allowed to resume their professions without hindrance; text books and other supplies need to be urgently sourced. The Ministry of Education is canvassing donors to help with the revival of the sector, and this is imperative if thousands of competent youngsters are to be saved from otherwise certain academic failure in the next few years.

5. Access to Health Care

“I have never seen such suffering in my life. I am preparing to die - the clinic is on strike, my wife and daughter died last year, after May there will be no food hand outs at the clinic and then I will starve.” (Bulawayo, Feb)

"I am very ill, but I have no money. So I will sit here and wait to die". (Bulawayo, March) 49

“I have been 5 times to the clinic without treatment being given: the children had chicken pox, but at the clinic is a sign saying nothing is available so don't bother.” (Lupane, Feb)

Zimbabwe’s indicators for access to health care have fallen dramatically during the last few years, impacting on life expectancy, maternal and child mortality rates, and prevalence of preventable diseases. Our research shows that access to health care was highly problematic during 2008 in rural Matabeleland, both in terms of availability and quality of delivery. Our interviewers were told one incident after another in which people had died avoidable deaths because of lack of access to health care.

49 When our interviewer returned a few days later, having sourced medical help for this interviewee, she had in fact died without accessing any health care.
care, or had been unable to source essential drugs for blood pressure, diabetes, asthma and other common and controllable illnesses.

i. Distance to clinic/hospital

“I have terrible backache, and need to go to Gwanda hospital but cannot get there because of the cost of the bus”. (Makwe, April)

It is clear that in 2009, around a third of Matabeleland residents do not live within walking distance, or within any kind of easy reach of a health care centre – particularly bearing in mind that if you are ill, you are unlikely to be able to walk or travel far.

- 11% of interviewees reported that the nearest health care centre was between 17 and 30 km away (Tsholotsho wards 6, 9; Lupane ward 2; Gwanda ward 8).
- 22% reported the nearest centre was 8 to 16 km away
- 18% reported the nearest centre was 5 to 7 km away
- 49% reported the nearest centre was 1 to 4 km away: this included all the Bulawayo respondents (20) and all those in Insiza, ward 15, which includes Filabusi business centre and clinic (10).

\[ 
\text{Chart 3: Distance in km to nearest health care centre} 
\]

ii. Quality of Service

“Nurses just leave for a week or more and give prescriptions for drugs they don’t have”. (Lupane)

“I think I have TB but I have not been tested even though I go to the clinic - and they have no TB drugs anyway”. (Insiza)
“Services are good and there are drugs - people come from other wards to get treatment here”. (Mupanedziba, Red Cross assisted clinic in Tsholotsho)

Graph 2: Reasons why local health facility seen as not functional (n=85)

When asked about health delivery:

- **75% of interviewees reported that their nearest health care centre was not functioning adequately**
- 4% said they were not sure of service delivery, as they had not tried to use the clinic for some time.
- 4% reported that the nearest centre was a church or donor supported health centre and was functioning adequately
- 4% reported that since March 2009, things had improved somewhat although prior to this, service had been poor
- **13% reported that the nearest government health centre had been able to provide them with their health needs, mostly immunization.** Many of these reported that they only visited the clinic on the one day a month when there was outreach from the local mission hospital and a mission doctor in attendance.

When asked to describe in what way the health service was inadequate, respondents noted the following:

- 100% reported that drugs/ linen/ plaster of paris were generally not available
- 40% reported that the facility was understaffed, and/or that quality of staff was poor
- 21% reported that necessary equipment was broken, such as X ray machines, dialysis machines, blood testing machines
- 26% reported that the fees were too high, making access impossible
- 11% reported that the facility was too far away, making access impossible
In terms of how long clinics/hospitals in their area had not been functional, interviewees reported the following:

- 40% reported it was 2 to 3 years or longer since health services had functioned
- 31% reported it was 12 to 23 months since health services had functioned
- 18% reported it was less than a year
- 11% could not remember how long

**Chart 4: Length of time for which health centre has not been functional**

**Chart 5: Strategy when local health care facility is seen as inadequate**

- Traditional; 28%
- Travel; 19%
- Nothing; 4%
- Prophets/prayer; 36%
- Home care; 6%
- Chemist; 7%
iii. Alternatives to formal health care

Those families who reported that formal health services were inadequate, were asked to describe what they had resorted to in place of local clinic/hospital services.

- 28% had sought the services of a traditional healer, or had used traditional herbal remedies
- 36% had gone to a prophet or to their local pastor for healing through prayer
- 19% resorted to traveling further away, such as to Bulawayo or to a mission hospital in another district, to get better services
- 7% reported buying over-the-counter drugs from a shop or chemist
- 6% tried to care for the ill person at home without any other intervention
- 4% reported doing nothing

iv. Maternal and childcare

The part of the health care service that seems to have more or less resisted collapse is child immunizations. However, even this service is not unproblematic. Out of 36 respondents who acknowledged having sought maternal or childcare at their local clinic within the last year, 23 (64%) reported that the local service was adequate and 8 (22%) that it was not, while 5 reported only coming to the baby clinic on the one day a month of mission hospital outreach in order to be sure of a service.

Immunizations

8 mothers reported that the service was unreliable, particularly with regard to immunization: some clinics had erratic or no access to refrigeration in Feb/March, and nurses reportedly will not administer immunizations unless there is a minimum number of 6 – 10 children needing this on a particular morning. Key informants in the clinics confirmed this approach. This is to prevent opening a vial and then having to discard most of it, but it means that mothers may go several extra weeks running without their babies receiving their jabs; timely immunization is therefore no longer assured in some wards, and there is a danger of mothers ultimately giving up on pursuing a jab. Measles vaccinations seem to be the worst affected by this system.

On follow up during May, our interviewers were informed by nurses that in some clinics, the refrigerator has been repaired or gas delivered in the last month, and immunization availability has therefore improved. We also noted that in the second week of June there was a province wide immunization exercise, targeting mainly measles. Nurses were set up at extra points in the districts and mothers were flocking to receive the jabs, so this has hopefully offset the fact that immunizations have not always worked as well as they should have during 2008. It is imperative that immunizations are available weekly in all clinics if Zimbabwe is to avoid a breakout of serious diseases in the years ahead, particularly measles.

Childbirth

Two families reported the death of a family member during childbirth in 2008. In one area of Lupane, the Mdlankunzi clinic has no roof as it blew off a long time ago and has not been replaced, meaning that it is unsuitable for deliveries. This means families in this area have to go long distances to deliver
and as they cannot afford the bus fares, they are unable to do so. In all cases, even where clinics can
still do deliveries, the mother is expected to bring all the linen and to purchase other supplies needed
during the delivery in advance.

Several families reported family members delivering babies at home because they could not afford the
fee of R150 to deliver the baby in a hospital, their nearest health facility.

v. Costs of health care: official

The tariffs following in this section are those confirmed by the Ministry of Health on 11 February 2009.

According to the existing policies and tariffs, FREE services are provided for:

- all patients at rural clinics
- children under five
- pregnant mothers, although only those referred to a hospital can deliver there free.
- patients over 65
- TB, epilepsy and psychiatric cases
- for chronic cases, consultation includes free drugs

In a district/general hospital:

- an adult consultation is USD 4 and a child over five years is USD 1
- a medical examination is USD 4
- prescribed medicines are available at a maximum cost of USD 2 per course
- X rays and laboratory tests are available at a maximum cost of USD 2

However, it is clear that over the last year, health care has NOT been free in many rural health centres
in spite of this being the policy, and many services supposedly available for free or at minimal cost are
not available at government hospitals and have to be sourced through the private sector at huge
expense. The collapse of services has meant that those with chronic conditions such as high blood
pressure, asthma, kidney problems or diabetes, have not been able to access their drugs free through
clinics, and if they have not been able to afford them from elsewhere, they have simply fallen off their
regime of treatment, sometimes with dire consequences and even death. It is also clear from our
interviews that even the fairly minimal prescribed costs of USD 4 for a consultation is beyond many
people in rural areas, who have no access at all to foreign exchange.

vi. Nurses charging fees at rural clinics

During the course of 2008, civil service salaries were reduced to nothing by hyperinflation, and nurses
in some rural clinics adopted a local strategy of charging fees in foreign exchange in order that they
could personally survive. While one can empathise with this decision, it had the effect of excluding
possibly hundreds of ill people in rural areas from any access whatsoever to health care, which
according to official policy is supposed to be free. Considering the extremely minimal facilities
available in return for the foreign exchange outlay, the costs have been hard for families to justify or accept.

Costs have varied from one district and clinic to another, as they are simply decided upon by the local staff. For example, in a clinic in Lupane, every family that wishes to use the clinic has had to pay a monthly levy of R10 to the nurses, plus a further R5 per consultation. As one interviewee put it bitterly, “I cannot afford this, and it is not properly accounted for”.

In Insiza, nurses in one of the clinics were in February charging R10 per consultation, which could also be paid by a chicken or 5 kg maize meal – and these latter goods are clearly worth far more than R10. One ill person who could not afford these rates was made to collect water for the clinic in exchange for a consultation.

vii. Other survival strategies of nurses during 2008

**Vending and irrigation farming:** Nurses have had to adopt various strategies to survive financially in the last year. Key informants in all districts refer to nurses who buy and sell goods such as paraffin, soap and sugar to supplement their income. In Gwanda and Insiza, informants referred to some nurses having been allocated plots in the local irrigation scheme, which allowed them to farm and sell produce. However, it is clear that a nurse that is vending or farming in any meaningful way cannot also be providing a regular service in the clinic.

**Illegal sale of drugs:** Key informants from Insiza, Nkayi and Bulawayo - including one nurse - acknowledged that one source of income was stealing drugs from the clinic and then selling them back to patients.

*Photo 11: ill man in hospital, Feb 2009*
Photo 12: cholera clinic set up in Harare, December 2009

Photo 13: ill woman taken to hospital in a hand pulled cart, December 2009
Donations: In some districts, nurses were recognized by the end of last year as being as needy as any other rural resident, and were included on World Food Programme food lists, so that donor food became a key means of survival. In Tsholotsho and Lupane, key informants stated that villagers made voluntary contributions of food to nurses so that they could survive.

Generally, key informants showed more sympathy for the plight of nurses than the rural patients trying to access their health care! Most key informants referred to the lives of nurses as very tough, or a real struggle for survival, and commented that highly qualified nurses had mostly left rural clinics for financial reasons.

viii. Deaths

“*My husband died because we could not afford the medication, getting money is very hard and without it you can do nothing.*”

“*My daughter died because there were no doctors at the hospital.*” (Bulawayo)

“*Someone died last month as he went to two clinics with no drugs and could not afford R70 bus fare to St Lukes. People have to pay bus fares in chickens - even to make a phone call for an ambulance costs one chicken. Going to clinics is useless.*” (Lupane, key informant)

36% of families had a death in that homestead in the last year. The total number of reported deaths was 52, as several homesteads reported multiple deaths.

- HIV /TB accounted for 44% of deaths
- Heart failure and “old age” accounted for 6% each
- Hunger, childbirth, cancer, pneumonia and stomach/kidney each accounted for 4%
- Two people were murdered (criminal, not political) and one died in an accident
- One person died of malaria
- Families were not sure of cause of death in 8 cases.

What was of interest was the high number of families that felt that death could have been delayed or avoided if they had had adequate access to health care, proper food, or the money needed to access better health care in another place. When asked if there was any factor contributing to the death of a relative apart from disease:

- 29% reported that lack of access to the right drugs contributed to premature death
- 19% reported that a shortage of money meant they could not pay for the right treatment
- 15% reported that they sought medical help too late, either because it was too far or too expensive to get it
- 14% reported that the staff were poorly trained or did not offer adequate care
- 10% reported that broken equipment had contributed to premature death
- 9% reported that poor nutrition had contributed to premature death
- 4% reported it was too far to get to a very sick person to a health centre
Photo 14: government hospital “linen” on the line (Feb 09)

Photo 15: government hospital kitchen (Feb 09)
Many of those whose relatives died of HIV commented on the long queues at Opportunistic Infections hospitals and the difficulty of getting onto ARVs.

**ix. Cholera and anthrax in our targeted districts**

2008 ended with Zimbabwe in the midst of the worst cholera outbreak in Africa in the last 15 years, and one of the largest the world has ever recorded. This resulted from the simultaneous breakdown of delivery of uncontaminated water in many cities including Harare, and the collapse of health services. However, most of Matabeleland has remained relatively unscathed, with the districts that we included in this study all showing low, or even no (Tsholotsho), cumulative cases of cholera. This is probably owing to the fact that Bulawayo’s main water supply has remained uncontaminated, unlike that of Harare and other smaller city centres further east. Cholera moved from Harare and surrounding areas into other parts of Zimbabwe, from August 2008 onwards. While the ICRC and MSF have acted to bolster the collapsing health services in order to contain the outbreak, cases continue to trickle in daily around the nation, and the possibility of another large outbreak has not been entirely eliminated. The water supply problems around the nation have not been adequately addressed, which means the cholera risk remains.

There was awareness of cholera in Matabeleland in spite of the relatively few cases, which indicates an effective information campaign has taken place, and clinics in Matabeleland reported having cholera drugs on hand – often virtually the only drugs in a clinic.

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50WHO, press release: “Global, national efforts must be urgently intensified to control Zimbabwe cholera outbreak”; 30 January 2009.

51Exceptions to this in Matabeleland are Binga in the far north, with over 1,000 cases and 62 deaths, and Beitbridge in the south, with over 5,000 cases and 149 deaths. Binga’s proximity to highly populated Gokwe in the Midlands, and the fact that Beitbridge is a transit point for people from all over Zimbabwe, account for these Matabeleland districts having such high cholera statistics.
CHOLERA: CUMULATIVE STATS according to WHO on 4 June 2009

<table>
<thead>
<tr>
<th></th>
<th>Cases</th>
<th>Deaths</th>
<th>Community deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bulawayo</td>
<td>445</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>Lupane</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Nkayi</td>
<td>34</td>
<td>9</td>
<td>77.8%</td>
</tr>
<tr>
<td>Tsholotsho</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Gwanda</td>
<td>74</td>
<td>9</td>
<td>66.7%</td>
</tr>
<tr>
<td>Umzingwane</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Plumtree</td>
<td>32</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>588</td>
<td>37</td>
<td></td>
</tr>
</tbody>
</table>

The 588 cumulative cases of infection in the 6 districts we targeted, represent 0.6% of all cholera cases in Zimbabwe since August 2008, which stood at 98,441 on 4 June. The 37 deaths also represent less than 1% of all deaths, recorded at 4,277 on 4 June.

It is therefore not surprising that none of the families we interviewed had had any family member with cholera in the previous year.

Anthrax: there was an anthrax outbreak in Matabeleland North during late 2008, with more than a score of human deaths reported. Two of our sample families in Lupane reported the deaths of some of their cattle owing to anthrax, but nobody reported the disease as having infected a family member.

Changes in health care between January and May 2009

Drugs: Health professionals across the districts reported *improvements in drug supplies* to clinics by May 2009. UNICEF is making deliveries to hospitals and health facilities around the country, which is alleviating the situation. Nationally, the health services have reported that the drug situation has improved from almost zero to around 40% of drug needs – which means that there is still a 60% shortfall. Other resources remain unimproved, including linen for inpatients. In some instances equipment such as X ray machines are functional now, after years of disuse.

Whereas previously a clinic might operate with only painkillers (and recently, cholera medication) on a regular basis, and malarial and TB treatment on a fairly regular basis, and with very little else, some clinics are now reporting intermittent supplies of a range of antibiotics and some chronic drugs. However, these are still in small amounts and tend to run out in a week and then not to be replenished for a month. Word spreads quickly that drugs are in stock, villagers inundate the clinic, and within a few days the drugs are all dispensed and the situation is as before. A clinic will receive one or two types of antibiotics only – for example penicillin but no tetracycline, which means that treatment is *ad hoc* and not always the right drug for the disease. However, the fact that clinics now have any antibiotics at all on a monthly basis is a dramatic improvement.
Staffing has also improved in health facilities, with the introduction of USD allowances for nurses and salaries supplemented by UNICEF for doctors.

However, health care is still erratic in places. Some rural clinics, for example in Nkayi and Tsholotsho, did not report an improvement in drug supplies. At one clinic in Nketa, Bulawayo, there were no vaccines, including no polio or DPT vaccines available in early June. In May the media reported that there were no TB drugs available in Kadoma.52

**Hospitals:** having a family member in hospital, even in the city, remains very difficult. 53 Families have to bring in clean linen and blankets, as well as food three times a day. Certain drugs still have to be sourced privately, outside of the hospital. Nurses that remain in the system are often lacking in experience or are demoralized, resulting in poor nursing at times. For a family that is struggling financially, which most families in Zimbabwe are, the costs of getting to and from a hospital with food and drugs and linen several times a day is an insuperable task. Zimbabwe has a long way to go to recover the ground it has lost in health service delivery in the last decade.

**Pressure on church institutions:** hospitals run by the Catholic and other churches in rural areas are being put under huge demand, as they provide free and more efficient service than government institutions. This results in people from outside of the hospital’s usual catchment area travelling often hundreds of kilometers in pursuit of health care. In Bulawayo, people travel to St Luke’s hospital 120 km away in rural Lupane to seek service. These institutions are considering ways of introducing some kind of fee structure to reduce the burden on their overheads.

**Clinic levies:** in mid June 2009, it was reported by key informants that many rural clinics are still charging a R5 levy in order for people to get service. In some places, the levy is R5 per child and R10 per adult. The rationale is that this money should be used to improve the clinic status and resources. However, this practice needs to be seriously reconsidered, as it is resulting in some families and even children being denied access to a service that in terms of government policy is FREE. The Ministry of Health needs to consider this situation and make a clear ruling. Upgrading clinics is the responsibility of government and not Zimbabwe’s poorest citizens.

6. **Political violence**

Most people were reluctant to mention their own political affiliation, but were happy to list which parties were politically active in their ward. Most mentioned more than one party, usually one or other MDC and ZANU PF. In Tsholotsho, people mentioned Independent MP Jonathon Moyo. Elsewhere, ZAPU, Simba Makoni’s Mavambo party and PUMA (Patriotic Union of Matabeleland) all had minor mentions.


53 A Mphisa; “Health services far from restored”; Zimbabwetimes.com, 3 June 2009.
Interviewees were asked whether they had had any experience of political violence or intimidation in the last twelve months. Matabeleland had comparatively low levels of political violence during April to June 2008, although intimidation and abuse of food was fairly widely reported by interviewees. People reported being forced to attend ZANU PF education sessions at bases, where they had to sing and toyi toyi, and women had to cook for the war veterans. People were threatened with beatings and forced disappearances if they did not vote for ZANU PF. However, actual violence was restricted to the Gomoza area of Lupane and part of Gwanda. There were no political murders in these three provinces during 2008, in stark contrast to all other provinces.

**Graph 3: Which political parties are active in your ward?**

![Graph showing political parties active in the ward](image)

**Graph 4: Political problems experienced in the last year**

![Bar graph showing political problems](image)
All districts reported problems with political manipulation of access to maize, saying that only ZANU PF card-holders were able to buy maize from GMB. This included Bulawayo. Generally, Matabeleland has remained relatively free of political intimidation in 2009. All incidents of violence and intimidation related only to 2008, and none to 2009. Nonetheless, the violence and intimidation of last year – and the previous decades – have left residual tensions that continue to divide and demoralize communities. There are concerted programmes on the ground by pastors and others, in both Gwanda and Lupane, to mediate in the divisions left by 2008 violence.

The democratic space in rural Matabeleland has tangibly opened up in the last six months. In our experience, large public meetings are going ahead without interference, particularly in relation to discussions on the need for a new constitution. A coalition of Bulawayo based NGOs, under the umbrella Matabeleland Constitutional Reform Agenda (MACRA) is holding almost daily meetings across the three provinces. MACRA often arrives expecting 20 or 30 people, to find 200 or 300 in some tiny rural business centre. There is a voracious interest in coming together to debate the grievances and needs of rural communities, and these meetings are always far reaching in the issues raised. Supporters of all political parties are attending, and the District Administrators, chiefs and other traditional leaders are also endorsing and engaging in this process.

A meeting took place in Gwanda in May attended by 152 traditional leaders under the local chief, and follow up constitutional discussions will now take place with the support of these leaders. In Binga in mid June, around 700 people arrived at a small business centre to discuss the constitution, some having walked long distances! Such meetings are proving useful catalysts for ordinary citizens to confront traditional leadership over the role they have played in political violence in the recent past, and to discuss how a new constitution can entrench separation of powers, introduce accountability of leadership – and allow local control of local resources.

**Conclusion**

There has been a small shift towards improved access to resources in rural Matabeleland over the last four months, and this is at least partly attributable to the work of ministers in the GPA.

Access to education is tentatively better, although this could be reversed at any time. If teachers do not get improved salaries, another indefinite strike is a real possibility. While schools are now more or less staffed and pupil enrolment is close to normal, many of the staff are inexperienced and under resourced. In some schools in Bulawayo, we have had reports of teachers still refusing to teach and insisting on their classes attending “extra lessons” at extra charges after hours, in order to supplement their inadequate USD 100 per month.

School infrastructure suffered damage through neglect during the strike of 2008, and resources are needed to repair this damage in the interests of children. There is a desperate need for text books and for specialist teaching in rural schools.
Clinics now have erratic but improved supply of basic drugs, and some have better access to refrigeration than before. Generally, access to adequate health care is elusive, particularly for those who need hospitalization, as the fees remain beyond the reach of most Zimbabweans, modest as they may be. Hospitals still have almost no linen, many machines and mortuaries still do not function, and there are shortages especially of highly experienced staff.

If wages for teachers and nurses are not raised soon, there is a danger of these civil servants resorting to alternative means of making a living, as they did in 2008. It is important that nurses and teachers are not out gold panning or vending or extorting money for “free” and essential services – but they have a right to a living wage.

Food security is reasonable for now in much of Matabeleland. However, urban poverty is a major reality, and some rural farmers also failed to harvest anything last year. Furthermore, the acute lack of foreign exchange in most families is going to jeopardize food security, as families are already being forced to barter their precious harvests in exchange for school levies, bus fares and medical bills.

Political violence is not apparent in rural Matabeleland at this time. The democratic space has been pushed back and people are able to meet freely and debate contentious issues without interference. However, in Bulawayo itself problems persist, with students and members of WOZA arrested and assaulted this year when conducting peaceful demonstrations.

The lack of foreign exchange provides an overwhelming dilemma for rural Zimbabweans. Families have had have no option but to succumb to exploitative bartering, or to sending their able bodied into the diaspora, in order to survive in a situation where they have no foreign exchange and therefore no way of engaging with the formal economy. As the phenomenon of diasporisation and bartering is such a central one in Matabeleland at this time, Solidarity Peace Trust has produced a separate report dealing with these topics, entitled “Gone to Egoli”. It is not only the leaders of Zimbabwe’s GPA that “walk a thin line” in order to keep the country from toppling into chaos: all over Zimbabwe, millions of people battle daily to keep their families from the abyss of even greater poverty.

Photo 16: lowest life expectancy in the world - Zimbabwe
Appendices

Questionnaires used in Case Study
Questionnaires used in Case Study

[Reduced in font size and answering space]

QUESTIONNAIRE ONE: KEY INFORMANTS

SOCIO ECONOMIC SURVIVAL AND RESOURCES IN MATABELELAND: DATE: ……………………………

1. DEMOGRAPHIC DATA

1:1. PERSONAL DETAILS

Name of Interviewee: …………………………… Address: …………………………………………………

Age: … Sex: … Marital Status: ……… Occupation: ………… Source of Livelihood: …………………

Level of Education: …………… Size of family: ………… Political Affiliation: ……………………

1:2. GEOGRAPHIC LOCATION

Province: ……………… District: ………………………………. Ward: Number: ……… Name: …………

Village: ……………………………… Kraal Head: …………………………

School: ……………………………… Dip tank: ……………………………

2. EDUCATION:

How many schools are there in your ward? Pr: …… sec: …… Tert: ……

How many were operational by close of last term of 2008? Pr: …… Sec: …… Tert: ……

How many are operational now? Pr: …… Sec: …… Tert: ……

What is the staff compliment currently? Pr: …… Sec: …… Tert: ……

Comment on staff survival: ………………………………………………………………………………………………

How many children attending by close of the last term? Pr: ……Sec: …… Tert: ……

What are the current schools enrolments? Pr: …… Sec: …… Tert: ……

Boys: …………………………………………………………………………………………………………………

Girls: …………………………………………………………………………………………………………………

In cases where schools are not operational how do children spend time?

Boys: …………………………………………………………………………………………………………………

Girls: …………………………………………………………………………………………………………………

How many children have moved to the Diaspora in your village: ………………………

If any for what reasons: ……………………………………………………………………………………………

What are alternatives to the present education systems:

Any other comments on education

3. HEALTH

Is there a health centre in your ward: YES / NO Type of health centre: ……………………

Name of centre: ……………………………………………………………………………………………

Is your health centre operational: YES / NO

What is the staff compliment: Nurses: …. Doctors: …. EHTs: …. Rehab Tec: …… X – ray staff: …. Lab Tec: …… Nurse aids: ……
What services are normally provided at your health centre: .................................................................
What services are currently provided at your health centre: .................................................................

Comment on drug availability including ARVs; Cholera; TB: ...............................................................
What are the common diseases in your ward: ...........................................................................................
How are they being managed by the health centre: ..............................................................................

How many people have died in your ward in the last six months (approx): ......................

Circle any disease that has caused deaths in your area in the last six months and rank with a number what you think have been the major causes of death:

HIV/AIDS    TB    Hunger    Malaria    Anthrax    Cholera    Cancer    Old age    Other..............................

Were any deaths partly or mainly caused by (circle)

No access to health care / staff incompetence / lack of drugs / lack of equipment / lack of money / lack of food /other

Explain: ….................................................................................................................................

Comment on availability of hospital equipment including linen and medical sundries: ................................

How has health service delivery system impacted on women and children, especially in relation to childbirth and immunisation services: ...........................................................

Comment on staff survival: ..............................................................................................................

What alternatives do people use to try and get health care in your ward:
..............................................................................................................................................................

4. SOCIO-POLITICAL

Which political parties are active/present in your ward:
How do these political parties relate to each other:
Since January 2008 have there been any political motivated incidences: If YES what was the role of:
Women:..............................................................................................Men: ........................................
Youth: .......................................................................................................................

Comment on the government of national unity: ...........................................................

5. SOCIO-ECONOMIC

Where did people get the seed for planting during the current rainy season:............................

How many families have draught power:
MOST / SOME / VERY FEW (NUMBER IF POSS).............

How does this compare to 2007/8 planting season?
SAME / BETTER / WORSE    Explain...............................................

How did people without draught power manage to plant?: .................................................................

What are the sources of income for people in your ward: circle and rank with a number
FARMING / JOB IN TOWN / MONEY FROM DIASPORA / SMALL LOCAL BUSINESS / OTHER SOURCE OF INCOME ...........................................................

What are the income generating programmes provided in your ward and including providers:
..............................................................................................................................................................
What are the donor programmes – food / other .................................................................

Comment on the participation of:
Women: ………… Youth: ………………………………………………………………………
How has Diaspora impacted on the people in your ward: …………………………………
How has dollarisation of the economy impacted on the lives of the people in your ward:
Comment on the barter in ward if there is any going on: ………………………………..
What are other socio – economic challenges that are faced by the people in your ward:………………………………………………

ADD OTHER COMMENTS HERE:

____________________________________

____________________________________

QUESTIONNAIRE TWO: COMMUNITY MEMBERS

SOCIO ECONOMIC SURVIVAL AND RESOURCES IN MATABELELAND: DATE: …………………

1. DEMOGRAPHIC DATA
1:1. PERSONAL DETAILS

Name of Interviewee: …………………………………………………….
Address:………………………………………………………………………..
Age: ……… Sex: ……… Marital Status: ………………… Occupation: ……… Source of Livelihood:
……………… Level of Education: ………………………Size of family: ……… Political Affiliation: ………

1:2. GEOGRAPHIC LOCATION
Province: …………………………. District: …………………………….. Ward: Number: ……..
Name: ………………………….. Village: ……………………Kraal Head: ……………………………
School: …………………………. Dip tank: ………………………………..

2. EDUCATION.

How many school going age children are there in your family:
Pr: ……..  Sec: ……… Tert: ………
How many are attending school:
Pr: ……..  Sec: ……… Tert: ………
If some or all are not attending what are the reasons: ………………………………….
If children are not attending school how do they spend time: …………………………….

In your family are there any children that have moved to the Diaspora IN THE LAST SIX MONTHS (SAY WHEN EXACTLY)
Females (Ages) ………………………………………………………………………
Males (Ages): ………………………………………………………………………...
What were the reasons for this?
WORK / SCHOOLING / OTHER EDUCATION / REFUGEE
Explain: ……………………………………………………………………………

What other members of your family have moved to the Diaspora prior to this (MORE THAN SIX MONTHS AGO)
Females (Ages): ………………………………………………………………………
Males (Ages) ………………………………………………………………………..
What were the reasons for this?
WORK / SCHOOLING / OTHER EDUCATION / REFUGEE
Explain: ……………………………………………………………………………

What are the alternatives to the formal education system in your area: …………..
Other comments on education: ………………………………………………………………………
3. HEALTH
How far is the nearest health centre: .......................... HOSPITAL / CLINIC Name:.................................

Is your health centre FULLY operational: YES / NO
IF NO:
FOR HOW LONG has it been not working properly?:..........................
In what way is it not working properly for you? (CIRCLE)
NO STAFF / STAFF POORLY QUALIFIED / SHORTAGE DRUGS / EQUIPMENT BROKEN / FEES TOO HIGH / NO TRANSPORT
Explain:........................................................................................................
Have anyone in your family tried to receive any medical services since January 2008:
YES / NO
What were the health problem/s?:.................................................................
Explain what happened: .............................................................................
If the clinic or hospital cannot provide services, what do you do?..............

Has anyone in your family tried to access maternal or child health care including immunisations since January 2008?:
YES / NO
IF YES, are these services functioning OK or NOT? .................................

Have you experienced any deaths in the family since January 2008: YES / NO (number).............................................
CIRCLE cause

HIV/AIDS   TB   Hunger   Malaria   Anthrax   Cholera   Cancer   Old age   Other
...........................................................................................................

Were any deaths partly or mainly caused by (circle)

No access to health care / staff incompetence / lack of drugs / lack of equipment / lack of money / lack of food /other
Explain: ...............................................................

4. SOCIO – POLITICAL
Which political parties are active or present in your village?
MDC M / MDC T / ZANU PF / ZAPU / OTHER .........................

Since January 2008 have you ever experienced politically motivated difficulties:
YES / NO
FOOD DISCRIMINATION / VIOLENCE / INTIMIDATION / OTHER
Describe the events:..............................................................................
Who were the perpetrators: .................................................................

5. SOCIO – ECONOMIC
How do you survive as a family:

FARMING / JOB IN TOWN / MONEY FROM DIASPORA / SMALL LOCAL BUSINESS / OTHER SOURCE OF INCOME .................................................................

How many members in your family are earning money regularly:
In Zimbabwe: .................................. Diaspora: ..................................
Are any members of your family participating in local (village level) income generating programmes:
Women: ............................Men: ...................Youth:..............

Are there any donor funded programmes that your family is participating in?:
YES / NO If yes which ones:
Women: ............................Men: ...................Youth:..............
Is there any member of your family who is in the Diaspora since January 2008:
YES / NO If yes how has it impacted on your life? ………………………………

Is there a member of your family who will be going to the Diaspora in the next 3 months:
YES / NO If yes how many: ……………………………

How has US Dollarisation of the economy impacted on your family: ……………………………………………………

Has your family been involved in any barter trade: YES / NO If yes comment: …………………………………………………

Did your family have inputs during the current planting season:
SEED: ENOUGH / NOT ENOUGH / NO PROPER SEED
FERTILIZER: ENOUGH / NOT ENOUGH / NO PROPER FERTILIZER
What crops did you plant? ……………………………………………………………

Where did the inputs come from:
Government / self sourced / donors (name) ……………………………………………

Did your family have draught power during the CURRENT planting season:
YES / NO: If YES in what form: cattle / donkeys / tractor

Did your family have draught power during the 2007 planting season:
YES / NO: If YES in what form: cattle / donkeys / tractor

Do you have enough human labour for your fields this year compared to previous years?
YES / NO Explain: ………………………………………………………………………

What proportion of your fields have you planted this year compared to previous years?
ALL FIELDS / MORE THAN LAST YEAR / SAME / LESS THAN BEFORE

Give proportion of fields planted if possible (visual) …………………………………
If different to last year, explain: ……………………………………………………………

How many months’ supply of maize do you expect to harvest this year? ……………
Do you have mealie meal in the house right now? YES / NO
IF YES: How many weeks supply? ………………………
Where did it come from? GMB / SELF / DIASPORA / DONOR …………………
What is the going price in your area for 10 kg Mealie meal? ……………………………

Are there any other socio-economic challenges that your family faced since January 2008:
……………………………………………………………………………………

ANY OTHER COMMENTS

_____________________________________________________________________________________________

_____________________________________________________________________________________________

DIASPORA QUESTIONS

When exactly did family members leave for the Diaspora: how old are they?
How often have they sent goods or money home to you?

<table>
<thead>
<tr>
<th>NAME (sex)</th>
<th>Left: year/month</th>
<th>age</th>
<th>Education</th>
<th>WHEN LAST HOME?</th>
<th>DATE LAST GOODS/MONEY SENT</th>
</tr>
</thead>
</table>

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Goods are most often delivered by:
Family member in person / paid car delivery / other friend or relative / other ……………………………

Our family receives something from relatives abroad on average:
Once a month / once in six months / once a year /less often than once a year / Nothing so far

During 2008 we received GOODS on ………………… occasions:
During 2008 we received MONEY on ………………… occasions, totalling the following amounts
USD……….. Pula …………….. Rand ………….. £ ………………
The money was used for: food / clothes / schooling / phone time / transport / funerals / medical bills / ……………………………………………………………………………………………

In 2008, we received from the Diaspora:
Mealie meal / other food stuffs / clothes / building materials / phone time / other major goods( eg radio, bike, furniture etc) ……………………………………………

What is the most important change in your life in terms of having family in the Diaspora: (place a number 1 – 3/4/5 depending on how replies are weighted)
groceries and money contribute positively / fewer mouths to feed at home / children growing up without proper supervision (either here or in Diaspora) / fewer people to help in fields / people come back dead, to die / people come back sick / people come back with diseases and infect others / no incentive to finish school here / broken marriages / they bring back bad habits / more orphans / nothing/ other………………………………………………

Did you have family members abroad during the 1980s and 1990s? YES  /  NO
If so, how was this different to things now? EXPLAIN …………………………………………………

BARTER TRADE
Explain in detail any instances in which you swopped goods for other goods in the last year.

<table>
<thead>
<tr>
<th>INDICATE WHAT YOU GAVE : GOODS/LABOUR IN DETAIL</th>
<th>INDICATE WHAT YOU RECEIVED</th>
<th>WAS IT A FAIR DEAL?</th>
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</table>

How often did you barter last year?
Every month / once or twice only / only when things are very bad ……………………………

When exactly did you MOST RECENTLY barter goods? (year/month) ……………………………
Prime Minister Morgan Tsvangirai addresses the crowds after being sworn into office, February 2009