

HARARE (regional)

COVERING: Botswana, Malawi, Namibia, Zambia, Zimbabwe



ICRC / AR 2010

ICRC regional delegation ICRC sub-delegation

EXPENDITURE (IN KCHF)

Protection	1,325
Assistance	8,169
Prevention	1,427
Cooperation with National Societies	989
General	-

▶ **11,911**
of which: Overheads 723

IMPLEMENTATION RATE

Expenditure/yearly budget	79%
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PERSONNEL

Expatriates	21
National staff (daily workers not included)	99

KEY POINTS

In 2010, the ICRC:

- ▶ worked in close collaboration with the Zimbabwe Prison Services (ZPS) to stabilize detainees' nutritional status and provide them with a regular food supply, notably by boosting production in 18 prison farms
- ▶ agreed on a plan of action with the ZPS to improve inmates' access to health care
- ▶ downscaled its support to Zimbabwe's rural health clinics, while continuing to support polyclinics in Harare's suburbs
- ▶ trained Zimbabwean farmers in advanced agricultural techniques, significantly boosting their crop yields
- ▶ sponsored national IHL committee members from all the countries covered to attend 3 major events abroad
- ▶ organized a five-day workshop in Malawi on restoring family links for National Society personnel from the southern African region

The Harare regional delegation has existed in its current form since 1981, although the ICRC has been present in some of the countries covered for much longer. It visits detainees in Namibia and Zimbabwe, working closely with the latter authorities to improve prison conditions in the country. It also supports hospitals in Zimbabwe. Throughout the region, it helps family members separated by armed conflict to restore contact, raises awareness of IHL, international human rights law and the ICRC's mandate among the authorities, armed and security forces and the general public, and helps the National Societies develop their operational capacities.

CONTEXT

Under the national unity government, formed in February 2009, Zimbabwe remained mostly stable, despite rising friction between the two main parties, notably during the second half of the year. A series of community outreach meetings to elicit popular views on a new constitution were marred by politically motivated violence. The economy was gradually reviving and civil servants saw their salaries raised. Despite a relatively good harvest in 2009, parts of the south-east suffered a dry spell that caused a reduction in crop yields.

In Zambia, the government prepared for presidential and legislative elections, scheduled to take place in 2011. In April, a parliamentary

by-election was disrupted by street skirmishes, which reportedly left several people seriously injured.

The rest of the region remained stable, but the effects of the 2009 global financial crisis were still being felt. Tens of thousands of refugees were hosted within the region, and economic migration, for example from Zimbabwe to South Africa, often created tension.

The Southern African Development Community (SADC) continued to play an important role in the region, dealing with many of the above and other issues.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	833		
RCMs distributed	546		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	19	3	15
People located (tracing cases closed positively)	19		
<i>including people for whom tracing requests were registered by another delegation</i>	11		
Tracing cases still being handled at 31 December 2010 (people)	133	7	11
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	1		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	2	1	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹			
ICRC visits	Total	Women	Minors
Detainees visited	14,422		
Detainees visited and monitored individually	116		
Number of visits carried out	137		
Number of places of detention visited	42		
Restoring family links	Total		
Detainees visited by their relatives with ICRC/National Society support	124		

* Unaccompanied minors/separated children

1. Namibia and Zimbabwe

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.) ²				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	7,995	25%	50%
Essential household items	Beneficiaries	105	25%	50%
Water and habitat activities	Beneficiaries	18,530	51%	32%
Health				
Health centres supported	Structures	18		
Average catchment population		1,210,096		
Consultations	Patients	641,113		
	<i>of which curative</i>		503,203	262,602
	<i>of which ante/post-natal</i>		62,777	
Immunizations	Doses	783,799		
	<i>of which for children aged five or under</i>	Doses		
	<i>of which for women of childbearing age</i>	Doses		
Referrals to a second level of care	Patients	43,668		
Health education	Sessions	10,888		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ²				
Economic security, water and habitat				
Food	Beneficiaries	8,330		
Essential household items	Beneficiaries	9,921		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	9,827		
Water and habitat activities	Beneficiaries	8,000		

2. Zimbabwe only

ICRC ACTION AND RESULTS

Building on access gained in April 2009 to prisons run by Zimbabwe's Ministry of Justice, the ICRC kept up regular visits to detainees, monitoring their treatment and living conditions. With a view to obtaining access to all detainees in the country, the delegation made an offer of services to visit people held in police stations.

The ICRC supported the relevant authorities, working closely in particular with the Zimbabwe Prison Services (ZPS) to improve detainees' living conditions. The joint efforts of the ZPS and the ICRC contributed to stabilizing inmates' nutritional status and ensuring a regular food supply to prisons. The ICRC continued to supplement detainees' diets, upgraded prison cooking facilities and launched an initiative to boost food production in prisons through the cultivation of sugar beans, groundnuts and vegetables. The authorities and the delegation also took steps to improve health care and hygiene in detention centres, notably by including detainees in the national drug-distribution plan. Inmates faced fewer health risks after the ICRC rehabilitated prison water and sanitation facilities and provided them with jerrycans, kitchenware and blankets. No major outbreaks of disease were reported in Zimbabwe's main prisons during the year.

In Namibia, people arrested in connection with the 1999 uprising in the Caprivi Strip were also visited by delegates. With ICRC support, the Namibia Red Cross organized family visits to the detainees by their relatives living in the Caprivi Strip.

While the ICRC began downscaling its assistance to health clinics in Zimbabwe, as planned, it continued to distribute drugs, medical supplies and equipment to polyclinics in Harare's suburbs. With the delegation's input, the city health authorities produced a draft 2010–15 plan to further improve peoples' access to health services. In two rural districts, the authorities took over the supply of drugs and medical material for health centres and referral hospitals, which had been supported by the ICRC since 2006. To help ensure a smooth transition, the delegation built or renovated vital infrastructure.

The delegation also wrapped up an agricultural initiative launched in 2009. Training in advanced farming techniques contributed to significantly higher yields for the country's farmers.

As part of ongoing efforts to raise awareness of IHL and the Movement, the delegation fostered contacts with the authorities, armed and security forces, academics and other members of civil society in the region. For example, it trained Zimbabwean armed forces instructors to teach IHL and organized a workshop for senior officers from SADC countries on the integration of IHL into military doctrine, training and operations. The ICRC also sponsored members of Zimbabwe's national IHL committee to attend three events abroad to bolster their capacities to implement IHL.

The ICRC and the region's National Societies continued to provide tracing and RCM services to refugees and unaccompanied children. To reinforce the family-links network, the southern African region's

National Societies and the International Federation participated in a five-day workshop supported by the ICRC. National Societies also received support to promote the Movement and to better respond to humanitarian needs arising from cross-border issues.

The ICRC coordinated its activities with Movement partners, UN agencies and other humanitarian actors to ensure humanitarian needs were met, while avoiding duplication.

CIVILIANS

Civilians' protection concerns shared with the authorities

In Zimbabwe, sporadic skirmishes during the outreach meetings to discuss the new constitution (see *Context*) led to occasional incidents of politically motivated violence and destruction of property. On the basis of such allegations, the ICRC fostered dialogue with the relevant authorities and influential community representatives to deepen understanding of humanitarian concerns and of legal provisions to protect and assist people in the event of violence during the upcoming constitutional referendum or the elections. Following an ICRC assessment of the needs of people affected by the violence during the meetings, those worst-off were provided with food rations and essential household items.

People in Zimbabwe have improved access to health care

In Harare's densely populated suburbs, people had better access to curative and ante/post-natal care and family planning services in 12 polyclinics, thanks in part to the ICRC's regular deliveries of drugs, cleaning materials and office supplies, as well as one-off donations of vital medical equipment. The ICRC began downsizing its support to the polyclinics in 2010, with donations covering 75% of the requirements for drugs, compared with nearly 100% in 2009; the remaining 25% was met by the National Pharmaceutical Company of Zimbabwe and UNICEF. With a catchment population of some 1.2 million people, the clinics provided consultations to over 640,000 patients, including over 260,000 children, and ante/post-natal consultations to nearly 63,000 women. Work was ongoing to improve the clinics' plumbing, electrical systems and waste management.

To maintain and further improve health care in Harare, the city health authorities developed and agreed on a 2010–15 plan of action during a three-day workshop supported by the ICRC. In addition, head nurses and administrators from all 12 ICRC-supported polyclinics assessed their work and planned accordingly for 2010 during a day-long workshop. With ICRC technical input, health administrators made notable progress in the distribution and management of drugs in the polyclinics.

In January, the health authorities in two districts in Masvingo and Matabeleland North took over the supply of drugs and medical materials to 6 of the 11 rural health centres and 1 of the 2 referral hospitals supported by the ICRC since 2006. Following a final ICRC donation, they also started supplying the remaining six health facilities by the end of the month. To help the authorities assume full responsibility for running the facilities in June,

the ICRC constructed waste-management systems in six centres, rehabilitated shelters and kitchens for expectant mothers in five, and improved access to water in two, contributing to a cleaner and safer environment. Staff also underwent training in equipment sterilization and waste management.

To stem a nationwide measles epidemic among children, the government launched a ten-day vaccination campaign in May, backed up by four ICRC vehicles with drivers.

Villagers in Zimbabwe have safer water and farmers produce higher yields

Some 18,000 people in rural communities in Mbire district had access to safe water after local authorities repaired or maintained hand pumps, with spare parts and training provided by the ICRC.

Meanwhile, an agricultural initiative – launched in Mashonaland Central and East in early 2009 to help farmers recover from years of drought and economic hardship – produced encouraging results in improving people’s food self-sufficiency there. Dozens of employees from the Ministry of Agriculture underwent training to teach advanced farming techniques. Farmers, also trained by the ICRC, began adopting similar methods. The initiative came to a close in June, following an evaluation showing that farmers had more than doubled, and sometimes tripled, their crop yields. In areas where crops were still affected by dry spells, nearly 8,000 people (1,578 households) were given a one-off food ration.

Dispersed families reconnect

Refugees in the region restored and maintained contact with their relatives through tracing and RCM services provided directly by the ICRC in Zimbabwe and by the respective National Societies in Botswana, Malawi and Namibia, with ICRC support.

In parallel, the region’s National Societies reinforced their skills in restoring links between separated family members at an ICRC workshop (see *Red Cross and Red Crescent Movement*).

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in 41 of Zimbabwe’s Ministry of Justice-run prisons received visits conducted according to the ICRC’s standard procedures, enabling delegates to monitor their treatment and living conditions. Detainees received letter-writing materials to stay in touch with their families. After the visits, the detaining authorities were provided with confidential feedback on the delegates’ findings and,

where relevant, recommendations for improvements. In Namibia, inmates arrested in connection with the 1999 uprising in the Caprivi Strip were also visited by delegates. Additionally, they received visits from relatives living in the Caprivi Strip, organized by the Namibia Red Cross with ICRC support.

In Zimbabwe, oral and written representations formed the basis of a dialogue with the authorities on ways to improve inmates’ nutritional status, access to health care and adequate hygiene conditions (see below), as well as respect for their judicial guarantees. For example, a series of meetings with the authorities that also involved magistrates and key stakeholders resulted, in several cases, in faster handling of detainees’ case files, particularly those of minors, the mentally ill and other vulnerable inmates.

As part of efforts to gain access to detainees in all places of detention in Zimbabwe, the permanent secretary of the Ministry of Home Affairs received an offer of services from the ICRC to visit police stations and to contribute to the police training programme. The offer was still under consideration at year-end.

To avoid overlap, the ICRC and other organizations working in fields related to detention held regular coordination meetings.

Zimbabwe’s authorities take steps to improve detainees’ living conditions

Inmates’ nutritional status stabilizes

During the year, the joint efforts of the ZPS and the ICRC contributed to stabilizing inmates’ nutritional status and ensuring a regular food supply to prisons.

In the spring, the Ministry of Justice and the ZPS began implementing the recommendations of an ICRC report submitted in late 2009. The document suggested ways to sustain the improvement in detainees’ nutritional status following the ICRC’s six-month therapeutic feeding programme in 2009. On the basis of the report, a third of Zimbabwe’s prisons began systematically screening incoming inmates’ nutritional status, and detainees in half of the country’s prisons had their weight regularly checked, by ZPS order.

The ZPS and the delegation continued monitoring the food supply chain to prisons. More than 8,300 detainees in 17 of the country’s largest prisons supplemented their diets with beans, groundnuts and oil provided to the authorities, on a monthly basis, according to need. Over the course of the year, an average of 6,000 inmates per month benefited from such distributions. Therapeutic feeding was not required. With a larger budget at its disposal, the ZPS

PEOPLE DEPRIVED OF THEIR FREEDOM	NAMIBIA	ZIMBABWE
ICRC visits		
Detainees visited	116	14,306
Detainees visited and monitored individually	116	
Number of visits carried out	1	136
Number of places of detention visited	1	41
Restoring family links		
Detainees visited by their relatives with ICRC/National Society support	124	

drafted a working agreement with the delegation to gradually assume full responsibility for food supplies in 2012. Thus, following the submission of an ICRC report recommending ways to boost food production, the Justice Ministry, the ZPS and the delegation began to implement a joint plan of action to grow sugar beans, groundnuts and vegetables in 18 prisons. With government funding, the ZPS rehabilitated the irrigation systems of two prison farms, while the ICRC provided support for similar works in five others. Farm managers received the necessary equipment and learnt how to boost their crop yields during two workshops co-organized by the ZPS and the delegation.

Detainees have improved health care and hygiene conditions

On the basis of an ICRC report assessing health care in prisons in late 2009, the Justice Ministry, the ZPS and the ICRC agreed on a 2010 plan of action to improve services. Prisons began receiving medicines on a regular basis after the authorities included detainees in the national plan for the provision of basic drugs. Dispensaries still lacking drugs and medical items got a regular supply from the ICRC. To ensure proper distribution of such medicines, more than 200 ZPS health professionals and administrators exchanged best practices on drug management during a three-day seminar. Meanwhile, ZPS regional health coordinators and the ICRC strengthened coordination with provincial and district health authorities to ensure proper training for health staff, medical visits for detainees, and access of inmates to HIV/AIDS and tuberculosis treatment.

Inmates in prisons also benefited from several preventive health measures supported by the ICRC, including the provision of hygiene kits. Nearly 10,000 detainees also received soap, plates, jerrycans and blankets, and those in two prisons began knitting warm clothing for inmates using eight new machines. Newly drilled boreholes and constructed water supply systems enhanced the provision of safe water for inmates in four prisons. Eight others had their kitchens renovated or stocked with new stoves and pots.

Thanks in part to these initiatives, no major outbreaks of disease were reported in Zimbabwe's main prisons during the year.

AUTHORITIES

Politicians and decision-makers in the region, including Zimbabwean government officials, deepened their knowledge of humanitarian issues, IHL and the Movement's activities during bilateral meetings with and briefings by the ICRC.

National IHL committee members from all the countries covered received technical support in ensuring IHL implementation, including through sponsorship to attend the third Universal Meeting of National IHL Committees, held in Geneva, Switzerland, (see *International Law and Cooperation*) and two regional IHL seminars in South Africa (see *Pretoria*). Additionally, members of Zimbabwe's IHL committee attended two ICRC information sessions focusing on the ratification of certain treaties, such as the Convention on Cluster Munitions.

At the regional level, contacts were fostered with SADC to raise its members' awareness of the Movement's mandate and operations.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Regionwide, members of the armed and security forces participated in briefings and presentations to familiarize them with IHL and humanitarian principles and garner support for the Movement's neutral, impartial and independent humanitarian action. Among those briefed were participants in a military exercise in Zambia, government officials and senior police officers attending seminars at the SADC Regional Peacekeeping Training Centre (RPTC) in Harare, and nearly 600 officers and soldiers from the armed forces in Malawi, Namibia and Zimbabwe, who learnt about basic IHL and the ICRC before their deployment on peace-support operations. The Zimbabwe Defence Forces were also given 5,000 ICRC booklets on IHL rules governing combat to distribute to soldiers heading off on peace-support missions.

With ICRC technical support, the region's armed forces also continued to integrate IHL into their doctrine, training and operations. In Zimbabwe, two dozen air force and army instructors were trained to teach IHL, and two personnel from these branches of the military were sponsored by the ICRC to participate in an advanced IHL training course abroad. Military schools in Botswana, Malawi, Namibia and Zimbabwe also received publications to facilitate IHL teaching. Meanwhile, 15 senior military and police officers from 13 SADC countries devised new strategies for integrating IHL into their respective doctrine and training during a five-day ICRC workshop at the RPTC.

CIVIL SOCIETY

Universities in Botswana, Namibia and Zambia received IHL reference publications to enhance IHL teaching and research. In Zimbabwe, four universities assessed IHL instruction with the delegation and started exploring ways to better integrate the subject into curricula, and one lecturer was sponsored by the ICRC to attend a course abroad. Students there also tested their IHL knowledge at a national moot court competition, during which the delegation was able to foster contacts with several high-profile civil society actors in attendance, including High Court judges and NGOs. With ICRC sponsorship, the competition's winning team went on to take first runner-up in the regional moot court competition (see *Nairobi*).

Backed up by ICRC training, National Society communication staff raised public awareness of the Movement (see *Red Cross and Red Crescent Movement*).

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC training, technical, material and financial support, the region's National Societies worked to develop their family-links services and emergency response capacities and to raise awareness of the Movement and its Fundamental Principles.

To strengthen the tracing and RCM network, the National Societies of nine southern African countries, including Botswana, Malawi, Namibia and Zimbabwe, reinforced their technical capacities and reviewed their plans of action to implement the Restoring Family Links Strategy for the Movement during a five-day regional workshop in Malawi, organized by the ICRC with the participation of the International Federation. In Zimbabwe, 10 volunteers also underwent training to become family-links focal points.

The National Societies held three meetings, with International Federation and ICRC support, where they addressed regional and Movement issues, exchanged expertise and coordinated activities to strengthen operations. Such regional coordination facilitated a quick response to humanitarian needs across borders and enabled the National Societies to prepare an emergency response in the event of violence, using the Safer Access approach. In Malawi and Zimbabwe, the National Societies' HF radio network covering the region was updated by the ICRC.

In Botswana, Malawi and Namibia, the National Societies continued improving their communication skills, and in Zimbabwe, the National Society held an international youth camp. These activities stimulated interest in the Movement among the authorities, the media and the general public.