Zimbabwe Idai Recovery Project

financed by THE WORLD BANK

managed by UNOPS

MONTHLY OVERVIEW

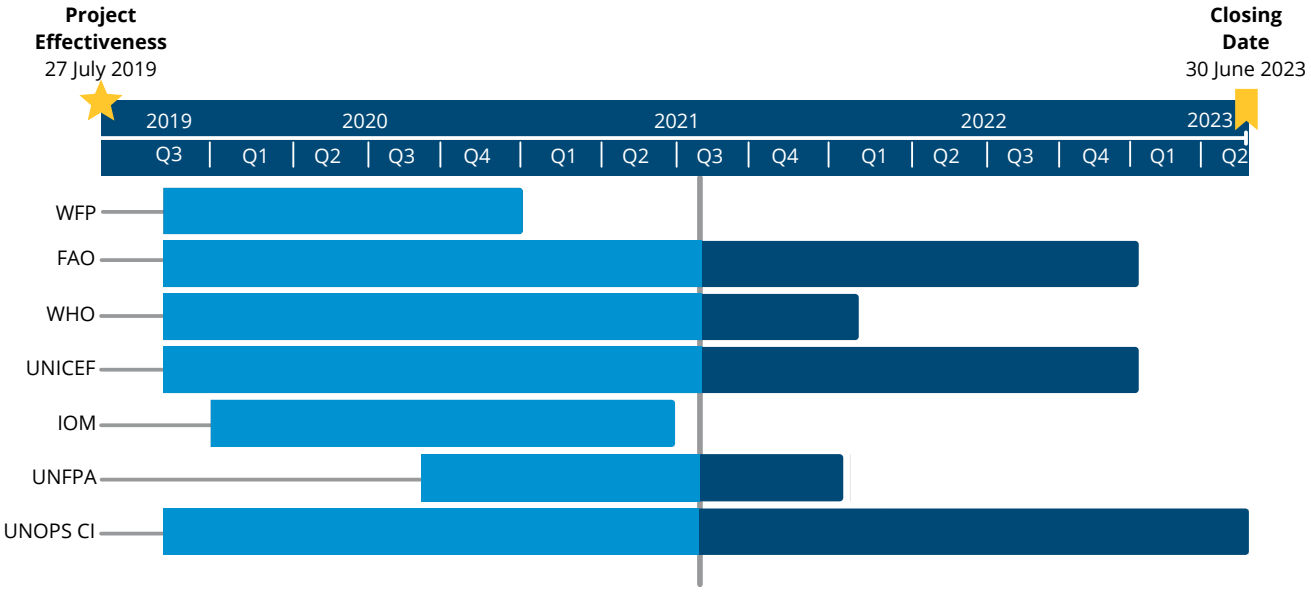
JULY 2021

Zimbabwe Idai Recovery Project

financed by THE WORLD BANK

managed by UNOPS

PROJECT TIMELINES



FOOD SECURITY AND LIVELIHOODS

WFP World Food Programme | Food and Agriculture Organization of the United Nations | UNOPS

2 dipping sessions were conducted this month. The procurement of an additional 41,000 litres of Deltamethrin for the second phase of dipping chemicals distribution is currently in progress to cater for an additional 246 dip tanks. 466 farmers were trained in agronomy with a cumulative total of 1,002 farmers trained to date.

Irrigation scheme rehabilitation works progress

Gudyanga	41%	Bwerudza	43%
Nyanyadzi	60%	Chipendeke	14%
Maunganidze	43%	Kushinga-Gambadziya	14%

1500 farmers supported with chicken and goats for restocking.

HEALTH AND WASH

World Health Organization | UNOPS | unicef

Virtual consultation and inception meeting with stakeholders (PHE) are in progress to provide an overview of planned activities for the documentation of the ZIRP peer supervision and social mobilization model, highlighting lessons learnt and a plan for implementation of scale-up activities.

1,956 beneficiaries were reached in July with health services, captured using the eHealth platform. Expansion of the mHealth platform is underway, with consultations and engagement with MOHCC in progress to seek clearance for the modified user training modality given the COVID 19 restrictions.

3 supportive supervision visits for health facilities were conducted in July in Manicaland, Masvingo, and Mashonaland East, with a total of 49 facilities visited. Registration of the four procured ambulances has been delayed by issues with ZIMRA's vehicle registration system and performance problems with the clearance agent.

196,300 people reached through community sensitization on health promotion interventions

4,307 households have restored access to water services

164 communities were trained on drinking water safety and security planning. 148 communities have developed their DWSSP plans, which are being reviewed by the CSO's and UNICEF WASH. 43 communities are working on the development of their plans.

Construction of household latrines progress has been slowed down due to the COVID-19 restrictions. However, partners have been given clearance letters to continue work within communities. 33 boreholes were rehabilitated and 18 latrines were constructed for vulnerable households in July.

EDUCATION

unicef UNOPS

Plans are underway to distribute 7 tents to 7 schools from Chimanimani, Buhera and Chipinge districts. Release Orders have been approved and the supply division is facilitating the distribution to schools.

Plans are now underway to procure additional ECD kits and School in a box which will be distributed to the 121 non-UNOPS CI schools.

CROSS CUTTING ELEMENTS

IOM UN MIGRATION UNFPA UNOPS

The majority of survivors who accessed services are women aged 18 years and above. The majority of cases reported in July are economic (30%), Psychological (29%) and physical (21%). 15% of the cases were sexual. 28 survivors received post-rape care in Chipinge in the month of July. 14 survivors received PEP in the month of July out of a total of 65 who accessed health facilities. The 14 managed to report to health facilities within 72 hours. Of the survivors referred by community cadres, 15 reported physical violence, 31 psychological violence, 7 economic violence and 2 were child pregnancies. 30 survivors received transport to access higher level of care.

Construction works progress on access roads

Bridal Veil Falls Access Road	55%
Tiya Road	25%
Nyunga Road	35%
Gumira Road	21%
Ruwedza Road	26%
Nyamusundu Road	25%

375 GBV survivors received services from mobile One stop centers in July and **55** were referred for services by community cadres.

172 Kilometers of damaged access roads identified and assessed.

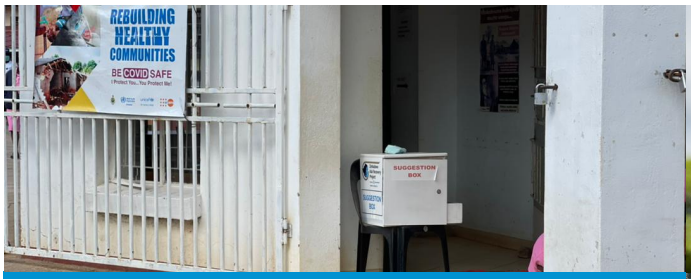
COVID-19 RESPONSE ACTIVITIES

Zimbabwe Idai Recovery Project

financed by THE WORLD BANK

managed by UNOPS

In response to COVID-19, the following interventions were supported through ZIRP, under various targetted sectors:



Support to Health Workers tracing contacts is ongoing with an increase in lab request forms and contacts line listing forms.

26,824 specimen samples were collected in July.

ONE PROJECT ONE TEAM

FEATURE STORY

Going above and beyond the call of duty

By Dr. Tapiwa Nyamangodo
ZIRP Medical Doctor

In the final years of medical training in the Obs & Gynae department at the University of Zimbabwe, maternity cases with horrendous outcomes were presented weekly. Chimanimani and Chipinge district transferred patients featured too often.

A real sense of déjà vu engulfed me when a mother sat in front of me inside our NGO tent deep in Rusitu valley. On her lap, a 16-year-old boy who wore this enticing broad smile on his face. That the boy's mother looked pensive and deeply anxious did not seem to bother him.

He was in his own world. I quickly learnt that the boy, named Nyasha, could not speak save for excited groans and grunts, could not walk, feed, or clean himself. Nyasha has cerebral palsy. He is a surviving outcome of one of the 3 delays in seeking obstetric help and/or care that is prevalent in the settings his family comes from.

He is well washed and has a bright face. He has no pressure sores that are common and come with neglect by caregivers. But his mother tells me she came over because she heard a doctor was coming to see the sick and she could not miss such a rare opportunity to present her son.

This is a post-COVID-19 hard lockdown time period in Zimbabwe. Not much movement is happening to Chipinge or Rusitu hospitals, where one may see a doctor if they can afford it. My mind goes into overdrive as I sit there with a highly expectant mother.

How do I tell her I have nothing to offer to her son today? Will this not break her great mothering spirit to pieces? Did my program community mobilization raise false expectations? How do we model our mobilising messages not to create expectations such as Mai Nyasha's?

I explain Nyasha's condition to his mother. I was not going to offer any wonder treatment to her son. I, however, promise to come back to her through the local clinic if ever I got anything that can be of help to a long-suffering family.

I took notice of the absence of Nyasha's father. I did not ask. Mothers bring the sick to clinics and hospitals. It is just a fact of life in the communities we serve. Mai Nyasha reluctantly takes her son onto her back and off they go to their cyclone-affected home where I am told Nyasha's medical record papers had been swept away by cyclone waters over a year ago.

I then told myself the least Nyasha needed is a wheelchair. With all this that his mother goes through in a day taking care of him, I really wondered what other domestic and economic chores she could perform given her son's total dependence.

I forgot to ask if Mai Nyasha is the only wife. She has not had any other babies after him, she told me. Her medical record could shed some light on what happened, but that record got lost. I saw three cerebral palsy patients on this day, but Mai Nyasha's trust and expectation on what a doctor could have done for her son still makes me feel empty deep inside.

We have not developed viable pathways within our health delivery systems to help a family like Nyasha's. If any exist that I am not aware of, it is because they are dysfunctional to the extent that no ordinary healthcare worker really knows what to do with such a child, like Nyasha, at the community level to get help.

A call to a friendly senior Paediatric colleague about the cerebral palsy cases in these settings elicited this response- "I call it The Chipinge Disease". This, to me, sums it up all.

I am happy to say that through the kindness of well-wishers, Nyasha now has a wheelchair. The nurse in charge at the local health centre made arrangements for his parents to receive the wheelchair at the institution. There I met Nyasha's father. He could hardly hide his happiness. And so was Nyasha's mother. She actually wore a smile on her face too on this day and wholeheartedly asked me to express their gratitude to those that made this donation possible.