COVID-19 THIRD WAVE CONTEXT

Zimbabwe was hit by a third wave of COVID-19 in June 2021, forcing the Government to declare the strictest level-four lockdown. It includes dusk to dawn curfew, a ban on inter-city travel and a cut on business hours. The measures were extended on 27 July. The COVID-19 lockdown continued to affect majority of project implementation with exception of Health service delivery and GBV response; which are considered essential services. In management of COVID-19 related challenges; Technical Agencies continue to review and update their contingency plans accordingly; making necessary modifications and approaches to implementation.

Food security and livelihoods
COVID-19 related movement restrictions continued to affect implementation of training and on farm demonstration activities; resulting in downscaling of the activities. Some procurement and distribution activities were also affected resulting in implementation delays.

Stakeholder engagement has also been affected as some beneficiaries do not have mobile devices to facilitate communication and engagement. FAO is making use of Whatsapp platforms and local leadership to disseminate and collect information, with some implementation support by lead farmers with oversight from LEAD, an implementing partner for FAO.

Health
The expansion of the mHealth platform has been impacted by the restrictions as part of the implementation involves face to face capacity-building of VHWs on registration workflows to register mothers on the platform. UNICEF is looking into possible alternatives as a virtual format is not possible due to the lack of access to connectivity at the village level. Additionally, ZIRP medical staff are at risk of getting COVID-19 infections, despite the preventive measures that have been put in place, leading to absenteeism from work and low performance.

WASH
WASH infrastructure rehabilitation works are ongoing as implementing partners have been issued with exemption letters. COVID-19 regulations and guidelines are being adhered to at all project sites. COVID-19 restrictions have slowed down stakeholder engagement processes.
COVID-19 THIRD WAVE CONTEXT

Education
End-user monitoring could not be carried out due to COVID-19 induced schools closure. Plans are now in place for an external consultant to carry out end user monitoring at targetted schools as soon as schools reopen.

Cross-cutting elements
The GBV component is classified as essential services under health so it is continuing with adapted modalities. The mobile one stop clinics are now going around local health facilities offering mobile services to survivors in need. Community cadres and VHWs still conduct GBV surveillance in close coordination with the service providers. The use of static health facilities has reduced access but enhanced COVID infection prevention control and client management, with reduced exposure to COVID-19 for ZIRP mobile teams.

UNOPS field teams remain fully active while taking all necessary precautions to ensure safety. Some construction activities are on hold while UNOPS investigates alternatives for engaging community labourers while maintaining social distancing. Some of UNESCO’s activities have been replaced by desktop studies instead of active stakeholder engagement, while others have been put on hold until conditions improve. All IOM planned assessments and reports have been achieved as of June 30th.
FOOD SECURITY AND LIVELIHOODS

Fortnightly dipping of cattle is currently in progress across 297 community-managed dip tanks and two dipping sessions were conducted during the month under review.

8% of work was completed at Chipendeke irrigation scheme and 6% of work was completed at Kushinga-Gambadziya Irrigation Scheme. Work is ongoing at Nyanyadzi, Gudyanga, Maunganidze and Bwerudza Irrigation Schemes.

**Two** dipping sessions were conducted in the month under review.

Design works for rehabilitation of **55** dip tanks were completed.

HEALTH AND WASH

1,457 beneficiaries were sensitized on health promotion interventions in June under WHO and 1,482 were reached with health services in ZIRP target areas, captured using the eHealth platform. A total of three mission hospitals and four outreach sites in Chimanimani and Chipinge received supervision support during the reporting period. One integrated health documentary was produced showcasing WHO, UNICEF, UNOPS and UNFPA’s integrated work under the Health sector.

Design works for rehabilitation of **4** health facilities were completed.

1,049 households have restored access to water services.

18 water systems were rehabilitated and/or constructed - 6 boreholes, 3 springs, 6 deep wells and 3 piped water schemes. Five community entities were trained on Operation and Maintenance including Village Pump Mechanics, Water Point Committees, Community Health Clubs, and School Health Clubs. 19,341 people were reached through refresher sessions to reinforce hygiene messaging.

74 latrines were constructed for vulnerable households, 29 squat holes were constructed in 9 Health Centre Facilities (HCF), ottoway pits were constructed in 2 HCF, and a bottle-pit in 1 HCF. Additionally, 1,173 school beneficiaries benefited from 28 sanitation facilities (squat holes) constructed at schools with handwashing facilities.
EDUCATION

The procurement of additional Education in Emergencies (EiE) kits for 122 ZIRP schools is in progress. Plans are now in place for an external consultant to carry out end user monitoring at the ZIRP targetted schools as soon as schools reopen.

CROSS CUTTING ELEMENTS

One displacement trend analysis report was produced and disseminated to TAs and other humanitarian partners. The report summarized the findings and analysis trends from the Displacement Tracking Matrix (DTM) baseline and return assessments for the period January 2020 to June 2021.

While lockdown measures continued in place, community workers relied on the information provided at the mobile one stop clinics (OSC). They used the telephone for follow-up support and to refer survivors where movements were constrained. In total, 663 survivors accessed mobile OSC during the reporting period.

48 GBV survivors were provided with transport to higher levels of care and 24 were referred for services by community cadres.

Progress of labour-intensive works:
55% at Bridal Veil Access Road
23% at Nyamusundu Road
22% at Ruwedza Road
21% at Nyungu Road
18% at Tiya Road
17% at Gumira Road
COVID-19 RESPONSE ACTIVITIES

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

The second performance appraisal was done for VHWs and continuous assessment will continue. By end of June 2021, all the 800 VHWs had received their first performance appraisals across all 9 districts.

3,883 COVID-19 specimens were collected and sent for testing.

ONE PROJECT
ONE TEAM
FEATURE STORY FOR THE MONTH
Promoting social inclusion in construction

Takarindwa Gari is a 33-year-old man born with cerebral palsy in Matezwa Village, Chipinge. Takarindwa has difficulties walking, he does not have full function of his hands, and his speech is impaired. Growing up, he never had a chance to interact with children his age as they were all afraid of him and some even branded him a wizard. He started walking at the age of 20, but unfortunately, he lost his mother then. An elderly aunt (tete) took him.

Though life was difficult for him, the community has always looked out for him. When UNOPS came to Matezwa-Gumira in 2020, some community members heard that UNOPS also considers people living with disabilities as part of their community workers and immediately registered him. Takarindwa was enrolled as a community worker with ZIRP and got his first-ever paying job at 33.

“I MANAGED TO BUY MY FIRST PHONE AND ALSO FOOD FOR MY AUNT. UNOPS WAS THE FIRST ORGANISATION TO RECOGNISE ME AS A HUMAN CAPABLE OF EARNING A LIVING!”

Under ZIRP, UNOPS ensures that every site has the representation of people living with disabilities either through direct employment or employing people who are taking care of people living with disabilities. The beneficiary selection criteria used by UNOPS prioritises marginalised groups, including people living with disabilities.

Takarindwa enjoys his job and makes sure that he meets the targets set for him that day. Targets are set as per the capacity of carrying out the work for the individual to make sure that the job does not make him worse off but that the person carrying out the job feels useful.