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NEWSLETTER

ICRC HARARE REGIONAL DELEGATION

This issue provides insight into the assistance provided to families displaced due to insecurity in Gorongosa by the ICRC and the Mozambique Red Cross Society.

We highlight the role of IHL Moot Courts in shaping the careers of young law students, as well as narrating the journey of the ICRC and its support for primary healthcare institutions in Zimbabwe which was completed in December 2013.

The International Committee of the Red Cross (ICRC) Regional Delegation in Harare carries out humanitarian activities in five countries-Malawi, Mozambique, Namibia, Zambia and Zimbabwe. The ICRC has been working in the region since 1959 to protect and assist people affected by armed conflict and other situations of violence that occur. The organisation aims to engage relevant authorities in confidential bilateral dialogue to remind them of their obligation and the humanitarian consequences of violence.

MOZAMBIQUE – SUPPORTING DISPLACED FAMILIES



Melisa Bonzo/ICRC

People displaced by violent clashes in Gorongosa District wait to be registered for humanitarian assistance by Mozambique Red Cross Society volunteers.

Violent clashes in central Mozambique have led to the displacement of residents from parts of Gorongosa District, Sofala Province. Bernard Metraux, an ICRC Delegate, explains the situation at the camp housing the displaced and the assistance provided in March 2014.

What is the situation like at the camp?

Clashes between armed fighters and government security forces over the past five months have led to insecurity in many communities.

As a result more than 6,000 people fled their places of origin in the area of the Sera Gorongosa seeking safety.

Most of them are accommodated by their families in neighbouring communities. However 550 people are being housed at a camp set up to shelter displaced individuals and families by the Mozambican authorities.

150 years
of humanitarian action



ICRC

What are the humanitarian needs of people living in the camp? Who has provided assistance?

The government set up temporary accommodation, continues to distribute food rations and has provided a health worker to address basic medical needs. Following an assessment of the needs of the displaced, the Mozambican Red Cross Society (CVM) and ICRC distributed kitchen sets, mosquito nets, blankets, soap, children clothes as well as efficient stoves with a 3 months supply of charcoal.

What challenges do the residents of the camp face?

Schooling for more than 3,000 children is currently being provided in tents. More needs to be done to ensure that the children can carry on with their education in adequate facilities. If people who have been displaced are not able to return to their homes before the harvest, their livelihood over the coming year could be in danger.

The situation of people remaining in the areas affected by the insecurity is also worrying because of the extreme difficulty in accessing basic healthcare services and clean water. These difficulties need be addressed as soon as possible.

What plans are there to help the families return home?

The reestablishment of a stable security situation is critical for people to go back to their place of origin. That is the wish of all those based in the camp. The CVM and ICRC will continue to monitor the evolution of the humanitarian situation to see how best we can complement the efforts of the government to meet the needs of the displaced.



FACTS & FIGURES: CVM & ICRC ASSISTANCE

- Rehabilitation of 2 hand pumps to maintain access to clean water for the displaced and the community hosting them;
- Provision of:
 - 440 bars of soap, 260 blankets, 130 kitchen sets and 130 jerry cans to complement government assistance to families;
 - 220 mosquito nets (2 per family) to prevent the spread of malaria;
 - 110 efficient, portable stoves and 3 months' supply of charcoal for cooking;
 - 110 sanitary buckets to enable families to maintain good hygiene;
 - 2 sets of clothes for each child under 15 years old.

ZIMBABWE: HELPING BUILD DECISION-MAKERS OF THE FUTURE



The National IHL Moot Court Competition trophy with the inscription of the teams that have won in previous years.

Daphne Maruta, a young law student at Midlands State University, says participating in the National International Humanitarian Law Moot Court Competition has helped her decide her next career move – a Master's Degree in International Humanitarian Law.

The ICRC Harare Regional Delegation in conjunction with the High Court of Zimbabwe host the annual National International Humanitarian Law (IHL) Moot Court Competition pitting the Midlands State University (MSU) Faculty of Law against the University of Zimbabwe (UZ) Faculty of Law.

The goal of the competition is to enhance the key legal skills of participants in areas such as advocacy and research whilst sensitizing future decision makers on IHL and the role it plays in the careers and responsibilities of judges, diplomats, military officers and community leaders amongst others.

According to High Court Judge President, Justice George Chiweshe, the competition has played a pivotal role in shaping careers of upcoming law practitioners.

Justice George Chiweshe believes the annual IHL Moot Court competition, regardless of who wins, remains an important teaching tool for law students as well as a tool for the dissemination of IHL to interested stakeholders.

"The Moot Court is critical for career development for law students, it sharpens their advocacy skills and their capacity to argue cases," says Justice Chiweshe.

"I know 2 ex-mooters who have appeared before me and they have developed into very good legal practitioners who have gained confidence and know how to present their cases in a court of law."

Simbarashe Mubvuma, a UZ law student says, "Any law student at the University of Zimbabwe would tell you that the ICRC Moot is the most respected competition in the Faculty of Law."

"In packed rooms in September and October every year at the UZ, young men and women gather to argue important issues of international law before their friends and teachers. It is a season when the law of armed conflict comes alive. It is that time of the year when some prosecute while some defend. It is a time to cheer and celebrate the rich history of the ICRC IHL moot at the UZ."

Regionally, the winners of the National IHL Moot Court Competition get a chance to participate in the All-Africa IHL Moot Court Competition at the International Criminal Tribunal for Rwanda in Arusha, Tanzania. In 2013, UZ represented Zimbabwe in Arusha

When the ICRC began supporting 12 City of Harare polyclinics in 2008, the primary healthcare centres recorded less than 100,000 consultations per year within their catchment population of 1.2million people. Five years later, in December 2013, the number of consultations had risen to 1.4 million per year.

ICRC assistance for primary healthcare institutions in Zimbabwe began in 2006 with the aim of improving the quality of their service to communities through the provision of essential drugs and medical items, training programmes as well as the rehabilitation of critical infrastructure. Initial support targeted 16 rural health centres and 4 hospitals in Chivi, Makoni and Tsholotsho Districts meeting the needs of over 180,000 people.

Muchadeyi Masunda, Mayor of Harare when the ICRC began its assistance, says 75% of the drugs purchased in the 12 polyclinics were donated by the ICRC and other stakeholders during that difficult period.

after having won the National IHL Moot Court for the fifth consecutive time since 2008.

"In an atmosphere of fierce but friendly competition, we went on a journey of International Humanitarian Law. Through the lectures from ICRC experts, we enriched our knowledge of IHL. We also fell in love with the noble idea of IHL" says Simbarashe.

"We remembered Mr Dunant and applauded him for his insight into the world of IHL. Although we ended as runners up, we boarded the plane home enriched and empowered by IHL."

Although Arusha evaded them in 2013, MSU tasted success in the competitive application process for the Jean Pictet Competition, the leading global moot court on IHL. Vusumuzi Bhebe, Melusi Moyo and Daphne flew to Lisbon, Portugal in March 2014.

"The different role plays that we experienced during the Jean Pictet Competition made us appreciate the implementation or the



The 2013 National IHL Moot Court champions from the University of Zimbabwe Faculty of Law pose with the trophy.

proposed implementation of IHL from people who were coming from countries that have experienced various forms of armed conflict," Daphne says with pride.

Melusi says the interaction with IHL has further nurtured his interest in humanitarian law.

"With the exposure I had from the competition, with first hand testimony from individuals from five different continents whose lives were significantly changed by the same experiences, I now know that there are no boundaries to my success," Melusi says.

ZIMBABWE: A PARTNERSHIP FOR LIFE



ICRC Harare Head of Regional Delegation, Olivier Dubois, hands over a donation of medical drugs and surgical sundries to the City of Harare Director of City Health Services, Dr Stanley Mungofa while Health and Child Care Minister, Dr David Parirenyatwa looks on.

"Without this assistance, we would have failed to deliver the kind of medical services we were able to muster at the time when most government institutions faced significant challenges and people started gravitating to these polyclinics," says Masunda.

"Due to social and economic challenges, Harare polyclinics started seeing a lot of people coming from all over Zimbabwe seeking medical services because where they lived, the services were either not up to scratch or were not readily available."



Jesilyn Dendere/ICRC

A nurse examining stocks of drugs donated by the ICRC at Mbare Polyclinic.

The ICRC's rehabilitation of maternity wards at the polyclinics resulted in an increase in the number of babies being delivered. Mabvuku Polyclinic Sister-In-Charge, Sheila Chiedza, says the infrastructural upgrade to the maternity wards has continued to play a key role in saving both mothers and babies since more than 300 babies are born at Mabvuku Polyclinic every month.

"The number of patients we were serving increased beyond the catchment population of Mabvuku. We could not turn them away. In the maternity wards, the baby warmers and the [electrical] power back-up systems that were installed by the ICRC enabled us to save the lives of babies who were born with hypothermia related complications," she says proudly.

Beginning in 2011 and in conjunction with the City, the ICRC began to gradually handover responsibility for the areas where it had been providing assistance (such as drugs and other medical accessories) to enable the City to build long term partnerships with its development partners.

Following consultation with the City, greater emphasis was placed on training and infrastructure rehabilitation with a view to building a legacy for the partnership.

The ICRC constructed incinerators at selected clinics in Chivi, Makoni and Tsholotsho, whilst in Harare, 8 incinerators

were installed to improve waste management and disease prevention. The Minister of Health and Child Care, Dr David Parirenyatwa, speaking at a ceremony to mark the handover of ICRC assistance to the City in January 2014, said the installation of the incinerators had saved the City USD72,000 annually, money that would have been paid to private contractors.

Councillor, Bernard Manyenyeni, the current Mayor of Harare says, "we have recovered to a point where we can be weaned off. We cannot wish to be in dire need so that we continue receiving assistance."

Echoing these sentiments, Dr Parirenyatwa, continued saying "our health situation is improving and the ICRC has realised this... Zimbabwe is re-engaging the international community with a view to developing the health services sector – to build on what was started by the ICRC and other stakeholders."



Jesilyn Dendere/ICRC

A new-born baby lies in a baby warmer donated by the ICRC at Kuwadzana Polyclinic.

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