

...Death in hospitals
Terror in the streets
Hunger in the house...
Documenting violations in a
country under lock & key...



2021

A FALSE START...

**THE ZIMBABWE
PEACE PROJECT
MONTHLY
MONITORING
REPORT**



**ZIMBABWE
PEACE
PROJECT**



zimpeaceproject.com

The Zimbabwe Republic Police contributed to

45.05%

of human rights violations, followed by the army at

26.07%



Ruvimbo Muchenje

What social distancing?

Police in Highfields transport people arrested for violating lockdown rules on January 8.

Pic Credit. Ruvimbo Muchenje. Pindula

1.0 EXECUTIVE SUMMARY

On the last day of January, journalist Hopewell Chin’ono, who has exposed government corruption and has been arrested 3 times in the last six months, tweeted a freestyle version of a song that he titled “Dem Loot”

In a reggae style, Chin’ono – fresh from getting bail after being in remand prison for 20 days-denounced corruption at the highest level of government.

Within a day, over 112k had listened to the amateur song and its title under the hashtag, #DemLoot was trending in the social media streets of Zimbabwe.

What could have been a moment of fun by Chin’ono turned out to be a trigger for a conversation on the gravity of high level corruption in Zimbabwe, and how such corruption has resulted in the total collapse of the country’s social service delivery system, notably health, education and public service and infrastructure.

The conversations were timeous as the country endured the fourth week of a government-imposed strict lockdown to contain the COVID-19 pandemic.

The lockdown, which came in response to the rise in COVID-19 infections, further exposed government’s ill-preparedness to solve, not just the COVID-19 problem, but the entire social and economic rot in the country.

As the numbers of infections swelled, public health institutions, already teetering towards total collapse following years of neglect, were overwhelmed.

Government, whose approach has always been military-first, found itself with a well-oiled military machinery, and public health institutions that had become death traps.

This is the same government, ironically, which arrested Hopewell Chin’ono after he exposed the high-level looting of US\$60 million meant for COVID-19 interventions in June 2020.

To date, no-one has been convicted of the brazen looting and public health institution remain incapacitated, and the ordinary citizen is living on luck as some public health centres- as surveyed nationally by ZPP – do not even have basic medication such as Paracetamol pain killer tablets.

So, as Chin’ono capped the month with an amateur song that reminded government of its obligations, it was clearer that the events of January had proved that government had not learned from the previous lockdowns as the focus remained not on the critical health and other key social service sectors, but equipping the state security agents to silence citizens in the name of COVID-19 enforcement.

They had learned nothing and forgotten nothing from the lockdown initiated in March 2020.

This is evidenced by the dominance of the Zimbabwe Republic Police (ZRP) on the list of human rights violators of the month of January.

ZRP accounted for 45.05 percent of the 271 human rights violations in January, up from 22.61 in December, while the Zimbabwe National Army (ZNA) contributed to 26.07 percent of human rights violations, compared to 7.9 percent last month.

The police and the army are on the frontline of enforcing the lockdown and while doing that, they have harassed, assaulted and illegally detained citizens.

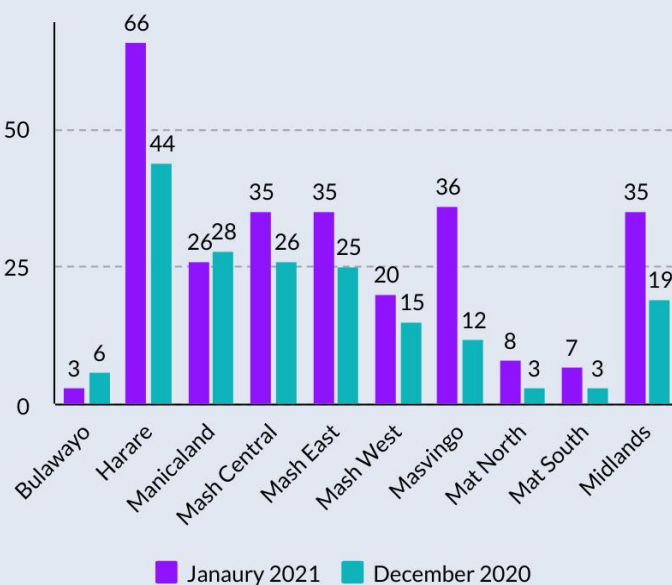
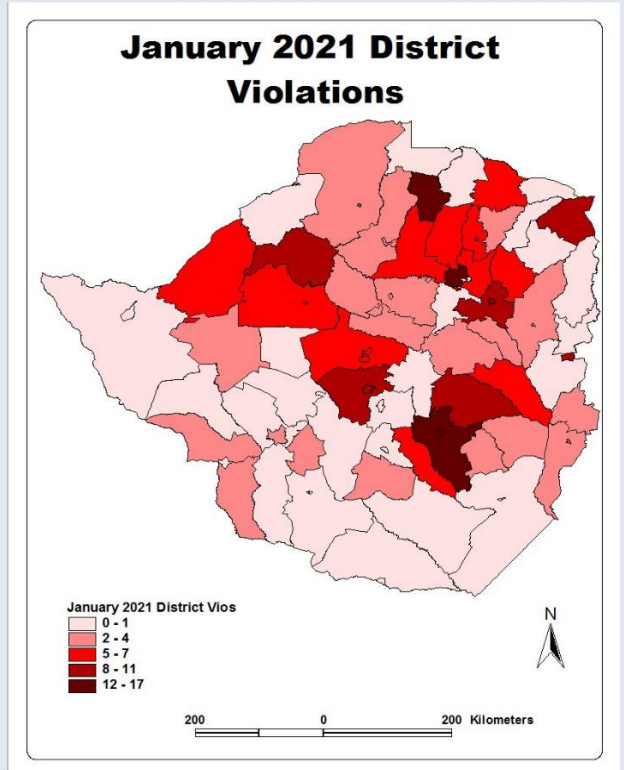
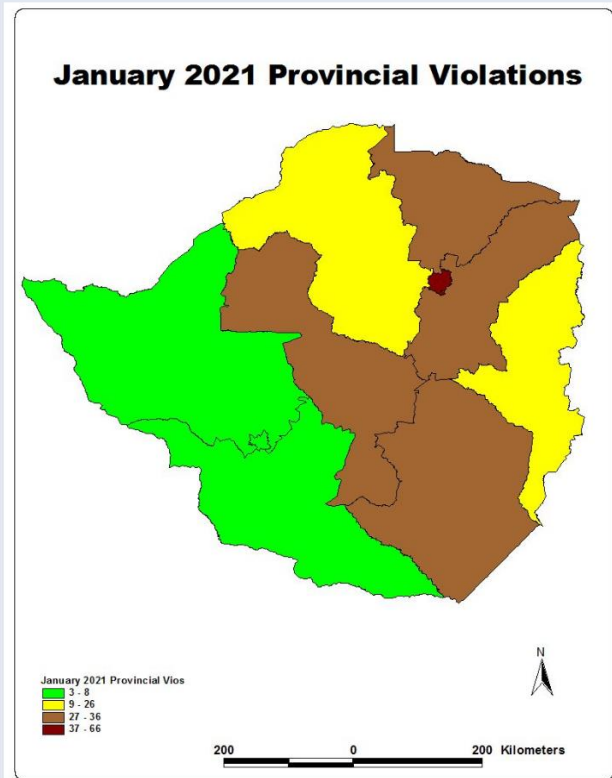
ZPP documented 101 cases of harassment, 44 cases of assault, and 19 unlawful arrests, most of which are attributable to the enforcement of the lockdown regulations.

It is on this basis that January was a false start to 2021, a year that was hoped to provide a break from the turmoil of 2020.

Human Rights Violations Monthly Dashboard

Report time frame: January, 2021

Zimbabwe Peace Project

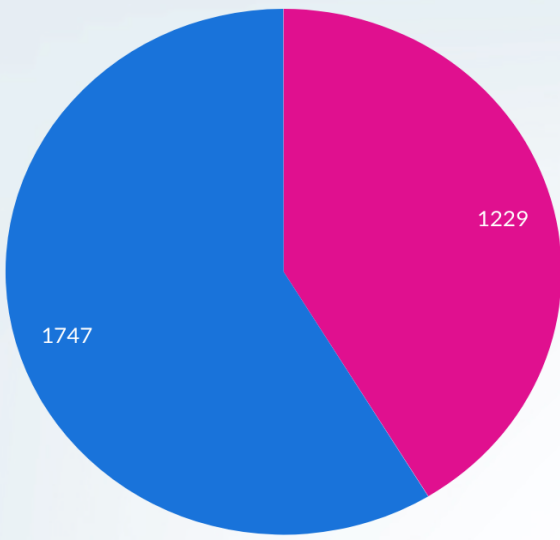


January Provincial Violations

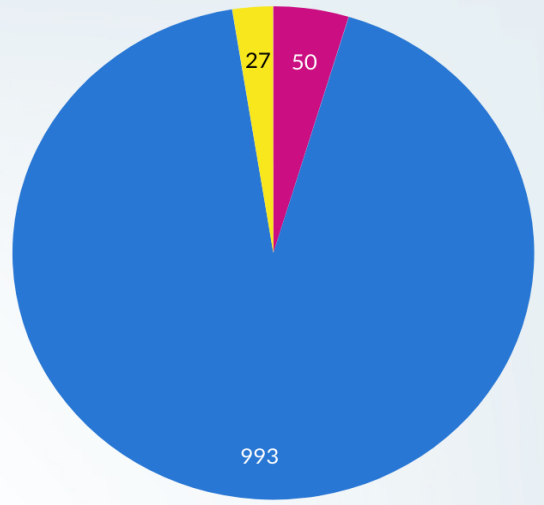
January Types of Violations

VIOLATIONS INTENSIFIED

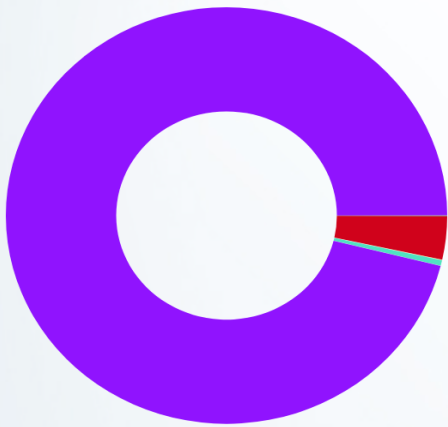
As shown in the two maps, the density of human rights violations increased significantly in the month of January. Harare had the highest, followed by the three Mashonaland Provinces and Midlands. This is a worrying trend and ZPP continues to closely monitor the situation and to urge government to take necessary measures to protect citizens from human rights violations



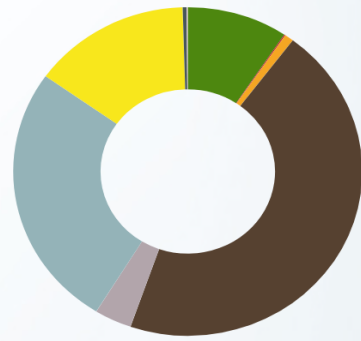
Gender of January Victims



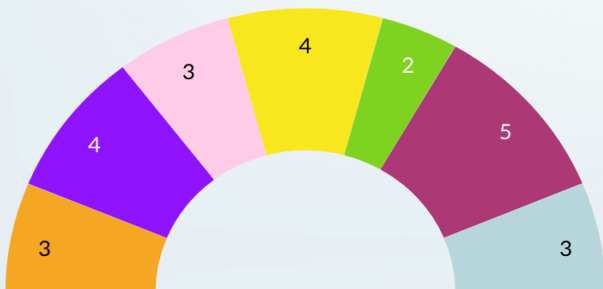
Gender of January Perpetrators



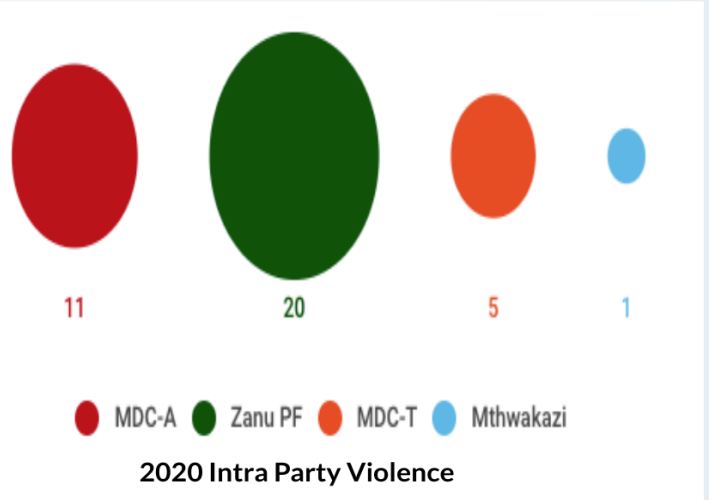
January Victims Affiliation



January Perpetrators Affiliation



January Food & Other Aid Violations



2020 Intra Party Violence

DEATH IN THE HOSPITALS A PERSONAL EXPERIENCE



Parirenyatwa Group of Hospitals is the largest medical institution in Zimbabwe and its main hospital – a complex maze of charcoal grey buildings built before Zimbabwe’s independence in 1980 - is located a few kilometres shy of Harare’s city centre, a distance that is walkable for many.

Upon entering the foyer in the casualty department, the first noticeable thing is the large numbers of people.

Dozens sit on the rows of the benches to the left while many others are either milling around or sitting all over the place, while others stand on the reception area, sorting out administrative issues with the medical personnel.

A nurse checks blood pressure and temperature of the incoming patients on one part of the foyer.

There is a strong sense of hopelessness, despair and the fatigue on the many faces is too much to be ignored.

Today, I am here to join family members who have come to process the paperwork for the burial of my auntie who died a day after being admitted to the COVID-19 section of the hospital.

We are headed towards the police post within the hospital complex and on the way is the entrance to the mortuary. The strong, traumatising stench in that area suggests poor ventilation and improper handling of the morgue.

As we reach the police post, I notice hordes of people waiting on the outside, waiting to collect burial orders for their dead relatives.

In Zimbabwe, a burial order is a document approving the burial of a deceased person, and it often has the authorization of a doctor, pathologist, the police and next of kin.

Inside the police post, are two officers and a pathologist, all sitting on chairs, processing papers.

There is no doubt the three are going beyond their limits to deal with the dozens of people eagerly waiting outside.

We submit my aunt’s papers and the police officer politely tells us that since she was in the COVID-19 ward, she will not get a post mortem.

“But when she was admitted, she had negative results from the two tests she undertook at a private hospital and when we came here, she never got tested for COVID-19, so what leads to that conclusion?” we enquire.

The pathologist weighs in.

“All bodies that come from the COVID-19 ward do not get post mortems,” he says.

Later on, we discover that anyone who is admitted to the hospital exhibiting any symptoms of COVID-19, be it a fever or breathing complications, they are bundled to the COVID-19 ward even before they are tested, and there, they are condemned with no access to any life-saving medication.

As we waited for about an hour for our papers to be processed, over five people came in to submit papers of their relatives who had died of COVID-19- related complications.

When all was done, we collected our papers and all we know, without any conclusive evidence, is that our aunt died of ‘COVID-19- related complications’, and that is because she was never tested positive, neither was she tested posthumously.

In the end, my aunt becomes one of the statistics of COVID-19, and still we are never sure of the cause of her death, and she joins the many Zimbabweans whose deaths are not being fully accounted for as government continues to keep a tight lid on how it is dealing with contact tracing, testing of the deceased and their relatives, among other procedures necessary to deal with COVID-19.

The story of the death of my auntie speaks a great deal to how a lot of corners are being cut to cover up for government’s failure to deal with COVID-19.

In addition, it exposes government’s disjointed approach to the pandemic, and whereas other countries such as South Africa have already secured vaccines, the Zimbabwean government is still appealing for funding and donations.

It goes beyond COVID-19.

It must be noted that while COVID-19 is the major focus right now, other healthcare needs, such as medication for chronic diseases, sexual and reproductive health services, among others, remain inaccessible to the ordinary people.

Local clinics are charging a prohibitive US\$5 consultation fee in some cases.

TERROR, CORRUPTION IN THE STREETS



Corruption and general mis-governance at the highest level of governance naturally run down to the lower levels of society.

It is a culture, a cycle that can only be broken when the highest powers in the land gather the will to instill transparency right from the head of the rotting fish.

In the case of Zimbabwe, corruption has become a cancer, and this January, its seeds, which had been abundantly watered throughout the years by government's ineptitude, flourished and further spread deep into the lowest level of society.

As government announced a 30- day lockdown, police and soldiers returned to roadblocks to enforce the strict travel restrictions.

In addition to harassing, intimidating and assaulting citizens, the police and the army engaged in their own form of low-level corruption.

ZPP recorded countrywide incidents where the state security agents demanded bribes in exchange for freedom to those they would have arrested.

For example, on January 5, police at Murombedzi Growth Point in Zvimba West arrested and assaulted villagers who were at the rural shopping centre before demanding bribes.

The victims were accused of not properly wearing face masks and the villagers were only released after paying between US\$2.00 and US\$3.00 each.

Down in Mt Darwin South soldiers from 2-1 brigade reserve force housed at the former Border Gezi National Youth Service training camp have habitually carried out random patrols in the small town.

Armed with guns and whips, the soldiers assault, intimidate and harass ordinary citizens in the small town.

WE RECOMMEND

Firstly, there should be a clear distinction between the operations of the army and the police, with the police being the civilian force meant to deal with law enforcement.

Secondly, ZPP recommends that government should retrain police officers and equip them with human skills so that they do not overstep their mandate and engage in corruption, unlawful arrests and assault of civilians.

On corruption, it takes government's will to deal with the scourge, and it starts from the top. Government should show sincerity to deal with this by ensuring that the Zimbabwe Anti-Corruption Commission is not used as a political tool to deal with opponents and that it operates without fear or favour.

Only this can ensure that corruption at the highest level is dealt with, and this will have positive impact on the lower levels of society.

HUNGER IN THE HOUSE

Zimbabwe's worsening hunger crisis has been exacerbated by the worst economic downturn the country has seen in decades and now, COVID-19. The pandemic, along with government lockdown measures have had a large impact on informal workers, who constitute at least 90% of the population. Their livelihoods have been lost due to the slowing demand for their services and products as mobility into town continues to be restricted; affecting the flow of customers.

The 2020 rural Zimbabwe Vulnerability Assessment (ZimVac) assessment indicates that households saw an average 51.5% reduction in income compared to 2019 due to COVID-19. The abrupt announcement of the initial lockdown in March 2020 gave informal workers little time to organise their savings or stock up on goods. Despite the government's promise to avail an informal sector cushion fund to help vendors survive during the lockdown, no financial assistance has been provided. While many recognise the threat posed by COVID 19, they would rather risk contracting the virus than sit idle at home and starve to death. Many families have been forced to reduce the quantity of their food portions as well as their food intake to two meals a day in order to save the little they have.

Acute malnutrition cases have also been on the rise in the country as food shortages deepen. According to ZimVac, the percentage of children receiving the minimum acceptable diet necessary for growth and development decreased from 6.9% in 2019 to 2.1% in 2020. In 2021, the percentage is projected to decline.

The right to food is enshrined in Article 77 of the Constitution; however, Government has failed to ensure that the hunger crisis is addressed urgently and accordingly. Various food relief initiatives to local have failed to solve the hunger problem and government-issued grants and food aid interventions have been largely ineffective. Government aid processes, particularly the Pfumvudza agricultural support scheme, have created a hub for corruption, politicisation and exclusionary distribution practices. The government's approach to addressing the hunger crisis has been limited as it neglects the need for a long-term solution and instead opts to rely on short-term solutions such as food relief schemes- which have proven unsustainable.

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WE RECOMMEND

In light of this, ZPP calls for a genuine intervention in addressing economic challenges plaguing the country which have led to the worsening hunger crisis.

ZPP also urges the government to remember the obligation to ensure that the right to adequate food is protected and guaranteed. In addition, relevant authorities are expected to account for the continuous partisan distribution of aid and make certain that all vulnerable citizens are provided with the aid and without bias.

CONCLUSIONS & RECOMMENDATIONS

It is clear that January marked a false start to Zimbabwe's hopes of economic recovery and the surge in the COVID-19 cases was more like a wake up call for government to act on the social service systems it had conveniently neglected for decades.

It therefore remains to be seen if government will act as they should, and that is to ensure they capacitate the health sector to deal with the healthcare needs of all citizens regardless of class or political affiliation. This is because when disease comes, it does not discriminate, and with international travel under restriction, government officials, who all along flew out for medical attention, must now have to make do with the system they neglected, and if they are ever to learn, the time is now!

Government should provide a clear, inclusive plan on how it intends to deal with the long-term changes brought about by COVID-19 and this should apply to the health and education sector.

Government cannot continue to deny the existence of the informal sector, and it needs to have some income and should therefore have a clear plan on how to ensure that the over 70 percent of the population who are in the informal sector, do not become completely vulnerable.

While social grants - which government has not provided since January - can be welcome, there is need for a long-term solution to the situation, which, according to experts, will be with us for quite a long time.



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