



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HUMANITARIAN AID - ECHO

**HUMANITARIAN AID
For
Vulnerable Population Groups
in
ZIMBABWE**

GLOBAL PLAN 2006

Humanitarian Aid Committee – January 2006

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Section 1 Executive summary

Zimbabwe, highly unstable and vulnerable, continues to be immersed in a profound crisis. For many years Zimbabwe prospered as the “breadbasket” of the Southern African region, net crop exporter and the world’s third largest tobacco producer. Today Zimbabwe has one of the world’s fastest crumbling economies. The crisis is aggravated by an increasingly HIV/AIDS infected and affected population, an unsuccessful Land Reform Programme and the overall rapid decline of social services. The UN has identified the crisis as a “triple threat” of food insecurity, poor governance and the HIV/AIDS pandemic.

This situation has been further aggravated with the Government-led “Restore Order” and “Drive Out the Trash” (“Murambatsvina”) Operations (from May to July 2005), which supposedly aimed at stopping illegal trading in urban and sub-urban areas across the country. As a result of these operations informal market sites, small businesses and allegedly illegal houses were demolished and large groups of people evicted. The UN estimates that 700,000 people have been directly affected by the operations whilst a total of 2.4 million people have been adversely affected by the evictions.

An estimated 2.9 million people are in need of emergency food assistance in marketing year 2005/2006 following a poor cereal harvest early in 2005. The resulting food shortages, rising staple food prices and diminished income-earning opportunities have led to an upward revision of the number of people at risk of food insecurity. Despite this, the Government of Zimbabwe refuses to formally appeal for food aid.

The European Commission will continue to support humanitarian interventions in Zimbabwe in order to mitigate the impact of an enduring crisis on the most vulnerable population groups. In accordance with its policy as a humanitarian donor, the Commission’s response to the persisting crisis – a result of major policy constraints, continued bad governance, the devastating effects of the HIV/AIDS pandemic and erratic weather conditions - must be pertinent to its emergency mandate and type of response which is short-term in nature. In the light of above the principal objective of the Commission’s humanitarian interventions in Zimbabwe in 2006 will be limited to alleviating the impact of the deteriorating situation on vulnerable populations at particular risk and to contributing towards strengthening positive coping mechanisms of vulnerable populations through integrated assistance, food security and water and sanitation interventions. As long-term programmes are a more adequate tool to engage in a recovery of a permanently food insecure population, a proposed decrease in DG ECHO’s support to short-term humanitarian interventions is to be considered with a view to the funding allocated by the other financial instruments of the European Commission. The Commission’s Directorate General for Humanitarian Aid (DG ECHO) aims also at supporting and enhancing humanitarian coordination mechanisms, in order to improve effectiveness and efficiency of the humanitarian response.

The proposed budget is EUR 12 million. The expenditure under this Decision shall be eligible from 01/03/2006.

Section 2 General context and current situation

Section 2.1 General context

Zimbabwe's population is estimated officially at 12.9 million, the 4th largest in Southern Africa after South Africa, Angola and Mozambique.¹ It occupies an area of 391,000 sq km. About 60 percent of Zimbabwe's population live in rural areas and base their livelihoods largely on crop production and livestock farming.

Zimbabwe's ongoing crisis dates back to 1965 when Ian Smith, leader of Southern Rhodesia, issued a Unilateral Declaration of Independence (UDI) from Britain, imposing white-minority rule. This action prompted international sanctions and guerrilla war which, by 1979, had claimed some 36,000 lives and displaced some 1.5 million. Britain brokered a peace deal in 1979 involving the government, Joshua Nkomo's Zimbabwe African People's Union (ZAPU) and Robert Mugabe's Zimbabwe African National Union (ZANU), culminating in the Lancaster House Agreement. Mugabe won first elections after the independence agreement, becoming country's Prime Minister and Africa's most feted leader. In 1987 the ZANU merged with the opposition creating the ZANU-PF and paving the way for constitutional change giving Mugabe executive presidential powers and turning the country into a *de facto* one-party state. Attempts to create a *de jure* one-party state failed in 1990, but Mugabe secured re-election in 1996.

Forcible seizures of mostly white-owned land by ZANU war veterans crippled the economy and led to a chronic shortage of basic commodities and services from 2000 onwards. The President lost the 2000 constitutional referendum, but defeated the Movement for Democratic Change (MDC) opposition in parliamentary elections, though missing the two-thirds majority needed to change the constitution. Following the seriously flawed 2002 presidential elections, Mugabe resorted to using state machinery, war veterans and youth militias to spread a culture of intimidation, suppress dissent, gag the media and violate human rights.

Denounced by international observers as neither free nor fair, the elections were nevertheless endorsed by South Africa, which feared Zimbabwe's collapse and insisted on African and dialogue-based solutions. Zimbabwe left the Commonwealth in December 2003 following indefinite suspension agreed by the triumvirate of Nigeria, Kenya and Australia.² Repression cast a shadow on the elections in March 2003 and on the subsequent parliamentary elections in March 2005.

Section 2.2 Current situation

The March 2005 election, preceded by a certain level of political tension, had been won over again by ZANU-PF party. Two months after the elections, the ZANU-PF Government started operations "Restore Order" and "Drive Out the Trash" ("Murambatsvina"), which aimed at stopping illegal small trading and demolishing allegedly illegal housing and businesses. The operation (executed from May until July), left large populations in urban and sub-urban areas across the country homeless and deprived of their livelihoods. In most cases, the displacement of population was politically motivated. This crackdown has increased vulnerability and

¹ Given the large scale work-related emigration over the past five years, when an estimated 25% of the population has left Zimbabwe in search of economic opportunities and political protection, it is likely that it lowered to the level of 11 million.

² Analysis by International Crisis Group: 'History of the Crisis'; September 2004

despair among ordinary Zimbabweans even further. The UN Special Representative of the Secretary General, Mrs. Anna Tibaijuka, reported that some 700,000 people had lost their homes or their source of livelihoods and that 500,000 children were forced out of school or had their education disrupted.

On the eve of the Senate elections in November, the opposition party (MDC) remains seriously divided over participating in the electoral process, as MDC had steadfastly opposed the creation of the Senate chamber considering it as yet another level of government in an already cumbersome, top-heavy system and as irrelevant to the issue of resolution of the political and economic crisis of the country.

In 2005 the humanitarian situation in the country remains highly vulnerable. The crisis is aggravated by an increasingly HIV/AIDS infected and affected population, an unsuccessful, destabilising Land Reform Programme, the overall rapid decline of social services and widespread human rights abuses. The UN has identified the crisis as a “triple threat” of food insecurity, poor governance and the HIV/AIDS pandemic, with adult prevalence rate 21.3 %³. As a result life expectancy has dropped from 61 years during the early 1990s to 35 years by the end of 2004.

These combined developments have exacerbated the humanitarian situation and continue to hinder recovery. According to the human development index (HDI) calculated by the United Nations Development Programme (UNDP), Zimbabwe is a low development country. In recent years Zimbabwe dropped from a HDI ranking of 128 to 147 (out of 177 countries)⁴ GDP per capita (PPP) fell from USD 2635 in 2000 to USD 2443 in 2003.⁵ The official inflation rate decreased in 2005 to 136%, in comparison with considerably higher rates (approx. 380%) in preceding years. An unofficial inflation rate is however estimated to be as high as 360% in September 2005.

An estimated 2.9 million people are in need of emergency food assistance in the marketing year 2005/2006 following a poor cereal harvest early 2005.⁶ The resulting food shortages, rising staple food prices and diminished income-earning opportunities have led to an upward revision of the number of people at risk of food insecurity. These needs are being addressed by European Commission though its contributions to WFP, channelled by humanitarian aid and the food security budget line.

Despite these needs the Government of Zimbabwe (GoZ) refuses to recognise a “humanitarian crisis” in the country and does not have the intention to appeal officially for international assistance. Nevertheless the UN is expecting to launch the Consolidated Appeal for 2006 for Zimbabwe at the end of November 2005.

³UNAIDS AIDS Epidemic Update 2005. According to the annual report by the UNAIDS and WHO, there is an evidence of drops in HIV rates among pregnant women in Zimbabwe from 26% in 2003 to 21% in 2004. The improved data might not however have been adjusted to the mortality and fertility rates: the prevalence of HIV among pregnant woman in Zimbabwe may have reduced from 24 to 21% in part because those already infected during the first survey have died or become infertile due to disease progression. The rate of HIV/AIDS prevalence differs also depending on the area and population groups at particular risk i.e. displaced population, ex-commercial farm workers. To compare with neighbouring countries: new data from South Africa show HIV prevalence among pregnant women has reached its highest levels to date: 29.5% of women attending antenatal clinics were HIV-positive in 2004.

⁴ Human development Index, HDR 2004

⁵ GDP PPP (Purchasing power parity) in US\$. HDR 2002; HDR 2005

⁶ Zimbabwe Rural Household Food Security and Vulnerability Assessment Report (ZIMVAC), June 2005

The lean period – a periodic cycle of food grain shortages - that usually starts in December and lasts through to March, is expected to begin much earlier this year. In Zimbabwe, access to food in many areas is severely hampered by the scarcity of grain on the market, either from farmers/traders or from the state-run Grain Marketing Board (GMB), transport problems and fuel shortages. For the same reasons, prospects for 2006 are dire, regardless of rainfall.

The continuing hyperinflation combined with extremely high levels of unemployment, is greatly limiting access to food for the most vulnerable population groups: people living with HIV/AIDS (PLWHA), orphans and other vulnerable children (OVCs), elderly, widow and child-headed households and displaced population groups including ex-commercial farm workers. The Zimbabwean Vulnerability Assessment Committee (ZIMVAC) has estimated 2.9 million people as requiring food assistance. With rising prices, the number of people at risk of food insecurity is likely to be much higher, over 3 million, about a quarter of the total population.⁷

Section 3 Identification and assessment of humanitarian needs

The following should be given particular emphasis by the humanitarian community:

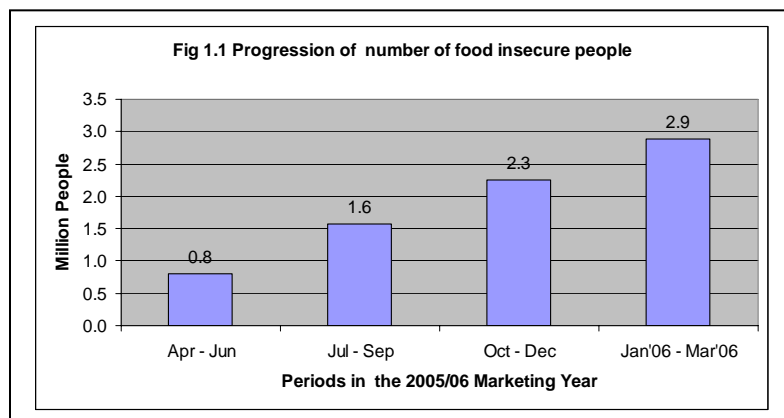
Food Aid / Food Security

Annual cereal requirements for Zimbabwe are considered to be 1.8 million⁸ Mt. According to the Food and Agriculture Organization (FAO) the estimated harvest in the 2004/2005 season was around 600,000 Mt. The GoZ made its commitment to import 1.2 million Mt. in order to counterbalance the shortages experienced in production. It has been reported that the GoZ has managed to import into the country approximately 500,000 Mt from the Regional Markets, especially from South Africa, in the period from April to September 2005. However, it is understood that transport constraints, including scarcity of fuel, pose a major challenge to the authorities as regards their ability to distribute the food to the vulnerable population in need.

The Zimbabwe Vulnerability Assessment (ZIMVAC) estimated that at least 2.9 million people or 36% of the rural population will be in need of food assistance during the 2005/2006 marketing year on the assumption of food requirements of 2,100 K-calories per person per day. However, different analysts predict that these figures could be much higher due to the rampant inflation (360% in September) that is eroding the purchasing capacity of many households in Zimbabwe. Different, recently undertaken, household economic surveys reported that food insecure households have been engaging in negative coping mechanisms such as reduction of the number of meals per day (62%); reduction in expenditure in education (41%); reduction in health expenditure (36%); reduction of expenditure in agricultural inputs (35%).

⁷ FAO « Food supply situation and crop prospects in sub-Saharan Africa » September 2005

⁸ Human Requirements 1.4 million Mt; Livestock feeding needs 0.4 Mt



“Progression of Number of Food Insecure People”,

Source: Zimvac

To such effect the World Food Programme (WFP) is reaching at the moment approximately 1 million people through its different targeted programmes that include school feeding and home-based care for people living with HIV and AIDS, and orphan’s and vulnerable children. Apart from the “*Targeted Feeding Programme*”, the “*Vulnerable Group Feeding Programme*” that started in October 2005 and aims to assist up to 3 million people until April 2006, WFP is implementing food aid programmes across the country with the support of 15 implementing partner’s (IPs). WFP and other humanitarian actors endeavour to import and distribute an approximate total of 300,000 Mt. in the framework of above-mentioned programmes. WFP has been operating until now with an agreement⁹ of the Government of Zimbabwe and remains engaged in ongoing lengthy discussions with the GoZ to obtain the official Memorandum of Understanding (MoU).

The WFP operation is being implemented under the framework of the three years Regional Protractive Relief and Recovery Operation (PRRO) through the Unallocated Emergency Window (UEW) mechanism under which the Zimbabwe intervention is included. However, the Zimbabwe intervention is exceptionally being implemented within a one-year time frame which ends in June 2006. The funding allocated to date to Zimbabwe through PRRO is as follows: EU Food Aid/Food Security Budget Line EUR 22.45 million (USD 29.8 million); USAID USD 34.6 million; UK 12.5 million¹⁰; Australia USD 1.9 Million; and Japan USD 0.3 Million. All contributions to date represent approximately 47% coverage of current needs.

The 2004/2005 agricultural season was characterized by low production. According to FAO recent figures 26,000 Mt. of locally produced seed have been procured by the GoZ for the current planting season 2005/2006. The GoZ is also intending to import an additional 25,000 Mt. from neighbouring countries. However, serious doubts arise on the availability of foreign currency in order to pay for the importations. Therefore, total availability of seed ready to be distributed and planted becomes difficult to be estimated. Fertilizer production has been minimal and import levels are low. Therefore fertilizer availability is considered to be extremely short. Additional constraints are the capacity to distribute the amounts of seeds available on time to the beneficiaries, the escalating prices of fuel, the availability of tillage together with labour force. Taking into consideration all of the constraints mentioned, the realistic scenario is that approximately 1.2 Million Ha. area will be planted with an average production of 0.3/0.4 Mt/Ha. That gives an approximate forecasted production between 360,000 and 480,000 Mt. in 2006. Based on these calculations we may estimate that Zimbabwe could face a deficit of cereal for next year of approximately 800,000/900,000 Mt.

⁹ Letter from the Ministry of Public Service, Labour and Social Welfare

¹⁰ UK Contribution is at present blocked until such time that WFP signs the MoU with the GoZ

or higher on cereal production for human consumption. Therefore, it is envisaged that the number of communal households in need of support to enhance their agricultural activities will be the same as in this agricultural campaign; approximately 400,000 which represents around 25% of the rural communal households.

The forecasted figures on agricultural production provide a precarious and worrying scenario for 2006. Consequently, continuous support to food security and agricultural programmes is considered to be highly relevant and important. In 2006 humanitarian food security programmes will focus on the continuation of provision of agricultural inputs such as seeds and fertilizer, extension training and improved agricultural techniques. DG ECHO interventions will liaise with the agricultural recovery programmes financed by the EC Food Security Budget Line, which is in the process of making allocations based on a maximum 3 year multiannual programme, NGO Call for Proposals “*European Programmes for Food Aid and Food Security*”, for a total of EUR 10 Million.

DG ECHO’s continuous support to food security programmes is considered as a ‘mitigation measure’ to diminish the impact of the deteriorating food security situation on the most vulnerable rural households. However, long-term food security recovery programmes are a more adequate and effective tool to be used in order to initiate a recovery of a permanently food insecure population. DG ECHO’s role in supporting recovery programmes should be decreased as soon as other, more adequate, funding instruments (i.e. EC Food Security Budget Line) will add to their support to these programmes. Therefore a proposed decrease in DG ECHO’s support to food security programmes is to be considered with a view to new funding allocated by the FSBL.

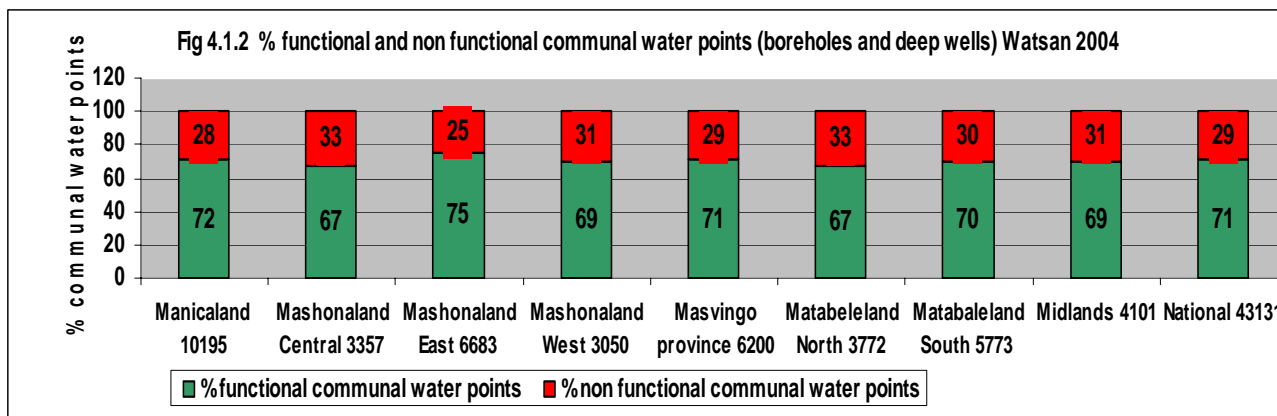
Water and Sanitation

The Water and Sanitation coverage of rural populations in Zimbabwe has dramatically declined during the last years. Once a country with a coverage of more than 70% of rural areas, which is considered to be a high standard for the Southern Africa region, Zimbabwe is today facing an increased decline. The access of the population to safe water supplies and basic sanitation facilities has been affected by a number of causes which include a) persistent decline in rainfall during recent years that has contributed to declining levels of surface and underground water availability; b) general economic decline that has eroded institutional and community capacity for the maintenance of structures.

Despite the efforts made during recent years in the rehabilitation of rural water supply systems and sanitation facilities it is considered that operation and maintenance of water and sanitation facilities nearly collapsed in rural areas and approximately 30% of the water facilities are currently not operational¹¹. An estimated 2.5 million people in rural areas suffer from the shortage of safe water for drinking and other domestic purposes. Increased pressure on the existing water points, especially in the dry areas of the country, is being observed where the water available has to be shared between humans and livestock. Access to sanitation facilities has also declined: recent statistics show that access to such facilities has fallen from over 30% in 2001 to 24% in 2004¹².

¹¹ “National Water and Sanitation Inventory 2004”, joint exercise between the Ministry of Health and Child Welfare; National Action Committee; and UNICEF

¹² UNICEF



“Functional and Non-functional Communal Water Points by Province”, Source: Water and Sanitation National Inventory, 2004

Inadequate water sources and excreta disposal structures have undeniably produced a negative impact in health indicators. Recent studies indicate that over 80% of cases of hospitalized people suffering from a disease are directly related to the use of contaminated water supplies or inadequate sanitation facilities¹³. During recent years Zimbabwe has experienced an increase in waterborne diseases including dysentery and cholera outbreaks in areas not previously affected. A total of 207 cases of cholera and 14 deaths have been reported in Manicaland Province between January and July 2005¹⁴.

Inadequate water sources and sanitation structures have also a detrimental impact on people infected and affected by HIV and AIDS as it is understood that safe excreta disposal structures and safe water requirements are three times higher for these particular groups. These vulnerable household categories, including Orphans and Other Vulnerable Children (OVCs) and Child Headed Households (CHH) are the most affected by shortages of safe water as they lack comprehensive coping mechanisms and have to spend long periods fetching water from long distances.

The current scenario requires continuous support to water and sanitation programmes in Zimbabwe. During the last three years the European Commission has been one of the largest donors in funding emergency water and sanitation programmes. Given the continuous decline of the sector it is considered that Commission’s support to such programmes is to be maintained. However the approach to be applied has to be coherent with relief and humanitarian water and sanitation programmes. Those programmes have to be clearly targeted at particular groups or areas at risk and focused more on quality (relevance of the water points to be rehabilitated in relation to impact on the population in need) than on quantity (number of water points rehabilitated) of interventions. Following that principle, the reduction of the water and sanitation funding component will not affect the overall assistance channelled through DG ECHO. DG ECHO support will be linked to interventions funded from the “*Water Facility Call for Proposals*” managed by the Commission’s Delegation in Harare, which has to date received requests for a total funding of approximately EUR 7.3 million for a maximum implementation period of 5 years¹⁵. The EC Water Facility funding mechanism is considered – as a long-term mechanism - to be more adequate to address the overall water and sanitation situation in Zimbabwe.

¹³ Water and Sanitation Working Group, UNICEF

¹⁴ Weekly Epidemiological Report: Ministry of Health and Child Welfare, 2005

¹⁵ Amount requested on proposals received. Proposals will be evaluated in the next two months

IDPs

In May 2005 the Government of Zimbabwe started the Operations “Restore Order” and “Drive Out the Trash” (“Murambatsvina”) and most recently “Operation Stay Better” (“Garikai”). The aim of this series of operations was to stop illegal trading and black market activities that according to the GoZ were undermining economic recovery plans. Authorities have argued that informal settlements and shanty dwellings have not only been erected illegally and without proper permits, have no proper sanitation conditions and pose a health hazard but are also main concentration areas of illegal and criminal activities. The operations affected all main cities and towns of Zimbabwe including Harare, Bulawayo, Victoria Falls, Mutare, Masvingo and Kariba.

The Zimbabwean government claims that the operation was meant to restore order to the cities and dignity to the people. However, there is no rationale that can justify the blatant violation of human rights and the untold misery and chaos that the illegal evictions and demolitions have caused¹⁶. The United Nations Special Envoy to Zimbabwe assessed in her report, dated July 2005, that 700,000 individuals countrywide are affected by the Government operation and in urgent need of humanitarian assistance in the form of shelter, food and non-food items (NFIs). In summer 2005 the GoZ launched Operation “Garikai” (“Stay better”) aimed at providing shelter to the groups affected by the demolitions. There are however many concerns as regards the target criteria used by GoZ to define potential beneficiaries of the operation “Garikai”, as GoZ seems to have failed to provide assistance to the most affected groups. The United Nations Humanitarian Coordinator together with different UN agencies and other humanitarian actors have encountered a number of barriers from the GoZ in their attempt to provide assistance to the affected population.

Apart from the groups affected by the recent urban evictions, there is a continuous need of assistance to the ex-commercial farm workers. The Fast Track Land Reform programme, started by the GoZ in 2000, resulted in an estimated 200,000 farm workers being displaced from commercial land. Together with their families this group is believed to be as many as 1 million people¹⁷. The displacement has been exacerbated by the economic conditions on the former commercial farms. Some of the new settlers have been unable to farm the newly allocated land due to different reasons including lack of financial capital, low production capacity, lack of essential agricultural inputs and more significantly lack of farming and agricultural skills. Due to the constraints mentioned new farmers have been unable to provide services to the farm worker population – salaries, health and educational provisions - as provided by former farmers. Former farm workers lost their source of income and have turned into short term or seasonal workers on other farms. The rapid impoverishment of the ex-farm workers community lead to massive exodus from the former commercial farms in search of better economic opportunities. Commercial Farms and other farmlands continue nowadays to be seized resulting in an increased number of displaced and re-displaced ex-commercial farm workers. In 2005 DG ECHO provided assistance to the rural and urban mobile vulnerable populations. It is imperative, if access continues to be granted to the humanitarian community by the authorities, that further assistance is provided to urban and rural displaced groups in the form of food, non-food items, shelter, water and sanitation and livelihood recovery assistance.

¹⁶ “Zimbabwe: Mass Evictions Lead to Massive Abuses”, Human Rights Watch, September 2005

¹⁷ International Organization for Migration, IOM

Target population and regions concerned:

Province	Target Population	Needs
Matabeleland South	Rural Vulnerable Communities	Food Security including Agriculture
Matabeleland North	Rural Vulnerable Communities	Food Security including Agriculture
Midlands	OVCs	Integrated Child Support
Manicaland	Rural Vulnerable Communities, OVCs and IDPs	Food Security including Agriculture, Water and Sanitation, Integrated Child Support, NFIs
Mashonaland Central	Rural Vulnerable Communities, OVCs and IDPs	Food Security including Agriculture, Water and Sanitation, Integrated Child Support, NFIs
Mashonaland West	Rural Vulnerable Communities, OVCs and IDPs	Food Security including Agriculture, Water and Sanitation, Integrated Child Support, NFIs
Mashonaland East	Rural Vulnerable Communities, OVCs and IDPs	Food Security including Agriculture, Water and Sanitation, Integrated Child Support, NFIs

HIV/AIDS, Orphans and Other Vulnerable Children (OVC)

Zimbabwe is one of the hardest hit countries by the HIV epidemic with an adult seroprevalence rate estimated at 21.3%. An estimated 1.8 million people were living with HIV/AIDS in 2004.¹⁸ As a result life expectancy has dropped from 61 years during the early 1990s to 35 years by the end of 2004. This has huge social implications and also reflects the severity of the HIV/AIDS pandemic and its impact on the labour force. During a recent national survey it was found that half of all recorded deaths were in the productive age group of 20-45.¹⁹ Mortality in women peaks earlier than men and is increasing at a faster rate than for men.

The drop in life expectancy has the devastating effect of orphaning generations of children. In 2005 alone 180,000 children lost a parent. Orphans will account for 25 per cent of children in 2006.²⁰ Of the estimated 1.3 million orphans in Zimbabwe in 2003, about 75 per cent have been orphaned by AIDS. There is growing evidence that orphans made vulnerable by HIV/AIDS are disadvantaged in numerous and often devastating ways. In addition to the trauma of witnessing the sickness and death of one or both parents, they are likely to be poorer and less healthy than non-orphans are. They are more likely to suffer damage to their cognitive and emotional development, less likely go to school, more likely to be malnourished and subjected to the worst forms of child labour. Recent research shows that adolescent girls that are orphaned may be up to three times more likely to become infected with HIV than their non-orphaned peers.²¹

The key challenge for DG ECHO is to provide support, in accordance with its mandate, to interventions that can assist orphans and OVC in the Zimbabwean context where traditional

¹⁸ UNAIDS, UNICEF, WHO [Zimbabwe: epidemiological fact sheets on HIV/AIDS and sexually transmitted infections](#); FactSheet – 1 September 2004; More than half of all new infections occur among young people, especially girls.

¹⁹ Ministry for Health and Child Welfare Zimbabwe, 2004

²⁰ UNICEF « Nutrition Fact Sheet » June 2004

²¹ International HIV/AIDS Alliance 2003; Africa's Orphaned Generations, UNICEF 2003.

community and Government-based support mechanisms have been weakened by the current complex humanitarian situation.

Coordination

The presence of a significant number of international aid agencies and non-governmental organisations and limited access to reliable information on the humanitarian situation in the country bring with it the risk of duplication and overlap of humanitarian interventions. FAO and UNICEF already play an important role as leading agencies in sectoral co-ordination of humanitarian actors' interventions in respectively two main sectors of DG ECHO operations in Zimbabwe: food security and water and sanitation.

The new office of UNOCHA, that will be fully operational as from January 2006 aims at improving coordination, transparency and awareness of overall humanitarian activities. As recurrent international awareness is given to the crisis in Zimbabwe, donor activity is likely to continue. With this will come the need for coordination to be even better amongst those channelling aid to the vulnerable.

Section 4 Proposed DG ECHO strategy

Section 4.1 Coherence with DG ECHO's overall strategic priorities

The strategy proposed under this decision is consistent with the overall DG ECHO strategic priorities in four ways:

- **Needs-based approach:** Geographic priorities in DG ECHO are defined every year by a combination of field level needs assessments and analyses of aggregated data on relevant humanitarian indicators (food insecurity, access to water and sanitation facilities, IDPs, mortality and morbidity rates, malnutrition rates, OVCs, PLWHA etc). There is also a comprehensive consultation of humanitarian actors and stakeholders. Zimbabwe has been identified as one of the countries most affected by poverty, natural and man-made disasters in DG ECHO's Global Humanitarian Needs Assessment.
- **Humanitarian crisis:** The situation in Zimbabwe continues to be of major concern. DG ECHO will continue support humanitarian interventions in order to mitigate the impact of an enduring crisis on the most vulnerable population groups. In accordance with DG ECHO's policy as a humanitarian donor, DG ECHO's response to the crisis, which resulted from combination of major policy constraints (e.g. Land Reform process), continued bad governance, the devastating effects of the HIV/AIDS pandemic and erratic weather conditions, must be limited to and pertinent to its emergency mandate and type of response which is short-term in nature.
- **Promoting quality humanitarian aid through systematically mainstreaming cross-cutting issues into its operations:** Support to cross-cutting issues will be provided by mainstreaming them into the individual projects identified by the partners (e.g. a non-exhaustive list of issues may include HIV/AIDS, gender, women and children, protection, co-ordination. etc).
- **Water and Sanitation:** Water and Sanitation interventions will remain one of the main sectoral priorities for DG ECHO's in Zimbabwe, in order to address scarcity as

well as quality of water supply: in context of health issues related to water-borne diseases and in support of food security projects.

The Commission's response will be to focus on an integrated cross-sector package of water and sanitation, food security, non-food items, protection and coordination, with particular attention being paid to DG ECHO's strategic priorities, vulnerable groups (covering internally displaced population, PLWHA, OVC etc) improved water coverage and food security. Food security interventions will, on the one hand reduce the reliance of the affected populations on food aid, and on the other, restore the dignity of the people by increasing their self-sufficiency. DG ECHO's interventions will as such complement WFP's food distributions and in the medium-term possibly lead to a decrease in the need for food distributions. Food security interventions can improve IDP's potential for increasing their own capacity for providing food security at household level.

Section 4.2 Impact of previous humanitarian response

DG ECHO has been present in Zimbabwe since June 2002 providing funding for humanitarian aid projects implemented by UN Agencies, International Organizations, the Red Cross and various International NGOs aiming at alleviating the deterioration of the humanitarian situation in Zimbabwe.

Since 2002 to date DG ECHO has adopted 6 financial decisions for a total of EUR 68,872,692 to respond to the growing needs of the most vulnerable populations in Zimbabwe, benefiting beneficiaries as follows²²:

YEAR	EUROS	BENEFICIARIES	SECTORS
2002	15,476.899.00	2,146,047	Food Security (Agriculture); Home Based Care – HIV/AIDS; Water and Sanitation; Nutrition; UN Co-ordination; Orphans & Other Vulnerable Children; and Internally Displaced Populations.
2003	23,395,793.00	3,157,081	
2004	15,000,000.00	1,740,233	
2005	15,000,000.00	1,331,442	Food Security (Agriculture); Food Aid; Water and Sanitation; Internally Displaced Populations; and Orphans & Other Vulnerable Children.

Despite humanitarian interventions to date, we are still bearing witness to a persistent crisis in Zimbabwe in socio-economical and food insecurity terms. The deepening crisis results from failed economic programmes and poor governance together with erratic rainfall patterns, widespread disruptions in food availability due to continuous abortive harvests, and extreme levels of prevailing poverty undermining livelihood strategies due to the HIV/AIDS pandemic.

However it is too early to give a complete picture of the results of DG ECHO's humanitarian response in 2005 as the programmes are on-going, the expected results can be indicated as follows:

Food Security (Agriculture): improved food availability of targeted households through the production of improved high yielding crops, supported through extension services and

²² Operational statistics by ECHO Technical Support Office in Harare.

training and hedging against drought with the use of drip kits and preservation of communal draught power resource, namely cattle, through the rehabilitation of existing infrastructures.

Food Aid – Home Based Care: household vulnerability does not increase further for food insecure and HIV/AIDS infected/affected families and OVCs in the Masvingo, Matebeleland North and South provinces.

Water & Sanitation: Reduction of stress on rural populations caused by limited and difficult access to safe drinking water through construction and/or rehabilitation of safe water sources and construction of basic sanitation facilities. Increased knowledge of participatory health and hygiene practices and increased community based management and capacity to maintain water points and sanitation facilities.

Internally Displaced Populations: Living conditions of IDPs are improved through the provision of non-food items, livelihood recovery and access to water and sanitation facilities.

Orphans and Other Vulnerable Children: OVCs and young people are reached with psychosocial care, information, skills and support required to protect themselves from HIV infection. 2,000 most vulnerable OVCs affected by displacements are provided with basic non-food assistance. Co-ordination of nutrition and water and sanitation activities is improved.

Section 4.3 Coordination with activities of other donors and institutions

The persistent crisis and deteriorating humanitarian situation in Zimbabwe has led to the continuous attention of humanitarian donors. The country continues to receive support from a variety of donors, including the EC. The Commission provides a large share of humanitarian aid to Zimbabwe and support to many NGOs and UN agencies. Other donors currently present in the country are USAID, DFID, Dutch Embassy, SIDA, CIDA, and UN Agencies. On the field level monthly sectoral co-ordination meetings on: Food Aid, Food Security, Agriculture Recovery, Nutrition, Health, Urban Sector, Education, IDP/Protection, and HIV/AIDS, Child Protection, and Water and Sanitation are organised with other humanitarian operators to avoid any overlapping, to examine and adopt the most effective solutions, and to maximise the impact of the funds available. The Commission's possible future financial support to OCHA, on the basis of an upcoming OCHA project proposal, will also contribute to strengthening humanitarian co-ordination.

Section 4.4 Risk assessment and assumptions

The March 2005 election, preceded by a certain political tension, was won by ZANU-PF, which secured 78 of the 120 contested seats, while the opposition Movement for Democratic Change (MDC) dropped to 41 - down from the 58 seats it had in 2000. Furthermore, President Robert Mugabe appointed an additional 30 deputies in the 150-seat parliament, giving him the numbers required to introduce constitutional changes.

Despite the fact that the governing ZANU-PF party has succeeded in consolidating power, the situation in the country remains volatile. The Operations "Restore Order" and "Drive Out the Trash" ("Murambatsvina") started by the Government two months after the elections, left up to 700,000 people in urban and sub-urban areas across the country homeless and deprived of their livelihood. The Government's rationale behind cracking down on allegedly illegal dwellings and small businesses in town and cities and subsequently displacing its inhabitants to rural areas or different urban dwelling seems to be, among others, "a punishment" for the urban populace for having voted largely for the opposition party (MDC) which traditionally won the votes in most of Zimbabwean cities. The operation ended formally in July, the

displaced population remain however in a highly politicized context. Large parts of the population have moved or have been forcibly displaced to rural areas and this has additionally weakened already over-stretched coping capacities of many rural households.²³

Apart from Government' incoherent approach towards assistance that the UN proposes for the victims of "Restore Order" evictions, no major difficulties in access for humanitarian organisations to project areas have been noted so far. The food security operations carried out by international humanitarian actors were seriously affected last year by the reinforcement of a stricter law on seed importation procedures introduced by the Government with a minimum delay prior to the main cropping season 2004/2005. This resulted in some food security operations experiencing significant delays, thus reducing their effectiveness and efficiency. The NGOs have not noticed similar disturbances prior to the upcoming 2005/2006 cropping season.

The Government refusal to recognise a "humanitarian crisis" in the country and, and more importantly, to renew the Memorandum of Understanding with WFP may jeopardise the contributions of certain donors to WFP. This context may further weaken the framework in which humanitarian organisations have to operate.

In February 2005 the GoZ Cabinet did not sign the NGO Bill and returned it to Parliament. The Bill however remains the most serious threat to humanitarian organisations. It violates the right of freedom of association and significantly extends government control over organizations provided for in the current Private Voluntary Organizations (PVO) Act, which it seeks to repeal. The PVO Act was deemed to limit civil liberties by the African Commission for Human and People's Rights. The Bill denies local NGOs that are involved in "issues of governance" access to foreign funding (clause 17) and prohibits the registration of foreign NGOs engaged in "issues of governance"(clause 9). Like the PVO Act, the Bill gives the Minister of Public Service, Labour and Social Welfare absolute control over the appointment of the NGO Council, which decides on registration and de-registration.²⁴

The general perception is that the Government aims at undermining the work of NGOs operating in the field of human rights and good governance, in particular indigenous organisations. These organisations are perceived as supporting the political opposition and exerting a negative influence on the population. As such, humanitarian organisations are not targeted directly by the government but they *are* under threat. However in the particular case of certain vulnerable groups, such as people affected by the operation "Restore Order", the Government proved to be highly obstructive and providing assistance to these groups proved to be extremely complex and difficult.

Taking into consideration the general terms in which the NGO Bill was drafted and the continuous administrative and operational problems that international NGOs continue to face in Zimbabwe, it is certain that they are also under direct threat. The NGO Bill, if signed, may limit considerably the capacity of humanitarian organisations to implement relief projects. The NGO Bill gives discretionary powers to the government to decide if an NGO is allowed to work or not.

²³DG ECHO continuously provides indirect assistance to uprooted population by supporting rural communities, some of which are or will be hosting displaced people, through water and sanitation and food security programmes.

²⁴ Human Rights Watch briefing from 3rd December 2004

Section 4.5 Components of DG ECHO Strategy²⁵

4.5.1 Principal objective

To mitigate the socio-economic breakdown and deteriorating situation of vulnerable groups in Zimbabwe.

4.5.2 Specific objectives

- Specific objective 1: To reinforce immediate food security needs at household level by supporting agricultural interventions and linking them with food security long-term recovery programmes.
- Specific objective 2: To increase access to safe water sources and basic sanitation facilities by supporting water and sanitation interventions.
- Specific objective 3: To contribute towards meeting emergency needs of IDPs and other vulnerable groups by providing an integrated assistance. To enhance general and sectoral coordination of humanitarian actors and their interventions.
- Specific objective 4: To maintain technical assistance capacity in the field, to assess needs, appraise project proposals and to coordinate and monitor the implementation of operations.

Components:

- Specific objective 1: Emergency agriculture support to targeted vulnerable populations through the provision of seeds, fertilizer, training, improved farming techniques and micro irrigation kits. Enhancement of the coordination mechanism in the food security sector. Mainstreaming of HIV/AIDS prevention, linking information on HIV/AIDS with behavioural change approach.
- Specific objective 2: Construction and/or rehabilitation of water points (boreholes, deep wells and open wells); and construction of sanitation facilities. Mainstreaming of HIV/AIDS prevention, linking information on HIV/AIDS with behavioural change approach.

²⁵ Grants for the implementation of humanitarian aid within the meaning of Council Regulation (EC) No.1257/96 of 20 June 1996 concerning humanitarian aid are awarded in accordance with the Financial Regulation, in particular Article 110 thereof, and its Implementing Rules in particular Article 168 thereof (Council Regulation (EC, Euratom) No 1605/2002 of 25 June 2002, OJ L248 of 16 September 2002 and Commission Regulation (EC, Euratom) No 2342/2002 of 23 December 2002, OJ L 357 of 31 December 2002).

Rate of financing: In accordance with Article 169 of the Financial Regulation, grants for the implementation of this Decision may finance 100% of the costs of an action.

Humanitarian aid operations funded by the Commission are implemented by NGOs and the Red Cross organisations on the basis of Framework Partnership Agreements (FPA) (in conformity with Article 163 of the Implementing Rules of the Financial Regulation) and by United Nations agencies based on the Financial and Administrative Framework Agreement (FAFA). The standards and criteria established in ECHO's standard Framework Partnership Agreement to which NGO's and International organisations have to adhere and the procedures and criteria needed to become a partner may be found at http://europa.eu.int/comm/echo/partners/index_en.htm.

- Specific objective 3: Provision of integrated assistance to IDPs and other vulnerable groups, including non-food items, water and sanitation, hygiene products and HIV/AIDS prevention, mitigation and awareness. Enhancement of general and sectoral coordination mechanisms, including mapping, information systems and assessments.
- Specific objective 4: The Commission will maintain DG ECHO support office in Harare (Zimbabwe). The office will provide technical assistance capacity and support in the implementation of relief projects.

4.5.3 Results

- Specific objective 1: Improved food security conditions in targeted rural vulnerable communities, including OVCs and PLWHA.
- Specific objective 2: Improved access to safe drinking water and sanitation facilities in rural communities. Improved knowledge of health and hygiene management.
- Specific objective 3: Reinforced food security and well being of IDPs and other vulnerable groups, OVC's and PLWHA, by increasing availability of essential items and HIV/AIDS protection. Strengthened co-ordination mechanism of humanitarian actors as a means to improve effectiveness and efficiency of the humanitarian interventions.
- Specific objective 4: Transparent and effective monitoring and supervision of ECHO operations. In order to maximize the impact of the humanitarian aid on the beneficiaries, the Commission will maintain an ECHO support office in Harare. This office will appraise project proposals, co-ordinate and monitor the implementation of humanitarian operations financed by the Commission. The office will provide technical assistance capacity and the necessary logistics for the achievement of its tasks.

Section 4.6. Duration

The duration for the implementation of this decision will be 18 months. Considering that the situation in Zimbabwe will remain unpredictable and highly volatile, an implementation duration of 18 months is necessary for this decision, thus allowing maximum flexibility to adapt the implementation of relief operations to the prevailing unstable and uncertain working environment. Humanitarian operations funded by this decision must be implemented within this period. It is expected that the operations funded under this decision will start in March 2006 and be completed no later than 12 months later. If the implementation of the actions envisaged in this decision is suspended due to force majeure or any comparable circumstance, the period of suspension will not be taken into account for the calculation of the duration of the decision.

Expenditure under this Decision shall be eligible from 01/03/2006.
Start Date: 01/03/2006

Section 4.7 Amount of decision and strategic programming matrix

Principal objective: *To mitigate the socio-economic breakdown and deteriorating situation of vulnerable groups in Zimbabwe.*

Specific objectives	Allocated amount by specific objective (EUR)	Possible geographical area of operation	Activities	Potential partners ⁹
Specific obj.1: To reinforce immediate food security needs at household level by supporting agricultural interventions and linking them with food security long-term recovery programmes.	3, 600, 000	Manicaland, Matabeleland South, Matabeleland North, Midlands	Provision of seeds, fertilizer, training, improved farming techniques and micro irrigation kits. Enhancement of coordination mechanism in the food security sector. Mainstreaming of HIV/AIDS prevention, linking information on HIV/AIDS with behavioural change approach.	- COSV - MILAN - HELP - UN - FAO - WORLD VISION – UK
Specific obj.2: To increase access to safe water sources and basic sanitation facilities by supporting water and sanitation interventions.	4, 400, 000	Masvingo, Manicaland, Matabeleland South, Matabeleland North, Midlands, Mashonaland Central, Mashonaland West, Mashonaland East, Harare and Bulawayo.	Construction and/or rehabilitation of water points (boreholes, deep wells and open wells); and construction of sanitation facilities. Mainstreaming of HIV/AIDS prevention, linking information on HIV/AIDS with behavioural change approach.	- ACF - FRA - GERMAN AGRO ACTION - UN - UNICEF - WORLD VISION DEU
Specific obj.3: To contribute towards meeting emergency needs of IDPs and other vulnerable groups by providing an integrated assistance. To enhance general and sectoral coordination of humanitarian actors and	2, 600, 000	Nationwide	Provision of integrated assistance to IDPs and other vulnerable groups, including non-food items, water and sanitation, hygiene products and HIV/AIDS prevention, mitigation and awareness. Enhancement of general and sectoral coordination mechanisms, including mapping, information systems and assessments.	- IOM - UN - UNICEF - UN - OCHA

their interventions.				
Specific obj.4: To maintain technical assistance capacity in the field, to assess needs, appraise project proposals and to coordinate and monitor the implementation of operations.	200, 000	Nationwide and in the Southern Africa Region.	DG ECHO's office in Harare will provide technical assistance capacity and support in the implementation of relief projects.	
Reserve, max. 10% of the total amount	1, 200, 000			
TOTAL	12, 000, 000			

5. EVALUATION

Under article 18 of Council Regulation (EC) No.1257/96 of 20 June 1996 concerning humanitarian aid the Commission is required to "regularly assess humanitarian aid operations financed by the Community in order to establish whether they have achieved their objectives and to produce guidelines for improving the effectiveness of subsequent operations." These evaluations are structured and organised in overarching and cross cutting issues forming part of DG ECHO's Annual Strategy such as child-related issues, the security of relief workers, respect for human rights, gender. Each year, an indicative Evaluation Programme is established after a consultative process. This programme is flexible and can be adapted to include evaluations not foreseen in the initial programme, in response to particular events or changing circumstances. More information can be obtained at:

http://europa.eu.int/comm/echo/evaluation/index_en.htm

6. BUDGET IMPACT ARTICLE 23 02 01

	CE (EUR)
Budget Appropriations for 2006	470,429,000
Supplementary Budgets	-
Transfers	-
Total Available Credits	470,429,000
Total amount of the decision	12,000,000

7. ANNEXES

Annex 1: Statistics on the humanitarian situation

Annex 2: Map of country and location of DG ECHO operations

Annex 3: List of previous DG ECHO operations

Annex 4: Other donors' assistance

Annex 5: List of abbreviation

Annex 1: Statistics on the humanitarian situation in the Southern Africa

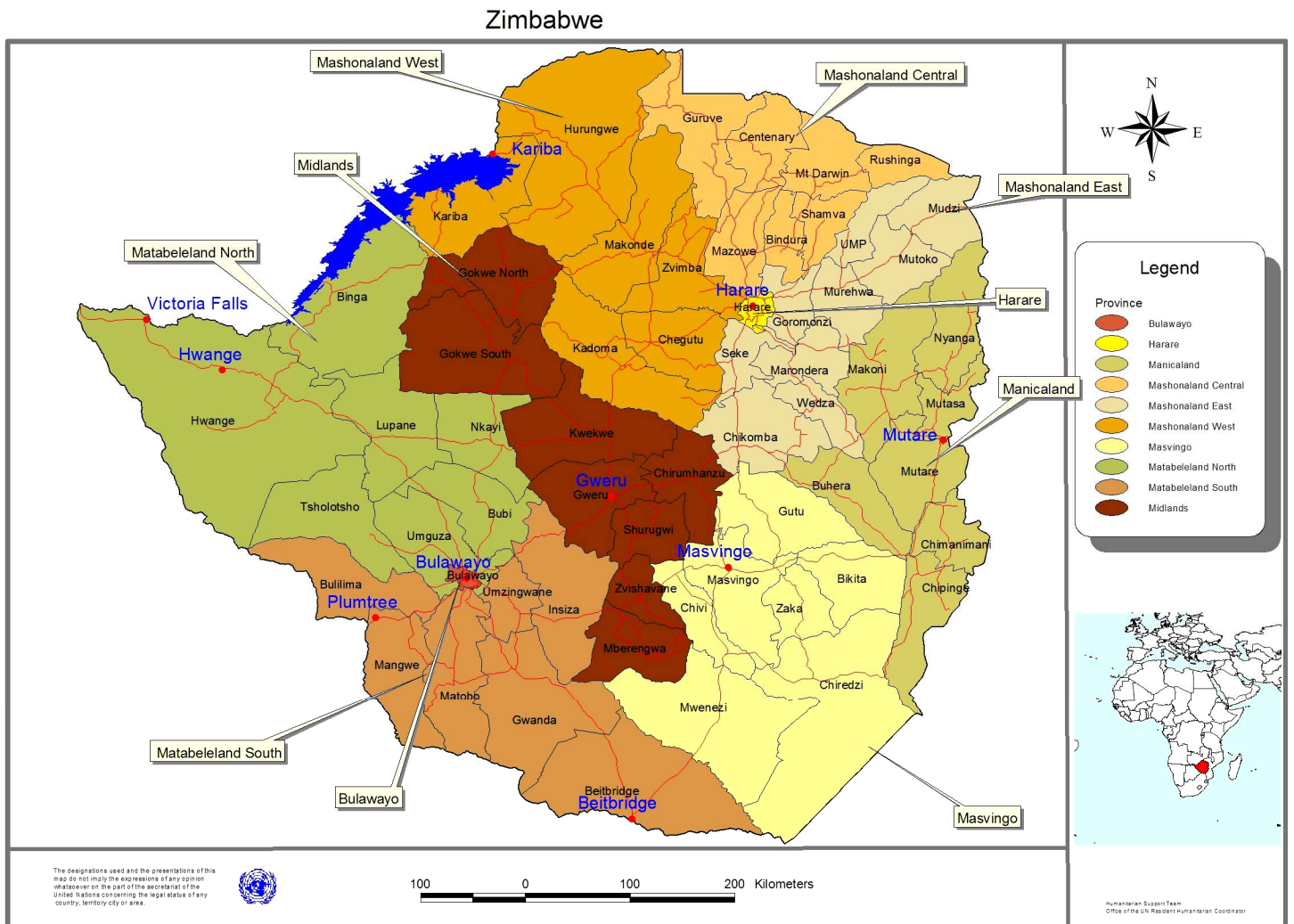
Global Index for Humanitarian Needs Assessment (GNA 2006)		I	II	III	IV	V	VI	VII	VIII
DG ECHO Humanitarian Aid Office GNA 2005		HDR 2005 UNDP Human Developme nt Index HDI	HDR 2005 UNDP Human Poverty Index HPI	CRED Natural Disasters	HIK 2005 Conflicts	IDPs & Refugees/ Total Population	UNICEF HDR2005 Children under WEIGHT for age as % of Total population	UNICEF Children Mortality Rate Under 5	OECD ODA / Capita
Countries ranking including ODA		2006	2005		2005	2005			
Rank	Country	Average	Score	Score	Score	Score	Score	Score	Score
70	LESOTHO	1,75	3	3	2	0	0	2	2
75	MALAWI	2,125	3	3	2	0	1	2	3
86	MOZAMBIQUE	1,875	3	3	3	0	0	2	3
116	SOUTH AFRICA	1,625	2	2	1	0	2	2	2
120	SWAZILAND	2	3	3	2	0	1	2	3
138	ZAMBIA	2,625	3	3	3	0	4	3	3
139	ZIMBABWE	2,375	2	3	3	0	4	2	3

Key:		Score parameters1: GNA average	
3	high need	>	2,0
2	medium need		
1	low need	<	1,0
0	No need		

Key:		Score parameters2: IDPs & Refugees / Total population	
6	high need	>	5%
5		>	1,7%
4	medium need	>	0,4%
3		>	0,17%
2	low need	>	0,06%
1		>=	0,005%
0	no need	<	0,005%

Source: The draft DG ECHO Global Index for Humanitarian Needs Assessment 2006. The information used in the GNA comes from OECD, CRED, HIK and UN organisations. It complements needs assessments at field level. The above table reflects the global humanitarian situation in these countries in a comparative perspective across eight aggregated indicators. It draws on data collected by international organisations like UNICEF, UNHCR etc in recent years at national level. The reliability of the data may be limited given the unstable environment and time in which they were collected. Due to the high level of aggregation they may also not precisely reflect existing "pockets of needs" at subnational level. They can nevertheless provide a general indication on the severity of the humanitarian situation in a comparative perspective in the absence of other, more reliable data. The method is based on a ranking of each country for each indicator into a scale from 1 (low need) to 3 (high need) and an average across indicators. However, the scale for indicator five ranks from 0 (no need) to 6 (high need) providing a more detailed ranking of needs.

Annex 2: Map of country and location of DG ECHO operations (nationwide)



Annex 3: List of previous DG ECHO operations

List of previous DG ECHO operations in Zimbabwe				
		2003	2004	2005
Decision number	Decision type	EUR	EUR	EUR
ECHO/ZWE/210/2003/01000	Non emergency	13,000,000		
ECHO/TPS/210/2003/12000*	Non emergency	10,370,793		
ECHO/ZWE/210/2004/01000	Non emergency		15,000,000	
ECHO/ZWE/210/2005/01000	Non emergency			15,000,000
	Subtotal	23,370,793	15,000,000	15,000,000
	Total (y-2)+(y-1)+(y)			53,370,793

Dated : 23/11/2005

Source : HOPE

* Regional decision adopted for southern Africa, under which the amount indicated was allocated to Zimbabwe

Annex 4: Other Commission services / other donors' assistance

Donors in Zimbabwe the last 12 months					
1. EU Members States (*)		2. European Commission		3. Others	
	EUR		EUR		EUR
Austria		ECHO	15,000,000	US	
Belgium	600,000	Other services	55,000,000 (3)	Canada	202,577
Cyprus				Japan	415,328
Czech republic				Norway	19,921
Denmark				Switzerland	348,976
Estonia				South Africa	10,200
Finland				Australia	629,217
France	1,012,884 (2)			New Zealand	57,478
Germany	4,164,635			Private donors	1,265,369
Greece					
Hungary					
Ireland	900,000				
Italy	921,400				
Latvia					
Lithuania					
Luxemburg					
Malta					
Netherlands	1,903,05				
Poland					
Portugal					
Slovakia					
Slovenie					
Spain					
Sweden	37,300				
United kingdom	54,598 (2)				
Subtotal	9,594,422	Subtotal	70,000,000	Subtotal	2,949,066
		Grand total	82,543,488		

Dated : 24/11/2005

1 Source : DG ECHO 14 Points reporting for Members States. <https://hac.cec.eu.int>

2 Source: OCHA. The OCHA figures were in US\$ and were converted at a rate of US\$1 = €0.830565

3 Source: EC services

* Donated amount in 2005

Annex 5: List of Abbreviations

ACF	Action Contre le Faim / Action Against Hunger
CAP	Consolidated Appeal Process
COSV	Comitato di Coordinamento delle Organizzazioni per il Servizio Volontario
DG ECHO	Directorate General for Humanitarian Aid (ECHO), European Commission
EC	European Commission
ECHO	European Community Humanitarian Office
EDF	European Development Fund
EU	European Union
FAFA	Financial and Administrative Framework Agreement
FAO	Food and Agriculture Office
FPA	Framework Partnership Agreement
GAA	German Agro-Action
GNA	Global Needs Assessment
GoZ	Government of Zimbabwe
GP	Global Plan
HDI	Human Development Index
HDR	Human Development Report
HIV/AIDS	Human Immuno-Deficiency Virus/Acquired Immuno-Deficiency Syndrome
HPI	Human Poverty Index
IOM	International Organisation for Migration
IPD	Internally Displaced People
NFI s	Non-food Items
NGOs	Non-Governmental Organisations
MDC	Movement for Democratic Change
MoU	Memorandum of Understanding
OCHA	Office for Co-ordination of Humanitarian Aid
OVC	Orphans and Other vulnerable children
PLWHA	People Living with HIV/AIDS
UDI	Unilateral Declaration of Independence
UN	United Nations
UNAIDS	Joint United Nations Program on HIV/AIDS
UNCT	United Nations Country Team
UNICEF	United Nations Children Fund
WFP	World Food Programme
WVI	World Vision International
ZANU	Zimbabwe African National Union
ZAPU	Zimbabwe African People's Union
ZIMVAC	Zimbabwe Vulnerability Assessment Committee

COMMISSION DECISION

of

**on the financing of humanitarian operations from the budget of the European Union in
ZIMBABWE**

THE COMMISSION OF THE EUROPEAN COMMUNITIES,

Having regard to the Treaty establishing the European Community,
Having regard to Council Regulation (EC) No.1257/96 of 20 June 1996 concerning humanitarian aid²⁶, and in particular Article 15(2) thereof,

Whereas:

- 1) Zimbabwe will continue to face a protracted emergency situation due to political instability and socio-economic breakdown;
- 2) The country is faced with insufficient agricultural production, high HIV/AIDS infection rates, and a rapidly growing number of AIDS orphans estimated at 1.1 million living under extreme vulnerability;
- 3) Of particular concern are the protection and living conditions of the estimated 800,000 internally displaced population and a further 700,000 individuals affected by the clean-up campaign;
- 4) It is essential to continue supporting the implementation of an integrated emergency intervention to reduce the extreme vulnerability of population groups at particular risk in Zimbabwe;
- 5) In order to maximize the impact of humanitarian aid for the victims, it is necessary to maintain a technical assistance capacity in the field;
- 6) An assessment of the humanitarian situation leads to the conclusion that humanitarian aid operations should be financed by the Community for a period of 18 months;
- 7) It is estimated that an amount of 12,000,000 EUR from budget line 23 02 01 of the general budget of the European Union is necessary to provide humanitarian assistance to extreme vulnerable populations, taking into account the available budget, other donors' interventions and other factors;
- 8) In accordance with Article 17 (3) of Regulation (EC) No.1257/96 the Humanitarian Aid Committee gave a favourable opinion on 26 January 2006.

²⁶ OJ L 163, 2.7.1996, p. 1-6

HAS DECIDED AS FOLLOWS:

Article 1

1. In accordance with the objectives and general principles of humanitarian aid, the Commission hereby approves a total amount of 12,000,000 EUR for humanitarian aid operations for assistance to vulnerable population groups in Zimbabwe, by using line 23 02 01 of the 2006 general budget of the European Union.

2. In accordance with Articles 2 and 4 of Regulation (EC) No.1257/96, the humanitarian operations shall be implemented in the pursuance of the following specific objectives:

- To reinforce immediate food security needs at household level by supporting agricultural interventions and linking them with food security long-term recovery programmes.
- To increase access to safe water sources and basic sanitation facilities by supporting water and sanitation interventions.
- To contribute towards meeting emergency needs of IDPs and other vulnerable groups by providing an integrated assistance. To enhance general and sectoral coordination of humanitarian actors and their interventions.
- To maintain technical assistance capacity in the field, to assess needs, appraise project proposals and to coordinate and monitor the implementation of operations.

The amounts allocated to each of these objectives and to the reserve are listed in the annex to this decision.

Article 2

Without prejudice to the use of the reserve, the Commission may, where this is justified by the humanitarian situation, re-allocate the funding levels established for one of the objectives set out in Article 1(2) to another objective mentioned therein, provided that the re-allocated amount represents less than 20% of the global amount covered by this Decision and does not exceed EUR 2,000,000.

Article 3

1. The duration for the implementation of this decision shall be for a maximum period of 18 months, starting on **1 March 2006**.

2. Expenditure under this Decision shall be eligible from **1 March 2006**.

3. If the operations envisaged in this Decision are suspended owing to *force majeure* or comparable circumstances, the period of suspension shall not be taken into account for the calculation of the duration of the implementation of this Decision.

Article 4

This Decision shall take effect on the date of its adoption.

Done at Brussels,
For the Commission

Annex: Breakdown of allocations by specific objectives

Specific objectives	Amount per specific objective (EUR)
1. To reinforce immediate food security needs at household level by supporting agricultural interventions and linking them with food security long-term recovery programmes.	3,600,000
2. To increase access to safe water sources and basic sanitation facilities by supporting water and sanitation interventions.	4,400,000
3. To contribute towards meeting emergency needs of IDPs and other vulnerable groups by providing an integrated assistance. To enhance general and sectoral coordination of humanitarian actors and their interventions.	2,600,000
4. To maintain technical assistance capacity in the field, to assess needs, appraise project proposals and to coordinate and monitor the implementation of operations.	200,000
RESERVE	1,200,000
TOTAL	12,000,000