



# Africa AHEAD Zimbabwe



Applied Health Education and Development



Upgrading Protected family wells in Makoni District, Manicaland, Zimbabwe (Supported by SKAT Foundation)

## Biennial Report January 2018 - December 2019

## Head Quarters for Africa AHEAD Organisation

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Community Health Club Registry:  
[www.chcahead.com](http://www.chcahead.com)

## REGISTRATION DETAILS

**Africa AHEAD-Zimbabwe**  
**Formally Zim AHEAD Trust**  
Private Voluntary Organisation  
**PVO 19/2014**

**Affiliated with Not for Profit 2005/0400379/08**  
**Africa AHEAD Association**  
95 Dorries Drive, Simons Town, South Africa

## ACRONYMS

ACF	Action Contra la Faim
AWET	Apostolic Women's Empowerment Trust
BMC	BioMed Central
CBD	Central Business District
CBF	Community Based Facilitator
CHC	Community Health Club
cRCT	Cluster Randomised Control Trial
DFID	Department for International Development (UK Aid)
DWSSC	District Water Supply & Sanitation Sub-committee
EHD	Environmental Health Department (MoHCC)
EHTs	Environmental Health Technicians
EMA	Environmental Management Agency
FAN	Food Agriculture Nutrition (Clubs)
HDI	Human Development Index
INGO	International Non Governmental Organisation
IPA	Innovation for Poverty Action
LED	Local Economic Development
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MEDRA	Methodist Development Relief Agency
MoHCC	Ministry of Health and Child Care
NAC	National Action Committee (WASH)
NGO	Non Governmental Organisation
NCU	National Coordination Unit (Secretariat to NAC- WASH)
OD	Open Defecation
ODF	Open Defecation Free
PCA	Program Cooperation Agreement
PHHE	Participatory Health and Hygiene Education
PLWD	Person living with disability
PWSSC	Provincial Water Supply & Sanitation Sub-committee
RDC	Rural District Council
SDGs	Sustainable Development Goals
VfM	Value for Money
VHW	Village Health Workers
VPM	Village Pump Mechanic
WASH	Water, Sanitation and Hygiene
ZOD	Zero Open Defecation

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## Incoming Chairman's Report - Dr Jaap Kuiper

*In December 2019, at the AGM, Dr Jaap Kuiper, was voted Chairman of the Board of Trustees taking over from Janette Hetherton who has held this position for the past three years.*

Having been a Trustee on the Board of Africa AHEAD Zimbabwe for some 4-5 years, I feel privileged to have been asked to now be the Chairperson.

During the last few years I have experienced the dedication and persistence of the staff who implement our programmes in the face of rapid and fundamental changes and challenges, carrying out the organisational vision and mission in order to deliver support, encouragement, and development to numerous communities in Zimbabwe (and beyond). As I become Chairman of Africa AHEAD, it gives me confidence to know we have an experienced and dedicated team representing many talents and interests.

If there is one lesson I have learnt in my work over the last 30 years as education professional and advisor in many countries in Africa, it is that implementation of a single aspect is never as strong as an integrative and multi-level approach that seeks to ensure the development of individuals and communities, supported by systemic growth to help ensure sustainability. As the headquarters of Africa AHEAD move to Zimbabwe, the organisation is entering a period of growth and a widening of its scope based on two fundamental trends:

1. Internationally, the Sustainable Development Goals (SDGs) are now seeking a multifaceted approach to deal with poverty, through combining health, education, climate, justice, urban development, employment, to achieve sustainable and equitable economic growth. The SDGs are being combined with the concept of the Human Development Index (HDI), posited by Amartya Sen, to provide a firm basis for a more integrated approach to community development.
2. Locally, in Zimbabwe we are experiencing a decreasing ability of the government to provide basic infrastructure, health, education, and other development pre-conditions. Together with recent natural disasters, this has severely weakened the basis for community and personal development and wellbeing. We are caught in a situation where international pressure may result in withdrawal of funding for development, further weakening communities.





## Overview: retiring CEO - Anthony Waterkeyn

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*As Co-founder of Zimbabwe AHEAD in 1999, Anthony was Chairman from 2006-2010, then Executive Director from 2010 - 2013. Between 2013 and 2017 he was Director of Advocacy based out of Africa AHEAD in the UK, and then became Chief Executive Officer until the end of 2019. After 30 years replicating the CHC Model to 12 other African countries, most notably starting the national CHC program throughout Rwanda. He remains as founder Trustee on the Board.*

In late 2018, Vitol Foundation funded an Evaluation of Africa AHEAD and our Community Health Club Model. This Evaluation recognised CHCs for achieving cost-effective and sustainable hygiene behaviour change that also strengthened social and human capital. However, the Evaluation also revealed anomalies in AA's governance structure as having become rather detached from the 'front line' operations (mainly in Rwanda and Zimbabwe) after AA had registered as a British Charity six years ago in 2013. The UK Board of Trustees and AA Executive subsequently held two Strategic Planning Meetings in London (in March & July 2019) during which it was agreed to relocate our HQ back to Southern Africa and end our British Charity status by the end of 2019.

Back in Zimbabwe at our AGM in Harare on 12<sup>th</sup> December 2019, the Zimbabwe Board of Trustees agreed to accept full responsibility for the overall governance of Africa AHEAD in Zimbabwe and they elected Dr Jaap Kuiper as new Chairman. Jaap takes over from Janette Hetherton who has most effectively held this position for the past three years. Janette took over from me when I became CEO upon Juliet's retirement in 2016. Meanwhile, Regis Matimati, our Country Director for Zimbabwe for the past eight years, has been appointed by the Board as Executive Director. This promotion is extremely well deserved for the way Regis has steered AA-Zimbabwe through some very turbulent waters over many years. As this Biennial Report reveals, Regis has managed to raise close to one million US\$ for our Zimbabwe programme by implementing Emergency projects (with significant hard-ware components) as well as a few innovative projects relating to Climate Change (Urban Resilience funded by UNICEF & UNDP) and Self-Supply (SKAT). Our staff compliment also increased to 30 personnel when all projects were running. I am particularly delighted by the fact that UNICEF is at last funding a lot of our work and this is likely to continue while Regis is determined to maintain close partnership with ACF and Christian Aid while seeking additional funding opportunities as we enter the next decade.

As retiring CEO of Africa AHEAD, I wish to offer my most sincere thanks to Prof. Richard Carter and our UK Board of Trustees, for their considerable support and loyalty over the six years that we have been registered as a British Charity. We have been strengthened and encouraged by our UK Board and remain confident that Africa AHEAD will continue to play a worthwhile role in support of community-based holistic and integrated development initiatives across Africa. I am also hugely grateful to Janette for holding the fort in Zimbabwe and wish Jaap and Regis every success heading up AA in the years ahead.

As co-founders, Juliet and I will remain on the AA Board in Zimbabwe as well as head up a small consultancy in South Africa which was registered as Africa AHEAD Association in 2005. This is not an implementing organisation but a resource for research, advocacy and training in the CHC Model as we seek to replicate the approach in additional countries across Africa, through working with MoH and international NGOs. Africa AHEAD in Zimbabwe is an indigenous southern NGO which will continue to provide the verifiable proof of the long-term sustainability and cost-effectiveness of the CHC Model.



### AHEAD Publications — Dr. Juliet Waterkeyn

*As Co-founder of Zimbabwe AHEAD, Juliet was the first Executive Director until 2003, when she undertook a doctorate researching the cost-effectiveness of the CHC Model of which she was the architect. In 2005 she and Anthony founded the consultancy Africa AHEAD to disseminate the approach internationally. From 2013 - 2016 she was CEO of Africa AHEAD UK and is now Secretary to the Board of Trustees in Zimbabwe.*

For the past three years I have been co-ordinating research by many of our past and present Africa AHEAD staff and trustees, in response to the challenge of questionable recommendations which were published in 2015 by the IPA research team of the cluster Randomised Control Trial of Community Health Clubs. Their findings after only a short 5 month period of implementation seemed to misrepresent the achievements of the community in terms of hygiene behaviour change in an intervention which was implemented by Africa AHEAD in partnership with the Ministry of Health in Rwanda.

We therefore continued to monitor the same communities for a further two years and have provided an update of achievements of the same indicators used by IPA. After over 50 drafts and three revisions, the paper was finally accepted by the BMC—Public Health Journal and will be available on line in 2020. May I express my appreciation for all co-authors who have patiently supported this drawn out process, in the hope we have managed to defend our work enabling deeper understanding of the CHC Model.

**Waterkeyn J, Waterkeyn A, Uwingabire F, Pantoglou J, Ntakarutimana A, Mbirira M, Katarwa J, Bigirimana Z, Cairncross S, Carter R.** (2019) The value of monitoring data in a process evaluation of hygiene behaviour change in Community Health Clubs to explain findings from a cluster-Randomised Controlled Trial in Rwanda. BMC Public Health. DOI: [10.1186/s12889-019-7991-7](https://doi.org/10.1186/s12889-019-7991-7)

In 2019 I worked on a paper comparing the cRCT in Rwanda and a similar scale CHC project in Zimbabwe. In both countries the level of hygiene behaviour change was highly significant with 90% compliance of similar 12 indicators in Zimbabwe (US\$4.50 per beneficiary) and 80% compliance in Rwanda (US\$13.13 per beneficiary). The paper is published online by IntechOpen as a chapter in an Open Access book.

**Waterkeyn J, Matimati R, Muringaniza A, Chingono A, Ntakarutimana A, Katarwa J, Bigirimana Z, Pantoglou J, Waterkeyn A, Cairncross S.** (2019) Comparative Assessment of Hygiene Behaviour Change and Cost-effectiveness of Community Health Clubs in Rwanda and Zimbabwe. IntechOpen. DOI: [dx.doi.org/10.5772/intechopen.89995](https://doi.org/10.5772/intechopen.89995)



## Executive Summary: Regis Matimati MPH

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*As a nurse-in-charge of a rural Health Centre, Regis was quick to appreciate the value of CHCs to prevent disease through 'common unity'. In 2007 he joined ZimAHEAD as a Project Officer, and was then promoted to Programme Manager in 2008/9. In 2013 as Zimbabwe AHEAD fused with Africa AHEAD-UK, he was appointed Country Director, whilst at the same time gaining his Masters in Public Health from Roehampton University. He becomes Executive Director of Africa AHEAD in 2020.*

The macro economic environment in Zimbabwe coupled with multiple humanitarian crises that include flooding, successive droughts, and cholera outbreaks continues to be constrictive and impoverishing in our country. However, despite these challenges Africa AHEAD continued to join hands with other development agencies to mitigate the effects of these crises on rural and urban communities. Since 2013, we have assisted nearly 1.4 million people with improved access to WASH services and hygiene promotion. This means that Zimbabwe is the only country so far to have met the Africa AHEAD 5x5 challenge of reaching one million people in 5 years (2013-2019) (*see p.25.*)

With global warming now a firm reality in Zimbabwe, the true versatility of the 4-phase AHEAD Model is enabling us to implement projects across a far broader spectrum than ever before. In response to the devastation caused by Cyclone Idai on the border with Mozambique we established **Emergency CHCs** to enable fair distribution of relief items on behalf of ACF and Christian Aid, which included a range of 'hardware' interventions — water-point rehabilitation, the construction of new protected springs as well as building 75 houses for families whose homes were washed away in the floods.

In response to the raging typhoid and cholera outbreaks in Harare we not only refurbished sanitation infrastructure but started Church Health Clubs that saw Apostolic faith groups (who are traditionally sceptical of western development initiatives) participating energetically in the prevention of disease. We contributed to the containment of the spread of cholera when we piloted mass public handwashing in long distance bus termini in Harare and Mbare, preventing the travelling public from spreading the disease from urban to distant communities in the rural areas. UNDP & UNICEF are funding our **CHC Urban Resilience** pilot project in response to **Climate Change** with a focus on **Women's Empowerment** through increasing **Human & Social Capital** enabling psycho-social support through social networks in CHCs for those affected.

Our **Rural CHCs** in Makoni District include not only training in self-supply for safe drinking water with local fabrication of hand-pumps, but also incorporate our **FAN (Food, Agriculture and Nutrition)** training to ensure sustainable livelihoods and resilience. This range of projects reflects our adaptive and dynamic response to changing circumstances in Zimbabwe and provides evidence that the CHC approach can indeed achieve integrated, holistic, cost-effective, grass-root development aligned with closely with key SDGs.



## AFRICA AHEAD BOARD OF TRUSTEES



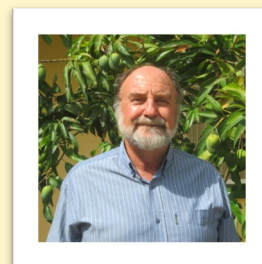
Chairman:  
Dr. Jaap Kuiper



Founder / Secretary:  
Dr. Juliet Waterkeyn



Outgoing Chairperson  
Janette Hetherton



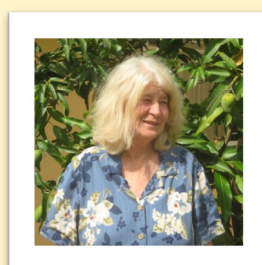
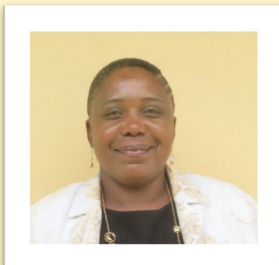
Founder / WASH Advisor:  
Anthony Waterkeyn

Trustees

Right: Smolly Moyo

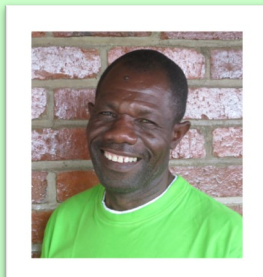
Center: Claire Griffiths

Left: Sally Whitaker



## AFRICA AHEAD 2020 STAFF

FIELD  
PROGRAM  
DEPT



Senior Program Manager  
Andrew Muringanza



Regis Matimati: Executive Director

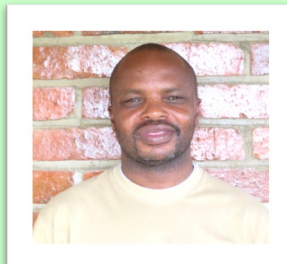
FINANCE &  
ADMIN  
DEPT



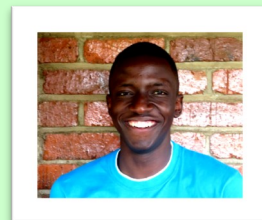
Finance Officer:  
Patience Muserepwa



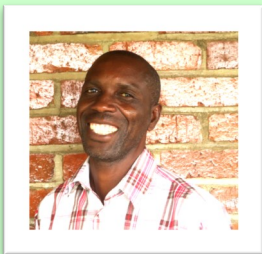
Program Managers  
Spiwe Mpofu



Agrippa Chingono



Finance Assistant:  
Tinashe Zamabezi



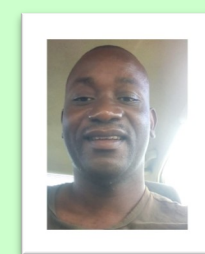
Project Officer  
Canaan Makusha



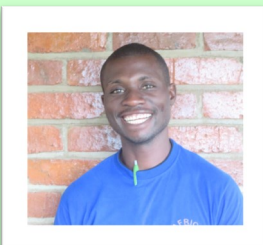
Emergency Project Officer  
Rutendo Mtisi



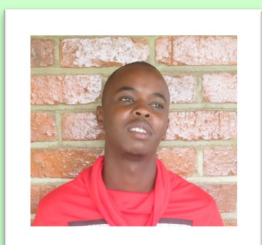
Project Officer  
Mercy Jambo



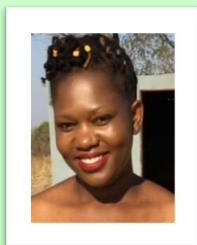
Hygiene Promoter  
Beauty Dzingirai



Monitoring & Evaluation Office  
Lester Muringanza



Lincoln Mutambara



WASH Technician  
Babongile Moyo

Drivers:

French Njobvuyale-  
maFrank Matimati,  
Daniel Chakazira  
Takudwa Matimati



Caretaker  
Orphan Hamilton



## Africa AHEAD: SUMMARY OF PROJECTS 2018-2019

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District	Area	Project Title	Num-ber of CHCs	Start and end date	Donor	US\$ Budget	Num-ber of benefi-ciaries	Page
Makoni	Rural	Self Supply Protected Family wells	30	June 2018— July 2019	SKAT	41,800	9,375	7
Harare	Urban	Cholera Mitigation	20	Oct 2018— Dec 2018	ACF	32,557	110.000	8
Harare	Urban	Cholera Response, Hand wash	55	Dec 2018— May 2019	Unicef	355,417	324,000	9/10
Gwanda	Urban	Urban Resilience	10	July 2019 - March 2020	Unicef	210,328	46,095	11/12
Chipinge			10					13
Chipinge	Rural	Emergency Cyclone Response	20	April— Aug 2019	ACF	75,000	30,340	14
Chipinge	Rural 3 wards	Emergency Cyclone Response	10	April - Sept 2019	Christian Aid	232,000	8050	15
<b>4 Districts</b>	<b>Rural &amp; Urban</b>	<b>Emergency &amp; Developmt</b>	<b>155 CHCs</b>	<b>2 years</b>	<b>4 partners</b>	<b>US\$ 947,102</b>	<b>527,869</b>	

### QUICK FACTS

Africa AHEAD Organisation in Zimbabwe

- ◆ We have 3 years of audited accounts with low risk assessment
- ◆ We have 15 full time dedicated staff at the end of 2019
- ◆ We have reached 527,869 beneficiaries in the past two years
- ◆ We do both emergency and development projects in rural & urban areas
- ◆ Our average cost per beneficiary was approximately US\$ 1.8 per person
- ◆ We had a two year budget of US\$ 947,102

## Self-Supply Water Improvement in Makoni District

**Donor:** SKAT Foundation  
**District:** Makoni  
**Project Wards:** 5,6,7,19, 20  
**Protected wells:** 80  
**Nutrition Gardens:** 80  
**Masons trained:** 19 (9 extra)  
**Beneficiaries:** 9,375  
**Cost of Project:** US\$ 41,800  
**Cost per Beneficiary:** US\$ 4.45  
**Start Date:** June 2018  
**End Date:** July 2019  
**No cost extension:** 6 months

**Right:** One of the 80 FAN Clubs show their graduation certificates. See front cover for Protected well



**The objective of this project was to demonstrate the effectiveness of the Community Health Club Approach to promote the self supply of productive protected family wells.**

Seven EHTs were trained who then trained and supported 19 masons (9 extra than targeted) .

**All 80 water-points** were protected giving safe water to 439 households with 2,698 direct beneficiaries benefitting from clean and protected drinking water (See Front Cover).

In addition the community members themselves protected an additional 10 water points without subsidies which would have benefitted an additional 250 people.

The 30 existing CHCs which had already completed hygiene promotion training were then trained in the Food Agriculture and Nutrition clubs (FAN Clubs) benefiting **9,375** people.

With the masons being employed directly by households copying the new 'Rope and Washer' pumps, we consider that the model of promoting 'Self Supply of water' through Community Health Clubs,' has worked very well.

Water promotion projects should be linked with nutrition projects to make the water 'productive water' and hence more sustainable as the value of the water point increases where it has dual use in potable water and agricultural water. With no dedicated project officer funded to stay full time in Makoni, this project suffered when the Country Director who was running the project was taken up with the demands of the emergency response to Cyclone Idai until finally an intern was posted. The next phase of the project should go into neighbouring communities in order to achieve at least 80% saturation in the clinic catchment areas so as to impact on number of reported cases on diarrhoea and other preventable diseases.

## Cholera Mitigation through Handwashing at Bus Termini in Harare

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**Donor:** ACF

**District:** Harare Urban

**Suburbs:** Bus Termini

**Beneficiaries:** 110,000

**Market place/Church CHCs:** 20

**Cost of Project:** US\$32,557

**Cost per Beneficiary:** US\$ 1

**Start Date:** October 2018

**End Date:** November 2018

*Right:*

*All Bus Termini in Harare were equipped with large tanks (disability friendly) for handwashing. They were manned by Africa AHEAD personnel who distributed leaflets and information on how to prevent cholera as people boarded buses.*

*The tanks were based on a design by an Italian intern Francesco studying industrial design who was working with Africa AHEAD recently.*



The Cholera outbreak which started once again in Harare in 2018 was due to poor water and sanitation facilities, poor hygiene behaviour and inadequate water management by the City of Harare for residents. Between October and November 2018, Africa AHEAD partnered ACF to lend a helping hand to the City of Harare in the fight against the spread of cholera in Harare.

The epidemic was kept in check and only a few cases were reported in the other provinces of the country compared to what was expected. Africa AHEAD designed a novel programme to promote handwashing at the public WASH facilities in the Harare CBD, using a design of handwashing facility designed by a recent intern. The project involved hand washing promotion, general health and hygiene education at 5 busy bus termini that are used by commuting public to and from the cholera epicentre so as to avoid interpersonal transmission of the disease. ACF funded most of the hardware whilst UNICEF chipped in by providing soap for the public facilities.

Over the 6 weeks period over 110 thousand men, women and children accessed hand washing in Harare through our hand wash stations and over 150 thousand residents were reached with public health promotion messages. Africa AHEAD engaged 12 extra Hygiene Promotion Officers and deployed 5 project vehicles onto the project which was completed in July 2019.

## Continuation of Handwashing Campaign in Harare

**Donor:** Unicef  
**District:** Harare Urban  
**Suburbs:** Mbare, Glen Nora,  
 Glen View, Budiriro  
**Beneficiaries:** 324,000 travellers  
**Church CHCs:** 50  
**Market CHCs:** 5  
**Number of CHC Members:** approx. 550  
**Number of staff:** 24  
**Public toilets upgraded and manned:** 10  
**Cost of Project:** Euro 355,417  
**Cost per Beneficiary:** US\$ 1

### *Right:*

*One of thousands of travellers washing hands with soap before boarding the bus back to the rural areas.*



Due to the success of our initial cholera response project, funded by ACF, in Harare in 2018, Africa AHEAD was contracted by UNICEF and a Program Cooperation Agreement (PCA) was signed to continue with the activities in Harare for a further 6 months until end of May 2019.

The organization re-engaged the 16 hygiene promoters, mobilized our vehicles and 5 drivers, 1 M&E officer and 1 Program Development Officer, 1 WASH Program Manager, 1 WASH Officer and Admin and Finance intern were also supported. This increased our staff to a total of 29 members.

The project provided health and hygiene promotion messages and improving handwashing access to the commuting public in Harare CBD, Mbare terminus, the cholera hot spots of Glen Norah, Glen View and Budiriro high density suburbs of Harare.

In Glen Norah Churches were assisted to start CHCs to spread the message about cholera. All public toilets in the Bus termini and suburbs were renovated and kept clean, serviced by the CHC members who took an active role.

The project also established CHCs in 5 public markets in the high density suburbs for the regular fruit and vegetable sellers to join enabling women sellers in particular to be a part of the solution and assist in clean ups and control of toilets, so spreading public awareness of cholera transmission. Washing fruit and keeping their own hands clean may also contribute to fighting the transmission of cholera.



## Church Health Clubs combatting Cholera in Harare

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Established churches such as the Roman Catholic, Anglican, Methodist, and Salvation Army as well as Apostolic and Evangelical churches of Zion, AFM Dunamis, the Jekeniseni, the Sheepgate, the Jesus Unchangeable Changers, the Power of God's word, the Pentecostal Faith Life, the Fountain of Grace, the Apostles of Christ, the Grace of God, the Tabernacle of Worship have formed 50 Health Clubs account for a total of 2,005 adults and 889 children meeting each week.



With ongoing support from Unicef, Africa AHEAD is working with 50 different church groups around the capital Harare, to spread the message of cholera prevention through handwashing with soap and general hygiene. Given that the Community Health Club approach uses the same tactic as most religions to organise its members, and meet regularly each week, it seems appropriate that we have at last begun to work closely with established churches, who are so good at gathering the faithful. This is a new approach and one that, if successful in improving hygiene behaviours, should be rolled out nationally. Community Health Clubs also attract committed followers at weekly meetings to reinforce core beliefs and to build a common unity of understanding, and so we are joining forces, putting 'Cleanliness next to Godliness' in a combination that makes sense to worshippers, with the support of influential religious leaders in their community. Believers are asked to stay for a hygiene promotion session at the end of the church service and use the facilities for proper handwashing before they depart. All funerals are organised by CHC members and those attending are asked to bring their own cup and plate so cholera is not spread by shared utensils and food, or contaminated water. The church venue also demonstrates model home facilities.

## Building Partnership for Urban Resilience

**Donor:** Unicef

**Towns:** Gwanda & Chipinge

**Start Date:** July 2019

**End Date:** March 2020

**Beneficiaries:** 46,095

**Budget:** USD210,328

**Cost per beneficiary:** US\$4.5



**Right:**

*Programme Manager Spiwe Mpopu training CHC members with Hygiene Promotion Visual Aids*

### Objective of Project:

To strengthen the Gwanda and Chipinge urban initiatives, through training of the communities in financial literacy and marketing in order to contribute to sustainable operation of their livelihood activities, as well as further strengthen WASH led economic activities, through establishment of water kiosks, and pay toilets which are manned and operated by Health Clubs in partnership with urban local authorities.

### Result 1:

Immediate improvements in urban environment to build practical evidence of access to basic public services, employment, livelihoods opportunities for youth in underserved urban areas improved.

### Result 2:

#### Responding to the Cyclone IDAI effect in urban Chipinge

- 2 Water Repair Kit provided to the local authority.
- 1 Road Show conducted including sign language on Cholera Prevention
- 5 Operatives trained on Operation and Maintenance of pumps.
- 15 Water Point Management Committees trained in maintenance
- 15 water points with water quality assessment conducted.
- Local Authority staff and 6 CHC members were trained on water quality monitoring.
- 15 boreholes repaired and installed with inline chlorinators



**Left:**

*Desperate shortage of water and long queues at functional boreholes was the result of flooding and the breakdown of boreholes following Cyclone Idai.*

*Water Kiosk are being set up with monitoring of the water quality*

*Boreholes are being rehabilitated with built in chlorination with community based management.*



**Donor:** Unicef  
**Districts:** Gwanda Urban  
**Start Date:** July 2019  
**End Date:** March 2020  
**Gwanda CHCs:** 14  
**CHC members:** 331 (91% women)  
**Chipinge CHC:** 14  
**CHC Members:** 272 (93% women)  
**Project personnel :** 7  
**Vehicles:** 3



*One of 4 public toilets constructed in Gwanda & Chipinge*

### **Training on Effective responsive service delivery and customer care**

Training was conducted over a period of 2 days. The target group was the WASH Local Authority personnel on middle management and representative from the people with disabilities.

**U reporting** – Web based reporting system on WASH service delivery was provided for users.

### **Refurbishment of Public Toilets**

Four public toilets are being constructed and will be managed by the CHC in each town (see above)

**LED Workshop with Youth, Women in CHC:** A one day workshop was conducted through the assistance from Boost district officer. The attendees were drawn from the women in CHCs, youth in CHCs, Private Sector, Ministry of Industry and Commerce, Municipality of Gwanda, Zimbabwe Sunshine Group and Environmental Management Agency. It was realized that there was a lot of opportunities from using waste products for making a living including providing employment opportunities for the Gwanda communities. This will be followed up applying some of the training in Street Business at a recent training in Uganda.

### **Borehole drilling**

The drilling of the borehole for the water kiosk was done during the month of October when the water table is at its lowest to ensure all year water supply.

### **Right: Clean up Days**

*Community Health Clubs are doing monthly clean-up campaigns with the town now becoming much less polluted with trash, and awareness of the need for better management of waste being understood by residents. All equipment was supplied by the project to the CHCs.*



## AHEAD Emergency Response to Cyclone IDAI (1) with ACF

**Donor:** Action Contre la Faim  
**District:** Chipinge  
**Wards:** 12 & 20  
**Beneficiaries:** 30,340  
**CHCs:** 20  
**CHC Members:** 1,363  
**SHCs:** 10 (506 pupils)  
**Cost :** Euro 76,431  
**Cost per Beneficiary:** US\$ 4.14  
**Start Date:** 15th April 2019  
**End Date:** 15th August 2019  
**No Cost extension:** one month



### 1. Access to Drinking Water is brought into alignment with Sphere standards

- Water quality was tested from 27 water points and all were found contaminated.
- After chlorination was done, all the boreholes were safe for drinking water.
- 23 boreholes were rehabilitated and 4 were repaired.
- The 27 functional boreholes (2 extra above target) restored safe drinking water to a total of 3,308 households, with a total population of 30,364 people (8,321 men, 10,105 women, 5,742 boys, 6,196 girls)
- 107 people living with disability (PLWD) (46 men , 61 women) provided with WASH

### 2. Strengthening of Water Point Committees by Training of Mechanics & Provision of Tools

- A total of 17 Village Pump Mechanics (VPMs) went through an on-job training during the rehabilitation and repair of the 27 boreholes.
- 3 basic toolkits to enable routine operation and maintenance were procured and distributed [2 in ward 20 and 1 in ward 12]

### 3. Sanitation and hygiene practices have improved and Cholera awareness raised

- 20 CHCs (8 in ward 12 and 12 in ward 20) were established with a total membership of 1,363 people (158 males and 1,205 females)
- 10 School Health Clubs—5 in each ward were established at 10 schools with 508 (200 boys and 308 girls) school children being club members.

The targets on water point head works construction which were affected by delays in procurement processes due to money supply, fuel shortages, power outages subsequent to abrupt changes in monetary relegations in the country. Field logistics was affected by the transportation of river sand for concrete from a long distance of approximately 80 to 100kms away.



## Emergency Response (2) in Chipinge District - Christian Aid

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**Donor:** Christian Aid

**Partners:** Medra  
AWET

**District:** Chipinge

**Wards:** 2, 9 & 14

**Beneficiaries:** 8,050

**CHCs:** 10

**Cost :** US\$ 232,000

**Cost per Beneficiary:**  
US\$28.81



**Distribution of water containers, soap and water guard to Victims of Cyclone Idai**

**Goal:** To alleviate human suffering and increase dignity in Cyclone IDAI affected communities

**Objective:** To contribute enhancing the capacity of affected populations in Chipinge to meet their basic survival needs.: reduce suffering and increase dignity.

Christian Aid partnered with Africa AHEAD with the objective of alleviating human suffering in the wake of the disaster inflicted by Cyclone Idai in March 2019, which tore through Chipinge district leaving trail of destruction on the roads and bridges making it difficult to access goods and services. Efforts by the District Civil Protection Unit [DCPU] and partners have seen some reconstruction of the damaged roads and bridges and the restoration of access to goods and services. There has been a hive of activity from different organizations and agencies providing assistance in wards 2, 9, and 14, where communities lost relatives, food, homes, livestock, property, water and sanitation infrastructure and livelihoods.

The distribution of hygiene and WASH kits by Africa AHEAD commenced in September 2019 following the registration and verification of beneficiary registers, targeting the very vulnerable in each community, such as the elderly, the disabled, the chronically ill, pregnant and lactating mothers, child-headed families and single-headed families. A total of 894 households with a population of 5,133 beneficiaries with 2,439 men and 2,694 women. Hygiene kits comprised of lady's pants, sanitary pads, bathing soap, laundry soap, petroleum jelly, toothpaste, toothbrush, bathing towel, and bathing bucket. The provision of housing and water supply increases the total number of beneficiaries to 8,050.

The distribution was delayed due to challenges experienced across the nation with suppliers failing to cope with the huge demand resulting in delays in procurement and supply of the commodities due to shortages within the market. This was worsened by the fuel shortages, power outages and price escalation with over 350% inflation rate and delays in disbursement of funds.

### Community Health and Hygiene awareness sessions

- 21 Community Based Facilitators were trained.
- 23 Community Health Clubs were established with a membership of 1,614 members [1,488 women and 126 men]

Awareness sessions were also done at community gatherings focusing on point-of-use water treatment, sanitation / latrine construction, menstrual hygiene management, hand washing.

### Access to safe potable water

- 10 hand pumps and 8 springs were rehabilitated
- Safe water to 350 households with a population of 1,505 people [1,349 women / 156 men.]
- 6 village pump mechanics were trained and 3 basic toolkits were provided for routine operation and maintenance.



*Above: One of the many protected springs to ensure safe drinking water*

### Access to safe sanitation

- 50 households are targeted to benefit from the construction of single squat hole household latrines.
- 19 latrines have been completed and 31 pits have been lined to bottom slab level.
- 12 builders were trained and provided with tools to spearhead the construction works.



*Left: One of 19 new lined pit latrines with a hand-washing facility replacing the temporary latrine on the right.*



### Access to safe and dignified shelter

Following the loss or damage of their houses by the cyclone a target of 75 households are to benefit from new 2 roomed houses - all houses are now at various stages of completion i.e painting, glazing and roofing.

See: Video from Zimbabwe TV and Newspaper Article  
<https://www.africaahead.org/category/featured->



One of the 75 two rooms homes built by Africa AHEAD for rehousing Cyclone victims using the tent.

### Challenges

- There was no dedicated driver funded for the project and therefore the Project Manager had to fill the gap which delayed some aspects as he was overstretched.
- Logistical challenges on provision of construction river sand - ferried from 100km away, and worsened by the mountainous terrain
- Delays in disbursement of funds leading to delays in procurement
- Stock outs of materials on the market e.g. hygiene kits commodities



One of the latrines blocks built by Africa AHEAD

## AHEAD staff Capacity Building and Awards



### Outstanding Worker of the Year 2019

The **Director's Award for the Best Worker 2018/19** goes to **Patience Muserepwa**, our Finance and Administration Officer for holding ship so well during these turbulent economic times. Patience led the organization to a successful 2018 audit by Nolans with an **unqualified opinion**. In 2019 she steered the Finance office through two Audits on behalf of Unicef by **Ernest & Young** and Berker Tilly and Gwatidzo Chartered Accountants who both classified Africa AHEAD as a **low risk Organization for donors** (the lowest of 4 categories of risk used by Unicef)



### Best Staff Photographer of the Year 2019

The picture selected for the front cover of this report was taken by Lincoln Mutambara, an intern posted to the SKAT funded Self Supply Project in Makoni. The photo was selected because it represents all generations and captures the genuine delight of the whole family with the new water source, and the joyful expressions transfer joy to the beholder... a positive image to thank our donors and supporters.

## Staff Capacity Building

### Entrepreneurship and Women's Empowerment:

Since Africa AHEAD first pioneered the CHC approach 25 years ago we have not had the resources to enable us to complete the fourth phase of the AHEAD Model to enable CHCs to become self-reliant Community Based Organizations (CBOs). For this reason we gladly accepted the sponsorship from Street Business School (SBS) and sent Canaan Makusha and Siphwe Mpofu for a training in Uganda in September 2019, with the aim of helping women break out of poverty through effective entrepreneurial training. This will be introduced into the existing clubs in Chipinge and Gwanda.

**Organizational Induction** - Our staff on joining the organization are taken through the organizational strategy, protocol and policies and sign induction forms.

**An Annual Retreat** was held for 3 days for all staff for team building and to take stock of the last year, with new training materials designed and theoretical concepts shared on the CHC model.

**Security and First Aid** - Lincoln Mutabawa & Lister Muringaniza went for personal security training as well as First Aid training and they provided feedback to the rest of the staff.

**Accountability and Safeguarding:** All program staff had refresher training with Christian Aid.

**Gender Mainstreaming:** Rutendo Mtisi was seconded for training at Christian Aid.



## Conferences

In February 2019 Anthony and Juliet Waterkeyn with Regis Matimati, participated in the international AfricaSan5 conference that was held in Cape Town. Africa AHEAD shared a platform with World Bank where we gave a well-attended presentation on how CHCs enhance Social Capital.

From 4-8 November 2019 the CEO was invited by the World Bank to show-case the CHC model to participants from 20 African countries at an in-house conference they were hosting in Uganda with a view to enabling their WASH teams from Nigeria and Ethiopia, in particular, to be exposed to the CHC model with prospects of additional support from AA. The poster is found at [https://www.africaahead.org/wp-content/uploads/2019/10/2019-Waterkeyn-J\\_CHC-SDG-Poster\\_Africa-AHEAD.pdf](https://www.africaahead.org/wp-content/uploads/2019/10/2019-Waterkeyn-J_CHC-SDG-Poster_Africa-AHEAD.pdf)

In November 2018, and again in 2019, the CEO was invited to attend the MEDS Meeting of the Bill & Melinda Gates Foundation in Cambodia. The poster can be found at: [https://www.africaahead.org/wp-content/uploads/2019/10/2019-Waterkeyn-et-al.-Zim-and-Rwanda-comparison\\_Africa-AHEAD.pdf](https://www.africaahead.org/wp-content/uploads/2019/10/2019-Waterkeyn-et-al.-Zim-and-Rwanda-comparison_Africa-AHEAD.pdf)

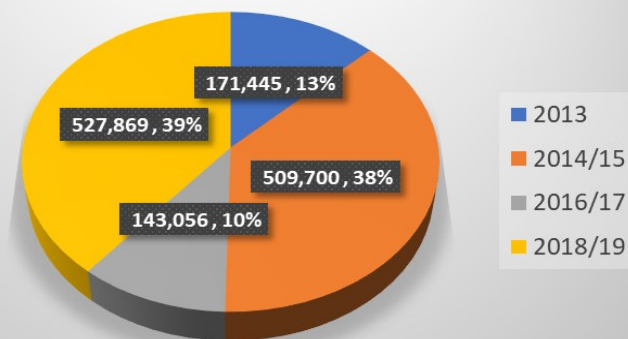
## Future Funding

The organization hopes to maintain the UNICEF PCA so that successive projects can come through.

We also hope to continue with existing partners: ACF, Christian Aid and SKAT Foundation.

As the economic situation is not improving in Zimbabwe and we are at the front line of climate change, we expect to be able to offer our services to emergency agencies wishing to partner with a reliable local NGO, which delivers all targets reliably. With three clean audits and a budget of US\$ one million annually we can offer donors a low risk partnership.

### 5x5 Challenge achieved in Zimbabwe with 1,313,680 beneficiaries in 5 years



**The 5x5 Challenge  
was a vision we set  
for Africa AHEAD in 2013**

**5 million people  
reduction of 5 critical diseases  
affecting children under 5 years  
at under \$5 per person  
within 5 countries  
within 5 years**

**Cost per beneficiary in Zimbabwe  
for 1,313,680 people =  
US\$2.52 per person!!!**

## Financial Report 2018 & 2019

### REVENUE 2018 / 2019\*

Grants income	789'048.50.
Sale of Training Material	89482.25
Consultancy Income	1'940.00
Other Income	852.00
<b>EXPENDITURE</b>	
Marketing Expenses	5'100.40
Bank Charges	4'833.73
Cleaning Expenses	242.12
Computer Expenses	1'022.11
Consulting and Professional fees	
Depreciation, Amortisation and Impairments	27413.99
Employee costs	319'705.30
Licenses	300.00
Parking and Toll Fees	
Office Supplies	5'587.10
Board Expenses	
Project implementation	429'485.71
IT Expenses	922.00
Insurance	1'860.00
Lease rentals	6'000.00
Motor Vehicle Expenses	39'666.82
General Expenses	2'672.83
Promotions	
Repairs & Maintenance	44.00
Staff Welfare	600.00
Communication Costs	2990.00
Training	2492.50
Travel Costs	13985.40
Utilities	390.80
<b>SURPLUS FOR THE YEAR</b>	
GENERAL FUND—November 2019	

# Financial Report 2018 & 2019

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## Statement of Financial Position\*

Figures in US Dollars	2019	2018
<b>Assets</b>		
Non-Current Assets		
Property, plant and equipment	89667.01	115'798.00
Current Assets		
Inventories	2577.76	1'748.00
Trade and other receivables	2137	2'137.00
Cash and cash equivalents	6017.45	142'528.00
	10732.21	146'413.00
<b>Total Assets</b>	<b>100399.22</b>	<b>262'211.00</b>
Reserves and Liabilities		
Reserves		
Revaluation Reserve	48554.99	138'222.00
Accumulated funds	23'478.38	45'084.00
	72'033.37	183'306.00
Liabilities		
Current Liabilities		
Trade and other payable	28'365.85	78'906.00
<b>Total Reserves and Liabilities</b>	<b>100,399.22</b>	<b>262,211.00</b>

\* 2018-2019 accounts have not yet been audited at as December 2019



## Financial Report 2019

### Financial Statements for the year ending December 31st, 2019

#### Statement of Changes in Equity

Figures in US Dollar	Revaluation	General	Total
	Reserve	Fund	Equity
Balance at January 01, 2018	22423	-16982	5441
		62066	
	115799		
Total changes	138222	45084	183306
Balance at December 31, 2018			
Profit for the year		-21'605.62	
Revaluation surplus	89667.01		
Total changes	48554.99	23'478.38	
<b>Balance at November 30, 2019</b>	<b>48554.99</b>	<b>23'478.38</b>	

# Financial Report 2019

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Financial Statements or the year ended November 30, 2019		
Statement of Comprehensive Income		
Figures in US Dollar	2019	2018
Revenue	789'048.50	227'214.00
Gross Profit from sale of toolkits	51'868.69	11'316.00
Gross Profit	840'917.19	238'530.00
Other Income	2'792	22136.00
Operating Expenses	-865'314.81	-198'600.00
Operating Profit (loss)		
Profit (loss) for the year	-21'605.62	62'066.00
Other comprehensive income:		
Gains and losses on property revaluation		-
Total comprehensive income (loss)		
Total comprehensive income (loss) attributable to:		
Owners of the parent		