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DFID's Assistance to Zimbabwe

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International Development Committee

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Summary

The Global Political Agreement between the two main parties in Zimbabwe was a significant step towards political stability. It resulted in the formation of the Government of National Unity (GNU) which has initiated welcome recovery in the economy. However, the political situation remains fragile. The prospect of free and fair elections taking place, with the result accepted by all sides, still seems unlikely. Zimbabwe also faces enormous challenges on governance, respect for human rights and delivery of basic services. DFID says that the ZANU-PF regime reacted to the country’s decline “with electoral manipulation, abuse of state power and increasing intimidation of political opponents and civil society”. We agree with this assessment.

Zimbabwe will need the long-term support of the international community. Much remains to be done to rebuild the economy, including normalising relations with the international financial institutions. The livelihoods of millions of people have been destroyed by the collapse of the agricultural sector. Migration and displacement have resulted in the loss of vast numbers of skilled workers, including health professionals and teachers, exacerbating the decline of health and education.

The countries in Southern Africa which are Zimbabwe’s neighbours are best-placed to assist in its political progress and economic recovery, particularly South Africa. The Southern African Development Community (SADC) brokered the Global Political Agreement. It must continue to support Zimbabwe’s progress. The mediation of the South African President is a vital part of this support.

The collapse of the economy led to a humanitarian crisis. Although the situation has improved, two million people are estimated to require food aid this year. The UK Department for International Development (DFID) has provided vital humanitarian assistance and this will continue to be necessary for the next few years. However, DFID should work towards a smooth transition to longer-term development assistance as conditions improve. DFID has already demonstrated an innovative and effective approach to this transition through its Protracted Relief Programme (PRP). Its success is evident in the number of other donors who have decided to direct their resources to the second phase of the PRP.

The challenges in the health sector are clear: life expectancy rates are amongst the lowest in the world; maternal and child mortality rates are particularly worrying; and HIV/AIDS is a massive problem. Continued donor support is needed to restore Zimbabwe’s health services to the capability and capacity they had 20 years ago, when they were amongst the best in Africa. This is also true of education where a lack of teachers has resulted in a sharp decline in the number of children who are in school and the quality of provision they receive.

The plight of Zimbabwe’s children, many of whom have been orphaned as a result of HIV/AIDS, is a serious international concern. Many are being cared for in extended families and are vulnerable to abuse and deprivation. Communities are left to care for orphans with very little financial or other support. DFID’s Programme of Support has been
effective in rescuing thousands of children from dire living conditions and ensuring they are fed and educated. Psychosocial support is available to try to reduce the damage done by their experiences. DFID should ensure that this area of its work continues to be a priority.

Many of DFID’s programmes are implemented by non-governmental organisations which are making a significant contribution to providing basic services and supporting the country’s progress. The main mechanisms for delivering UK aid should remain joint programmes with other bilateral and multilateral donors, in co-operation with partners from civil society and local communities.

Zimbabwe’s recovery will not only benefit its own people but neighbouring countries and the wider international community. The UK should continue to provide substantial support. The international community’s longer-term focus should be on strengthening the capacity of the Government of National Unity so that it is better placed to determine its own development priorities and to deliver them. For this to happen, the rights of all parties to function without intimidation must be implemented in practice. It also requires a willingness within all elements of the Government to meet the needs of the people, especially the poor. Continuing political violence and harassment is incompatible with this.

Progress on human rights and democracy needs to be demonstrated before all the EU’s restrictive measures placed on named individuals and organisations can be lifted. In the meantime, donors need to continue to provide humanitarian and development assistance. DFID has shown leadership amongst donor partners, evidenced by their willingness to support effective DFID programmes. It should continue to innovate and identify development priorities.

The nature and scale of DFID’s future engagement in Zimbabwe should reflect the level of need and the capacity for this assistance to be absorbed. Its continued support must be based on strong co-ordination with development partners and alignment of its approach with the pro-poor elements of the Government’s own policies.
1 The Inquiry

1. Zimbabwe is in a period of fragile transition, following a decline caused by years of “neglect, repression and economic mismanagement.” The economy has shrunk by over 80% since 1999. The last decade saw consistent negative growth, with levels of poverty worsening steadily, in the face of hyper-inflation, high unemployment, collapse of the agricultural sector and the devastating impact of HIV/AIDS.

2. Bad government and political instability led to economic and social decline. Political turmoil increased further after the 2008 elections, leading to greater instability and even more desperate living conditions for ordinary Zimbabweans. The disputed outcome of the 2008 presidential elections was accompanied by the ruling ZANU-PF party subjecting the opposition Movement for Democratic Change (MDC) to violence and intimidation. Mediation by the Southern African Development Community (SADC) and South Africa eventually resulted in a Global Political Agreement (GPA) being signed between the parties.

3. The GPA provided for the establishment of the Government of National Unity (GNU) in February 2009 (also known as the “Inclusive Government”), which included representatives of both main parties and the MDC-M. Given that the MDC won the parliamentary elections and the first round of the presidential elections, the Inclusive Government is anything but satisfactory as it ensures that all the main levers of power remain with Mr Mugabe and ZANU-PF who have not fulfilled their undertakings and have sought to undermine the MDC’s ability to deliver their limited areas of government. The GNU’s first year in office has therefore been far from smooth, but some progress has been made in governance reforms and in addressing the significant humanitarian and development challenges.

4. Support from the international community continues to be essential in Zimbabwe. There are, however, many challenges to delivering it effectively. DFID says that “the transition from crisis to full recovery is promising to be messy, protracted and complex”. Its assistance has evolved to reflect the changed conditions under the GNU but it is not yet possible for DFID to “sustain a full development relationship” with the Government of Zimbabwe. The future scale and nature of DFID’s assistance to Zimbabwe therefore remain uncertain.

5. Our concern about the situation in Zimbabwe and the uncertainty over the future of DFID’s work there led to our decision in December 2009 to launch this inquiry. Given the imminence of a UK General Election, our inquiry has had to be very brief. In Chapter 2, we include some examination of the political context in which donor support is provided.

1 Ev 48
2 Ev 69
4 The MDC split into two factions following the 2005 Senate elections; MDC-T, under the leadership of Morgan Tsvangirai, and MDC-M, under the leadership of Arthur Mutambara
5 Ev 48
6 Ev 52
However, we have not attempted to conduct an in-depth analysis of the past and present political situation. Instead we have focused on the aspects of the situation in Zimbabwe which fall within our remit: the humanitarian situation and DFID’s programme of assistance. Nevertheless, the current need for aid in Zimbabwe is a direct result of poor Government and the UK’s relationship with the Government affects its ability to deliver aid effectively.

6. We received 13 submissions of written evidence, including from the UK Government, academics and non-governmental organisations (NGOs). We held two evidence sessions in January and February 2010. We also met informally with NGOs working in Zimbabwe to discuss the current situation and their work in the country. We are grateful to all those who took the time to engage with the inquiry.

7. We visited Zimbabwe in February 2010. We travelled first to Harare, the national capital, and then to Bulawayo, capital of Matabeleland. We saw a variety of projects which DFID is supporting, and held discussions with a broad range of people including: the Prime Minister, Morgan Tsvangirai, and other government ministers; the Speaker of the House of Assembly, Lovemore Moyo; the Governor of Bulawayo; the Mayor of Bulawayo; NGOs and delivery partners; a wide range of civil society representatives; and other donors. We visited hospitals, HIV clinics, schools and livelihoods projects. Our full visit programme is set out in the Annex to this Report. We were greatly impressed with the DFID staff and programme in Zimbabwe and would like to thank everyone who made the visit so worthwhile and interesting.

**Report structure**

8. The next chapter assesses the development context for DFID’s work in Zimbabwe, including the implications of the recent changes in the political and economic situation. Chapter 3 examines Zimbabwe’s regional relations and the role of neighbouring countries in supporting its recovery. We then look at the ways DFID has adapted its activities in Zimbabwe to reflect the particular circumstances there, including working through NGOs and multilateral bodies, and providing both humanitarian aid and wider development assistance (Chapter 4). Chapter 5 assesses DFID’s support for health services and Chapter 6 focuses on its work with children, particularly those made vulnerable by HIV/AIDS. In the concluding chapter we discuss DFID’s future engagement with Zimbabwe.
2 The development context

Political background

9. An illegal "Unilateral Declaration of Independence" by white settlers in 1965 delayed independence and majority rule by 15 years. Zimbabwe finally became independent on 18 April 1980. For almost the entire period since then it has been ruled by the ZANU-PF party, under the leadership of President Robert Mugabe. In that time it has declined from a well-run state to one that depends on remittances and aid for food and basic services, due to political turmoil and economic maladministration. DFID says that the ZANU-PF regime reacted to the country’s decline “with electoral manipulation, abuse of state power and increasing intimidation of political opponents and civil society.” This was made clear to us during our visit.

10. Professor Brett of the London School of Economics (LSE) believed that the decline began when the ZANU-PF government’s political monopoly was challenged in the late 1990s. He says that it responded to the confrontation from radical civic groups and the Movement for Democratic Change (MDC) by using a variety of measures, including currency and financial market controls, restrictions on the press, a grain and fuel market monopoly and land seizures to transfer resources to political associates, the security services and war veterans. Through these actions, ZANU-PF was able to win elections, but at the same time it destroyed the economic system, which has led to “fiscal, food, fuel and foreign exchange crises.”

11. In the 2008 parliamentary elections, ZANU-PF lost its majority for the first time since independence. Morgan Tsvangirai’s MDC-T faction of the Movement for Democratic Change became the largest party in parliament. In the presidential elections, Morgan Tsvangirai won the first vote with 47.9%, while President Robert Mugabe gained 43.2%. As Morgan Tsvangirai did not achieve the 50% of the votes cast in the first round necessary to be declared the winner of the election, the Zimbabwe Election Commission announced in May that a second round of voting should take place. In June, before the votes could be cast, Morgan Tsvangirai announced that he was withdrawing from the run-off because of the increased violence and intimidation aimed at his supporters. In the second round election, Mr Mugabe took a majority of the vote and was sworn in as President on 29 June.

12. Controversy over the presidential vote led to a protracted period of uncertainty. Finally, in September 2008, a Global Political Agreement (GPA) between the parties was brokered by the then South African President Thabo Mbeki, acting on behalf of the Southern African Development Community (SADC). After a four-month delay, on 30 January 2009, Morgan Tsvangirai’s wing of the MDC agreed to form a coalition government with President Mugabe’s ZANU-PF, and the Government of National Unity (GNU) came into

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7 Ev 48
8 Ev 48
9 Ev 38
10 See FCO Zimbabwe Country Brief available at www.fco.gov.uk
existence. Under the GNU Robert Mugabe retained his position as President, and Morgan Tsvangirai became Prime Minister.

The Global Political Agreement and the Government of National Unity

13. Dr Steve Kibble of the Zimbabwe European Network considered the GPA to be “a very badly drafted document” and one that:

[...] in the context of the problems facing Zimbabwe (especially on human rights violations and related security sector reform needs) is replete with omissions. Most analysts agreed that it lacked a time-frame, was riddled with contradictory statements and laid up as many problems as it solved [...].

Nevertheless, DFID’s view is that “the Inclusive Government remains Zimbabwe’s best hope”. It has “largely succeeded” in stabilising the economy but “there has been far less progress in restoring the rule of law and ensuring human rights are respected.” Donald Steinberg, Deputy President of the International Crisis Group, believed that the new government “started out reasonably well”:

Schools and hospitals re-opened. Civil servants were paid a small stipend and returned to work. As the Zimbabwe dollar was shelved, goods returned to empty store shelves. A cholera epidemic was brought under control; and a bipartisan parliamentary committee was formed to reform the constitution. Human rights activists reported a significant drop in government abuses. An ambitious yet pragmatic reconstruction programme—the Short-Term Economic Recovery Programme—called for about $8.5 billion in resources, including foreign assistance and investment, and was generally well-received by foreign donors and the Bretton Woods institutions.

14. However, he also highlighted serious concerns, including the continuation of farm seizures and the decline of human rights. Security forces “continued to arrest and detain activists and MDC parliamentarians”. He pointed to the reappointment of ZANU-PF stalwarts Reserve Bank Governor Gideon Gono and the Attorney General Johannes Tomana as very negative developments. He said that “top generals boycotted the new national security establishments and showed public disdain for Tsvangirai, and ZANU-PF delayed or ignored key commitments under the GPA.” He believed that “some old regime elements, especially hard-line generals and other Mugabe loyalists” had “actively thwarted the new government, and undermined it by refusing to implement its decisions”. Professor Brett agreed that ZANU-PF had not implemented most of the agreements in the

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11 International Crisis Group, Zimbabwe: Engaging the Inclusive Government, April 2009. See also Ev 48
12 Ev 64
13 Ev 48
14 Ev 77
15 Ev 77
GPA, and believed that it “still intended to extricate itself from it in order to retain its mantle as the only dominant and ascendant political party.”

15. Witnesses believed that a stable political environment in Zimbabwe was far from guaranteed. Donald Steinberg identified a number of “formal” challenges which the GNU had to meet. These were: completion of the GPA; agreement of a new Constitution; and the holding of elections. In addition, there were a set of “informal” challenges: a need for political maturity in the process; resolution of the security situation; and rebuilding of the economy. He told us that:

[...] major threats could still derail the process, including the resistance of intransigent senior security officials; fractious political in-fighting, especially within [ZANU-PF]; a growing gap between the political class and civil society; a battered economy unable to address a 90% unemployment rate and meet the immediate expectations for a peace dividend; and the capricious and ever-dangerous whims of President Robert Mugabe.

16. The GNU has continued to function for just over a year, albeit with sporadic breakdowns. Particularly serious divisions arose in October 2009 following the arrest of Roy Bennett, a senior MDC member. The Prime Minister and the MDC announced that they were boycotting Cabinet meetings and refusing to engage with the rest of government. DFID says that this period “saw a particular ramping up of violence”. The immediate crisis was resolved the following month, following intervention by SADC, and the MDC re-engaged with the GNU.

17. Mr Tsvangirai remains publicly optimistic about the GNU. In an address to Zimbabwean expatriates at Southwark Cathedral in June last year he said that Zimbabwe had already made great strides towards recovery after years of a downward economic spiral. When we met him during our visit, he reiterated his comments about progress since the formation of the Inclusive Government. He believed that there were two main objectives for the transitional government: to revive the economy and to implement a constitutional agenda. His view was that there would be no reversal in the political progress which had been made.

18. We welcome the Global Political Agreement (GPA), which, although not perfect, created the basis for formation of the Government of National Unity. Progress has been made since the settlement was reached, including the re-opening of schools and hospitals, the introduction of a budget and stabilisation of the economy. However, movement towards full implementation of the Agreement has been slow and important provisions have been ignored by some of the parties involved. Adherence to the rule of

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16 Ev 39
17 Q 1
18 Ev 77
19 “MDC boycotting Zimbabwe Cabinet”, BBC News website, 16 October 2009
20 Ev 49
21 “Zimbabwe back from brink as Morgan Tsvangirai calls off boycott”, The Guardian, 6 November 2009
22 “UK Zimbabweans jeer Tsvangirai as he urges them to return home”, The Independent, 21 June 2009
law and respect for human rights are two areas requiring urgent and significant improvement.

**The new Constitution**

19. Article 6 of the GPA provides for the adoption of a new Constitution for Zimbabwe within 18 months of implementation of the GPA, subject to approval in a referendum. A parliamentary select committee, comprising the three parties (ZANU-PF, MDC-T and MDC-M) has been established to guide the constitution-making process. DFID believes that a “successful review and implementation of the Constitution would likely strengthen the separation of powers and could increase the prospects of free and fair elections.” It says that, together with other donors, it “is considering support which can make this a more open and accountable process, including strengthening parliamentary oversight and supporting wider civil society engagement.”

20. There are differences over whether the “Kariba Draft” for a new Constitution, which provides for substantial presidential executive powers, or a more “people-driven” approach, as called for by civil society and some within MDC-T, should form the basis of the new Constitution. Dr Kibble questioned the scope for public involvement in the process: “Despite the existence of a Constitutional Parliamentary Committee (COPAC), one of its three chairs has recognised that a culture of fear gripping a population that has endured years of political violence […] could hamper free debate.”

21. We regret that development of a new Constitution for Zimbabwe is making such slow progress. We agree with DFID’s assessment that its implementation could increase the prospects for free and fair elections in the future. We recommend that, in response to this Report, DFID provide us with more information about the support it is giving, jointly with other donors, to the constitution-drafting process.

**DFID support for the Prime Minister’s Office**

22. DFID’s governance support has included technical assistance to the Office of the Prime Minister (OPM). The aim of the support was to enable the OPM to fulfil its functions set out in the GPA to lead policy design and implementation. DFID’s £450,000 funding has supported a core team of two consultants from the Adam Smith International, with experience in supporting central government systems. The aim of the programme, which started in June 2009 and operated until the end of December, was to “strengthen the systems for designing, monitoring and communication of Government of Zimbabwe’s policies and priorities.”

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24 Ev 49

25 Although the Kariba draft was agreed by senior party members from each of the three groupings in the context of negotiations in 2007, it is now rejected by many in MDC-T. It is, however, specifically referred to in the GPA document

26 Ev 66

27 Q 58, Ev 51; see also information available on the Project Details section of the DFID website at www.dfid.gov.uk
23. Mr Tsvangirai has written to DFID requesting an extension of the support which would maintain the same focus, including to the Prime Minister’s role in leading executive business in Parliament. When we met him, he reiterated his appreciation of the support his Office had received and the need for this to be extended. The DFID Minister of State told us that he would look sympathetically at further requests for assistance from the Prime Minister. DFID’s support was designed to enable the Office of the Prime Minister to perform the normal functions that a head of government’s office would usually undertake, including oversight of the budget, ensuring ministries followed through on the Government’s agreed work plan and helping to resolve disputes between government departments.28

24. DFID’s support for the Office of the Prime Minister has clearly been valuable and has been much appreciated by him. We recommend that DFID extend this support for a further period. This will enable progress achieved to date to continue, in terms of strengthening the capacity of the Office to oversee the smooth running of government departments and implementation of policy, and to lead on executive business in Parliament.

**Political violence and lack of security**

25. The UN Office for the Coordination of Humanitarian Affairs (OCHA) states that “political instability and related violence in Zimbabwe has placed considerable strain on coping mechanisms and income-generating activities, and contributed to [an] increase in unemployment”.29 Widespread repression and human rights abuses occurred before, during, and after the 2008 elections. OCHA has estimated that post-election violence in May 2008 displaced over 36,000 Zimbabweans.30 DFID reports that incidents have decreased under the GNU. However, arrests of civil society activists and trade unionists have continued, as well as land invasions and politically motivated attacks against parliamentarians, with “weak and inconsistent responses from the judiciary.” There have also been recent reports of serious human rights abuses in the Marange diamond fields.31 We were also told that diamonds were probably being illegally expropriated and proceeds diverted to ZANU-PF.32

26. DFID stresses that “reform of the security and justice sector into a set of professional and accountable institutions is essential.”33 Dr Kibble was concerned that the militarisation of the state which had occurred over the last 10 years had not been challenged.34 He told us that:

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28 Q 58
29 UN Office for the Coordination of Humanitarian Affairs (OCHA), Zimbabwe Consolidated Appeal: Mid-year Review 2008, p 1
30 UN OCHA, Annual Report 2008, p 95
31 Ev 49
32 This information was provided in informal discussions. It was also referred to in the Zimbabwean press—see for example “ZANU-PF looting natural resources”, The Zimbabwean, 12 January 2010
33 Ev 49
34 Q 2 [Dr Kibble]
[...] despite the signing of the [...] GPA [...] little progress has been made in the protection and promotion of human rights in Zimbabwe as seen by the sustained levels of violence from month to month [...] Some reports received by the Human Rights Forum indicate that ZANU-PF bases that were used as places to torture and maim supporters and purported supporters of the MDC during the electoral violence [...] are still operational or re-activated. [...] The harassment and intimidation of human rights and MDC activists was persistent [...] Rape is also reported to be used as a political weapon. The legacy of nine years of abuses against Zimbabwean citizens still has to be addressed. An estimated 25,000 people have been the victims of human rights abuses, along with 200,000 displaced, endemic torture, beatings and murders.35

It has been reported that Gertrude Hambira, Secretary-General of the General Agricultural and Plantation Workers Union of Zimbabwe, whom we met during our visit, is in hiding and fears for her safety after police raid the union’s head office.36 This illustrates the continuing threat of political violence and the need for such cases to be highlighted internationally.

27. Continuing political violence and lack of security has resulted in the displacement of many Zimbabweans, the migration of many thousands to neighbouring countries and the closure of many schools and medical facilities throughout the country. It compromises donors’ ability to provide support to Zimbabwe’s development and should be an ongoing concern to the international community.

The economy

28. Article 3.1 of the Global Political Agreement (GPA) states that the parties agree:

To give priority to the restoration of economic stability and growth in Zimbabwe. The Government will lead the process of developing and implementing an economic recovery strategy and plan. To that end, the parties are committed to working together on a full and comprehensive economic programme to resuscitate Zimbabwe’s economy, which will urgently address the issues of production, food security, poverty and unemployment and the challenges of high inflation, interest rates and the exchange rate.37

29. According to the World Bank, Zimbabwe’s economy grew strongly in the decade following independence, and living standards improved considerably. Economic growth started to slow down in the 1990s due to a balance of payments crisis and droughts. In 1998 agriculture accounted for 22% of GDP.38 The effect of land seizures and drought on agricultural productivity has therefore been one of the key elements in the economic decline (see below). Zimbabwe’s economy has continued to deteriorate, reaching critical

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35 Ev 71–72
36 See“Zimbabwean union leader in hiding after police raid”, Amnesty International website, 24 February 2010 and “Union leader flees to South Africa”, zimonline, 2 March 2010
37 Government of Zimbabwe, Global Political Agreement, Article 3.1, September 2008
38 World Bank, Zimbabwe At A Glance
levels. GDP fell by a third between 1999 and 2006. Economic decline was accompanied by hyper-inflation: in July 2008, Zimbabwe’s Central Statistical Office announced the official inflation rate to be 231 million per cent. However, some international economists considered that the real rate was substantially higher.

30. Unemployment reached 94% in January 2008. Out of the country’s 12 million people, only 480,000 had formal jobs, a reduction from 3.6 million (30%) in 2003. The high rate of unemployment has, according to Dr Kibble, “driven tens of thousands of professionals to leave the country to find work abroad [and] millions of less-skilled others into the southern Africa region and Europe.”

31. In January 2009 the Zimbabwean Government decided to abandon the Zimbabwean dollar and use the US dollar. A budget statement in the same month indicated that the Reserve Bank of Zimbabwe would be taking a less prominent role in economic management of the country. The Finance Minister, Tendai Biti, announced a revised budget in March, which introduced an economic plan (the Short Term Emergency Recovery Programme) aimed at reinstating fiscal discipline and resuscitating productivity. These changes have had a positive impact in many areas. GDP growth for 2009 is estimated at 3.7% and forecast to be 6.0% in 2010.

32. Concern about the economy increased again in February 2010 when President Mugabe introduced a law, which came into effect on 1 March, that required white-owned companies with an asset value of over $500,000 to surrender 51% of their shareholdings to black Zimbabweans. The law was introduced by the President without consultation with his partners in the coalition government. He compared it to his “revolutionary land reforms” (see below). He said that only “indigenous” people could control the country’s resources. He had previously declared that white Zimbabweans were not “indigenous, even though they were born here [Zimbabwe]. They are the offspring of settlers.” It has been reported that when the new law was announced there was an immediate halt on billions of dollars of investment plans, including a $500 million project for the expansion of a platinum mine by a South African-based company. The Financial Times has reported that economists, business leaders and trade unionists have warned that the new “indigenisation” law would “wreck any chance of attracting foreign investment and strangle the economy’s weak recovery.” We agree with this assessment.

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40 “Dollarization of Zimbabwe’s economy appears to vanquish hyperinflation”, VoANews.com, 24 March 2009
41 “Zimbabwe unemployment soars to 94%”, AFP, 29 January 2009
43 Ev 49. The South African Rand is also widely used in some parts of the country, Ev 69. See also “Has Zimbabwe’s runaway inflation been tamed?”, Time, 26 March 2009
46 “Mugabe seeks local ownership for every company”, Financial Times, 2 March 2010, p 11. The law is referred to in the press as the “Indigenisation Act” but is in fact a Statutory Instrument, *Indigenisation and Economic Empowerment (General) Regulations 2010.*
47 “Mugabe forces handover of white-owned companies to black Zimbabweans”, Times Online, 1 March 2010
48 “Mugabe seeks local ownership for every company”, Financial Times, 2 March 2010, p 11
Relations with the International Monetary Fund

33. In 2001, the International Monetary Fund (IMF) imposed a series of measures on Zimbabwe in response to the high level of arrears to two of its main funding mechanisms for developing countries, the Poverty Reduction and Growth Facility (PRGF) and the General Resource Account (GRA). In 2002, Zimbabwe’s further failure to meet its financial obligations resulted in the IMF suspending the provision of technical assistance to Zimbabwe; and in 2003 Zimbabwe’s voting rights at the IMF were suspended. Zimbabwe settled its GRA arrears in 2006.49

34. Following the recent improvement in Zimbabwe’s economy and its co-operation on economic policies there has been progress towards normalisation of the country’s relationship with the IMF. The IMF approved the provision of technical assistance in May 2009. On 19 February 2010, following a request from Zimbabwe’s Finance Minister, the IMF Executive Board announced that Zimbabwe’s voting and related rights had been restored, together with its eligibility to use resources from the GRA. However, the IMF says that “notwithstanding the restoration of eligibility to use GRA resources, Zimbabwe will not be able to use resources from the GRA or the Poverty and Reduction and Growth Trust (PRGT) until it fully settles its arrears to the PRGT” of $140 million.50

35. Normalisation of Zimbabwe’s relations with the international financial institutions will clearly be a major contributor to its economic recovery. We welcome the IMF’s approval of technical assistance to Zimbabwe and the restoration of its voting and related rights as a major step in this process, in response to the economic recovery in the country. We would urge the IMF to continue to engage with the Government of National Unity, with a view to making further progress towards restoring the availability of funding, and to support Zimbabwe in its efforts to work towards meeting the loan approval criteria.

EU restrictive measures

36. In February 2002 the European Council imposed restrictive measures (“sanctions”) against Zimbabwean individuals following the expulsion of the head of the EU observer team covering the presidential elections. The Council said that the “EU remained profoundly concerned at the continuing political violence, the serious violations of human rights and the restrictions on the media in Zimbabwe.” They questioned the prospects for free and fair elections.51 The Council agreed a Common Position which stated that it “prohibits the direct or indirect sale or supply of equipment capable of being used to repress the people of Zimbabwe.” It also “freezes all funds, financial assets or economic resources of persons [named in an annex to the Common Position] who are engaged in activities that seriously undermine democracy, respect for human rights and the rule of law.

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49 “IMF executive board restores Zimbabwe’s voting rights and takes steps towards unfreezing access to the General Resource Account”, IMF press release, 2010/pr1053, 19 February 2010. The PRGF has since been renamed the PRGT-Poverty Reduction and Growth Trust

50 ibid

51 European Commission, Bulletin of the European Union, 1/2–2002
in Zimbabwe.” Additionally, a ban on travel to the EU was imposed on named individuals.\textsuperscript{52}

37. The restrictions target approximately 200 individuals and 40 companies, linked to the ZANU-PF party.\textsuperscript{53} The US has also imposed sanctions that have frozen the assets of named Zimbabwean individuals.\textsuperscript{54} Since their imposition the sanctions have been used for political purposes by ZANU-PF, who claim that they favour the MDC party. The state-controlled media argues that the sanctions are targeted at all Zimbabweans, not just named individuals. President Mugabe and his supporters have repeatedly demanded that the UK remove the sanctions. President Mugabe has also used the restrictive measures to accuse the UK and US “of seeking to oust him by imposing economic sanctions.”\textsuperscript{55}

38. In February 2010 the European Council renewed the restrictive measures for a further year. However, it also emphasised its “readiness to work closely with the Government of National Unity in addressing the challenges the country faces and in the implementation of its commitments as set out in the Global Political Agreement”. While recognising the progress made by the GNU after a year in office, the Council nevertheless noted “with concern” that insufficient progress had been made with “regard to the rule of law, respect for human rights, constitutional reform, power sharing on equal terms, national reconciliation, security sector reform and the protection of investors.” It said that the restrictive measures would be kept under review and that they would be revoked “in response to further concrete developments in the implementation of the GPA.”\textsuperscript{56}

39. Donald Steinberg of the International Crisis Group told us that:

Tough targeted sanctions against such individuals and the companies they control should remain in place to secure the commitment of the recalcitrant parties to their commitments under the GPA. At the same time, the international community must recognize and encourage changes now occurring. One tangible step would be to consider lifting sanctions of certain entities, such as the Agricultural Bank of Zimbabwe, that help revitalize key sectors of the economy without overly benefitting the intransigent parties.\textsuperscript{57}

He suggested that “The UK and EU should make clear to Zimbabwe the specific steps it needs to see in order to lift these and other sanctions.”\textsuperscript{58}

40. President Zuma of South Africa made a state visit to the UK at the beginning of March. He argued for the lifting of sanctions both in advance of and during the visit, saying that they were “one-sided” and had “served only to divide the already fragile power-sharing government in Zimbabwe”. He believed that Zimbabwe could not be expected to sort out
its problems while the GNU was subject to two different sets of rules. The UK Prime Minister’s response was that some sanctions had been lifted but that those which remained in place targeted individuals with a history of supporting violence, rather than ordinary Zimbabweans. He stressed the need for the Commissions on human rights, media and governance established under the GPA “to move forward quickly so people can see the future of Zimbabwe as a democratic, prosperous country with freedom of the press and where there is respect for human rights.”

41. The EU has renewed the restrictive measures on named individuals and organisations in Zimbabwe for another year. We agree that further progress on democracy and human rights needs to be demonstrated before all the measures can be lifted. The UK should continue to make clear the basis of the measures, and their specific terms, to the people of Zimbabwe. It should also continue to support governance reforms which will help Zimbabwe move to a position where the measures can be removed.

Land reform

42. The 1979 Lancaster House Agreement placed restrictions on land acquisition which protected white farm-owners. A system of “willing-seller, willing-buyer”, at full market value, was instituted in the first 10 years following independence. In 1990 President Mugabe amended the constitution to allow compulsory acquisition of white-owned land, but few farms were acquired at that time. DFID says that in 2000 the Government began the Fast Track Land Reform Programme “ostensibly to address the inequitable distribution of land once and for all”. In practice, it resulted in the occupation of thousands of commercial farms “at a high cost to the economy and the people in general.”

43. Since the land seizures started, more than 200,000 farm-workers have lost their jobs and a million people have been displaced. DFID says that total commercial agricultural production has more than halved, (although, more positively, the Commercial Farmers Union told us that they had recently successfully promoted advisory programmes for farmers which had led to increased production). Professor Brett told us that the land seizures “have removed most of the best commercial farmers from their land and replaced them with small-holders operating at little more than subsistence level, and political cronies on large farms that they cannot run effectively.” He believed that the current land reform process had resulted in a situation where “handing over the land to the people means handing it over to generals who are now starving the people.”

59 “Zuma will ask UK to lift sanctions”, Financial Times, 24 February 2010 and “Zuma calls for sanctions on Zimbabwe to be lifted”, The Guardian, 2 March 2010
60 “Brown firm on Zimbabwe sanctions”, BBC News website, 4 March 2010
61 “Brown rebuffs Zuma on Zanu-PF sanctions”, Financial Times, 5 March 2010
63 Ev 61
64 Ev 61
65 Ev 41
66 Q 6
44. When our predecessors examined Zimbabwean land reform as part of their inquiry into the humanitarian crisis in Southern Africa in 2003 they said that “the disruption caused by the government’s disastrous land reform programme has severely undermined agricultural production and created a [...] new class of vulnerable people, farm workers and their families, who have lost their livelihood as a result of the land resettlement programme.”67 Seven years on, the situation has not changed: agricultural production is still severely reduced and even more farm-workers and their families have lost their livelihoods and homes. The DFID Minister condemned the farm invasions that had taken place and pointed out that “terrible human rights abuses” had been committed as part of the invasions. This was “completely unacceptable” on an individual basis, but also in terms of the “devastating impact it has had [...] on the rural agricultural economy.”68

45. A recent report from the Africa All-Party Parliamentary Group (APPG), *Land in Zimbabwe: past mistakes, future prospects*, says that the major consequence of the Fast Track Land Reform Programme has been the loss of farming skills, not just the management and agricultural skills of the white farmers, but also those of their skilled farm-workers.69 It recommends that any future land reform policy must seek to:

- Address the political as well as the economic tensions at the heart of the land issue in Zimbabwe;
- End the dual land tenure system and ensure that there is a uniform system;
- Establish institutions to consult with the stakeholders, administrate land policy and implement transparent, fair and sustainable land reform and resettlement within the rule of law;
- Establish and pay fair compensation for land acquisition and losses;
- Increase agricultural production to its full potential and address the ongoing under-utilisation of land.70

46. The Global Political Agreement includes provision for the “conduct [of] a comprehensive, transparent and non-partisan land audit [...] for the purpose of establishing accountability and eliminating multiple farm ownerships”.71 The NGO Action for Southern Africa (ACTSA) said that the “issues are who owns, controls and benefits from the land.” It called for a “comprehensive response” that addressed land title, historic injustices of land ownership, sustainable livelihoods and poverty reduction. It supported appeals for a land audit and suggested that the UK Government should provide funding to support a transparent and accountable process of land reform.72

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68 Q 75
70 ibid, p 40
71 Government of Zimbabwe, *Global Political Agreement, Article 5.9*, September 2008
72 Ev 36-37
47. DFID agrees that the first step towards reform would be for a land audit to take place. However, the Minister believed that there would only be merit in conducting a land audit if there was confidence that the information obtained would be used to “promote the type of pro-poor, sensible, transparent land reform” that would revive the rural economy. He said that DFID was ready to support a land audit, as part of a wider international effort, if the conditions were right. He considered that they were not right at present. Moreover, it was far from clear that all parties in the Inclusive Government wished a fairer land policy to be introduced.

48. The GNU Finance Minister allocated $30 million (£18.8 million) for the land audit in his December 2009 budget, to clarify who owns what land and to ensure that no-one owns more than one farm. Zimbabwe has, however, undertaken land audits in the past. A Presidential Land Review Commission produced an audit in 2003, but the full report was not published. Donald Steinberg highlighted that the Minister of Agriculture had said that it was too soon to undertake a new land audit. His own view was that a land reform programme was “absolutely necessary” but that now may not be the right time for the international community to be putting funds into the process.

49. Land reform in Zimbabwe is a complex issue. It is also a highly-charged political issue between Zimbabwe and the UK. However, resolution is essential for political stability and continued economic recovery. Land seizures have had a devastating impact, both on individual farm-owners and workers and on the agricultural economy, and should cease. We agree with the DFID Minister that the terrible human rights abuses which have taken place as part of farm invasions are completely unacceptable. The first stage in the land reform process should be a comprehensive and transparent land audit, as laid down in the Global Political Agreement. The timing of the audit is a matter for the Government of National Unity. The process should be supported by the international community, including the UK.

50. In the longer term, the UK should be prepared to join other donors to fund land reform as part of a wider rural and agricultural development strategy, provided the Government of Zimbabwe is able to give credible assurances that such a process will transfer land to the landless poor. However, the responsibility for compensating people for land seizures lies with those who seized land or condoned seizures.
3 Regional relations

51. DFID states that Zimbabwe’s economy and its external relations are tied into the region in three ways:

- by the prominent political role played by Zimbabwe in regional institutions such as SADC and the Common Market of Eastern and Southern Africa (COMESA);
- through trade links facilitated by these institutions; and
- by significant outward migration from Zimbabwe.\(^{77}\)

Zimbabwe had a greater regional economic role in Southern Africa until 1994, when apartheid ended in South Africa. Many businesses, NGOs and media organisations which had their headquarters in Harare have now moved to South Africa, thereby diminishing the role of Harare in the region. Zimbabwe’s trade volumes have extensively declined as the economic crisis has developed.\(^{78}\) Professor Brett said that “Zimbabwe used to be the major player after South Africa in the regional economy and all of that has gone [... it] has imposed huge losses on everybody in that region.”\(^{79}\) International Crisis Group highlighted the major regional impact which Zimbabwe’s recovery could make: “a prosperous Zimbabwe could be an engine of growth for the region, providing key links to regional communications, transport and electricity grids.”\(^{80}\)

52. Zimbabwe used to produce large amounts of agricultural surpluses that were exported to neighbouring countries and the rest of the world. Since the collapse of the economy and the huge reduction in agricultural productivity, Zimbabwe has been unable to supply vital food crops to its neighbours, and has required food aid to feed its own people. Ending food exports to its neighbours has contributed to the strains in its relations with them.

53. When our predecessors examined the humanitarian crisis in southern Africa in 2003 they reported that the “dire situation in Zimbabwe has major implications for the rest of southern Africa [...] as regards both the availability and price of food, especially maize, and the delivery of food aid and commercial imports.” At the time DFID commented:

The fact that Zimbabwe, normally a food supplier and a key transit country, has suffered such a collapse in agricultural production has made the situation in neighbouring countries worse and weakened the prospects for recovery; for the longer term, it throws into question one of the bases of food security planning in southern Africa for the last 20 years, namely that surpluses would normally be available in Zimbabwe.\(^{81}\)

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77 Ev 62
78 Ev 62
79 Q 10 [Professor Brett]
80 Ev 80
Since 2003, the situation has further deteriorated, with more commercial farms having been appropriated and agricultural production continuing to fall.

**Migration**

54. High unemployment, compounded by political instability and violence, has driven tens of thousands of professional and skilled workers to leave Zimbabwe to find work abroad. Steve Kibble explained that it was difficult to calculate accurately the number of people who have left Zimbabwe. Some attempts have been made to do this, either by counting them or by extrapolating from what the population would have been, taking into account the HIV/AIDS epidemic and other factors. He concluded that the estimated numbers of migrants was “up to three million”. The majority of skilled migrants are in South Africa, Botswana or the UK. Millions of less-skilled workers have migrated to other Southern African countries and Europe.\(^{82}\)

55. South Africa has the largest population of Zimbabwean emigrants with an official estimate of just over one million, although DFID says that the real number is likely to be significantly higher. 82% of emigrants are estimated to have a formal qualification and 38% a first or higher degree.\(^{83}\) Dr Kibble explained that there was a problem in that local people in neighbouring countries saw Zimbabweans living there purely as economic migrants who were simply seeking jobs, and took the view that it was “nothing to do with the current crisis inside Zimbabwe”.\(^{84}\) However, the point was also made to us in informal discussions that South Africa had benefited economically from the influx of skilled and professional Zimbabweans and also from the pool of cheap Zimbabwean labour for construction work associated with preparations for the football World Cup this year.

56. Relations between Zimbabwe and its southern neighbours, South Africa and Botswana, have deteriorated due to this migration. International Crisis Group says that “instability in Zimbabwe is profoundly destabilizing to its neighbours. Zimbabweans fleeing economic hardship and political abuses have flooded across borders, overwhelming the social services and the good will of South Africa, Botswana, and other neighbours”.\(^{85}\) Malawi has had to cope with different problems arising from its citizens returning from Zimbabwe, following the closure of many mines there, where Malawians had been employed. Meanwhile, the plight of former farm-workers in Zimbabwe, who were largely of Malawian descent, has caused tensions between the countries.\(^{86}\)

**Southern African Development Community**

57. ACTSA told us that the “region wants a resolution to the crisis of Zimbabwe” but that the solution “has to come from Zimbabwe, facilitated and encouraged by the region.” The Southern African Development Community (SADC) is taking the lead in supporting the

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82 Q 10 [Dr Kibble]. See also Dr Steve Kibble, “Who Controls the ‘New’ Zimbabwe”, February 2009, p 3 [Unpublished paper]

83 Ev 63

84 Q 10 [Dr Kibble]

85 Ev 80

mediation process in Zimbabwe, on behalf of the African Union. SADC now has 15 member states. Its vision is:

[...] one of a common future, within a regional community that will ensure economic well-being, improvement of the standards of living and quality of life, freedom and social justice; peace and security for the peoples of Southern Africa. This shared vision is anchored on the common values and principles and the historical and cultural affinities that exist amongst the peoples of Southern Africa.

SADC has agreed that South Africa should mediate on its behalf in Zimbabwe. As we have described, SADC facilitated agreement on the GPA and the formation of the GNU, under the mediation of the then South African President, Thabo Mbeki.

58. According to Donald Steinberg, South Africa is applying pressure on the parties in Zimbabwe to implement the GPA fully, but he believes it needs to do so with the cooperation of the international community. The DFID Minister considered that SADC had a key role to play in resolving Zimbabwe’s economic problems, and that it had accepted that role in terms of acting as guarantor of the GPA. President Zuma of South Africa had appointed a "high-level team with significant reputations [...] to lead on [the] mediation process". The Minister was encouraged that this process was in progress; he told us that it should be respected and that the UK was monitoring the situation closely. He stressed that the UK looked to the “leadership of both South Africa and SADC [...] to provide that on-the-spot mediation work that they are doing.”

59. Following the formation of the GNU, SADC members have also urged the African Development Bank, the International Monetary Fund, the World Bank and western donors to support the GNU financially. ACTSA noted that South African businesses were increasing investment in Zimbabwe and that private sector investment from across the region could assist economic recovery.

60. SADC has also been involved in the land reform issue. The SADC Tribunal ruled on 28 November 2008 that Zimbabwe’s planned seizure of dozens of white-owned farms violated international law and should be halted immediately. The Economist took the view that the Zimbabwean authorities had displayed their contempt for SADC decisions by pouring scorn on the judgment that had “ruled in favour of 79 white farmers whose land had been targeted for confiscation under Mr Mugabe’s land-reform programme”. It reported a Zimbabwean Government official as saying the tribunal was “daydreaming” if it thought the Government would comply with the ruling. Dr Kibble considered that, although a judgment might be passed by the SADC Tribunal, there was no mechanism to put the
judgment into practice “without the SADC political organisations taking part and that [...] is obviously much trickier.”

Professor Brett told us:

SADC and South Africa are seen as legitimate interlocutors by both parties [ZANU-PF and the MDC], but the MDC and civic organisations claim, with some justice, that their explicit or implicit support for ZANU over the past decade enabled it to manipulate elections, retain political power and destroy the economy. They did help to broker the GPA but have failed to oblige ZANU to honour its agreements. However, they have been forced to deal with the MDC since the 2008 victory, and do recognise the need for a viable solution to reduce the heavy costs that the crisis has imposed on the region.

61. The member states of the Southern African Development Community (SADC) are the guarantors of the Global Political Agreement (GPA). We believe that the UK Government should urge SADC collectively, and South Africa in particular, to continue to work with the Government of National Unity towards full implementation of the GPA. We are disappointed that Zimbabwe has defied the SADC Tribunal ruling on land seizures. Zimbabwe should recognise the authority of SADC. The fact that there are no mechanisms for enforcement of the ruling is a matter of concern to us and should be addressed.

62. SADC should also fully support economic recovery in Zimbabwe. This would bring wider benefits to the whole region, not just to Zimbabwe itself. It would also encourage Zimbabwean migrants to return and help address the tensions which the large number of migrants in neighbouring countries has caused.
4 DFID’s work in Zimbabwe

DFID’s current approach

63. DFID told us that the formation of the GNU changed the balance of risk and opportunity, and “justified a structured and incremental re-engagement with Zimbabwe”.96 It said that:

We have focussed on aligning behind the Government of Zimbabwe’s own commitments as agreed by the three main parties in the GPA. This cohesion has been time-consuming to build and maintain but it has become a very useful mechanism to communicate clearly with the Inclusive Government around the kind of reform needed in Zimbabwe for donors to increase their support.97

Although the GNU has provided an opportunity for greater engagement and an improved working relationship between DFID and elements of the Zimbabwean Government, DFID’s view is that “the Inclusive Government is not yet the partner we require to sustain a full development relationship.”98 It says that “no money at present goes through Government systems. However, in line with the cross-Whitehall strategy for Zimbabwe, [DFID has] recently begun to provide technical assistance and policy support to reforming Ministries to help build momentum for political and economic change.”99

64. Donor re-engagement will be determined against implementation of the GPA and progress towards the “Hague Principles” established for international engagement with Zimbabwe.100 These state that non-humanitarian assistance will be closely linked to progress on governance and democracy. Any approved assistance would be targeted only towards reform-minded elements of the transitional government. The reforms specified in the Principles include:

- full and equal access to humanitarian assistance;
- commitment to macro-economic stabilisation;
- restoration of the Rule of Law, including enforcement of contracts, an independent judiciary, and respect for property rights;
- commitment to the democratic process and respect for internationally accepted human rights standards, including a commitment to freedom of expression, freedom of print and broadcast media, freedom of assembly, and freedom of association; and
commitment to timely elections held in accordance with international standards, and in the presence of international election observers.101

65. DFID highlights that the uncertain future in Zimbabwe requires “a flexible and adaptable strategy” to ensure that it can continue to deliver “a high impact aid programme under volatile and challenging conditions and under a range of potential scenarios, from strong reform and change to sharper decline and deterioration”. The core of its programme aims to deliver practical assistance “to poor and vulnerable people in greatest need, including humanitarian assistance and protracted relief and basic services”.102

66. The UK is one of the leading donors in Zimbabwe, as shown in the table:

<table>
<thead>
<tr>
<th>Year</th>
<th>UK ($ millions)</th>
<th>EC ($ millions)</th>
<th>US ($ millions)</th>
<th>Total ODA ($ millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980</td>
<td>160.6</td>
<td>29.7%</td>
<td>14.9%</td>
<td>69.8%</td>
</tr>
<tr>
<td>1981</td>
<td>174.7</td>
<td>19.7%</td>
<td>2.0%</td>
<td>14.9%</td>
</tr>
<tr>
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<td>17.5%</td>
<td>4.8%</td>
<td>3.3%</td>
</tr>
<tr>
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<td>5.0%</td>
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<td>8.7%</td>
<td>24.6%</td>
</tr>
<tr>
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<td>1.7%</td>
<td>23.8%</td>
</tr>
<tr>
<td>1986</td>
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<td>6.9%</td>
<td>1.7%</td>
<td>12.1%</td>
</tr>
<tr>
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<td>5.6%</td>
<td>2.4%</td>
<td>12.0%</td>
</tr>
<tr>
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<td>11.2%</td>
<td>5.9%</td>
<td>3.7%</td>
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<tr>
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<tr>
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<td>5.2%</td>
<td>5.7%</td>
</tr>
<tr>
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<td>14.1%</td>
<td>8.4%</td>
<td>9.3%</td>
</tr>
<tr>
<td>1998</td>
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<td>1.7%</td>
<td>8.2%</td>
</tr>
<tr>
<td>1999</td>
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<td>11.5%</td>
<td>-0.8%</td>
<td>7.5%</td>
</tr>
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<tr>
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</tr>
<tr>
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<td>11.2%</td>
</tr>
<tr>
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<td>25.1%</td>
<td>19.7%</td>
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<tr>
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<tr>
<td>2008</td>
<td>611.0</td>
<td>14.6%</td>
<td>10.1%</td>
<td>36.5%</td>
</tr>
</tbody>
</table>

Note: (a) Multilateral agencies were -$16.3 million, and non-DAC countries -$0.6 million in 2000.

Source: OECD, Development Assistance Committee database, table 2a (accessed 12 March 2010)

102 Ev 50
DFID has allocated £60 million to Zimbabwe for 2009-10. £55 million is being spent on meeting humanitarian and other essential needs; £4 million is supporting local food production, including tools, seeds and fertilisers; and a contribution of £1 million has been made to procurement of school textbooks. DFID delivers its aid programme in Zimbabwe through UN agencies and established NGOs. The division of funding between NGOs and multilateral agencies is shown in the figure below.

**Delivery routes for DFID bilateral aid to Zimbabwe (excluding humanitarian assistance)**

![Graph showing distribution of aid between NGOs and multilateral agencies]

*Source: DFID, Statistics on International Development 2004/05 – 2008/09, p 46*

**Working with NGOs**

67. NGOs who work with DFID were positive about its approach. World Vision welcomed DFID’s efforts to address the complex causes of vulnerability in Zimbabwe. It said that DFID balances “the needs of relief and transitional work in the country”. The “focus on social protection and the rights of vulnerable groups” was especially appreciated as these policies had made funding available to agencies not previously engaged in human rights issues. Christian Aid also praised DFID’s work: “In Harare, DFID has consistently been one of the most forward-thinking donors; often setting the agenda for counterpart donors, UN agencies and NGOs.”

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103 Ev 52  
104 Ev 92  
105 Ev 43
68. However, Christian Aid also voiced some concerns. It said that DFID had “appeared to channel a large proportion” of financial aid for its short-term emergency support through UN agencies, which had occasionally worked against NGOs. It pointed to the UN administration fee applied when agreeing contracts with implementing NGOs and the “seemingly bureaucratic nature of grant disbursement for relief activities”, which could take many months. It argued that this “has the potential to render DFID’s response to rapid onset emergencies, such as health epidemics, less effective.”\textsuperscript{106} NGOs also raised with us some specific concerns about DFID’s use of managing agents for the Protracted Relief Programme (PRP). We discuss these in the section on the PRP below.

69. Many international NGOs supported by DFID implement their programmes in Zimbabwe through local civil society organisations (CSOs). As well as playing a key part in delivering services, DFID says that CSOs play an important role in strengthening state accountability through:

\begin{quote}
[...] protecting the human rights of Zimbabwe's citizens, supporting their participation in key decision making processes, strengthening the media and doing more to monitor state performance. Key priorities include the Constitution-making process, media, Parliament and the next elections.\textsuperscript{107}
\end{quote}

Support for these activities is made available to CSOs through DFID’s normal central funding channels including the Civil Society Challenge Fund, Programme Partnership Agreements and the Governance and Transparency Fund (GTF). Funding from the Zimbabwe country office is also provided through the Conflict Pool and a Gender Support Programme.\textsuperscript{108}

**Working with other donors**

70. The UN is the largest manager of DFID funding in Zimbabwe. DFID says that UN agencies, particularly UNICEF and the World Food Programme (WFP):

\begin{quote}
[...] have offered effective and practical ways of working to respond to critical needs, ranging from food aid to essential drugs and [...] ensuring safe drinking water. They have national coverage and are able to negotiate access in politically challenging situations.\textsuperscript{109}
\end{quote}

DFID currently leads the Donor Steering Committee in Zimbabwe. The DFID Minister believed that donor co-ordination with OECD DAC bilateral donors was working fairly well but that co-ordination with the World Bank and UN agencies could be improved.\textsuperscript{110}

71. World Vision commended DFID’s leadership, but believed that co-ordination among donors needed to be further improved, to address inconsistencies and overlaps in funding. It was encouraged by the formation of a Multi-Donor Trust Fund (MDTF) (see below) and

\begin{footnotes}
\item[106] Ev 43
\item[107] Ev 54
\item[108] Ev 54
\item[109] Ev 54
\item[110] Q 80
\end{footnotes}
the pivotal role DFID played in its development. However, it called for DFID to “lead the development of a broader common strategy among donors for Zimbabwe, which should include common needs and [...] impact assessments for the whole country.” Rob Rees of CAFOD expressed concern about DFID funding through multilateral agencies in the health sector. In particular he said that there had been “lots of delays [...] in the provision of the relief assistance” which DFID had channelled through UNICEF during the cholera epidemic in 2009.

**World Bank and African Development Bank**

72. Between 1980 and 2000 the World Bank provided $1.6 billion in assistance to Zimbabwe. The World Bank suspended its lending programme to Zimbabwe in 2000, when the country went into arrears. In 2008 these were estimated at $600 million with a further $429 million owed to the African Development Bank (AfDB). The World Bank stated that resumption of financial support would hinge on arrears clearance and government commitment to a sound economic recovery programme with international support. Its role in Zimbabwe has been restricted to technical assistance and analytical work focusing on macroeconomic policy, food security, the social sector, infrastructure, and HIV/AIDS programmes. Engagement with the AfDB has been similarly limited due to arrears.

73. However, as the political and economic situation in Zimbabwe has improved, the World Bank and AfDB have both increased their involvement in the country. The AfDB is providing technical assistance and funding. The World Bank is providing the secretariat for a Multi-Donor Trust Fund (MDTF). DFID’s written evidence indicated that:

> A second MDTF mechanism focused on major programme funding will now enable donor funding to flow into infrastructure investment, using World Bank procedures to ensure funds are allocated and implemented effectively. These funds will be mostly targeted at critical poverty reducing and growth enhancing investments (eg water supplies and possibly energy) where the World Bank is especially well placed.

However, the DFID Minister stressed that this second MDTF was “not up and running yet”.

**Humanitarian aid**

74. Analysis on which DFID has drawn shows that humanitarian assistance will continue to be required in Zimbabwe for at least another two years. It attributes this to “the impact of failed policies—including chaotic land reform, economic mismanagement and collapse,
the erosion of basic services and the general challenge of erratic rainfalls” which has led to “hunger, and disease outbreaks, coupled with the inability of the most vulnerable to access life-saving services.” Wherever possible DFID is providing multi-year funding to address hunger and vulnerability, while also ensuring it is able to respond rapidly to “sudden onset emergencies”. The table below shows the amount of humanitarian and total bilateral aid provided by DFID since 2003/04.

### DFID bilateral aid and humanitarian assistance, 2003/04 – 2008/09

<table>
<thead>
<tr>
<th></th>
<th>£’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total bilateral aid</td>
<td>36,006</td>
</tr>
<tr>
<td>of which humanitarian aid</td>
<td>25,285</td>
</tr>
</tbody>
</table>

Source: DFID, Annual Report and Resource Accounts 2008-09, Volume 2, p 76

75. The TUC recognised the “significant contribution” which DFID had made to humanitarian assistance in Zimbabwe and expressed its support for its continuation, where necessary and appropriate. However, the TUC also called for the “the expansion of DFID action beyond humanitarian relief into more development-oriented interventions including the provision of technical advice and assistance where appropriate in collaboration with multi-lateral agencies and bilateral donors.” ACTSA believed that “DFID in Zimbabwe has in challenging circumstances supported an informed and effective humanitarian response”. However, it stressed that “humanitarian assistance should avoid seeing Zimbabweans as passive recipients of aid. It should seek to build up self reliance, community organisation and responsibility.”

76. We asked witnesses whether DFID had the right balance between humanitarian aid and development assistance. Dr Kibble pointed out that, with 2.2 million people still food insecure, humanitarian aid should continue, but there was a need to examine how it could be translated into development aid, in a sequential way. He thought that money could be directed into long-term developmental assistance provided it used “clean [...] mechanisms” such as international NGOs and multilateral agencies. He believed that there could be steady progress towards “straightforward developmental assistance” but that direct budgetary support was “quite a long way off yet.”

77. Professor Brett argued that the creation of employment was the most effective intervention to enable people to generate what they needed to support themselves. He felt that DFID had not been investing sufficiently in microfinance and called on it to support...
small micro-enterprise projects that would encourage people to become involved in small businesses.122

Food aid

78. When our predecessors reported in 2003, 7.2 million Zimbabweans were in need of food aid. They noted that the immediate cause then was a “huge shortfall in cereal production” and that poor government was a key factor in the crisis. They concluded that “ politicisation of food aid, the exclusion of the private sector from any role in importing food and poor relationships between the government and donors had hindered responses to the crisis.”123 Last year, the requirement was at a similar level: DFID reported that 7 million Zimbabweans received food aid in early 2009; £9 million was provided by DFID to the World Food Programme (WFP) for this.124

79. Food availability has improved in the last year, which DFID says was due to “a good harvest, an end to the Grain Marketing Board monopoly on importing cereals into the country, dollarisation of the economy and availability of donor-funded agricultural inputs.” Nevertheless, it stresses that “extensive humanitarian support will remain critical to avoid the erosion of livelihoods and protect the health and nutrition status of the vulnerable.”125 WFP estimated that 2.8 million people would require food aid in early 2010 and DFID has allocated £4 million to WFP for this year.126 Mark Lowcock, the Director General for DFID Country Programmes, told us in oral evidence that estimates of future food aid requirements would be updated in late March, once the likely quality of this year’s harvest became clearer.127

80. DFID has provided essential humanitarian support to Zimbabwe, including food aid, over the last decade. Although the situation has improved, DFID believes it will be necessary for humanitarian assistance to continue for at least another two years. We recognise the priority which DFID and other donors have to give to meeting humanitarian needs in Zimbabwe’s current situation. However, we would hope that, as the economy continues to recover, people will be more able to support themselves and donors can then review the need for food aid and other short-term interventions. We recommend that DFID regularly reassess the balance between humanitarian aid and development assistance and that more of its programmes shift to a longer-term development approach at the earliest opportunity.

Internally displaced people

81. The UNDP has estimated that a million farm-workers and their families lost their homes and livelihoods as a result of the Fast Track Land Reform Programme. A further 570,000 people were made homeless by the urban demolitions of Operation
Murambatsvina ("clear the filth") in 2005. In late 2006 and early 2007 the Government destroyed the homes of thousands of informal mine workers in Operation Chikorokoza Chapera ("stop the gold panning"). Estimates of the displacement caused by electoral violence in 2008 range from 36,000 to 200,000 people.\(^\text{128}\)

82. A substantial proportion of Internally Displaced Persons (IDPs) have been displaced multiple times by successive operations. For example, many displaced farm-workers who went to the towns and cities or to mining areas were later caught up in Operation Murambatsvina or Operation Chikorokoza Chapera. Some of the people who were internally displaced have left Zimbabwe and are included in the estimate of three to four million migrants.\(^\text{129}\)

83. The International Displacement Monitoring Centre (IDMC) says that UN agencies and international NGOs have struggled to respond to the needs of IDPs, because of obstruction by the authorities and a lack of clear arrangements for leadership on IDPs’ protection.\(^\text{130}\) The Government of Zimbabwe had consistently failed to acknowledge that its actions have caused a displacement crisis in Zimbabwe, or to take responsibility for providing humanitarian assistance to the victims. It has been extremely difficult for humanitarian agencies to obtain access to displaced communities; even where access has been granted, the Government has often withdrawn its permission on arbitrary grounds. Humanitarian agencies have also often had to plan their interventions on the basis of incomplete information. Both local NGOs and international donors have voiced strong concerns over what they describe as the UN’s overly cautious approach in its dealings with the Government of Zimbabwe. Local NGOs in particular have expressed disappointment that the UN has not done more to create a space for them to assist Zimbabwe’s IDPs.\(^\text{131}\)

84. DFID has allocated £6.5 million over four years for emergency and humanitarian assistance to IDPs.\(^\text{132}\) This includes a programme with the International Organisation for Migration (IOM) that provides emergency assistance, in the form of food, non-food items and temporary shelter, to IDPs, together with humanitarian assistance at border crossings. The IOM are currently assisting 251,000 individuals. In 2006 it established the Beitbridge Reception Centre on Zimbabwe’s border with South Africa, which has assisted 320,000 returning migrants. DFID’s programme is due to end in March 2010.\(^\text{133}\)

85. We asked the DFID Minister about the level of support available for IDPs. He believed that the Inclusive Government was more willing to recognise their existence and needs, but said that he “would not want to downplay the challenges that still remain.” In addition to the direct support DFID provided, many of its mainstream programmes were assisting IDPs. He accepted that there was a clear need for more to be done “across the range”, but

\(^{128}\) Internal Displacement Monitoring Centre (IDMC), Zimbabwe, available at www.internal-displacement.org

\(^{129}\) ibid

\(^{130}\) ibid

\(^{131}\) IDMC, The Many Faces of Displacement: IDPs in Zimbabwe, August 2008, pp 4-6 and 43

\(^{132}\) Ev 56

\(^{133}\) Ev 97
believed that DFID’s programmes, and those of others in the international community, were helping to deliver aid to IDPs.¹³⁴

86. Hundreds of thousands of people in Zimbabwe have been driven from their homes as a result of deliberate, forced evictions by the Government in pursuit of political ends, or in reaction to more general insecurity, violence and intimidation or unemployment. Some have been forced to move several times. DFID is providing support to internally displaced persons (IDPs) through targeted projects and through its general livelihoods and basic service assistance. Its emergency assistance programme for IDPs is due to end shortly but substantial need clearly remains. We recommend that, in response to this Report, DFID clarify how support for IDPs will be provided by the donor community over the next two years and the role which it will play in this assistance.

Protracted Relief Programme

87. DFID’s Protracted Relief Programme (PRP) provides a good example of an intervention which combines humanitarian assistance with longer-term livelihoods support. DFID states that the PRP:

[...]

Phase I of the programme began in mid-2004 and ran for two years at a cost of £18 million. The range of activities helped beneficiaries to increase their food production, and provided home-based care to the chronically ill. PRP I was implemented by 10 international NGOs, many of whom worked with local NGOs and community-based organisations. UN agencies helped provide technical co-ordination, while three international agricultural research centres in Zimbabwe supplied further technical services.¹³⁶

88. Phase II of the PRP started in 2008–09 and will continue until 2012–13. The UK will contribute £54.8 million over that period, with £14.5 million being allocated in 2009–10. PRP II is now a multi-donor programme and includes Australia, Denmark, Norway, Netherlands, the EC and the World Bank. These donor partners will contribute a further £24 million over the lifetime of the programme, most of which will be channelled through DFID. The programme is implemented by a broad range of NGOs.¹³⁷

89. DFID told us that the target for the programme was to reach 300,000 households, which was about two million people, or between 15% and 20% of the population.¹³⁸

¹³⁴ Q 127
¹³⁵ Ev 96
¹³⁶ Protracted Relief Programme: output to purpose review, Food, Agriculture and Natural Resources Policy Analysis Network, available at www.fanrpan.org
¹³⁷ Ev 60-61
¹³⁸ Q 83 and Ev 61
Lowcock said that the programme was already reaching the target number of beneficiaries. DFID says that in 2008–09 the PRP:

- helped almost two million of the poorest people to grow more food;
- helped one million of the poorest people to gain access to clean water;
- provided food vouchers, shelter and access to education for 700,000 urban poor; and
- distributed agricultural inputs to 200,577 households.

PRP II aims to build on the experience of the first phase, with closer collaboration with government. There will be increased emphasis on social protection and the use of “relevant participatory tools”, which will lead to “increased community participation in the planning, implementation, and monitoring and evaluation of partner programmes”.

90. The PRP received praise from several witnesses. Christian Aid said that: “It is arguably the pre-eminent large-scale institutional donor-funded humanitarian programme in Zimbabwe. It is driven by the needs of vulnerable communities, and is relevant, sustainable and cost-effective through NGO implementation”. This was reiterated in oral evidence where it was described as “a flagship programme” which DFID “should be proud of”. World Vision said that: “The implementation of PRP II has been greatly helped by the highly participatory nature of DFID’s design process, which takes into consideration local realities and changing contexts.” Its Chief Executive, Justin Byworth, welcomed the programme’s “focus on the vulnerable, including vulnerable children, combined with a focus on livelihoods to lift up the communities, through such things as conservation agriculture, together with safety net and social protection programming to support those who are most vulnerable.” CARE International UK commended the PRP for the flexibility which it gave DFID “to respond to the basic needs of people [...] with provision of [...] services, such as food distribution, HIV/AIDS support, [and] agricultural [and] livelihoods capacity building.”

91. We saw a number of examples of PRP projects during our visit to Zimbabwe. These included such diverse activities as home-based care; employment generation, including floor-wax production and tailoring; and agricultural development, including provision of fertilisers and seeds, small-livestock farming and farming education. Participants told us about the benefits that they had gained and the difference it had made to their lives.

139 Qt 83–86
140 Ev 61
141 Protracted Relief Programme: Zimbabwe website at www.prpzim.info/
142 Ev 43
143 Q 22 [Mr Anderson]
144 Ev 90
145 Q 22 [Mr Byworth]
146 Ev 42
92. DFID’s Protracted Relief Programme (PRP) has already reached millions of vulnerable people in Zimbabwe and has been praised by the NGOs who participate in it as an innovative, flagship programme of which DFID should be proud. We agree with this assessment. Other donors have already seen the value of funding Phase II of the PRP and it has become an effective multi-donor intervention. Its excellence lies in its ability to meet the needs of the most vulnerable people and the breadth of its reach, from home-based care for sick people to agricultural extension and employment generation. There is clearly further scope for scaling up the programme in Zimbabwe, where the need is still acute for many people, and indeed using the lessons learned to replicate it in other countries. We recommend that DFID explore both these options.

Managing agents

93. As we have described above, the PRP is implemented through a range of NGOs who in turn contract local organisations to deliver services. DFID uses a managing agent, GRM, to administer the programme.\(^{147}\) NGOs drew our attention to some problems which arose from this. Christian Aid told us that the “decision to outsource the management of the PRP to a managing agent needs to be supported by more accessible evidence of cost-effectiveness and efficiency.”\(^{148}\) Rob Rees of CAFOD said that, while he understood DFID’s obligation to reduce transaction costs, the use of managing agents had increased the distance “between civil society organisations that are actually implementing the programme on the ground and the donor.” The partners CAFOD worked with “would like to feel that they have some opportunity for more direct contact with DFID” so that both they and DFID had a “good understanding of the situation that they are working in.” He called for improvements in communications and dialogue between civil society and DFID.\(^{149}\)

94. World Vision was critical of the onerous requirements made of PRP implementing partners. It said that the “impact measurement and meeting requirements are, at times excessive and a symptom of a lack of internal co-ordination.” These affected its capacity to deliver quality programmatic work.\(^{150}\) Its Chief Executive, commented that, although his organisation was happy with the use of agents, and that they worked effectively, they could be more co-ordinated and that “internal systems tend towards silos”. He agreed that there had been a loss of communication with DFID. He called for “a bit more access to DFID perhaps in terms of policy dimensions.”\(^{151}\)

95. We put these concerns to the Minister. He told us that a decision had been taken to use managing agents in Phase II of the PRP as it was a more ambitious programme than Phase I had been and more complex in that it involved other donors. This put pressure on DFID staff, and their ability to work on other important projects would have been reduced if they had continued to run the programme directly. The Minister said that there were quarterly meetings with civil society and that he was satisfied with the level of direct contact with

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147 Ev 53 and Ev 96
148 Ev 43
149 Q 24
150 Ev 90
151 Q 43
NGOs. Mark Lowcock pointed out that there were three members of DFID staff in the Harare office who still worked primarily on the PRP: “they are spending less of their time on the routine administration and more of it on the strategic dialogue”. They travelled to local areas at least once a month to check on PRP implementation.

Another area of concern was the administrative costs of the programme, given the number of levels through which funding has to pass before it reaches the eventual beneficiaries: managing agents, NGO partners and then local organisations which actually deliver the assistance in the villages and communities. The Minister believed that involving all these players helped accountability by ensuring that funding went to the most needy people. He acknowledged that, as the programme had expanded, some concerns had been expressed, but he thought that it was important that “we have the administration element in there so that we do have proper checks and balances.”

Mark Lowcock pointed to the cost-effectiveness of the programme:

As well as the cost of delivering the programme we need to think about what the returns and benefits of the programme are. It costs about $70 per household to provide the assistance we provide under the PRP and the value of the production that is generated by that $70 is about $140, it is a very high rate of return. The alternative to providing some of the inputs that we have provided would be in many cases to provide food aid which would cost us between $700 and $1,000. The opportunity saving of this programme is very high and the rate of return on the programme is also very high. The numbers I have given you reflect the administration costs as well as the costs of the inputs. We honestly think that in terms of value for money this is a very effective programme.

We asked the Minister for a breakdown of programme expenditure for the PRP. DFID told us that:

- 6% of costs are allocated to the management agents to cover: programme administration; technical advice and support; best practice and knowledge sharing; and monitoring and evaluation;
- 3% is used for financing and procurement fees, and covers the “costs of working as seamlessly as possible in a difficult and rapidly changing environment”;
- 25-30% is allocated to delivery on the ground, including NGO overheads and the costs of local community staff who provide services for poor households;
- Over 60% covers physical transfers to households in the form of agricultural inputs, small livestock support, soap and hygiene items and small-scale food and cash transfers.
These administrative costs seem quite high. However, as we have said in relation to DFID’s programmes in Bangladesh and Nepal, targeted programmes to reach the most vulnerable and poorest in society are inevitably more expensive to run because of the staff time needed to devise and implement them, whether this is done directly by DFID staff or through NGOs and agents.157

98. We accept the concerns expressed by delivery partners that the use of managing agents to administer the Protracted Relief Programme creates a distance between NGOs and DFID. DFID needs to do more to address these concerns. However, given the headcount constraint under which DFID operates, we believe it is sensible to contract out management of programmes once they are in operation, in order to release specialist DFID staff to undertake more strategic and innovative work.

99. The administration costs of the PRP are quite high but this has to be weighed against the cost-effectiveness and the value for money offered by the programme. Moreover, other donors would not be so keen to join the PRP if they did not consider that it was a worthwhile use of their funds. We believe the crucial point is that the most vulnerable and needy people in Zimbabwe are reached through the PRP. DFID should monitor the programme closely to ensure pro-poor benefits continue to be the focus, particularly if the programme is extended. DFID should also satisfy itself that its auditing mechanisms are sufficiently robust to ensure that PRP funding is reaching the intended beneficiaries, particularly given that it passes through several organisations first.

Conservation agriculture

100. One component of the PRP programme supports conservation agriculture. Christian Aid said that it recognised “DFID’s consistent support to this area despite initial reluctance by other key stakeholders” and highlighted that it “has been particularly beneficial to vulnerable communities” and “proven to lift households out of subsistence poverty”.158 William Anderson of Christian Aid explained to us the benefits it brought: “conservation agriculture is teaching people how to better manage their land and how to get a profitable harvest.” A family of six requires 1.2 metric tonnes of grain per annum to meet its food needs but the national average in Zimbabwe is 0.2 metric tonnes. “Conservation agriculture practice enables households to get at least 2, 3, 5 and in many cases over 10 metric tonnes per hectare.” He believed that the conservation agriculture aspect of the PRP programme was “an excellent agricultural practice that should be promoted across Africa.”159

101. We saw examples of conservation agriculture projects during our visit. We heard from project beneficiaries about the conservation farming techniques that they had been taught and how they had been provided with fertilisers, seeds and tools. We were told that the increased production that had been achieved had helped move the farmers from below


158 Ev 43

159 Qs 22 and 25 [Mr Anderson] and Ev 43
subsistence to having surplus crops to sell. The additional income was used for such things as paying school fees and investing in small savings schemes.

102. We were impressed by the benefits which the conservation agriculture element of the Protracted Relief Programme is bringing to communities in Zimbabwe, some of whom are the most vulnerable people in the country. Moving farmers from below subsistence to generating an income from selling crops provides direct and quick support for livelihoods. We recommend that DFID explore how this work can be expanded, both within Zimbabwe and in other African countries.
5 Health services

103. 43% of the UK’s aid programme in Zimbabwe for 2009–10 is allocated to provision of basic services. DFID told us that: “The ability of the Inclusive Government to deliver quality basic services to its people is weak following years of under-investment and turmoil. The challenge of rebuilding basic services is massive and far exceeds the public purse available.”\textsuperscript{160} The DFID Minister’s view was that there had been an improvement in the delivery of services, but that “huge challenges” remained. Some services were in place, but they were still “very basic” and a “much longer transition” needed to take place to bring “recognisable, good quality health, education and other services”.\textsuperscript{161} In this chapter we will focus on health services, including public health and the provision of sanitation and water. We discuss education in the next chapter on DFID’s support for children.

104. World Vision told us that the Zimbabwean health system has been compromised by critical shortages of finance and declining infrastructure during the last 10 years. The morale of key health personnel had fallen due to poor pay and their inability to deliver health care because of shortages of diagnostics, drugs and support systems. A large number of health professionals had left Zimbabwe due to political and economic factors. This had resulted in a “critical shortage of human resources”, especially in rural areas. Many rural clinics were no longer functioning and even in larger urban areas health care has suffered.\textsuperscript{162}

105. In 2006 the World Health Organisation reported that life expectancy rates in Zimbabwe were amongst the lowest in the world: 37 years for men and 34 for women.\textsuperscript{163} Dr Kibble highlighted the decline that had occurred—life expectancy in 1990 was 61 years—and that, given the unreliability of statistics in Zimbabwe, the current life expectancy rates may be lower than those officially quoted.\textsuperscript{164}

106. DFID says that “health related services account for the vast majority of our basic services spending (about £25 million).”\textsuperscript{165} It believes that its health programme has ensured that:

- the health system in Zimbabwe is still largely functioning, with each clinic retaining a basic complement of staff, drugs and services;
- access to anti-retroviral (ARV) treatment has continued to increase;
- malnutrition rates for children remain below emergency levels;
- contraceptive use has continued to grow and unmet need has shrunk; and

\textsuperscript{160} Ev 56
\textsuperscript{161} Q 54
\textsuperscript{162} Ev 91
\textsuperscript{163} Ev 50
\textsuperscript{164} Ev 69
\textsuperscript{165} Ev 56
HIV prevalence has continued to decline.\footnote{Ev 58}

107. We visited Harare Hospital, Mpilo Hospital in Bulawayo and Kezi Maphisa District Hospital in Matabo, Matabeleland. The staff we met were clearly very professional and dedicated and the services we saw were very good. However, Mpilo and Harare hospitals are tertiary referral hospitals. They would be expected to offer the best health care in the country and are by no means the norm. Local services remain weak in many areas. People often have to travel long distances to access services which are inadequate and cannot always meet their needs.

108. The DFID Minister highlighted that one of the factors which contributed to the cholera epidemic in 2008 had been the deterioration in the health sector, caused by the lack of health staff. To help address this, DFID had introduced a Health Worker Retention Scheme which was contributing £1.9 million over two years. Other donors, including Australia, Denmark, the European Commission, UNICEF and UNFPA, now contribute to the scheme. An allowance is paid into health workers’ bank accounts, to provide a direct incentive for them to go to work. The scheme has helped to increase the number of health workers from under 10,000 in December 2008 to over 26,000 in February 2009.\footnote{Q 97 and Ev 95} The Minister commented that, although it was worthwhile to provide direct assistance in this manner, the long–term solution would come from further economic stabilisation and a reduction in political instability.\footnote{Q 97}

109. DFID is also supporting the supply of essential drugs following the identification in 2008 of a huge shortage of basic supplies and equipment. The Emergency Vital Medicines programme is now a two-year programme worth £11.5 million (with an additional £5 million provided in 2009-10), managed by UNICEF. DFID says that it is “the main vehicle for providing basic medicines and supplies” in Zimbabwe and has a particular focus on under-fives and women, and prevention and treatment of transmissible diseases. It is also supported by the European Commission, Australia, Canada, Ireland and the Netherlands. DFID says that the programme has been instrumental in ensuring that a basic supply of drugs and medical supplies are available at all 1,531 health facilities in Zimbabwe and especially at rural health centres and district hospitals.\footnote{Ev 57-58} Staff we met at Kezi Maphisa Hospital in Matabo told us about the difference it had made to their capacity to supply patients with the drugs they needed.

110. DFID support is making a significant difference to the availability and quality of health care available in Zimbabwe. The retention scheme for health workers is an important intervention which is making a contribution to addressing the lack of trained staff and supporting committed staff to continue to work in health care. The Vital Medicines programme has ensured that all health facilities in the country have basic drugs and medical supplies. We commend DFID’s work in the health sector to date and recommend that it continue to give priority to supporting the rebuilding of health services.
HIV/AIDS

111. DFID is providing nearly £40 million over the next five years to support HIV/AIDS programmes, focusing on behaviour change and access to anti-retrovirals (ARVs). The HIV prevalence rate in Zimbabwe has declined from 18.1% in 2006 to 15.6% but is still one of the highest in the world. There are over 62,000 deaths from HIV/AIDS each year. DFID is working with UNAIDS, WHO and other donors to support universal access to ARVs. However, Zimbabwe has more people living with AIDS without access to treatment than any other country.

112. DFID has allocated £35 million to the Expanded Support Programme (ESP) (£6 million in 2009-10), a multi-donor funding mechanism which supports the National AIDS Strategy. ESP provided access to ARVs for more than 58,000 people in 2009. It is implemented through UN agencies and is managed by a working group comprising government, donors, UN agencies and civil society. DFID told us that the ESP had demonstrated that it was “possible to support national policy and public services without passing money through the government and without becoming entangled in political debate.” An impact assessment of the ESP programme is planned for 2010. We saw this programme in operation at Kezi Maphisa District Hospital in Matabo and heard about the benefits it was bringing. We also saw a Voluntary Counselling and Treatment Centre in Bulawayo run by Population Services International which offered rapid testing and counselling, as well as group support.

113. William Anderson of Christian Aid endorsed DFID Zimbabwe’s work on HIV/AIDS, saying that it was “a huge issue and DFID is right to concentrate on it.” Justin Byworth of World Vision highlighted that the social stigma around HIV/AIDS which existed some years ago was no longer evident. He said that programmes were effective, but the “need was huge.” The TUC told us that, due to the widespread prejudice in society, little attention had so far been paid to the need to prevent the spread of the pandemic among vulnerable groups, including sex workers, intravenous drug users, prison inmates and gays and lesbians. The TUC suggested that donor agencies like DFID should consider interventions targeted at vulnerable sections in society.

114. The NGO Avert points out that Zimbabwe has historically received far less HIV/AIDS funding than other sub-Saharan African countries. For example, Zambia, which has a similar HIV prevalence rate, was reported in 2005 to receive around US$187 per HIV positive person annually from international donors; in Zimbabwe, the figure was estimated to be just US$4. The Minister thought that the disparity “relates to the political situation

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170 “New dawn of hope for HIV help in Zimbabwe”, DFID news story, 18 September 2009
171 DFID, Annual Report and Resource Accounts 2008-09, Volume 2, p 167
172 DFID, Zimbabwe: major challenges, available on DFID website at www.dfid.gov.uk/
173 Ev 59 and Ev 95
174 Ev 59
175 Q 30 [Mr Anderson]
176 Q 30 [Mr Byworth]
177 Ev 83
178 Avert, Introduction to HIV and AIDS in Zimbabwe, available at www.avert.org/aids-zimbabwe
in Zimbabwe and the ability of the international community to spend money effectively to tackle HIV/AIDS.” As the economic situation stabilised, he believed that there would be greater opportunities for more to be done on healthcare, with HIV/AIDS remaining a priority. He said that the UK’s assistance had been “absolutely pivotal” in helping to reduce HIV prevalence and the number of AIDS-related deaths.\textsuperscript{179}

115. Male circumcision reduces the risk of HIV infection by about 60%. We saw DFID-supported programmes in two male circumcision clinics in Bulawayo and in Harare. This pilot programme was launched in mid-2009 and 3,000 men have so far been treated. In addition to the procedure, patients are provided with counselling and an HIV test. Once it is rolled-out, the programme aims to reach 80% of young men in the country in the next eight years, a total of three million people.\textsuperscript{180} We were told this would cost $140 million, but would save over £3 billion in treatment costs.

116. Zimbabwe’s HIV/AIDS rate is one of the highest in the world. The country and the international community face a huge task in trying to control the epidemic and provide support to HIV/AIDS sufferers. However, progress has been made and we commend DFID’s work in this sector. The male circumcision programme we saw appears to be a very cost-effective method of reducing HIV transmission in a country with a prevalence rate as high as Zimbabwe’s. We would encourage DFID to support the programme as it moves from the pilot to full implementation. The Expanded Support Programme (ESP) is fulfilling a vital function in provision of anti-retroviral treatment and broader treatment and care for people living with HIV and AIDS. We request that DFID shares the outcome of its impact assessment of ESP with us when it is available.

**Maternal health**

117. DFID has allocated £25 million over five years to maternal health services, and is spending £4.85 million in 2009–10.\textsuperscript{181} DFID’s programme includes a focus on women and newborn babies affected by HIV/AIDS, and access to family planning services. The rate of contraceptive prevalence increased from 55% in 1999 to 60% in 2006 and the rise has continued despite the decline in the economy and basic services.\textsuperscript{182} Nevertheless, maternal health is still a serious concern with a maternal mortality rate of 880 per 100,000 live births.\textsuperscript{183}

118. World Vision reported that half of pregnant women in rural areas were now delivering at home, with 40% of births taking place without a skilled attendant. User fees and other costs were said to be limiting women’s access to services, as well as the shortage of trained staff and the need to travel long distances to reach services.\textsuperscript{184} These are common contributors to poor maternal health outcomes as we highlighted in our 2008 Report on

\textsuperscript{179} Q 100
\textsuperscript{181} Ev 60
\textsuperscript{182} DFID, Annual Report and Resource Accounts 2008-09, Volume 2, p 167
\textsuperscript{183} Zimbabwe : Key facts, DFID, http://www.dfid.gov.uk/
\textsuperscript{184} Q 33 and Ev 91
Maternal Health. However, Justin Byworth believed that there had been some progress. He told us about a woman whom he met recently at an antenatal clinic in Zimbabwe. She contrasted her recent experience of childbirth with that two years previously: there had been a “real improvement” in terms of being able to give birth at a health centre and the subsequent immunisation and monitoring of her baby.

Infant mortality

119. Dr Kibble reported that the latest estimates of infant mortality in Zimbabwe were 76 per 1,000 live births with under-five child mortality at 123 per 1,000 live births. A donor-supported survey conducted in May 2009 showed a 20% rise in under-five mortality compared to 1990 rates.

120. Malnutrition is the underlying cause of much child morbidity and mortality. The latest data indicated that a third of all children under five were chronically malnourished. DFID agreed that malnutrition was the leading cause of infant mortality in Zimbabwe but said that it had not exceeded emergency levels in any district, partly because of the massive food aid programme which it and other donors had supported. DFID published a Nutrition Strategy on 11 March 2010. We have long argued for this, given the devastating impact malnutrition has on children’s health. DFID says that the “fight against malnutrition” will focus on the six countries which are “home to half of all undernourished children under five in the world.” Zimbabwe is one of these focus countries.

121. World Vision also pointed to HIV/AIDS, neonatal complications and infections, pneumonia and diarrhoea as key factors in the high levels of child deaths. Lack of accessibility to health care was another contributor. Children in rural areas and those in the poorest sections of the population are the worst affected and have least access to even basic health services. HIV positive children are particularly vulnerable.

122. Maternal and child health are two key areas hit particularly hard by the decline in services in Zimbabwe. Many mothers and babies are already vulnerable due to HIV/AIDS, and shortages of health staff and facilities have compounded this. We recommend that, in response to this Report, DFID provide us with more details of its plans to provide further support to maternal and child health, to assist Zimbabwe to get back on track on these two central Millennium Development Goals.

123. Malnutrition is the leading cause of child deaths and ill health in Zimbabwe. Donors must continue to address this through food aid and longer-term nutrition
interventions. DFID has recently published a Nutrition Strategy and has included Zimbabwe as one of the six countries where it will focus its efforts to tackle malnutrition. We would welcome more details, in response to this Report, on how the Strategy will guide DFID’s work on child health in Zimbabwe.

Sanitation and water

124. In our 2007 Report on Sanitation and Water we emphasised that provision of sanitation and clean drinking water was essential to contain disease.193 Oxfam says that the economic decline and reduced availability of clean water has increased the risk of water and sanitation related diseases in Zimbabwe: “water points have dried up, municipal water supply schemes have been shut down, wastewater systems blocked and general maintenance work has been abandoned.” Alternate water sources, many of which are unprotected, have had to be found in both rural and urban areas. Oxfam stresses that many of the water, sanitation and hygiene-related issues in Zimbabwe are chronic ones, which require long-term solutions, as well as an “immediate public health humanitarian response.”194

125. DFID told us that it makes a significant investment in water, sanitation and hygiene programmes. It has been working with local communities and district technicians to install and maintain a minimum of 500 new water points each year. Rural schools and clinics benefit from sanitation provision, in addition to “particularly vulnerable households.” The programme also supports health clubs. These have been shown to be effective in encouraging basic hygiene and health practices by working with village health workers and government environmental health technicians.195 We visited a school in Sontala in Matabeleland where DFID had supported the provision of additional latrines as part of the PRP. We were told by the headmistress that the improved sanitation had protected the children from the worst effects of the cholera epidemic (see below). However, the school still did not have its own water borehole: it had to share the one used by the local community which was 1.5 kilometres away.

Cholera

126. OCHA states that:

> In August [2008], one of the world’s largest cholera epidemics in recent history broke out [in Zimbabwe]. It quickly expanded to all ten provinces, affecting 32,000 people and killing 1,500 by December. The epidemic was due to the lack of safe drinking water, inadequacy of sanitation, and declining health care infrastructure within an already overburdened healthcare system.196

World Vision highlighted that this outbreak differed from previous ones in that it was mainly urban and had a high fatality rate. In addition to the causes identified by OCHA,
World Vision attributed the rapid spread of cholera to the Government’s ban on NGOs operating in the country and a lack of knowledge about how cholera spreads, resulting in ineffective containment of the epidemic. It said that DFID’s response to the outbreak had been “timelier than most donors and NGOs.” However, DFID, along with other donors had been “slow to see the outbreak as a priority concern.”

127. William Anderson of Christian Aid agreed that the outbreak had been “an epidemic waiting to happen”. He told us that “it had been talked about at various humanitarian agency co-ordination strategy working groups even before it broke out.” He said that DFID should support local government and the community in improving water and sanitation services. UNICEF believed that, without a major overhaul of Zimbabwe’s social and health infrastructure, health crises like the cholera outbreak would recur. Rob Rees of CAFOD agreed that there was a need, in the longer term, for a “major rehabilitation of the infrastructure.”

128. The Minister acknowledged this long-term need. He pointed to some DFID work that was already addressing water and sanitation issues, but emphasised that there was not a “clear long-term sector-wide plan on water and sanitation” on which DFID was leading. He was hopeful that, as progress was achieved on the political process in Zimbabwe, the donor community, in conjunction with the Government, could start to develop a plan for a “longer-term, more sustained investment in water and sanitation.” However, at present, due to the demands of the current humanitarian situation, the balance of DFID’s support would continue to focus on the delivery of basic services and “targeted assistance to support reforms in key ministries.”

129. We reiterate our previously stated view that sanitation and water are at the heart of development. We accept that long-term infrastructure projects, such as rehabilitation of sanitation and water systems, must wait for the humanitarian need to decrease and for the Government of Zimbabwe to be in a position to take the lead, supported by donors. However, DFID and its donor partners need to keep a clear focus on the contribution which poor sanitation and lack of clean water made to the scale of the cholera epidemic in 2008. They must ensure that health and humanitarian programmes do not lose sight of the importance of public health and hygiene in reducing the spread of disease.
6 Children

Education

130. DFID describes the education sector in Zimbabwe as being in crisis. Many teachers have been lost through migration caused by political intimidation and violence, or driven out of the profession by poor salaries. An estimated 25,000 teachers left Zimbabwe in 2007 alone. It has been reported that the number of children attending school dropped from 85% in 2007 to below 20% in 2009, mainly due to unaffordable school fees (introduced in 1991) and the shortage of teachers.\textsuperscript{202} Rob Rees of CAFOD told us that: “In the past Zimbabwe had a very high standard of education and a very high standard of teaching. Quite rightly it was proud of it.” However, the situation now was that “some of the best education in the countries around Zimbabwe is provided in schools where there are Zimbabwe exiled teachers.”\textsuperscript{203} The Inclusive Government has provided an allowance of $100 to all civil servants, including teachers and, according to DFID, there are early indications of recovery in the education system. Most schools are now functioning, but with reduced capacity.\textsuperscript{204}

131. In its recently published Education Strategy for 2010–2015, DFID states that education is a basic human right and “a very good investment”. It says that “there is strong evidence linking levels of education [...] to economic growth.”\textsuperscript{205} We were therefore surprised that DFID spends only 2% of its aid in Zimbabwe on education.\textsuperscript{206} DFID officials clarified in oral evidence that the 2% referred only to its pooled funding. He pointed out that the Programme of Support (PoS) for Orphans and Vulnerable Children (see next section) also had an educational element. The total value of educational support was therefore £2.4 million, or 6% of the total budget.\textsuperscript{207}

132. In 2009 DFID agreed to allocate £1 million for the provision of technical advice and seed funding to the Transitional Education Fund, a pooled financing mechanism with other donors which is now worth $50 million.\textsuperscript{208} The assistance the Fund will provide includes procurement of textbooks, exercise books and classroom furniture.\textsuperscript{209} At the school we visited in Matabeleland, six children had to share each textbook.

133. We were told during our visit that books procured through the Fund had not yet reached schools, and we asked the DFID Minister about this. He accepted that teachers were not receiving new books as quickly as they wished but pointed out that DFID had to ensure that “we get the procurement process right and [...] that we try to deliver economies of scale.” Mark Lowcock explained that “we were trading off speed with efficiency and

\textsuperscript{202} “For Mugabe’s children, life gets tougher and tougher”, The Independent, 28 February 2010
\textsuperscript{203} Q 38
\textsuperscript{204} Ev S7
\textsuperscript{205} DFID, Learning For All: DFID’s Education Strategy 2010–2015, p 11
\textsuperscript{206} DFID, Press Factsheet, 15 October 2009
\textsuperscript{207} Qs 112–116
\textsuperscript{208} Q 112
\textsuperscript{209} Ev S7
value for money. We have got a much cheaper deal and, therefore, can buy many more textbooks in the way we have done the procurement.\(^\text{210}\) When we pressed the DFID witnesses on when deliveries of books could be expected, they told us:

[...] we are not in complete control of this because we are a tiny part of the financing. We have to get all the other players into place as well [...] the contract will be let in the next few weeks and the first books will be delivered from about eight weeks from then, so about 12 weeks from now the first books will be delivered.\(^\text{211}\)

134. **Zimbabwe needs considerable donor support to rebuild its education system, which used to be one of the best in Africa.** The main problem is shortage of teachers which can only be addressed through wider recovery of the economy and political system and through the Government finding ways to pay adequate salaries to public servants. We recommend that DFID discuss with its donor partners whether further support could be offered to help attract Zimbabwean teachers back from neighbouring countries and from Europe. There is also a severe shortage of textbooks. DFID is a small contributor to the multi-donor fund set up to provide educational materials. It is regrettable that it has taken so long for the books procured through the scheme to reach schools. DFID may only be funding a small fraction of this programme but it is a lead donor in the country and should apply pressure on its partners to increase the efficiency of the procurement process.

**Orphans and vulnerable children**

135. According to WHO, 41% of Zimbabwe’s population is under 15 years of age.\(^\text{212}\) World Vision highlighted that children are one of the most vulnerable groups in Zimbabwe. It said that “economic conditions have led to an increase in rates of child abuse, such as child labour, forced marriage and physical and sexual abuse.”\(^\text{213}\) DFID told us during our visit that children remain extremely vulnerable to exploitation and abuse. They are at risk of taking up hazardous forms of child labour to support their families, and many may end up living and working on the streets, where they are vulnerable to child trafficking. It believed that continued support for these children was urgently needed.

136. The Consortium for Street Children highlighted that the number of children on the street or in abusive homes is increasing. The causes include unemployment and poverty, which force parents to send their children out to beg to supplement family incomes. Other factors driving children on to the streets include family breakdown, crime, neglect, and physical or sexual abuse.\(^\text{214}\)

137. DFID says that one in four children has been orphaned, with 1.6 million having lost at least one parent. The plight of children affected by HIV/AIDS is particularly acute, with nearly a million orphaned or otherwise affected by the disease. 79% of orphans and

\(^{210}\) Q 116  
\(^{211}\) Q 134  
\(^{213}\) Ev 89  
\(^{214}\) Ev 47
vulnerable children receive no external assistance. DFID estimates that more than 90% of the country’s orphans have been absorbed by the extended family. 40% of households in the poorest areas of rural Zimbabwe care for orphans and other vulnerable children, but less than half these households receive any form of external support.215

138. DFID is a lead donor in the Programme of Support (PoS) for Orphans and Vulnerable Children (OVCs), contributing £22 million over four years through UNICEF and NGO partners.216 The PoS is targeted on children who are vulnerable due to abuse and neglect, economic hardship and displacement. It provides support for community-based initiatives and is channelled through approximately 30 NGOs to over 150 community-based organisations. The programme includes measures to improve health, education, access to clean water and nutrition for the orphans and vulnerable children, as well as psychosocial support. PoS is part of the National Plan of Action for OVCs which DFID says has the support of the highest levels of government, as well as the UN and civil society in Zimbabwe.217

139. One of the key elements of the PoS is the support it provides for increasing access to education by paying school fees and providing remedial support for children who have missed out on years of schooling. DFID says that, by July 2009, the programme had benefited over 350,000 children and that 205,000 children were in education who would not otherwise have attended school. In 2009-10, the programme’s Basic Education Assistance Module was expected to ensure 700,000 OVCs were educated.218

140. Some of us saw the support offered by PoS at the Mavambo Learning Centre in Harare. The Centre provides intensive education for out-of-school children to bring them up to the standard necessary to enter school. We met a number of children who were participating in the programme, many of whom were living in an IDP camp. They told us about their experiences and their hopes for the future. We found their accounts of their lives very moving and were impressed by their resilience and determination to succeed in their education.

141. A recent survey found that 70% of children who lived or worked on the streets of Harare had no birth certificate or identity documents.219 It is necessary to have a certificate to get into school and to access benefits, but many children had lost theirs through the death of parents or displacement from their homes. The PoS therefore also helps OVCs to obtain birth certificates. More than 4,000 children have so far been assisted in this way by PoS implementing organisations.220

142. Current funding for the PoS is due to end in 2010. DFID is now assessing the impact of the programme on reducing the vulnerability of OVCs focusing on: the impact of

215 EV 50 and “£22 million to improve the lives of Zimbabwe’s rising population of orphans and vulnerable children”, 12 April 2006
216 DFID, Annual Report and Resource Accounts 2008-09 Volume 2, p 166
217 Ev 60; see also DFID Press release, “£22 million to improve the lives of Zimbabwe’s rising population of orphans and vulnerable children”, 12 April 2006
218 Ev 60
219 Ev 47
220 Ev 60
interventions and the number of children being reached; and the cost-effectiveness, benefits, strengths and weaknesses of the different approaches it uses. Lessons learned will be used to inform the design of the follow-on programme.221

143. DFID’s Programme of Support has brought vital assistance to children, including those whose vulnerability is compounded by loss of parents as a result of HIV/AIDS. The support has helped thousands of children to continue their education as well as ensuring that they are fed and have access to counselling to address the traumas they have endured and which many continue to suffer because of displacement, abuse and neglect. This is clearly fulfilling an essential and continuing need. It is right that DFID should assess the impact of the programme to date to enable it to decide how it can best continue to assist orphans and other children disadvantaged by poverty and HIV/AIDS. We recommend that, in response to this Report, DFID provide us with an indication of its future plans for supporting vulnerable children in Zimbabwe and the level of funding it will commit to this work.
7 Conclusion: DFID’s future engagement

144. The legacy of the colonial period and unresolved issues from the transition to independence mean that the UK’s relationship with Zimbabwe is a difficult one. This affects the way DFID is able to work in the country. Nevertheless, the UK has provided essential support to Zimbabwe through its period of political, economic and humanitarian crisis.

145. DFID’s 2009 White Paper promised an increased focus on fragile states.\textsuperscript{222} The Secretary of State defined fragile states as “countries where the government cannot or will not deliver core functions of the state for the majority of its people.”\textsuperscript{223} It is clear that, despite the signs of recovery, the Government of Zimbabwe will lack the capacity to deliver adequate basic services for all its people for some time. It therefore falls into the category of fragile states to which DFID is committed to providing increased assistance.

146. Zimbabwe is also one of the 14 countries in Africa where DFID monitors its performance against its Public Service Delivery Agreement by assessing progress towards the Millennium Development Goals. The Minister emphasised that “Zimbabwe’s recovery could help to drive progress towards the Millennium Development Goals across the whole of the region” of sub-Saharan Africa.\textsuperscript{224} He told us that this was one of the reasons for the high priority which both DFID and the FCO give to Zimbabwe. This was reflected in “a significant amount of both ministerial and very senior official time” being devoted to Zimbabwe.\textsuperscript{225} It is right that the UK gives a high priority to Zimbabwe through the work of both DFID and the FCO. We strongly believe that the assistance which DFID provides should continue, in co-ordination with Foreign Office staff. This assessment is based on the evidence we saw of the effectiveness of UK aid in reaching poor and vulnerable people, and the level and scale of ongoing need across the country.

147. DFID is one of the leading donors in Zimbabwe in terms of the amount of aid provided. Increased funding has been accompanied by an innovative approach to tackling the challenges of delivering aid effectively, both in the types of programmes it implements and the relationships it has formed with delivery partners, using both international NGOs and community-based local organisations. These local bodies, in particular, are able to assist DFID in identifying groups of people and communities who most need assistance and ensuring that targeted support reaches them. This approach may result in slightly higher administrative costs but the overall cost-effectiveness and value for money represented by the programmes appears to justify this expenditure.

148. DFID’s projects, particularly the Protracted Relief Programme, the Programme of Support for vulnerable children, and the Expanded Support Programme for people affected by HIV/AIDS, are strong interventions which other donors have been keen to support.

\textsuperscript{222} DFID, Eliminating World Poverty; Building our Common Future, Cm 7656, July 2009
\textsuperscript{224} Q 132
\textsuperscript{225} Q 132
Immediate humanitarian relief will continue to be necessary, including food aid but DFID should ensure that the transition to longer-term development assistance is smooth and takes place as soon as the conditions in any sector are appropriate. These programmes have been innovative in combining an immediate response to urgent needs with a longer-term approach. There is scope to build upon them.

149. We considered whether DFID is right to favour buying at “best value for money” over procuring development materials or services locally. We understand that tendering competitively in an international market ought to provide more material of a certain quality per pound spent. However, one important purpose of development spending is to promote economic development. This is particularly important in a country like Zimbabwe which has lost 80% of its GDP in a decade. In such circumstances, it may make development sense to buy goods or services from a local supplier, even though the cost may be greater, rather than buying at the lowest possible price from abroad. It is inconsistent to talk up the need for economic development in a country but not to stimulate economic activity where possible. **We recommend that, in response to this Report, DFID set out how much of the £60 million of British aid provided in 2009-10 for Zimbabwe was actually spent in Zimbabwe. We also recommend that the Department review the circumstances in which it may be right to buy in-country to stimulate local economic activity, even where this is not the cheapest option.**

150. The DFID Minister was clear that there were no plans to channel funding through the Government of Zimbabwe for the foreseeable future. He told us: “we are a long way off from having confidence in the systems of the government of Zimbabwe” and that it would be long time before money would be put directly into the Government’s budget. However, a number of ministries were developing pro-poor plans designed to assist the most vulnerable communities across the country. The Minister believed that UK support could be aligned to these plans and told us that discussions were taking place with the Government about this.226

151. **We agree with DFID’s assessment that the time is not right to move to direct budget support in Zimbabwe. The political situation remains fragile. Until Zimbabwe has demonstrated that free and fair elections can take place, with transfer of power between parties if this is the wish of the people, uncertainty will remain.**

152. The international community’s focus should be on strengthening the capability of the Government of National Unity so that it is better placed to determine its own development priorities and to deliver them. For this to happen, the rights of all parties to function without intimidation must be implemented in practice. It also requires a willingness within all elements of the Government to meet the needs of the people, especially the poor. Continuing political violence and harassment is incompatible with this.

153. **Progress on human rights and democracy need to be demonstrated before all the EU’s restrictive measures placed on named individuals and organisations can be lifted. However, donors should continue to provide humanitarian and development assistance, based on the needs of the people and the capacity for this assistance to be**
absorbed. The UK has shown leadership in this and should continue its important work, based on strong co-ordination with development partners and alignment of its approach with the pro-poor elements in the Government’s own policies.
Conclusions and recommendations

The political situation

1. We welcome the Global Political Agreement (GPA), which, although not perfect, created the basis for formation of the Government of National Unity. Progress has been made since the settlement was reached, including the re-opening of schools and hospitals, the introduction of a budget and stabilisation of the economy. However, movement towards full implementation of the Agreement has been slow and important provisions have been ignored by some of the parties involved. Adherence to the rule of law and respect for human rights are two areas requiring urgent and significant improvement. (Paragraph 18)

2. We regret that development of a new Constitution for Zimbabwe is making such slow progress. We agree with DFID’s assessment that its implementation could increase the prospects for free and fair elections in the future. We recommend that, in response to this Report, DFID provide us with more information about the support it is giving, jointly with other donors, to the constitution-drafting process. (Paragraph 21)

3. DFID’s support for the Office of the Prime Minister has clearly been valuable and has been much appreciated by him. We recommend that DFID extend this support for a further period. This will enable progress achieved to date to continue, in terms of strengthening the capacity of the Office to oversee the smooth running of government departments and implementation of policy, and to lead on executive business in Parliament. (Paragraph 24)

4. Continuing political violence and lack of security has resulted in the displacement of many Zimbabweans, the migration of many thousands to neighbouring countries and the closure of many schools and medical facilities throughout the country. It compromises donors’ ability to provide support to Zimbabwe’s development and should be an ongoing concern to the international community. (Paragraph 27)

The economy

5. The Financial Times has reported that economists, business leaders and trade unionists have warned that the new “indigenisation” law (which would require white-owned companies with an asset value over $500,000 to surrender 51% of their shareholdings to black Zimbabweans) would “wreck any chance of attracting foreign investment and strangle the economy’s weak recovery.” We agree with this assessment. (Paragraph 32)

6. Normalisation of Zimbabwe’s relations with the international financial institutions will clearly be a major contributor to its economic recovery. We welcome the IMF’s approval of technical assistance to Zimbabwe and the restoration of its voting and related rights as a major step in this process, in response to the economic recovery in the country. We would urge the IMF to continue to engage with the Government of National Unity, with a view to making further progress towards restoring the
availability of funding, and to support Zimbabwe in its efforts to work towards meeting the loan approval criteria. (Paragraph 35)

**EU restrictive measures**

7. The EU has renewed the restrictive measures on named individuals and organisations in Zimbabwe for another year. We agree that further progress on democracy and human rights needs to be demonstrated before all the measures can be lifted. The UK should continue to make clear the basis of the measures and their specific terms to the people of Zimbabwe. It should also continue to support governance reforms which will help Zimbabwe move to a position where the measures can be removed. (Paragraph 41)

**Land reform**

8. Land reform in Zimbabwe is a complex issue. It is also a highly-charged political issue between Zimbabwe and the UK. However, resolution is essential for political stability and continued economic recovery. Land seizures have had a devastating impact, both on individual farm-owners and workers and on the agricultural economy, and should cease. We agree with the DFID Minister that the terrible human rights abuses which have taken place as part of farm invasions are completely unacceptable. The first stage in the land reform process should be a comprehensive and transparent land audit, as laid down in the Global Political Agreement. The timing of the audit is a matter for the Government of National Unity. The process should be supported by the international community, including the UK. (Paragraph 49)

9. In the longer term, the UK should be prepared to join other donors to fund land reform as part of a wider rural and agricultural development strategy, provided the Government of Zimbabwe is able to give credible assurances that such a process will transfer land to the landless poor. However, the responsibility for compensating people for land seizures lies with those who seized land or condoned seizures. (Paragraph 50)

**Regional relations**

10. The member states of the Southern African Development Community (SADC) are the guarantors of the Global Political Agreement (GPA). We believe that the UK Government should urge SADC collectively, and South Africa in particular, to continue to work with the Government of National Unity towards full implementation of the GPA. We are disappointed that Zimbabwe has defied the SADC Tribunal ruling on land seizures. Zimbabwe should recognise the authority of SADC. The fact that there are no mechanisms for enforcement of the ruling is a matter of concern to us and should be addressed. (Paragraph 61)

11. SADC should also fully support economic recovery in Zimbabwe. This would bring wider benefits to the whole region, not just to Zimbabwe itself. It would also encourage Zimbabwean migrants to return and help address the tensions which the large number of migrants in neighbouring countries has caused. (Paragraph 62)
DFID’s humanitarian assistance

12. DFID has provided essential humanitarian support to Zimbabwe, including food aid, over the last decade. Although the situation has improved, DFID believes it will be necessary for humanitarian assistance to continue for at least another two years. We recognise the priority which DFID and other donors have to give to meeting humanitarian needs in Zimbabwe’s current situation. However, we would hope that, as the economy continues to recover, people will be more able to support themselves and donors can then review the need for food aid and other short-term interventions. We recommend that DFID regularly reassess the balance between humanitarian aid and development assistance and that more of its programmes shift to a longer-term development approach at the earliest opportunity. (Paragraph 80)

Internally displaced people

13. Hundreds of thousands of people in Zimbabwe have been driven from their homes as a result of deliberate, forced evictions by the Government in pursuit of political ends, or in reaction to more general insecurity, violence and intimidation or unemployment. Some have been forced to move several times. DFID is providing support to internally displaced persons (IDPs) through targeted projects and through its general livelihoods and basic service assistance. Its emergency assistance programme for IDPs is due to end shortly but substantial need clearly remains. We recommend that, in response to this Report, DFID clarify how support for IDPs will be provided by the donor community over the next two years and the role which it will play in this assistance. (Paragraph 86)

Protracted Relief Programme

14. DFID’s Protracted Relief Programme (PRP) has already reached millions of vulnerable people in Zimbabwe and has been praised by the NGOs who participate in it as an innovative, flagship programme of which DFID should be proud. We agree with this assessment. Other donors have already seen the value of funding Phase II of the PRP and it has become an effective multi-donor intervention. Its excellence lies in its ability to meet the needs of the most vulnerable people and the breadth of its reach, from home-based care for sick people to agricultural extension and employment generation. There is clearly further scope for scaling up the programme in Zimbabwe, where the need is still acute for many people, and indeed using the lessons learned to replicate it in other countries. We recommend that DFID explore both these options. (Paragraph 92)

15. We accept the concerns expressed by delivery partners that the use of managing agents to administer the Protracted Relief Programme creates a distance between NGOs and DFID. DFID needs to do more to address these concerns. However, given the headcount constraint under which DFID operates, we believe it is sensible to contract out management of programmes once they are in operation, in order to
release specialist DFID staff to undertake more strategic and innovative work. (Paragraph 98)

16. The administration costs of the PRP are quite high but this has to be weighed against the cost-effectiveness and the value for money offered by the programme. Moreover, other donors would not be so keen to join the PRP if they did not consider that it was a worthwhile use of their funds. We believe the crucial point is that the most vulnerable and needy people in Zimbabwe are reached through the PRP. DFID should monitor the programme closely to ensure pro-poor benefits continue to be the focus, particularly if the programme is extended. DFID should also satisfy itself that its auditing mechanisms are sufficiently robust to ensure that PRP funding is reaching the intended beneficiaries, particularly given that it passes through several organisations first. (Paragraph 99)

17. We were impressed by the benefits which the conservation agriculture element of the Protracted Relief Programme is bringing to communities in Zimbabwe, some of whom are the most vulnerable people in the country. Moving farmers from below subsistence to generating an income from selling crops provides direct and quick support for livelihoods. We recommend that DFID explore how this work can be expanded, both within Zimbabwe and in other African countries. (Paragraph 102)

**Health services**

18. DFID support is making a significant difference to the availability and quality of health care available in Zimbabwe. The retention scheme for health workers is an important intervention which is making a contribution to addressing the lack of trained staff and supporting committed staff to continue to work in health care. The Vital Medicines programme has ensured that all health facilities in the country have basic drugs and medical supplies. We commend DFID’s work in the health sector to date and recommend that it continue to give priority to supporting the rebuilding of health services. (Paragraph 110)

**HIV/AIDS**

19. Zimbabwe’s HIV/AIDS rate is one of the highest in the world. The country and the international community face a huge task in trying to control the epidemic and provide support to HIV/AIDS sufferers. However, progress has been made and we commend DFID’s work in this sector. The male circumcision programme we saw appears to be a very cost-effective method of reducing HIV transmission in a country with a prevalence rate as high as Zimbabwe’s. We would encourage DFID to support the programme as it moves from the pilot to full implementation. The Expanded Support Programme (ESP) is fulfilling a vital function in provision of anti-retroviral treatment and broader treatment and care for people living with HIV and AIDS. We request that DFID shares the outcome of its impact assessment of ESP with us when it is available. (Paragraph 116)
Maternal and child health

20. Maternal and child health are two key areas hit particularly hard by the decline in services in Zimbabwe. Many mothers and babies are already vulnerable due to HIV/AIDS, and shortages of health staff and facilities have compounded this. We recommend that, in response to this Report, DFID provide us with more details of its plans to provide further support to maternal and child health, to assist Zimbabwe to get back on track on these two central Millennium Development Goals. (Paragraph 122)

21. Malnutrition is the leading cause of child deaths and ill health in Zimbabwe. Donors must continue to address this through food aid and longer-term nutrition interventions. DFID has recently published a Nutrition Strategy and has included Zimbabwe as one of the six countries where it will focus its efforts to tackle malnutrition. We would welcome more details, in response to this Report, on how the Strategy will guide DFID’s work on child health in Zimbabwe. (Paragraph 123)

Sanitation and water

22. We reiterate our previously stated view that sanitation and water are at the heart of development. We accept that long-term infrastructure projects, such as rehabilitation of sanitation and water systems, must wait for the humanitarian need to decrease and for the Government of Zimbabwe to be in a position to take the lead, supported by donors. However, DFID and its donor partners need to keep a clear focus on the contribution which poor sanitation and lack of clean water made to the scale of the cholera epidemic in 2008. They must ensure health and humanitarian programmes do not lose sight of the importance of public health and hygiene in reducing the spread of disease. (Paragraph 129)

Education

23. Zimbabwe needs considerable donor support to rebuild its education system, which used to be one of the best in Africa. The main problem is shortage of teachers which can only be addressed through wider recovery of the economy and political system and through the Government finding ways to pay adequate salaries to public servants. We recommend that DFID discuss with its donor partners whether further support could be offered to help attract Zimbabwean teachers back from neighbouring countries and from Europe. There is also a severe shortage of textbooks. DFID is a small contributor to the multi-donor fund set up to provide educational materials. It is regrettable that it has taken so long for the books procured through the scheme to reach schools. DFID may only be funding a small fraction of this programme but it is a lead donor in the country and should apply pressure on its partners to increase the efficiency of the procurement process. (Paragraph 134)

Orphans and vulnerable children

24. DFID’s Programme of Support has brought vital assistance to children, including those whose vulnerability is compounded by loss of parents as a result of HIV/AIDS.
The support has helped thousands of children to continue their education as well as ensuring that they are fed and have access to counselling to address the traumas they have endured and which many continue to suffer because of displacement, abuse and neglect. This is clearly fulfilling an essential and continuing need. It is right that DFID should assess the impact of the programme to date to enable it to decide how it can best continue to assist orphans and other children disadvantaged by poverty and HIV/AIDS. We recommend that, in response to this Report, DFID provide us with an indication of its future plans for supporting vulnerable children in Zimbabwe and the level of funding it will commit to this work. (Paragraph 143)

DFID’s future engagement

25. It is right that the UK gives a high priority to Zimbabwe through the work of both DFID and the FCO. We strongly believe that the assistance which DFID provides should continue, in co-ordination with Foreign Office staff. This assessment is based on the evidence we saw of the effectiveness of UK aid in reaching poor and vulnerable people, and the level and scale of ongoing need across the country. (Paragraph 146)

26. We recommend that, in response to this Report, DFID set out how much of the £60 million of British aid provided in 2009-10 for Zimbabwe was actually spent in Zimbabwe. We also recommend that the Department review the circumstances in which it may be right to buy in-country to stimulate local economic activity, even where this is not the cheapest option. (Paragraph 149)

27. We agree with DFID’s assessment that the time is not right to move to direct budget support in Zimbabwe. The political situation remains fragile. Until Zimbabwe has demonstrated that free and fair elections can take place, with transfer of power between parties if this is the wish of the people, uncertainty will remain. (Paragraph 151)

28. The international community’s focus should be on strengthening the capability of the Government of National Unity so that it is better placed to determine its own development priorities and to deliver them. For this to happen, the rights of all parties to function without intimidation must be implemented in practice. It also requires a willingness within all elements of the Government to meet the needs of the people, especially the poor. Continuing political violence and harassment is incompatible with this. (Paragraph 152)

29. Progress on human rights and democracy need to be demonstrated before all the EU’s restrictive measures placed on named individuals and organisations can be lifted. However, donors should continue to provide humanitarian and development assistance, based on the needs of the people and the capacity for this assistance to be absorbed. The UK has shown leadership on this and should continue its important work, based on strong co-ordination with development partners and alignment of its approach with the pro-poor elements in the Government’s own policies. (Paragraph 153)
Annex: Committee’s Visit Programme in Zimbabwe

The Committee visited Zimbabwe from 1 to 4 February 2010.

Members participating: Malcolm Bruce (Chair), John Battle, Hugh Bayley, Richard Burden, Mr Nigel Evans, Mr Mark Lancaster, Daniel Kawczynski, Andrew Stunell

Accompanied by: Carol Oxborough (Clerk); Keith Neary (Second Clerk)

The Committee divided into two groups for parts of the visit.

Harare

Monday 1 February

Briefing from British Ambassador and Head of DFID Zimbabwe

Roundtable discussion with civil society organisations.

Meeting with Morgan Tsvangirai, Prime Minister

Working dinner with donor partners, UN agencies, representatives of the Government of Zimbabwe and media

Tuesday 2 February

Meeting with Elton Mangoma, Minister of Economic Planning and Investment Promotion

Bulawayo

Meeting with Cain Mathema, Governor of Bulawayo

Group 1

Field visits to projects on social protection and addressing vulnerability

Field visit to International Organisation of Migration Safe Zone Centre

Group 2

Field visit to Mpilo Hospital maternal care centre

Field visits to New Start HIV Counselling and Testing Centre and Male Circumcision Clinic
Whole group

Meeting with Thaba Moyo, Mayor of Bulawayo

Working dinner with local politicians and civil society representatives

Wednesday 3 February

Group 1: Tsholotsho

Field visits to water, sanitation and hygiene and conservation agriculture projects

Group 2: Matabo

Field visit to Kezi Maphisa Hospital to see Expanded Support Programme for HIV and AIDS

Field visits in Sontala to see water and sanitation and conservation farming projects

Whole group

Bulawayo

Meeting with Lovemore Moyo, Speaker of the House of Assembly

Harare

Reception for donor partners, NGOs and local community members

Thursday 4 February

Harare

Group 1

Field visit to Harare Hospital to see male circumcision clinic, Vital Medicines programme delivery system, antenatal clinic, Family Support Trust and Victim Friendly Clinic (child sexual abuse support and treatment centre)

Group 2

Field visit to Mavambo Learning Centre

Field visit to Tafara 1 Primary School
**Whole group**

Roundtable discussion on land reform:
- Dale Doré, Director, Sanduko Centre for Agrarian and Environmental Communal Areas
- Marchel Gerrman, Head of Development, Netherlands Embassy
- Professor Sam Mayo, Executive Director, African Institute for Agrarian Studies (AIAS)
- Deon Teon and Mark Kerry-Wilson, Commercial Farmers Union (CFU)
- Getrude Hambira, Secretary-General, General Agricultural and Plantation Workers Union of Zimbabwe (GAPWUZ)
- Ian Scoones, Institute of Development Studies, University of Sussex
Formal Minutes

Tuesday 16 March 2010

Members present:

Malcolm Bruce, in the Chair

John Battle
Hugh Bayley
Richard Burden

Mr Nigel Evans
Andrew Stunell

Draft Report (DFID’s Assistance to Zimbabwe), proposed by the Chair, brought up and read.

Ordered, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 153 read and agreed to.

Annex and Summary agreed to.

Resolved, That the Report be the Eighth Report of the Committee to the House.

Ordered, That the Chair make the Report to the House.

Ordered, That embargoed copies of the Report be made available, in accordance with the provisions of Standing Order No. 134.

Written evidence was ordered to be reported to the House for printing with the Report, together with written evidence reported and ordered to be published on 19 and 26 January and 23 February 2010.

[The Committee adjourned.]
Witnesses

Tuesday 26 January 2010

Mr Donald Steinberg, Deputy President (Policy), International Crisis Group; Professor Teddy Brett, Associate Programme Director, London School of Economics; and Dr Steve Kibble, Zimbabwe Europe Network

Mr Rob Rees, Africa Advocacy Co-ordinator, CAFOD; Mr William Anderson, Country Manager Zimbabwe, Christian Aid; and Mr Justin Byworth, Chief Executive, World Vision

Tuesday 23 February 2010

Mr Gareth Thomas MP, Minister of State, and Mr Mark Lowcock, Director General, Country Programmes, Department for International Development, and Mr John Dennis, Head of Zimbabwe Unit, Foreign and Commonwealth Office

List of written evidence

Action for Southern Africa Ev 35
Professor Teddy Brett, London School of Economics Ev 38
CARE International UK Ev 41
Christian Aid Ev 42
Commonwealth Local Government Forum and the Local Government Association of England and Wales Ev 44
Consortium for Street Children Ev 47
Department for International Development Ev 48; 94; 95
Dr Steve Kibble, Zimbabwe Europe Network Ev 63
Leonard Cheshire Disability Ev 75
Donald Steinberg, Deputy President, International Crisis Group Ev 77
TUC Ev 80
WOMANKIND Worldwide Ev 85
World Vision UK Ev 88

List of unprinted evidence

The following written evidence has been reported to the House, but to save printing costs has not been printed and copies have been placed in the House of Commons Library, where they may be inspected by Members. Other copies are in the Parliamentary Archives (www.parliament.uk/archives), and are available to the public for inspection. Requests for inspection should be addressed to The Parliamentary Archives, Houses of Parliament, London SW1A 0PW (tel. 020 7219 3074; email archives@parliament.uk). Opening hours are from 9.30 am to 5.00 pm on Mondays to Fridays.

List of Reports from the Committee during the current Parliament

The reference number of the Government’s response to each Report is printed in brackets after the HC printing number.

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