

KADOMA, BULAWAYO, HARARE FEEDBACK WORKSHOPS

SAFE CITIES REPORT BACK WORKSHOP BULAWAYO 15 October 2013

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1. Housing, shelter

COMMENTS FROM THE PARTICIPANTS

ECONOMIC ADVANCEMENT OPPORTUNITIES: EMPLOYMENT, INDUSTRIES, ACCESS TO RESOURCES, PROFESSIONS/OCCUPATIONS AND OPPORTUNITIES

1. Zimbabwe is one of those countries that is highly ranked in terms of coming out with the best policies. But it is in the bottom two in terms of implementation.
2. Salaries are not being paid and some are not even enough for the people to live on. There are people that are paid so little that there is no way to combat corruption.
3. Some people are not paid enough for the jobs they do, for example where a police officer has to attend a scene which is 20km away and earning that little and walking for that distance. People are then compromised both in terms of how they discharge their duties and in terms of corruption.
4. What happened to the money that was meant to resuscitate the industries?(DIMAF)
5. People end up losing Ubuntu as a coping mechanism for example the people in Hwange who resorted to killing elephants because of the breakdown of the campfire project.

EDUCATION – ACCESS TO BASIC EDUCATION, PRESCHOOL EDUCATION, PRIMARY EDUCATION, HIGH SCHOOL, TERTIARY, ADULT EDUCATION AND FURTHER EDUCATION

1. There are safety nets like BEAM but they are challenges in implementation. BEAM however caters for children whose parent(s) died. This leaves out children whose parents are alive but not financially well off to pay their school fees, but the other facilities like education transition funds, Capernaum trust. But they all still have challenges regarding implementation.
2. There is need for policies and ministerial declarations to be made into laws because they are being flaunted every day. Children are being sent home for non-payment of fees despite the ministerial declaration that children should not be sent away for non-payment of fees.
3. It is not a perception that children are dropping out of school but a reality. Issues of policies, challenges teachers face, poor remuneration affect the provision of education in a very big way. There has been a serious impact on incentives so that a teacher can come to class. Policies should be put in place to harmonise, council, teachers and the School Development Committees in a bid to improve education.
4. To what extent is the city council providing education.
5. The mushrooming of home schools, the deliberate delay in finishing syllabi so that parents pay for extra lessons.

6. What is basic education according to the constitution?
7. Are there anymore supplementary feeding schemes at schools?
8. There are only 2 schools catering for children with disabilities in Bulawayo but the schools are very expensive and most parents for the disabled children cannot afford them. There is therefore need for the children to have facilities that will make it possible for children with disability to learn in the same school with other children. (integration)
9. The other issue one has to consider is that by sending children with disability to specialised schools, their 'own' schools are we not segregating those children. On the other hand putting them in the same institutions with the other children may also expose them to some form of discrimination.
10. Min of education, a number of circulars for school on the shop floor, use of vocational centres, to what extent are the communities benefiting from all these?

HEALTH, BASIC AND PRIMARY HEALTH NEEDS: MARTENAL HEALTH, ANTENATAL AND POSTNATAL SERVICES AND IMMUNISATION

1. Why do council clinics close early? It is the structure of the system. Clinics are not meant to provide emergency services. They provide basic healthcare. Hospitals are the ones that people should go to when clinics are closed. It is unfortunate that they are not functional or people would go there. The health budget for health services in the City Council is always operating on a deficit. Grants for education and health are no longer available. Health was being funded from other services like water but now there is a move to make each department fund its own functions. The nurses are overworked; the nurse patient ration is very high. They need to rest.
2. One of the participants expected to hear the situation in the hospitals. It was however explained that we had challenges accessing the clinics as the nurses refused to give interviews despite us having authority to carry out the interviews in writing from the City health department, they still wanted someone to phone them to give further authority and this was impossible at the day had been declared a public holiday.
3. There are so many problems associated with the medical aid as there are so many shortfalls and then there are limits to accessing the said medical aids.
4. Also under health there are problems with specialists who are always in Harare.
5. When talking about the right to health, let us talk about access. For example there are deaf people who have lost their children because they would not be able to communicate in the clinic.
6. Patients have to buy needles, drip, bandages gloves. The state of the hospital itself, gives.

HEALTH, DIAGNOSTIC SERVICES, ADVANCED CARE SERVICES, MEDICINES, ACCESS TO HEALTH SERVICES. COST, PROXIMITY AND AVAILABILITY

1. Child headed families can be referred to **WARD CHILD PROTECTION COMMITTEES** where they can be assisted in the event of decisions that need a guardian regarding anything from health to education. (whether they are functional or not is another issue)
2. There is need for the state to make available drugs for some common chronic diseases like cancer because they are not found in other towns like Harare. When they are referred to Harare they may even die before they get to see the said specialists as the specialists are now operating at times from other countries and one is just told that the specialist is on leave.
3. When children are referred to provincial hospital their mothers are not given beds, food. They have to buy all those or pay for them separately as they are not the “patients” and at times some of those are from the rural areas or from poor backgrounds and may not have money to do the said buying and the children may need things like nappies and clothes and bathing utilities but they are not given at the hospital. There are some cases where mothers have walked out on their children living them alone in hospital because they will no food, do proper clothing for the children and they will be left with no choice but to just walk. So what is the right to basic health?
4. HIV has received considerable attention but there are things like cancer that have been neglected by the government. Simple chemotherapy drugs are only found in Harare and you have to know someone in order to access them even in government institutions. There is need for the state to have some facilities for the known diseases like cancer and invest in certain known chronic illnesses in the manner they have done with HIV.

LEGAL AND ADMINISTRATIVE JUSTICE, ACCESS TO LAW, IMPARTIAL DISPUTE RESOLUTION PROCESSES. PROXIMITY, ACCESSIBILITY AND COST

1. There is not much on the impact of access to justice regarding women and children.
2. The master of the high court has been very helpful especially regarding deceased estates registration.
3. In criminal matters, the police and the prosecution lose interest in witnesses. They make them come to court 20 times and you stay at the court until four but then you are expected to come again.
4. The police are so hostile.

5. The new constitution helps in issues regarding the police. Efforts are being made to educate the police on the provisions of the new constitution for the benefit of the general populace.
6. There is selective application of the law, and there is also need to keep teaching people on the constitution especially the police.
7. There is need to do an overhaul on the justice system of Zimbabwe, to allow the court to be accessed 24/7.
8. The notion of innocence until proven guilty, is it practical, a holding cell should be a place for an innocent person there should not be no lice, it is as good as one has been to prison. Are the courts enough, can people access them.

VIOLENCE AS A SOURCE OF EXCLUSION – GENDER BASED VIOLENCE (GBV), DOMESTIC VIOLENCE (DV), THEFT, ROBBERY AND MUGGINGS.

1. Rich people have been able to include themselves by making sure they have Duralwalls, generators and boreholes.
2. ZIMRA is also harassing people especially cross border women and they end up being bribed. But on the other hand the reason for such thorough searches is that it is an open secret that people will almost always have something hidden that they do not want to declare and pay duty for
3. People may inform the police through suggestion boxes, toll free lines and there is a provision that allows the police force to pay for the information.
4. The police are not well resourced, there is need to get them cars. If the complainants have cars then the police may use the one belonging to the complainant. This on the other hand excludes the poor who do not have cars to carry the police around.
5. The problem with the duty is very high that is why people find ways to evade duty.
6. Regarding domestic violence, if one gets to the police station in the rural areas and they do not understand the language you are speaking then you cannot report, especially when there is one officer. At times the police may not understand say Ndebele but they are a one man station in matebeleland.
7. The civil service is angry, civil servants have problems. They earn very little. They cannot even afford the upkeep of their own families from their salary. A police officer who asks for a lift from you every day as they cannot afford it cannot then help your spouse in the event that they say report domestic violence.

SAFE CITIES REPORT BACK WORKSHOP KADOMA 17 October 2013

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COMMENTS FROM THE PARTICIPANTS

ECONOMIC ADVANCEMENT OPPORTUNITIES: EMPLOYMENT, INDUSTRIES, ACCESS TO RESOURCES, PROFESSIONS/OCCUPATIONS AND OPPORTUNITIES

There was no input from the participants after the presentation.

EDUCATION – ACCESS TO BASIC EDUCATION, PRESCHOOL EDUCATION, PRIMARY EDUCATION, HIGH SCHOOL, TERTIARY, ADULT EDUCATION AND FURTHER EDUCATION

1. A representative from the ministry of education indicated that there are pilot projects to provide inclusive education in Sanyathi. There are a number of schools that have selected schools for inclusive learning. The infrastructure is being adjusted in order to cater for the needs of the disabled children.

2. All the schools are offering Early Childhood development. (ECD) (grade 0).
3. There was a change of policy, each school as instructed to provide ECD education. The infrastructure is still not adequate. All schools are putting new infrastructure to accommodate ECD but the explosion of rural-urban migration is making it difficult to plan as a ministry.

HEALTH, BASIC AND PRIMARY HEALTH NEEDS: MATERNAL HEALTH, ANTENATAL AND POSTNATAL SERVICES AND IMMUNISATION

4. Agreeing on the figures \$5 for adults. Issue of free primary health applies to rural clinics, charge \$5 as a cost recovery to make sure able to continue providing a service.
5. What understood from \$25 is that it covers normal delivery.
6. It is for local services, when referred the hospital then puts its own charges.
7. Min of health recognises the services of these people and their services have to be registered.
8. Families cannot afford even the consultation fees. Situation on the ground is really bad, leaving with the problem go out of their way to subsidise the residents.
9. There is a national health care project in conjunction with the University of Zimbabwe, if found anything interesting will share.

HEALTH, DIAGNOSTIC SERVICES, ADVANCED CARE SERVICES, MEDICINES, ACCESS TO HEALTH SERVICES. COST, PROXIMITY AND AVAILABILITY

1. Whenever there are emergencies, payment of consultation fee at clinics and hospitals is suspended e.g. when there is an outbreak of either malaria or cholera. In fact all charges for health service delivery for people who have the specific diseases or conditions or those suspected to have them is automatically suspended.
2. Whenever child headed family members need any form of consent for any medical procedure, they are referred to the Social welfare. Clinics also work with Non-Governmental Organisations (NGOs) like Tsungirirai which is based in Norton who at times even take care of any payment for those children whenever needed.
3. It is difficult to talk about the right to healthcare as some wards are partly urban partly rural. People walk between 7 to 14 kilometres to access the nearest clinic. (the health policies and WHO policies say no person should walk for more than 5 kilometres to the nearest clinic or health facility).
4. A number of people live in the farms outside the municipal boundary. Delimitation caused some of the wards to be partly in the urban area and partly in the rural. It is therefore difficult to include the people in the peri-urban areas when planning. There are however, expansion plans in the pipeline that will incorporate the areas in question and when that happens they will then be part of the city council.
5. These places because of this confusion asked the council to collect refuse from their area e.g. Kadoma textiles about which is 10km from town is not included in the planning and has to make its own plans for such facilities as refuse collection.
6. The Kadoma master plan has its municipal boundaries extending to Kadoma textiles.

LEGAL AND ADMINISTRATIVE JUSTICE, ACCESS TO LAW, IMPARTIAL DISPUTE RESOLUTION PROCESSES. PROXIMITY, ACCESSIBILITY AND COST

1. People do not realise where the job of the police ends. The police arrest and compile a docket and then they hand it over to the prosecution. That is where their duty officially ends. However, as long as the case has not been tried and the docket closed, the police will still have a problem as they want their dockets closed and filed away. For that reason, the police have gone out of their way to ferry witnesses to court, which duty is the prosecution's. When they get there with the witnesses, there are no witness expenses and then they are faced with hungry witnesses who do not have bus fare back home and at times the police will feed them and give them bus fare from their own pockets which money they cannot claim from anybody. When people see this, they then impute this duty to the police when in actual fact the police are going out of their way to try and facilitate the finalisation of cases.
2. The Regional Courts at Chinhoyi has 1 magistrate. It is overwhelmed with cases as it covers places like Norton, Kadoma and Chinhoyi. There is a backlog of cases dating back to as far back as 2004. Girls who were raped when they were young are withdrawing cases as they are getting married years before their cases are tried. They do so as to protect their marriages. There is a backlog of 3000 cases at the Regional Court.
3. The police have set standards service charter which sets the minimum standards and have mechanisms in place to make sure the charter has been adhered to. All the cases of corruption can be reported. If someone is not satisfied with the way their cases have been handled or any other complains with the police they see the Officer In Charge and if they are not happy they can go up the ladder to the Commissioner but usually one will get help before they even get far.
4. All these rights the public have is communicated to them through the launching of the Service Charter which is usually done every five years.

VIOLENCE AS A SOURCE OF EXCLUSION – GENDER BASED VIOLENCE (GBV), DOMESTIC VIOLENCE (DV), THEFT, ROBBERY AND MUGGINGS.

1. People do not use the Domestic Violence Act.
2. There are no NGOs in Kadoma that can help women assert their right at the same time complementing Government effort in curbing violence against women and girls.
3. Victims withdraw cases after reporting mostly because of economic dependency. Many women depend on their husbands for a living and they feel that if the husband is sent to prison they will suffer with the children. Society also has an influence in the number of the withdrawals. Relatives from both the woman and men's side will encourage the victim to withdraw. There is therefore need for livelihood to be enhanced in order to facilitate the freedom to report and to move away from violent relationships.

4. There is also need to use the traditional means of intervention which people relate with to avoid Domestic Violence and other forms of violence.
5. Even some men suffer from Domestic Violence but do not report because they are too embarrassed to come out in the open and report..
6. **IF THE VIOLENCE ISSUE IS TO BE SOLVED THERE IS NEED TO SOLVE ALL THE THEMATIC AREAS MENTIONED ABOVE AND THEN THIS WILL SORT ITSELF OUT.**
The words of one participant who is carrying out a similar research.

ISSUES FOR FURTHER PROBING

1. How can the council come up with ward based strategies that are apolitical so that people do not shun meetings called by their councillors?
2. How can police engage with the public in order to improve the prevention of crime.
3. How best can the laws be used to help people access housing. (mobilisation of resources)
4. How people can come up with poverty alleviation plans as poverty is what is causing violence and crime.
5. How best can Kadoma city come up with empowerment programmes for disadvantaged groups, girls and women and to improve gender mainstreaming in all their programmes.
6. How Legal Aid can be brought to Kadoma so as to help people know the law and their rights and also for free legal assistance to the indigent population of Kadoma.

SAFE CITIES REPORT BACK WORKSHOP HARARE 20 October 2013

COMMENTS FROM THE PARTICIPANTS

ECONOMIC ADVANCEMENT OPPORTUNITIES: EMPLOYMENT, INDUSTRIES, ACCESS TO RESOURCES, PROFESSIONS/OCCUPATIONS AND OPPORTUNITIES

There was no discussion in this thematic area.

EDUCATION – ACCESS TO BASIC EDUCATION, PRESCHOOL EDUCATION, PRIMARY EDUCATION, HIGH SCHOOL, TERTIARY, ADULT EDUCATION AND FURTHER EDUCATION

1. The research was said to be generalised, it was mentioned that no effort had been made to get statistical information on:
 - How many children are on BEAM.
 - How many if any have failed to access BEAM.
 - Whether there are any District Aids committees resources beyond beam, like uniforms and other needs.
2. There is government policy that says no child should be sent home for non-payment of fees, especially those on BEAM as the government will pay even if it delays.
3. In Hatcliffe there are no council pre-schools, but in Mbare there are council pre-schools which cost \$5 a month.
4. In Mbare there are government primary schools not council schools, but these also have grade 0 attached to the school as this is government policy that no child will be allowed to attend grade one without having gone through grade 0.
5. To effect that, the government is training ECD teachers in the teachers colleges like Seke Teacher's College.
6. Parents should not expect to have their children in school for free.
7. There is need to make it clear whether the research found out that the ECD classes are not enough or what exactly are they saying. If that is the case give us the names of the schools.
8. Mbare people are very clever they tell you lies, they tell researchers what they want to hear. Especially if they think they can benefit from the information they are giving.
9. The assertion that there are no safety nets is not true as there is BEAM and other NGOs who are also assisting.
10. Services are paid for, not given for free.
11. Inclusive cities means the poor and the rich must be able to leave and plan together. Not going to rob people in Mt Pleasant to pay for a child in Mbare. What is happening in Mbare is also happening in Mt Pleasant people cannot buy toilet paper, it is no longer time for people in Mt Pleasant to subsidise Mbare. People in Mt Pleasant cannot even pay their

rates. When we talk about inclusivity we are talking about the poor owning up and accepting that this city is ours. The vendor should own up and accept that the litter should not be thrown all over, they must pay their rates.

12. There are pre-schools in Mbare that are under subscribed.
13. There are supplementary feeding schemes in the hostels. There are half day care centres 8-12 in Mbare.
14. This is a preliminary research that is why we are giving raw data, not a full report. There are people that have not been interviewed yet.
15. During the meltdown of the economy, the City Council gave their crèches to individuals and communities, they are actually in the process of taking back the crèches so how do they say they have crèches in Mbare.
16. There is need for the City council not to take a defensive stance and accept that there are indeed gaps between what they are doing in the offices and what is happening on the ground. There is also need for the council to make follow ups and monitor the projects on the ground.
17. "This is not a criticism and it was what we were told you are clearly directing us to the areas that we need to probe further".

HEALTH, BASIC AND PRIMARY HEALTH NEEDS: MATERNAL HEALTH, ANTENATAL AND POSTNATAL SERVICES AND IMMUNISATION

1. It is true that health is a right according to the constitution but the question is who should fund it because practically, someone has to fund it.
2. As a recommendation government should reinstate grants and subsidies that it used to give to local authorities, because for as long as the government does not reinstate the grants withdrawn in 1985, it is impossible to even dream of the right to health being achieved.
3. Council employs 17 medical doctors, 285 nurses, clerks and nurse aides and all these need to be paid and someone has to fund this.
4. What does basic health mean for the local authority?
5. Planning specifies that for every certain number of households there must be a clinic and this should be facilitated by Ministry of Health, Education and Social Welfare.
6. Every service from council has to be paid for and council does not have money.
7. Education and Health are delegated responsibilities by parent ministries, local council is a child of central government.
8. The government is currently working on the budget, our role here as CBOs is to influence the budget whilst the minister of finance is crafting the budget.
9. City of Harare has 3-4 functional ambulances, when there is an accident or a woman in labour, we have to prioritise and we would rather go to the local clinic and transfer a pregnant woman to the provincial referral centre and leave victims of an accident to be assisted by other private ambulance services like EMRAS to attend to the accident.
10. The council has trained paramedics but has no ambulances. There used to be 15 ambulances but they have all broken down and we are left with about 3. We are having to hope that the business fraternity will assist with donations but even that is not adequate.

11. central government should give council money. Council only generates money from the rate payers.
12. Whenever people cannot afford, there is screening, those who cannot afford and those that can. Those who cannot afford still get the service, but there are council officials who do not know how to screen properly to the detriment of the public but such incidences are not many.
13. The \$5 paid at the council clinic covers drugs as well.

HEALTH, DIAGNOSTIC SERVICES, ADVANCED CARE SERVICES, MEDICINES, ACCESS TO HEALTH SERVICES. COST, PROXIMITY AND AVAILABILITY

There was no discussion on this thematic area

LEGAL AND ADMINISTRATIVE JUSTICE, ACCESS TO LAW, IMPARTIAL DISPUTE RESOLUTION PROCESSES. PROXIMITY, ACCESSIBILITY AND COST

1. There are victim friendly facilities. There is a clinic in Mbare that caters for victims of violence.
2. Police who deal with victim friend are trained. There is a victim friendly post at Mbare police station.
3. In Mbare there is a magistrate courts, “I do not agree that courts are for those with money”.
4. Women in the rural areas fear the courts, not sure if that applies to the women in Mbare. Cultural and social reasons make it difficult for people to go to court. If one does the tabloids may catch it and before one knows the case is in the newspapers. So people shy away from the courts.
5. The cases in Mbare are petty crimes, the people there are very good at swindling each other.
6. Regarding deceased estates, Mbare has received a lot of assistance from lawyer without borders. People are generally aware of the legal services available from legal aid, some of the disputes involve home ownership.
7. The Police Community Relations department in Mbare is very active in educating people.
8. Mbare is a politically polarised area and if there are problems they are quickly picked.

VIOLENCE AS A SOURCE OF EXCLUSION – GENDER BASED VIOLENCE (GBV), DOMESTIC VIOLENCE (DV), THEFT, ROBBERY AND MUGGINGS.

1. There is need to track down, where Harare is ranked in terms of levels of violence. We do not know at the moment but it is something we need to track.
2. There are times when people generalise but what is being said is what the people in the communities said. Eventually after the full research we will be able to sieve the truth and otherwise. (Prof)

3. There are very good recreational facilities in Mbare. Some of which are not even in other suburbs like the swimming pools, a library, a hall. So there is need to come out clearly what it is that is lacking in terms of recreation in Mbare.
4. It is not true that people in Mbare do not walk in the night. They do. The people in Mbare do not steal from their own, they know that if you are caught you will be beaten up. So they go to more affluent suburbs to “take from the rich giving to the poor”. There are working tower lights in Mbare. And the people there will only steal if they realise that one is not from Mbare.
5. If there is no water which is rare girls and women go to boreholes, we have not heard of girls being molested at a boreholes, even child labour in the hostels its once in a while like any normal community. Give us the statistics to prove that there is more violence in Mbare than other suburbs.
6. People usually never really speak out if there was a help desk in Mbare it is highly likely that people would be free to talk. The presence of the help desk at the civil court has brought out scary revelations of rape cases that were perpetrated in Mbare long back.
7. Mbare is a closed community, it is in such a community where abuses are not reported, either due to fear or that the perpetrator is a relative or bread winner or somebody feared for one reason or the other.