

## ***Shock responsive social protection- Scoping study***

### ***FINAL REPORT (Red Cross) – 30/11/2021***

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## **Introduction**

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Zimbabwe ranks 46<sup>th</sup> out of 191 in the INFORM 2020 index for Risk Management with an overall score of 5.1 thus putting it in the “high” risk category. The country faces multiple risks and sources of insecurity. This has a devastating impact on lives and livelihoods, leading to profound and protracted humanitarian and development needs. Climate extremes, provoking drought, and floods, represents the single largest factor impacting livelihoods and reducing resilience in Zimbabwe where livelihoods and economies are highly sensitive to fluctuations.

Since 1981, ZRCS has been assisting the most vulnerable in target communities with developmental and humanitarian interventions in collaboration with other Red Cross movement partners. Disaster preparedness and risk reduction programmes are being implemented, notably, CVA preparedness and Forecast Based Action (FBA) and further developments are being planned as part of the new 2021-2025 Strategic Plan.

Shock Responsive Social Protection (SRSP) along with preparedness, FBA and risk financing is increasingly seen as efficient instruments to support early and more effective responses to disasters. While there have been efforts from World Bank and UN agencies to support government capacity to better understand how the national social assistance programmes could respond to shocks and disasters, the auxiliary role of the National Society can have a unique contribution in supporting the ability of the existing Social Protection Schemes to support the delivery of emergency assistance and disaster relief.

## **The scoping study objectives, methodology and outputs**

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This scoping study aims at supporting the Zimbabwe Red Cross Society (ZRCS) to identify opportunities to engage with SRSP while leveraging on its auxiliary role in supporting National emergency and crisis responses and ensuring appropriate preparedness and effectiveness in delivering CVA and essential assistance.

This scoping study was conducted between July and November 2021 as a relatively light exercise addressing primarily the needs of the Red Cross Movement, alongside other initiatives launched by the UN agencies. It started with a review of the recent documents on the National Social Protection Systems and short interviews with key stakeholders (ZRCS, RCM, WFP, UNICEF, FCDO and government counterparts). In October 2021, a short field mission was conducted in one district in Zimbabwe to understand the communities and Red Cross volunteers’ perspectives, through key informant interviews (KII) and focus groups discussion (FGD). Finally, a workshop was organised in Harare gathering ZRCS and RC stakeholders to identify specific areas of engagement and an action plan.

This report is presenting key elements gathered through the desk review and KII, the field visit and the workshop to inform the Red Cross in developing its strategy of engagement in SRSP in Zimbabwe. This document is not a Social Protection or DRM sector review. The list of the documents reviewed is available in Annex 4 and the list of the informants in Annex 3. A position paper is complementing this report, presenting the ZRCS proposal in supporting SRSP in Zimbabwe, for a wider audience.

## **Key elements of disaster risks and Disaster Risk Management**

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### **Zimbabwe is particularly vulnerable to climate-related risks and climate change and economic instability**

In Zimbabwe, drought and floods are the most significant climate-related hazards and are exacerbated by the impact of climate change. As agriculture plays a critical role in food security and the national economy, the increase in drought frequency, severity and impact magnitude has a substantial impact on the economy. Zimbabwe's economy is projected to grow by 3.1% in 2021, but it is following successive recessions in 2019 and 2020. Agricultural output is also forecasted to substantively grow after successive drought seasons.

According to the 2020 Zimbabwe Vulnerability Assessment Committee (ZimVAC), 56 % of the population in rural areas were food insecure. The prevalence of food insecurity dropped in 2021 to 27%, probably impacted by the covid-19 crisis response and the positive agriculture forecasts. In urban areas, on the other hand, the 2020 ZimVAC reports that 2.4 million people are food insecure, an increase of 12% compared to 2019. The purchasing power of the Zimbabwe dollar has been heavily eroded by inflation and the negative economic effects of COVID-19. The year-on-year inflation for April 2021 was 194.1%. Zimbabwe is also in a constant currency crisis, affecting both the population purchasing power and the crisis responses.

As demonstrated by the above, regular situation and needs assessments are conducted. Specific district profiles have also been conducted as part of FBA or other projects. The 2016 UNDP Hazards mapping identifies 10 main hazards and provides specific district profiles for high-risk districts. But the study could not find nationwide consolidated information on disasters frequency, magnitude and severity and in-depth vulnerability assessments allowing to identify the profile of the groups and individuals affected by disasters. This information is however important to assess the shock responsiveness of the social protection programmes and identify if they could potentially reach those affected by disasters.

### **Despite an institutional framework for the DRM, the disaster response is fragmented**

Disaster and crisis responses are involving many governmental and non-governmental, national and local organisations. It is described as fragmented, competitive and poorly coordinated. However, the coordination seems more effective at the district level than at the provincial and national levels, while it varies across districts depending on local capacities.

The Department of Civil Protection (DCP), implementing the 1989 Civil Protection Act, is mandated to coordinate Disaster Risk Management institutions and support strategic planning encompassing prevention, risks mitigation, preparedness, early warning, responses, rehabilitation and recovery. The DCP falls under the Ministry of Local Government, Public Works & National Housing. The 1989 Civil

Protection Act is also acknowledging the specific auxiliary role of the ZRCS in the disaster response management system, which is a permanent member of the CP committee.

The national Civil Protection Committee meets quarterly and is called when a disaster occurs. It is chaired by the DCP, co-chaired by the National Police, and composed of Ministries (incl. the Department of Social Development / MoPSLSW, Red Cross), UN and NGO representatives. The DRM framework is further supported by committees at provincial, district and village levels, which could act as first responders. The annual National Disaster Plan is developed through a collaborative process involving all CP committee members and its implementation is supported through the National CP Fund. Funding from the national budget is limited and most of the financial resources come from partnered agencies.

In line with the new 2013 Constitution, a Disaster Management Bill is being prepared to update the DRM legal framework. A final draft should be presented for ratification in 2022.

At the national level, the Food Security Cluster (FSC) and the Cash Working Group (CWG) are the main coordination fora. The FSC is focusing on agriculture and rural programmes. The CWG is led by WFP and the Government and contributes to coordinating technical approaches (MEB, transfer values, selecting procedures) and ensuring coordination to avoid duplications.

### **The Social Welfare officers and the Ministry of Public Service, Labour and Social Welfare are already playing a role in disaster response**

The Department of Social Development (DSD), embedded in the Ministry of Public Service, Labour and Social Welfare (MoPSLSW), District Social Welfare offices (DSWO) and Social Welfare officers (SWO) are already playing an important role in disaster response. They implement programmes that have been designed in response to crises such as the Food Deficit Mitigation (FDM) programme, focusing on drought response, and recently specific responses to the Covid-19. The DSD is therefore involved in the civil protection coordination, the CP committee and is a member of the CWG.

District Social Welfare offices contribute to the evaluation of the needs and estimation of the number of people affected. But they dispose of limited resources to keep updated demographic information and their capacities are limited. In the most dynamic district offices, they are effectively leading the response coordination. Social welfare officers are systematically involved by the different partners, including the ZRCS, in identifying and estimating needs in their areas and participating in the response.

The DSWO involvement in disaster response activities is often prioritised over the delivery of routine social assistance. Moreover, the delivery of social assistance is often affected by disasters and crises, in the absence of contingency planning and measures to ensure the continuity of the services.

### **Despite major progress, disaster response is still facing challenges ensuring the inclusion of the most affected individuals**

While all agencies are reporting working with the District Social Welfare offices and Social Welfare officers when responding to a shock or disaster, they are not relying only on them and on existing information or database to identify targeted beneficiaries. District Social Welfare offices and Social Welfare officers have databases of people identified as vulnerable, however, they might be outdated and the enrolment criteria might not be known or correspond to the implementing agency

expectations. A common practice is for the SWO to share the lists of social assistance beneficiaries, to avoid duplication, rather than to allow expanding the assistance.

Across agencies and projects, the eligibility criteria and beneficiaries for disaster responses are mostly selected through village committees. Criteria often include the same groups of individuals based on their age, chronic illness and disability and being an orphan or a widow. Occasionally, some households could be selected based on their lack of resources and inability to meet their basic needs. The communities interviewed during the study report that the same households and individuals are targeted by the successive assistance projects, only the coverage varies according to each project resources and objectives. Every response is repeating a delivery process involving selection, enrolment and verification exercises to establish a list of beneficiaries.

In the absence of an accurate assessment of the profile of those affected by specific shocks, these processes might not be efficient in reaching those primarily in need. Issues ensuring the inclusion of the most affected by a shock or disaster range from the identification of the eligibility criteria to the physical access to those in need:

- Selection is traditionally influenced by political, social and cultural factors. Ensuring transparent criteria and selection seems therefore an important focus of the registration process but accountability requirements vary across organisations.
- Targeting approaches are primarily categorical, based on observable criteria, aligned with the social assistance programmes, which are perceived as focusing on the old people and people living with disabilities. Those might not be all vulnerable depending on their family circumstances. Disasters might affect other groups depending on their livelihoods or locations.
- Identification could also be an issue but moreover, it seems that it is citizenship or minority status that could impact inclusion. Identity is often verified through peers and community members. The use of biometric is not common. Only DCA and WFP are using it.
- The remoteness, disability and old age of some individuals could prevent them from participating in village assemblies and processes. Low empowerment as well.

As mentioned above, the study could not find evidence of systematic vulnerability assessments, mapping or lessons learnt exercises that could help in pre-identifying the profiles of those affected by specific shock or disaster and inform a review of the targeting processes towards more objective and inclusive criteria.

## **Key elements of the social protection landscape**

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*During the desk review, many discrepancies were found in the literature on the coverage and the expenditures of the social assistance programmes. The reporting on these programmes does not seem to be updated and accurate. The following is trying to describe the current state of play as accurately as possible.*

### **Zimbabwe has a Social Protection policy framework and a range of social assistance programmes**

The first National Social Protection Policy Framework (NSPPF) was published in 2016. It emerged from the assistance framework for the Orphans and Vulnerable Children (OVC) founded back in 2004 focusing on protective services and social assistance for OVC and households with children and people

living with HIV and AIDS. The publication of the NSPPF was a landmark for structuring a broader social protection system, including essential pillars of the social protection systems such as pensions and contributory insurance and provides a comprehensive framework for social protection.

Zimbabwe main social assistance programmes are:

- The Basic Education Assistance Module (BEAM), an educational subsidy targeted at vulnerable children enrolled in primary and secondary education. In 2015, BEAM counted only 118,408 beneficiaries (UNICEF, 2019). In 2020, 700 000 children were targeted through 65 districts.
- The Assisted Medical Treatment Order (AMTO), a health subsidy targeted at vulnerable individuals in need of health care and paying medical bills directly to hospitals and health centres. The programme did not release any resources between 2015 and 2019. Before that, it reported a caseload 25 000 beneficiaries, the current coverage is unknown.
- The Harmonised Social Cash Transfer (HSCT), one of the government flagships with the FDM. It consists of an unconditional cash transfer targeted at labour-constrained food-poor households. Currently, approximately 60,000 households are enrolled in 23 districts but payments are erratic.
- The Public assistance (PA) programme, a discretionary grant for individuals lacking means of subsistence provided by District Social Welfare Officers to vulnerable households. PA is operational in districts that are not covered by the HSCT. In 2020, there were 8,551 beneficiaries in 48 districts.
- The Food Deficit Mitigation (FDM) programme, a food transfer targeted at labour-constrained food-insecure households during peak lean season. FDM is considered largely influenced by political considerations rather than a social assistance programme. Information in its coverage and transfers are erratic.

Each of these programmes has its eligibility criteria, delivery mechanisms and beneficiary registries. At the moment, the programme databases are not interoperable, but a project supported by the World Bank is laying the foundations for a social registry and a Management Information System within the DSD. Databases are not updated regularly, however, initiatives have been launched to create a beneficiary registry around the FDM and WFP drought response.

The response to the Covid-19 highlighted the need to expand the SP system to new groups and those affected by shocks and crises. However, the response to the Covid-19 created a new programme, rather than expanding the existing ones. At the inception of the crisis, in 2020, the Government and Development Partners reviewed options to address the needs of those affected by the impact of COVID-19, especially in the informal sectors. Reflecting on the existing reach of the social protection system, the decision was made to introduce a new intervention to support two million people who were in the informal sector, whilst the development partners expanded their support through the Lean Season Assistance programme in rural areas, the WFP Urban Resilience Programme and the UNICEF Emergency Social Cash Transfer (ESCT) Programme in the urban localities. The introduction of the support to informal sector workers was hampered by the inability of the Ministry to gather accurate and timely information on the affected population and was paused in November 2020. Moreover, the implementation of this programme came at the cost of the delivery of routine social protection programmes. 200 000 people received a transfer of 3 USD through the mobile money system, Ecocash.

**The social assistance programmes coverage is low**

According to the ZIMSTAT Poverty, Income, Consumption and Expenditure Survey 2017 Report, 70.5% of the population were poor whilst 29.3% were deemed extremely poor and potentially eligible for social assistance (i.e. over 4 million people). According to the World Bank, the number of people in need of social assistance has doubled between 2011 to 2019 and is expected to increase further as a result of the Covid-19 crisis. The social protection system at present is not at a scale to address the needs of the chronically poor and vulnerable and it is not sufficiently well designed to adapt to meet the needs of the transitory vulnerable as a result of shocks.

It is estimated that 48% of those in extreme poverty were reached by at least one social assistance or humanitarian programme (PICES 2019). The Multiple Indicator Cluster Survey (2019) found only 40% of households to have received any external economic support in the three months before the survey, of these the majority (79%) received food assistance through drought relief, communal gardens or agricultural inputs. 17% reported getting any school-related support, which could be the BEAM but also WFP school feeding and less than 0,5 % were recipients of the Harmonised Social Cash Transfer (HSCT). The World Bank analysis shows humanitarian assistance to provide the bulk of support as compared to the Government. The 60,000 households receive support under the HSCT, representing less than 1% of households in need of support. The BEAM is reported to be supporting only a few children in each targeted school, leaving many without support.

### **The sector financing is insufficient and has decreased recently**

According to the 2019 Social Protection Sector Review, the fundamental problem with the social assistance programmes is the limited funding. The resources available are not commensurate with the scale of poverty and vulnerability in the country and the values of the benefits remain constant and their real values are eroded by inflation. Payments are very irregular, further exacerbating the poor adequacy of benefits.

The Zimbabwean government is facing funding challenges due to the combination of both the important external debt preventing new financing and the withdrawal of funding from development partners. Zimbabwe development partners continue to be interested in supporting the development of social protection and particularly the social assistance systems considering the important needs and the country vulnerabilities. However, their support is provided through technical assistance and 'humanitarian' programmes but not direct financing.

Zimbabwe spends 1.2% of GDP or 7.3% of the total national budget on social assistance programmes. The regional average is above 2%. In the 2020 fiscal year, the Social Protection allocation was budgeted at 85% from domestic resources and 15% from development partners. Government resources are further eroded by inflation as well.

### **The sector capacities are limited by several factors including financing but also coordination**

The Department of Social Development (DSD) has two units headed by Deputy Directors. The Family Support Unit is mandated with the delivery of AMTO, PA, HSCT and the FDM programme. The Child Protection Unit is mandated with the delivery of the BEAM and other child-focused initiatives. The responsibility for all the social assistance programmes being with the DSD provides an opportunity for integration and harmonisation that to date has not been realised. Although at subnational levels all programmes are delivered through the District Social Welfare Office and District Social Welfare

Officers. From the total Social Welfare Budget, social benefits constitute 96% of the total allocation, leaving only 4% for operations and capital expenditures (UNICEF 2020). At national and at district levels, the services have very little resources to provide services and to operate.

The mandate for coordination of social protection and implementation of the main social assistance programmes falls under MoPSLSW and while a coordination structure in the form of the National Social Protection Steering Committee and several Technical Working Groups have been established, in practice they have not been very active so far. UNICEF is providing support to the SP coordination trying to reactivate these mechanisms. The coordination and the policy and technical development are largely driven by the UN system and the donors even in the absence of direct funding (Devereux 2020).

### **Inclusion is also a major issue for social assistance programmes**

The 2019 SP sector Review highlights that the social assistance programmes use outdated information for targeting processes. Programmes are known to be open to patronage and abuse, grievance procedures are insufficient, and the situation in terms of data confidentiality and security is unclear.

A review of targeting approaches and mechanisms of social assistance programmes was conducted by OPM in early 2021. The final report and a policy note should be released shortly according to UNICEF. Here are a few key findings from the review:

- Community perceptions of who should be prioritised for unconditional social transfers align strongly with the current target groups of all five of the Government of Zimbabwe social assistance programmes. Whilst they list specific categories of vulnerable people (elderly, people with disabilities...) they also place the individual in the context of their household and wider supporting network.
- The quantitative analysis highlights that labour constrained households are more likely than others to be food poor, as are households that include orphans or people with disabilities or chronic illness. On the other hand, households headed by elderly people and widows are not actually any more likely than others to be food poor. A key gap in the current system from a targeting effectiveness perspective is households with children aged under two years. This category of households has the highest incidence of food poverty but does not feature in either community perceptions of who deserves transfers or in the target groups of current programmes.
- The targeting criteria and processes of the social assistance programmes do not allow selecting these people perceived as most vulnerable by their communities or evidence. The HSCT targeting approach uses Proxy Means Testing (PMT). The FDM CBT process is widely perceived by respondents as influenced by political and social considerations. The AMTO and PA are "on-demand" programmes - people have to apply, rendering the participation of the most vulnerable and deprived unlikely.

According to the above, the programmes and the functionality of the social assistance programmes are not currently conducive to SRSP considering notably its coverage, payment performance and the profile of its beneficiaries. However, there is an increasing interest to strengthen and developing systems to move towards an effective SRSP. The role played by the DSD and the SW officers in both disaster response and social assistance could represent an opportunity. Partners also continue to be

supportive of the social assistance systems, through institutional capacity strengthening, including moving towards a national shock-responsive system.

## **The Zimbabwean Red Cross Society strategy and priorities**

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ZRCS mission is to assist the most vulnerable in target communities with developmental and humanitarian interventions. The auxiliary role of the National Society and its nationwide network of over 40 000 members and volunteers have a unique contribution in supporting disaster preparedness and response.

ZRCS is a permanent member of the Civil Protection Committee, where it is represented by the Secretary-General. ZRCS National Disaster Response Team (NDRT) is composed of staff and volunteers and is supporting the Provincial Disaster Response Team (PDRT) when its response capacity is exceeded. The NDRT is responsible for resource mobilizations such as DREF, Appeals, Contingency planning and stocking and distribution of resources. The NDRT is also replicated at District and ward levels. The teams at these levels are activated as and when there is a need to act and can hold regular meetings for preparedness. The ZRCS standing contingency is reviewed annually. The contingency plan spells out priority response areas as informed by forecast based DRM initiatives. This plan also enables resources mobilization in time for the anticipated response needs, including stock prepositioning.

Disaster preparedness and risk reduction programmes are still an essential part of the ZRCS 2021-2025 Strategic goals under Strategic Goal 1 but also in synergies with its other strategic goals 2 and 3 and capacities and systems strengthening activities.

### **ZRCS 2021 – 2025 STRATEGIC GOALS**

STRATEGIC GOAL 1: People anticipate, respond to, and quickly recover from crisis

Key Focus Area 1.1 - Disaster management

Key Focus Area 1.2 - Strategic Partnerships

STRATEGIC GOAL 2: People lead safe, healthy and dignified lives and have opportunities to thrive

Key Focus Area 2.1 – Primary Health Services at community level

Key Focus Area 2.2 – Food security & livelihoods for communities

Key Focus Area 2.3 – Health, Nutrition and Protection in confined spaces

STRATEGIC GOAL 3: People Mobilise for inclusive and peaceful communities

Key Focus Area 3.1 – Volunteerism local action, global reach

Key Focus Area 3.2- Community Based Programming and Meaningful Inclusion of

Community Structures, towards Influencing Humanitarian Action

Key Focus Area 3.3 – Communication and Digital Transformation for impact



Over the past years, the ZRCS has been developing and implementing programmes to reduce the risks and exposures to hazards, improve preparedness and readiness. As part of the ECHO funded DRM project, ZRCS has established the initial institutional arrangements for long term Cash and Voucher Assistance programming which seeks to ensure that ZRCS strategic ability to undertake CVA effectively and at scale, including developing the necessary strategic partnerships.

While the World Bank and UN agencies are supporting the government capacity to coordinate and to strengthen Social Protection Programmes, the ZRCS could bring its experience in disaster preparedness and response and operational and institutional comparative advantages to assess existing Social Protection Schemes ability to support the delivery of humanitarian assistance in emergency contexts and to support specific interventions.

## Priority areas of engagement for the ZRCS

The engagement of the ZRCS in Social protection is aligned with its auxiliary role to the Government and first responder to disasters to:

- Respond effectively and timely to the needs of the population through its Red Cross volunteer network across the country
- Coordinate actions and DRM and SRSP mechanisms to ensure inclusion and timely and effective relief
- Strengthen national social protection systems to ensure their continuity during disasters and ensure they are shock-responsive and consider the new challenges brought by climate change

### Key recommendations

| <b>Activities</b>                                                                                                                                                                                                 | <b>Responsible</b> | <b>With</b> | <b>Timeline</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-----------------|
| <b>Sign a partnership agreement with the Department of Social Development, MoPSLSW</b>                                                                                                                            |                    |             |                 |
| Support the development of a contingency plan to ensure anticipatory actions and the continuity of the social protection programmes during disasters, incl. pre-payment, payment systems and community engagement | MoPSLSW            | ZRCS        | 2022            |
| Clarify the respective roles of Social Welfare officers and the RC volunteers and areas of collaboration                                                                                                          | ZRCS               | MoPSLSW     | 2022            |
| Participate in both the Civil Protection Committee and the Social Protection Committee and propose inter-sectoral coordination                                                                                    | ZRCS               | MoPSLSW     | <u>2021</u>     |
| Support the development of the MoPSLSW disaster response plan                                                                                                                                                     | MoPSLSW            | ZRCS        | 2022            |
| Develop operational tools for Community Engagement and Accountability and complaints and feedback mechanisms                                                                                                      | ZRCS               | MoPSLSW     | 2022            |
| <b>Continue the engagement with Social Welfare Offices</b>                                                                                                                                                        |                    |             |                 |
| Include SWOs in responses and project implementation                                                                                                                                                              | ZRCS               | SWO         | 2021            |
| Include them in capacity building exercises                                                                                                                                                                       | ZRCS               | SWO         | 2022            |

| <b>Activities</b>                                                                                                                                                                                                                                                                                                                                      | <b>Responsible</b> | <b>With</b>         | <b>Timeline</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------|-----------------|
| <b>Support the coordination efforts for SRSP</b>                                                                                                                                                                                                                                                                                                       |                    |                     |                 |
| Contribute to the UNICEF and WFP SRSP capacity assessment(s), on the DRM analysis and identifying linkages with SP, sharing lessons learnt from RCM and ZRCS                                                                                                                                                                                           | ZRCS               | UNICEF, WFP         | Q4 2021         |
| Propose the creation of a technical group on SRSP within the CWG                                                                                                                                                                                                                                                                                       | ZRCS               |                     | Q4 2021         |
| Propose agenda points to exchange on technical and strategic issues: <ul style="list-style-type: none"> <li>▪ understanding of vulnerabilities and profile of those affected,</li> <li>▪ inclusion,</li> <li>▪ targeting,</li> <li>▪ registries</li> <li>▪ enhancing the continuum between early warning, response and recovery/ resilience</li> </ul> | ZRCS               | BRC, DRC, FRC, IFRC | 2022            |
| <b>Continue building internal capacities on Social Protection</b>                                                                                                                                                                                                                                                                                      |                    |                     |                 |
| Organise knowledge sharing esp. on thematic issues such as targeting, registries and MIS, risk financing                                                                                                                                                                                                                                               | ZRCS               | BRC, DRC, FRC, IFRC |                 |
| Invite the DSD/ MoPSLSW to participate in capacity building activities                                                                                                                                                                                                                                                                                 | ZRCS               |                     |                 |

## ***Annexe 1. Abbreviations***

|         |                                                     |
|---------|-----------------------------------------------------|
| AMTO    | Assisted Medical Treatment Order                    |
| BEAM    | Basic Education Assistance Module                   |
| CBT     | Cash Based Transfer                                 |
| CEA     | Community Engagement and Accountability             |
| CP      | Civil Protection                                    |
| CVA     | Cash and Voucher Approach                           |
| CWG     | Cash Working Group                                  |
| DCA     | Danish Church Aid                                   |
| DCP     | Department of Civil Protection                      |
| DRM     | Disaster Risk Management                            |
| DSD     | Department of Social Development                    |
| DSW     | Department of Social Welfare                        |
| DSWOs   | District Social Welfare Officers                    |
| EAP     | Early Action Protocol                               |
| ECTP    | Emergency Social Cash Transfer Programme            |
| FBA     | Forecast Based Action                               |
| FCDO    | Foreign Commonwealth and Development Office         |
| FDM     | Food Deficit Mitigation                             |
| FGD     | Focus groups discussion                             |
| FSC     | Food Security Cluster                               |
| GRM     | Grievance and redress mechanisms                    |
| KII     | Key informants interviews                           |
| KRCS    | Kenya Red Cross Society                             |
| HSCT    | Harmonised Social Cash Transfer                     |
| HSNP    | Hunger Safety Net Programme                         |
| MEB     | Minimum Expenditure Basket                          |
| MIS     | Management Information System                       |
| MoPSLSW | Ministry of Public Service, Labour & Social Welfare |
| NDRT    | National Disaster Response Team                     |

|        |                                                     |
|--------|-----------------------------------------------------|
| NSPPF  | National Social Protection Policy Framework         |
| OVC    | Orphans and Vulnerable Children                     |
| PA     | Public assistance                                   |
| PDRT   | Provincial Disaster Response Team                   |
| PICES  | Poverty, Income, Consumption and Expenditure Survey |
| PMT    | Poverty Mean Testing                                |
| RCM    | Red Cross Movement                                  |
| SRSP   | Shock Responsive Social Protection                  |
| SP     | Social Protection                                   |
| SW     | Social Welfare                                      |
| SWO    | Social Welfare Officer                              |
| UN     | United Nations                                      |
| WB     | World Bank                                          |
| ZimVAC | Zimbabwe Vulnerability Assessment Committee         |
| ZRCS   | Zimbabwe Red Cross Society                          |

## ***Annexe 2. Scoping mission schedule***

| <b>Date</b>                                    | <b>Activity</b>                              |
|------------------------------------------------|----------------------------------------------|
| 5 <sup>th</sup> July 2021                      | Inception Meeting                            |
| July – August                                  | Desk Review and Key Informants Interviews    |
| 10 <sup>th</sup> September                     | Scoping study Notes shared                   |
| 26 <sup>th</sup> and 27 <sup>th</sup> November | Field mission to Mwenezi                     |
| 28 <sup>th</sup> November                      | Workshop in Harare                           |
| 29 <sup>th</sup> November                      | Debriefing with ZRCS and BRC                 |
| 2 <sup>nd</sup> November                       | Presentation of key conclusions to partners  |
| 30 <sup>th</sup> November 2021                 | Report and position paper outlines finalized |

### ***Annexe 3. List of Key informants***

| <b>Organisation</b> | <b>Name</b>           | <b>Position</b>                                 |
|---------------------|-----------------------|-------------------------------------------------|
| <b>FCDO</b>         | Corinna Kreidler      | Humanitarian Adviser (CVA),                     |
|                     | Isabelle Abbott Pugh  | Social Development Advisor                      |
| <b>WFP</b>          | Hashim Zaidi          | Head of Programme                               |
|                     | Marika Guderian       | Deputy HoP                                      |
|                     | Andres Chamba         | HQ Social Protection                            |
| <b>WFP</b>          | Elisha Moyo           | FBF/ climate risks management                   |
|                     | Nomthandazo Musengezi | CBT                                             |
|                     | Gwendoline Maphosa    | CBT                                             |
| <b>DRC</b>          | Mark Powell           | FBA delegate                                    |
| <b>ZRCS</b>         | Tapiwa Chadoka        | Programme Manager                               |
|                     | Admire Mandizvidza    | CVA officer                                     |
|                     | Leobah Mudungwe       | Community engagement and accountability officer |
|                     | Thulani Sibanda       | Coordinator of the ECHO project                 |
| <b>UNICEF</b>       | Andrew Kardan         | Social Protection Specialist                    |

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