



WFP Zimbabwe
SPECIAL OPERATION No 10822.0

Country:	Zimbabwe
Type of project:	Special Operation
Title:	Logistics coordination and provision of tertiary transport in support of the Humanitarian Community's response to the Cholera outbreak in Zimbabwe
Total cost (US\$):	1,175,194
Duration:	6 Months: from 16 February to 15 August 2009

Abstract

The logistics capacity of humanitarian organizations working in Zimbabwe has been greatly overstretched in the past few months owing to a cholera epidemic affecting much of the country. In November 2008, the United Nations Country Team (UNCT) requested the World Food Programme (WFP), in its role as Logistics Cluster Lead, to assist these organizations.

Through a 'Special Operation', WFP intends to support the efforts of the humanitarian community and local authorities in their efforts to respond to the outbreak of cholera. The operation provides for the assets, equipment, staff and systems necessary to ensure an uninterrupted supply chain of life-saving relief items to the affected areas;

- through the provision of tertiary transport, temporary storage and related logistics services; and
- by means of coordination of and information management for the overall logistics response.

This Special Operation will have run for six months at a cost of US\$ 1,175,194.

Project Background

1. Once one of Africa's most prosperous nations, Zimbabwe is now facing severe economic difficulties with unemployment over 90 percent and inflation reaching record levels. Most of the population lack basic amenities.
2. The political situation remains fragile, but the opposition and current administration have recently agreed to a power sharing arrangement which has now come into effect. Future political developments remain largely unpredictable.
3. A hyper inflationary environment, compounded by a shortage and frequent devaluation of the local currency, has made it very difficult to operate and engage labour for handling humanitarian aid in a normal way.
4. A cholera outbreak emerged some months ago and has since spread throughout the country. The most affected areas are Chitungwiza, Harare City, Mudzi, and

Beitbridge. In particular the spread of cholera to Beitbridge further raised alarms, as this city is a major hub for intense cross-border movements both into and out of Zimbabwe. The average case fatality rate (CFR) for cholera now stands at 4.7%, well above the international accepted standard of 1%.

5. The World Health Organization announced at the end of January that Zimbabwe's cholera cases exceeded 77,000, and that the death toll since August 2008 had reached 3,688 out of the 77,650 recorded cases. It is estimated that about half of Zimbabwe's population of some 12 million are at risk, mainly because of poor living conditions. The Humanitarian Community expressed strong concerns regarding the growing proportion of people falling ill and dying, particularly for those in rural areas who are out of reach of health care.
6. Zimbabwe's rainy season is expected to help nurture and spread this waterborne disease which seems to thrive on the country's poor sanitation and broken water system.

Project Justification

7. WFP is assuming its responsibility as the lead Agency of the Logistics Cluster as per the UNCT request in August 2008.
8. The cholera epidemic now affects almost all of the major regions of the country (56 out of 62 districts have reported cholera cases), thus hampering the timely and efficient provision of humanitarian aid to affected populations in the most remote areas. Medicines, food and non-food items need to be delivered to approximately 300 Cholera Treatment Centres (CTCs) and Cholera Treatment Units (CTUs). Since the end of the festive season, a distinct shift from a predominantly urban to a mostly rural outbreak has arisen. Various field assessments have highlighted gaps in the current response strategy and there is a need for local rapid response, including logistical support.
9. Transport capacity is limited throughout the country and competition for resources among commercial and humanitarian actors is expected to increase. In addition, the effectiveness of the transport fleet in the country is deteriorating overtime due to lack of spare parts and other essential inputs to service the fleet in a timely manner.
10. Fuel shortages have been reported in some areas of Zimbabwe. To prevent delays in the delivery of relief items, WFP has had to preposition fuel reserves with commercial contractors at several locations throughout the country in the framework of its operations.

Project Objective(s)

11. The objective of this operation is to coordinate the supply chain and ensure an efficient and timely delivery of life-saving relief items in support of the humanitarian community's response to the cholera epidemic in Zimbabwe. This

operation will further enable the humanitarian community to enhance local medical distribution networks and systems.

Project Implementation

12. The humanitarian needs of the population of Zimbabwe are substantial, and include needs for a range of humanitarian goods, from medicines, medical equipment, potable water, sanitation kits and food. The Special Operation accommodates logistical augmentation and coordination, set up to ensure the delivery of key relief items to the affected population, as well as operational support to the humanitarian community deemed essential to respond effectively to the crisis.

The activities to be undertaken are as follows:

Consolidation of humanitarian cargo:

13. Through the Special Operation, WFP will facilitate the consolidation of relief cargo from humanitarian actors, by augmenting five logistics hubs at strategic locations, namely: Harare, Mutare, Gweru, Bulawayo and Beitbridge. Hubs established for WFP's PRRO 10595.0 will be expanded for interagency use in response to the cholera epidemic. In coordination with local authorities, the humanitarian community, and in liaison with the main health and sanitation partners, i.e., UNICEF, WHO and MSF, relief items from humanitarian organizations will be compiled into 'kits' to ensure a timely reception, preparation and consolidation of the cargo which, in turn will ensure consolidation and optimal use of transport capacity and avoid gaps and overlaps.
14. The Special Operation will also cater to the mobilization and setting up of essential assets and equipments for the expansion of the logistics hubs, including the expansion of temporary storage facilities.

Logistics coordination, cargo prioritization and tracking:

15. A Harare-based 'Logistics Cluster Cell' will be established with support from the WFP Country Office and the Global Support Cluster cell in Rome. The Logistics Cluster Cell will be responsible for coordinating the logistics operation and prioritizing cargo based on demands set by the humanitarian community.
16. Furthermore, the Logistics Cluster will perform cargo tracking (stocks and deliveries) and provide information management services to the entire humanitarian community.
17. The Special Operation provides for the strengthening of the Logistics staffing structure in Zimbabwe through the deployment of a Logistics Coordinator and an Information Management Specialist. The Logistics Cluster operations will be further supported by Logistics and Administrative staff recruited locally.

Facilitation and provision of transport services

18. Through the Special Operation, WFP will offer logistics and transport in close coordination with the Health and Water & Sanitation Clusters. Some UN agencies

(e.g., WHO, UNICEF) as well as some NGOs (e.g., MSF, OXFAM, CRS and Africare) have expressed interest in participating in this logistical response. It is estimated that some 10,000 cubic metres of various relief items, e.g., medicines, cholera beds, buckets, soap and other health and sanitation items, will need to be stored and distributed to some half a million households to prevent the further spreading of the disease.

19. Handling and transport of emergency medicines, medical equipment, water & sanitation, food and non food relief items will be provided free of charge as per priorities set by the Humanitarian Community so long as resources are available.
20. Transport will be provided ex-hubs to determined Cholera Treatment Centres or any other agreed delivery points throughout the country.
21. WFP will also secure the supply of fuel to enable transporters to keep their performance above minimum operating levels. This measure is crucial to ensure that the operation is not impeded by possible fuel shortages, especially given the current, unreliable supply system.
22. Whereas Zimbabwean transporters will be expected to arrange their own supply of fuel, WFP will draw on its secured contingency stock in the event that local markets fail. If necessary, the fuel will be sold to transporters at commercial market rates and the value recovered from subsequent payments. WFP would bear management and storage costs of the stock. Any remaining quantity of fuel at the end of the operation will be sold to the fuel provider or transporters at commercial market rate and recoveries rolled up into the project to contract additional logistics services.
23. The Project Manager for this Special Operation will be the Head of Logistics in Zimbabwe; the Allotment Manager will be the WFP Finance Officer in Zimbabwe; and the Funds Manager will be the Country Director of WFP CO Zimbabwe.
24. Once the immediate requirements to respond to the cholera epidemic are met, the Logistics Cluster will assess any remaining gaps and/or bottlenecks faced by the humanitarian community in delivering relief assistance in Zimbabwe. In close liaison with all humanitarian partners and the UNCT, the Logistics Cluster will then define the need to phase out components of this operation or extend the scope of the Logistics Cluster activities as deemed necessary.

Project Costs and Benefits

25. The Special Operation will have a total cost to WFP of US\$ 1,175,194. The project is intended to enable WFP to ensure an uninterrupted supply chain of life-saving relief items and the provision of logistics coordination in support of the humanitarian community's response to the cholera epidemic in Zimbabwe.

26. A contribution amounting to US\$ 450,000 has been confirmed by the Central Emergency Response Fund and will ensure a rapid execution of the activities once the operation is approved.

27. Below is the Special Operation's budget structure. Details can be found in the attached budget sheet:

DSC	449,563
DOC	648,750
ISC (7%)	76,882

Monitoring & Evaluation

28. The key performance indicators will be reported at the end of the project and will include:

- Total tonnage of relief item received at hub versus consolidated as per planned figures.
- Time framework compliance with a phased approach
- Transport capacity made available versus actual utilization
- Warehouse capacity available versus utilization
- Number of agencies/NGOs making use of the service versus planned expectations
- Use of interagency coordination and information related services provided (website, reports, surveys, maps, assessments)

29. A compliance and cost effectiveness mission will be conducted by the end of the operation.

30. Operational reports will be provided on a regular basis.

RECOMMENDATION

A Special Operation covering the period 16 February to 15 August 2009, at a total cost to WFP of US\$ 1,175,194, is recommended for approval under the Executive Director's delegated authority.

APPROVAL

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