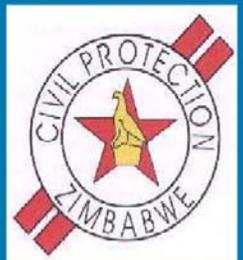


# CHIMANIMANI DISTRICT

## Disaster Risk Management Plan 2019



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## **1. TABLE OF CONTENTS**

1.	Table of Contents .....	2
	VISION .....	3
	MISSION .....	3
1.	INTRODUCTION .....	4
1.1.	Enabling Legislation and Policies .....	4
1.1.1	The principal ones are:.....	4
1.2	Purpose of the Plan .....	4
1.3.	MANAGEMENT STRUCTURE .....	5
2.	District Profile .....	5
2.1.	Socio-Demographics: .....	5
2.2.	Location.....	5
2.3.	Physical Features.....	6
2.4.	Socio-Economic Features .....	6
3.	District hazard profile .....	7
4.	Traditional Leadership .....	8
5.	SECTION A .....	9
5.1.	Disaster Risk Reduction Plan.....	9
5.1.1.	EMERGENCIES .....	9
5.1.2.	DROUGHT/FOOD SECURITY .....	12
5.1.3.	Epidemics, Epizootic and Zoonotics .....	14
6.	SECTION B .....	20
6.2.	DROUGHT/ RELIEF FOOD SUBCOMMITTEE (GUIDE).....	22
7.	Resource Matrix.....	27
8.	Emergency Preparedness Inventory .....	28
9.	ACRONYMS .....	30
10.	Diary of Focal Contacts .....	31
11.	Inventory for Councillors .....	32

## VISION

Chimanimani District Civil Protection Committee understands embraces and practise the disaster risk management principles to ensure a safe and resilient environment for the community.

## MISSION

To establish and maintain an inclusive integrated and effective disaster risk reduction programme for Chimanimani Rural District Council area that will ensure effective and speedy response in cases of disasters and emergencies to the benefit of all communities.

## 1. INTRODUCTION

The government of Zimbabwe's commitment to management of disasters is exhibited by the existence of enabling legislation and policies. In operation the management of disasters the approach entails a coordinated and multi-sectorial approach, bringing all relevant stakeholders in disaster risk management. With a view to manage disasters in Zimbabwe the government enacted the Civil Protection Act (10:06) in 1989. As such the Act provides for various functions and roles by Government Ministries/departments, local authorities, NGOs, Civil Society and the public in general in mitigating and managing disasters.

### 1.1. ENABLING LEGISLATION AND POLICIES

The Minister of Local Government, Public Works and National Housing (MLGPW&NH) is charged with the coordination role as empowered by the **Civil Protection Act (Cap 10:06)**.

The Act provides for: -

- (i) The establishment of the Civil Protection Directorate.
- (ii) Special powers designed to establish, coordinate and direct the activities of both the public and private emergency services;
- (iii) Guidelines for action and maximum use of resources since disaster mitigation require a multi-sectoral and interdisciplinary approach;
- (iv) The establishment of a National Civil Protection Fund that receives money from both Government and the public. The fund is applied to the development and promotion of Civil Protection activities throughout the country.

There are also a number of other Acts that underpin disaster management.

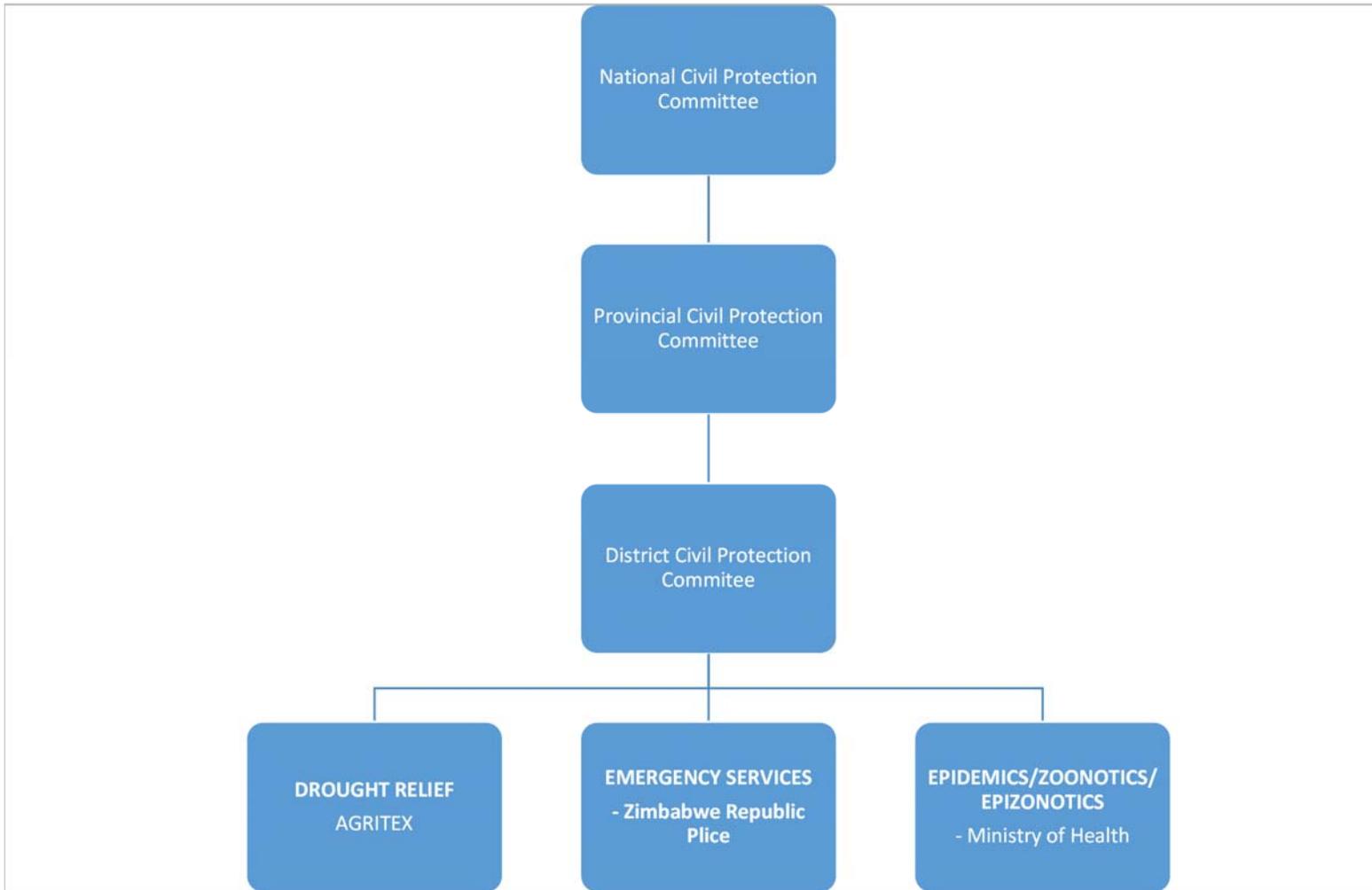
#### 1.1.1 The principal ones are:

- Environmental Management Act Cap 20:27
- Public Health Act Cap 15:09
- Rural District Councils Act Cap 29:13
- The Regional, Town and Country Planning Act, Cap 29:12
- The Police Act, Cap 11:10
- The Defence Act, Cap 11:02

#### 1.2 Purpose of the Plan

- To protect human life, property and the environment in case of emergencies or disaster through timely well-structured intervention measures.
- To prevent loss of life and alleviate human suffering and protect property and the environment from emergencies and disasters.
- To establish preparedness, response and mitigation measures for disasters in Chimanimani District.

### 1.3. Management Structure



## 2. DISTRICT PROFILE

### 2.1. Socio-Demographics:

The population of according to 2012 census stood at 134 939 (males 64 745, females 70194) is the smallest with density of 43.48 and 32 578 households. The district has 23 administrative wards.

### 2.2. Location

The District is located in the South Eastern border of the country (Zimbabwe) grid reference VP6911. Chimanimani District is one of the smallest in the South East of Manicaland province, boarded by Mozambique in the east, Mutare District in the north, Buhera District in the west and Chimanimani District in the south. It has an area of 3 450.14 square kilometres. District is the smallest of the 7 Districts in Manicaland with high rugged terrain rising up to 6 000m above sea level in the east to 1 600m above sea level in the Save and Odzi valleys in the western part. The district prides its self in having all the five (5) natural agro-ecological regions found in Zimbabwe. The district is 94% rural that is made up of 23 wards categorised as,

Communal (18), Resettlement Area (1) Commercial (3) Peri-urban (1). Before independence in 1980, the District was named Melsester by colonialist in 1897.

### 2.3. Physical Features

- a) **Hydrological System:** Rainfall averages 200mm in the west to 1000 mm per annum in the east. The district is home to 6 main big perennial rivers: Wengezi and Umvumvu in the North; Nyahode, Haroni and Rusitu in the Eastern part of the District. (These rivers are slowly becoming seasonal due to change in climatic conditions). Both Orographin and Relief rainfall pattern exists.
- b) **Climate:** Temperature averages 16°C in Natural Region 1, 20°C in Natural Region 2 and 3 and +25°C in Region 4 and 5.
- c) **Landscape:** High and rugged terrain in the Eastern area with an altitude of up to 6000m above sea level. Low flat terrain especially in the Save and Odzi Valleys. The District mainly consists of dolerite clays, silica clays in the High terrain to quartzite sands and aluminium in the low-lying areas.
- d) **Natural Regions:** The District has a total of 354 805 hectares (3 548.050 square kilometers) distributed over five natural regions found in Zimbabwe. Natural regions are distributed as follows
- e) **Vegetation:** There are three categories:
  - **Low lying areas:** (dry region) mixed deciduous woodland predominant of baobab and Mopani trees
  - **Escarpment:** Savanna woodland to Montana grassland and broad-leaved evergreen forests.
  - **Highlands :** Broad leafed Montana forests exotic trees of pine, wattle and eucalyptus trees

### 2.4. Socio-Economic Features

- a) **Transport:** The District is linked by 3 major tarred roads namely: the Mutare-Masvingo road to the Northern boundary, Wengezi – Chimanimani Road to the North East border and the Chimanimani – Chimanimani Road to the South. More of the other roads network is gravelled. Roads in the Eastern part of the District are partially accessible during the rainy season as there are not all weather roads.
- b) **Telecommunications:** About 5% of telecommunication service is being provided by TelOne through landlines. The larger part of the district is covered by cellular phone network provided for by NetOne and Econet Zimbabwe and Telecel constituting over 90% district coverage.
- c) **Water facilities:** The District has lots of water in the eastern part and underground water in the west i.e. region 4 and 5. The quality of underground water in the west is variable in some areas and has high fluorine content e.g. Hotsprings and Tonhorai. However, most of the underground and surface water is suitable for irrigation and domestic use. The biggest Rivers in the Eastern part of the District are Rusitu with its

tributaries being Nyahode, Mutsangazi, Chipita, Haroni then Musapa near Chikwakwa communal area to the West, the biggest Rivers are Save and Odzi which have major tributaries of Nyanyadzi, Umvumvumu and Wengezi. Most springs are found in region 1. The District has a total of 48 small dry dams 95% of which are silted and one medium sized dam namely: Mhakwe. The water from Mhakwe dam is mainly used for irrigation and livestock purposes. There are a number of suitable dam sites, many which have been surveyed on major rivers but cannot be constructed due to shortage of funds. . However the safe water coverage human use for stands at 33%.

- d) **Settlement Pattern:** Average density is 31.91/km<sup>2</sup>. Total population is 134 939 people (census 2012). There are a total of +26 045 households. Settlement pattern ranges from linear in the western part of the district to random in the eastern part of the district especially in communal areas. Most of the areas have well defined patterns due to a high level of land use planning in their areas. However, in the western parts settlements follow major sources of water supply and communication e.g. major rivers and roads. Most households do not have safe sanitation (28%)

### **3. DISTRICT HAZARD PROFILE**

The most prominent hazards found in the district include droughts, veldt fires, poor roads and traffic accidents, cholera and other communicable diseases outbreaks, cyclones and floods, environmental degradation, malaria, tremors, poor distribution of rain. Incidents of fire are also on increase as well as road related and environmental degradation mainly from illegal gold panning. Fire outbreaks are common in plantations, urban and commercial farms residence. Fire outbreaks require a strong and responsive mechanism given that massive destruction can be done in a very short space of time. There is a general upsurge in accidents occurring in the district due to increase in traffic volume in the district. In the same vein sugar estates are becoming refuge to wild animals leaving communities exposed to their threats.

Epidemics also appear as a serious threat to both humans and livestock. They include such diseases as cholera, malaria, diarrhoea, HIV, dysentery and measles which are human epidemics. In animals and livestock diseases such as anthrax, rabies, rinder pest, foot and mouth and new castle have been known to cause a lot of problems. The problems of land degradation and the subsequent siltation complement each other and therefore have to be tackled simultaneously. A lot of organization and resources have to be mobilized including traditional leaders to mitigate the problem.

The effects of disasters in communities and institutions cannot be overstated. The effects include loss of life, property, lack of adequate food, hunger, starvation, traumatization of communities, massive environmental degradation among others. The reduction of these will go a long way in making lives in communities bearable.

The knowledge about disaster risk reduction is of great importance in making people share a vision on the vulnerability of communities to emergencies and disasters. This can lead to them designing also to be aware of pending risks and disaster in their environments so as to

mobilize themselves in responding to disasters. This will put them in a position to work with the local leadership, government extension workers and local authorities.

Disasters are often worsened by ignorance compounded by inadequate precautionary measures. There is an urgent need to form disaster committees to strengthen the systems and structures at all levels. Communities should be in a position to identify areas of potential disasters and how to respond to such disasters within their area; hence the project is designed to mitigate these issues.

### **3.1. Health**

Chimanimani District has low water and sanitation coverage of about 33% and 28% respectively. This has exacerbated water-borne diseases such as cholera. The 2008 cholera outbreak was one of the reminders of the need for better sanitation in the district especially in Rusitu Valley and western part of the district. The district has 2 mission hospitals and 28 clinics that are not adequately equipped at the moment. The does not a government run district Hospital.

## **4. TRADITIONAL LEADERSHIP**

The district has six chiefs whose boundaries are clearly defined, however the boundaries for resettlement areas are yet to be gazetted. The chiefs are: -

- Chief Chikukwa
- Chief Muusha
- Chief Ngorima
- Chief Ndimba
- Chief Mutambara
- Chief Saurombe

## 5. SECTION A

### 5.1. Disaster Risk Reduction Plan

#### 5.1.1. EMERGENCIES

Hazard	Who or what is Vulnerable?	Prevention/mitigation strategies	Capacities	Responsible Main actors	Gaps/Challenges	Solutions to Address gaps	Timeframe
Road Traffic Accidents (RTAs)	<ul style="list-style-type: none"> <li>Motorists</li> <li>Pedestrians</li> <li>Animals</li> <li>Passengers</li> </ul>	<ul style="list-style-type: none"> <li>Proper training to drivers</li> <li>Traffic safety campaigns</li> <li>Adequate road signs (furniture)</li> <li>Improvement on the state of the roads</li> <li>Regular inspection of vehicles</li> <li>Speed humps</li> <li>Mobile speed</li> <li>Trapping machines</li> </ul>	<ul style="list-style-type: none"> <li>Legislation</li> <li>2 Mission hospitals</li> <li>4 Ambulances</li> <li>2 Mortuaries</li> <li>Qualified doctors and nurses</li> <li>Clinics in rural and urban areas</li> <li>Departmental vehicles including private vehicles</li> </ul>	<ul style="list-style-type: none"> <li>ZRP, Health</li> <li>VID, Local Authorities</li> <li>Traffic, DDF, Ministry of Transport and Roads, NGOs, Local Government</li> </ul>	<ul style="list-style-type: none"> <li>Inadequate resources-ambulances, machinery, fire tenders, vehicles, rescue equipment</li> <li>Harrow roads</li> <li>State of the roads,</li> <li>Lack of skilled human resources such as skilled ambulance technicians</li> <li>Poor road (furnisher)</li> </ul>	<ul style="list-style-type: none"> <li>Procurement of ambulances, fire tenders and vehicles</li> <li>Allocation of financial resources by the national budget</li> <li>Widening and regular maintenance of roads</li> <li>Local authority to budget for civil protection</li> <li>Training of key personnel</li> <li>To put more road signs</li> </ul>	On-going

					i.e. road signs, • Inadequate communication equipment i.e. radios	• Procurement of communication equipment	
Fire	<ul style="list-style-type: none"> <li>• Environment</li> <li>• People</li> <li>• Animals</li> <li>• Buildings</li> <li>• Infrastructure</li> <li>• Vehicles</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness campaigns on fire</li> <li>• Equipping fire departments</li> <li>• Construction of fire guards</li> <li>• Enforcement of the EMA and RDC Act</li> </ul>	<ul style="list-style-type: none"> <li>• Legislation</li> <li>• Fire tenders (private companies)</li> <li>• Skilled fire fighters</li> </ul>	<ul style="list-style-type: none"> <li>• ZRP, EMA, Fire Brigade, health, Public Sector, Private sector,</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate fire tenders</li> <li>• Poor sources of supply of water</li> <li>• Tall grass</li> <li>• Inadequate fire beaters</li> <li>• Poachers and smokers</li> <li>• Load shedding</li> <li>• Poor wiring of electrical installations</li> <li>• Uncontrolled human settlement</li> </ul>	<ul style="list-style-type: none"> <li>• Acquiring more fire tenders and maintenance</li> <li>• Awareness campaigns</li> <li>• Maintenance of buildings</li> <li>• Recruitment of human resources</li> <li>• Planning and communication of load-shedding to the public by ZESA</li> <li>• Communication by the public</li> <li>• Mock emergence/drills</li> </ul>	On-going

						<ul style="list-style-type: none"> <li>• Inspection of buildings</li> </ul>	
Floods	<ul style="list-style-type: none"> <li>• Human beings</li> <li>• Animals</li> <li>• Environment</li> <li>• Property</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness campaigns on floods</li> <li>• Relocation</li> <li>• Early warning systems.</li> <li>• Afforestation/ Reforestation.</li> <li>• Construction of durable structures.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel</li> <li>• Unused water bodies.</li> <li>• Early warning systems.</li> <li>• Readily available land</li> </ul>	<ul style="list-style-type: none"> <li>• AGRITEX, Social services,</li> <li>• DDF</li> <li>• Health</li> <li>• ZNA</li> <li>• ZRP</li> <li>• Local Authority</li> <li>• Met office and NGOs</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of funding</li> <li>• Under-utilisation of land.</li> <li>• Obsolete weather forecast equipment.</li> <li>• Social and cultural beliefs.</li> <li>• Met cannot predict rainfall distribution.</li> </ul>	<ul style="list-style-type: none"> <li>• Training on floods.</li> <li>• Funding</li> <li>• Land</li> <li>• Weather forecast</li> <li>• Awareness campaigns</li> <li>• Prioritize good tilling practices</li> </ul>	On-going
Landslide s/ rockfall	<ul style="list-style-type: none"> <li>• Human beings</li> <li>• Animals</li> <li>• Environment</li> <li>• Property</li> <li>• Roads</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness campaigns on landslides floods</li> <li>• Relocation</li> <li>• Early warning systems.</li> <li>• Afforestation/ Reforestation.</li> <li>• Construction of durable structures.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel</li> <li>• Early warning systems.</li> <li>• Readily available land</li> </ul>	<ul style="list-style-type: none"> <li>• AGRITEX,</li> <li>• DDF</li> <li>• ZNA</li> <li>• ZRP</li> <li>• Local Authority</li> <li>• Met office and NGOs</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of funding</li> <li>• Obsolete weather forecast equipment.</li> <li>• Met cannot predict rainfall distribution.</li> </ul>	<ul style="list-style-type: none"> <li>• Training on landslide.</li> <li>• Funding</li> <li>• Land</li> <li>• Weather forecast</li> <li>• Awareness campaigns</li> <li>• Prioritize good tilling practices</li> </ul>	On-going

### 5.1.2. DROUGHT/FOOD SECURITY

Hazard	Who /what is vulnerable	Prevention/mitigation Strategies	Capacities	Responsible / Main actors	Gaps or challenges	Solutions to address the gaps	Time frame
Drought	<ul style="list-style-type: none"> <li>• Human beings,</li> <li>• Animals</li> <li>• Environment</li> </ul>	<ul style="list-style-type: none"> <li>• Adoption of moisture conservation techniques.</li> <li>• Use of suitable crop varieties</li> <li>• Irrigation development.</li> <li>• Early warning systems.</li> <li>• Afforestation/ Reforestation.</li> <li>• Establishment of pastures and fodder banks.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel</li> <li>• Unused water bodies.</li> <li>• Early warning systems.</li> <li>• Readily available land</li> </ul>	<ul style="list-style-type: none"> <li>• AGRITEX, Social services, Mechanisation, Livestock production, Irrigation, Youth and women's affairs, lands office, Forestry, Met office and NGOs</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of funding</li> <li>• Under-utilisation of land.</li> <li>• Obsolete weather forecast equipment.</li> <li>• Social and cultural beliefs.</li> <li>• Met cannot predict rainfall distribution.</li> </ul>	<ul style="list-style-type: none"> <li>• Training on improved agricultural technologies.</li> <li>• Mechanised CA.</li> <li>• Prioritise funding for agriculture.</li> <li>• Zunderamambo</li> <li>• Veldt rehabilitation.</li> </ul>	On-going.
Hailstorm	<ul style="list-style-type: none"> <li>• Crops</li> <li>• Animals</li> <li>• Buildings</li> <li>• Human Beings</li> </ul>	<ul style="list-style-type: none"> <li>• Insurance.</li> <li>• Early warning systems.</li> <li>• Construction of durable structures.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel</li> <li>• Agro-insurance packages available.</li> </ul>	<ul style="list-style-type: none"> <li>• Met office</li> <li>• AGRITEX.</li> <li>• Insurance companies</li> </ul>	<ul style="list-style-type: none"> <li>• Reluctance to ensure crops.</li> <li>• Difficult to predict or manage hail storms.</li> </ul>	<ul style="list-style-type: none"> <li>• Development of early warning systems.</li> <li>• Awareness campaigns on crop insurance.</li> </ul>	

Siltation and Land degradation	<ul style="list-style-type: none"> <li>• Human beings</li> <li>• Animals</li> <li>• Aqua life</li> <li>• Environment</li> </ul>	<ul style="list-style-type: none"> <li>• Consolidated gardens.</li> <li>• Conservation sub-committee.</li> <li>• Council by laws.</li> <li>• Enforcement of government statutory</li> </ul>	<ul style="list-style-type: none"> <li>• Existing government acts.</li> <li>• Trained personnel</li> </ul>	<ul style="list-style-type: none"> <li>• EMA, AGRITEX, Mechanization, Local Authorities, Forestry Commission</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate law enforcement staff.</li> <li>• Soil type.</li> </ul>	<ul style="list-style-type: none"> <li>• Training.</li> <li>• Soil conservation works.</li> <li>• Establishment of livestock drinking points.</li> </ul>	
Veldt fires	<ul style="list-style-type: none"> <li>• Human beings</li> <li>• Animals , environment</li> <li>• Damage to property</li> </ul>	<ul style="list-style-type: none"> <li>• Establishments of fire guards.</li> <li>• Setting up and training of fire committees.</li> <li>• Crop and property insurance.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel.</li> <li>• By laws and government acts.</li> </ul>	<ul style="list-style-type: none"> <li>• EMA, ZRP , AGRITEX local authorities,</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate technical officers.</li> <li>• Fear of identifying fire starters.</li> <li>• Lack of cooperation in fighting fires.</li> </ul>	<ul style="list-style-type: none"> <li>• Scaling up of campaigns.</li> <li>• Strengthening enforcement.</li> </ul>	
Crop and animal pests and diseases	<ul style="list-style-type: none"> <li>• Human beings</li> <li>• Animals</li> <li>• Crops.</li> </ul>	<ul style="list-style-type: none"> <li>• Pest surveillance for early warning</li> <li>• Awareness campaigns and provision of literature.</li> <li>• Provision of chemicals and spraying teams.</li> </ul>	<ul style="list-style-type: none"> <li>• Trained personnel.</li> <li>• Readily available chemicals.</li> <li>• Early warning system in place.</li> </ul>	<ul style="list-style-type: none"> <li>• Parks and wildlife, Vet, AGRITEX, Livestock and NGOs.</li> </ul>	<ul style="list-style-type: none"> <li>• Poor communication systems.</li> <li>• Air control not functional.</li> <li>• Inadequate funding for chemicals and vaccination.</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of cell phones and radio networks to field level staff.</li> <li>• Prioritise funding for vaccination.</li> <li>• Introduction of bio-technologies</li> </ul>	

		<ul style="list-style-type: none"> <li>• Vaccinations and treatment.</li> </ul>				to the agricultural sector.	
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### 5.1.3. Epidemics, Epizootic and Zoonotics

Hazard	Who or What is vulnerable?	Prevention/Mitigation Strategies	Capacities	Responsible Main Actors	Gaps/challenges	Solutions to Address gaps	Time frame
Cholera / typhoid	<ul style="list-style-type: none"> <li>• Human beings</li> </ul>	<ul style="list-style-type: none"> <li>• Public awareness</li> <li>• Provision of adequate water and sanitary facilities</li> <li>• Proper disposal of waste</li> <li>• Food hygiene promotion</li> </ul>	<ul style="list-style-type: none"> <li>• Availability of adequate and trained health staff,</li> <li>• Field hospitals,</li> <li>• Early warning system,</li> <li>• Availability of boreholes in urban areas,</li> <li>• Rural WASH program</li> </ul>	<ul style="list-style-type: none"> <li>• Community</li> <li>• M.O.H.&amp;C.C,</li> <li>• D.D.F.</li> <li>• R.D.C.</li> </ul>	<ul style="list-style-type: none"> <li>• Salty bore holes,</li> <li>• Lack of adequate transport,</li> <li>• Limited laboratory services</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of safe water,</li> <li>• Training on PHHE, Deployment of more environmental health staff.</li> </ul>	
Malaria	<ul style="list-style-type: none"> <li>• Human beings</li> </ul>	<ul style="list-style-type: none"> <li>• Prophylaxis treatment to pregnant mothers,</li> <li>• IDSR,</li> <li>• ITN distribution</li> <li>• Awareness campaigns</li> </ul>	<ul style="list-style-type: none"> <li>• IRS team with a total of 45 spray operators, Trained health personnel on IDSR, PHHE</li> </ul>	<ul style="list-style-type: none"> <li>• Community, Health workers and all the stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>• Equipment for IDSR,</li> <li>• Inadequate transport,</li> <li>• Diagnostic test availability</li> </ul>	<ul style="list-style-type: none"> <li>• Liaise with other support supply chain, Proper environmental management</li> </ul>	Quarterly basis

		<ul style="list-style-type: none"> <li>• Treatment of known cases</li> </ul>					
Measles	<ul style="list-style-type: none"> <li>• Human beings</li> </ul>	<ul style="list-style-type: none"> <li>• Strengthen on disease surveillance system,</li> <li>• EPI , public awareness ,strengthen on PHHE</li> </ul>	<ul style="list-style-type: none"> <li>• Trained health staff, availability of vaccines</li> </ul>	<ul style="list-style-type: none"> <li>• MOH&amp;CC, community, stake holders</li> </ul>	<ul style="list-style-type: none"> <li>• Poor transport system and fuel, poor road conditions,</li> </ul>	<ul style="list-style-type: none"> <li>• Improve on transport system for EPI services, improve on road net work</li> </ul>	Quarterly basis
Rabies	<ul style="list-style-type: none"> <li>• People</li> <li>• Livestock</li> <li>• Animals</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccination,</li> <li>• Awareness (rabies week)</li> <li>• Post exposure vaccination,</li> <li>• Dog control,</li> <li>• Enforcement of bi-laws</li> </ul>	<ul style="list-style-type: none"> <li>• Vet Services</li> <li>• Adequate human resources,</li> <li>• Availability of vaccines</li> <li>• Health</li> <li>• Availability of vaccines</li> <li>• SPCA assist</li> </ul>	<ul style="list-style-type: none"> <li>• Community, Health staff, Local Authority</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of transport and fuel,</li> <li>• Lack of human vaccines,</li> <li>• Lack of adequate cold chain equipment (fridges)</li> <li>• Irregular meetings by disease committee</li> </ul>	<ul style="list-style-type: none"> <li>• Improve coordination</li> <li>• -Provision of refrigerator at Vet Services,</li> <li>• -Private pharmacies to stock vaccines</li> <li>• -Install fridges at Vet Services offices</li> <li>• -Scheduled zoonotic committee meetings</li> <li>• -Approach CDF or</li> </ul>	Quarterly  Review quarterly, on review meetings

						community share ownership trusts	
Anthrax	<ul style="list-style-type: none"> <li>• People</li> <li>• Animals</li> <li>• Livestock</li> </ul>	<ul style="list-style-type: none"> <li>• Animal vaccines</li> <li>• Awareness campaigns</li> <li>• Quarantine</li> <li>• Treatment of humans</li> <li>• Meat inspections</li> </ul>	<ul style="list-style-type: none"> <li>• Vet Services available</li> <li>• Vaccines readily available</li> <li>• Treatment readily available</li> <li>• Early warning systems available</li> <li>• Strengthen on disease surveillance</li> </ul>	<ul style="list-style-type: none"> <li>• Veterinary Department, Health, Community, Local Authority, all stake Holders</li> </ul>	<ul style="list-style-type: none"> <li>• Bad attitudes and practices</li> <li>• Inadequate transport and fuel</li> <li>• Lack of knowledge</li> </ul>	<ul style="list-style-type: none"> <li>• Increased coordination, Strengthen on disease surveillance, Strengthen on PHHE</li> </ul>	Quarterly coordination meetings
Foot and mouth	<ul style="list-style-type: none"> <li>• Livestock, humans on financial and psychological basis</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccination</li> <li>• Awareness</li> <li>• Quarantine</li> <li>• Food control</li> </ul>	<ul style="list-style-type: none"> <li>• Vet Services available</li> </ul>	<ul style="list-style-type: none"> <li>• Trained veterinary officers</li> </ul>	<ul style="list-style-type: none"> <li>• No robust early warning system</li> <li>• No equipment for cold chain</li> <li>• Vaccine is expensive</li> <li>• Liaison between Vet Services, meat hygiene and Min of Health</li> </ul>	<ul style="list-style-type: none"> <li>• Installation of cold chain</li> <li>• Coordination meetings</li> </ul>	
Rabies	<ul style="list-style-type: none"> <li>• Human beings, wildlife, livestock</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccinations</li> <li>• Buffer zones</li> <li>• fencing</li> <li>• Awareness campaigns</li> <li>• Surveillance</li> </ul>	<ul style="list-style-type: none"> <li>• Veterinary staff</li> <li>• Environmental health practitioner</li> <li>• Vehicle</li> <li>• Animal management centres</li> </ul>	<ul style="list-style-type: none"> <li>• Min of health and Vet, LPD, Council, ZRP, NGOs, Parks and Wildlife</li> </ul>	<ul style="list-style-type: none"> <li>• Unavailability of anti-rabies vaccine</li> <li>• Transport and fuel Allowances</li> <li>• Limited knowledge and behaviour change</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness</li> <li>• Investigations</li> <li>• Surveillance</li> <li>• Specimen collection and early treatment</li> </ul>	All year

		<ul style="list-style-type: none"> <li>• Specimen collection of the carcasses and early treatment of human beings</li> <li>• Controlling affected animals</li> <li>• Correct disposal of carcasses</li> </ul>			<ul style="list-style-type: none"> <li>• Unavailability of Cold chain</li> <li>• Control of stray wild animals</li> </ul>	<ul style="list-style-type: none"> <li>• Annual mass vaccination</li> </ul>	
Anthrax	<ul style="list-style-type: none"> <li>• Humans, livestock, wildlife</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccinations</li> <li>• Buffer zones</li> <li>• fencing</li> <li>• Awareness campaigns</li> <li>• Surveillance</li> <li>• Specimen collection and early treatment of human beings</li> <li>• Controlling affected animals</li> <li>• Correct disposal of carcasses</li> </ul>	<ul style="list-style-type: none"> <li>• Veterinary staff</li> <li>• Environmental health practitioner</li> <li>• Vehicle</li> <li>• Animal management centres</li> </ul>	<ul style="list-style-type: none"> <li>• Min of health and Vet, LPD, Council, ZRP, NGOs, Parks and Wildlife</li> </ul>	<ul style="list-style-type: none"> <li>• Transport and fuel Allowances</li> <li>• Limited knowledge and behaviour change</li> <li>• Unavailability of Cold chain</li> <li>• Control of stray wild animals</li> <li>• Unavailability of vaccines</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness</li> <li>• Investigations</li> <li>• Surveillance</li> <li>• Specimen collection and early treatment</li> <li>• Annual mass vaccination</li> </ul>	All year round

Foot and mouth	<ul style="list-style-type: none"> <li>Humans, livestock, wildlife</li> </ul>	<ul style="list-style-type: none"> <li>Vaccinations</li> <li>Buffer zones</li> <li>fencing</li> <li>Awareness campaigns</li> <li>Surveillance</li> <li>Specimen collection and early treatment</li> <li>Controlling affected animals</li> <li>Correct disposal of carcasses</li> </ul>	<ul style="list-style-type: none"> <li>Veterinary staff</li> <li>Environmental health practitioner</li> <li>Vehicle</li> <li>Animal management centres</li> </ul>	<ul style="list-style-type: none"> <li>Min of health and Vet, LPD, Council, ZRP, NGOs, Parks and Wildlife</li> </ul>	<ul style="list-style-type: none"> <li>Transport and fuel</li> <li>Allowances</li> <li>Limited knowledge and behaviour change</li> <li>Unavailability of Cold chain</li> <li>Control of stray wild animals</li> <li>Unavailability of vaccines</li> </ul>	<ul style="list-style-type: none"> <li>Awareness</li> <li>Investigations</li> <li>Surveillance</li> <li>Specimen collection and early treatment</li> <li>Annual mass vaccination</li> </ul>	All year round
Non Communicable Diseases (NCDs)	<ul style="list-style-type: none"> <li>Humans, livestock,</li> </ul>	<ul style="list-style-type: none"> <li>Vaccinations</li> <li>Awareness campaigns</li> <li>Surveillance</li> <li>Specimen collection and early treatment</li> <li>Controlling affected animals</li> <li>Correct disposal of carcasses</li> </ul>	<ul style="list-style-type: none"> <li>Veterinary staff</li> <li>Environmental health practitioner</li> <li>Vehicle</li> <li>Animal management centres</li> </ul>	<ul style="list-style-type: none"> <li>Min of health and Vet, LPD, Council, ZRP, NGOs, Parks and Wildlife</li> </ul>	<ul style="list-style-type: none"> <li>Transport and fuel</li> <li>Allowances</li> <li>Limited knowledge and behaviour change</li> <li>Unavailability of Cold chain</li> <li>Unavailability of vaccines</li> </ul>	<ul style="list-style-type: none"> <li>Awareness</li> <li>Investigations</li> <li>Surveillance</li> <li>Specimen collection and early treatment</li> <li>Annual mass vaccination</li> </ul>	All year round

Lumpy Skin Disease	<ul style="list-style-type: none"> <li>• Humans, livestock</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccinations</li> <li>• Awareness campaigns</li> <li>• Surveillance</li> <li>• Specimen collection and early treatment</li> <li>• Controlling affected animals</li> <li>• Correct disposal of carcasses</li> </ul>	<ul style="list-style-type: none"> <li>• Veterinary staff</li> <li>• Environmental health practitioner</li> <li>• Vehicle</li> <li>• Animal management centres</li> </ul>	<ul style="list-style-type: none"> <li>• Min of health and Vet, LPD, Council, ZRP, NGOs, Parks and Wildlife</li> </ul>	<ul style="list-style-type: none"> <li>• Transport and fuel Allowances</li> <li>• Limited knowledge and behaviour change</li> <li>• Unavailability of Cold chain</li> <li>• Unavailability of vaccines</li> <li>• Unavailability of acaricides</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness</li> <li>• Investigations</li> <li>• Surveillance</li> <li>• Specimen collection and early treatment</li> <li>• Annual mass vaccination</li> </ul>	All year round
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## 6. SECTION B

### 6.1. EMERGENCY SERVICES SUBCOMMITTEE

#### a) MEMBERSHIP

- Chairperson: ZIMBABWE REPUBLIC POLICE
- Vice: ZIMBABWE NATIONAL ARMY
- Other members: Hospitals, Defence Forces, Ambulance services, Wild life, Red cross, Social Services, MET department, NGOs, Local Council and ZPCS
- Others will be co-opted as and when necessary for their particular expertise/ resources

#### **Broad objective**

To ensure effective and efficient preparedness and response to mass casualty situations in the district through development of requisite emergency operating procedures and review of major incidents

#### **Potential Emergencies:**

Road traffic accidents, veldt fires, landslide, rockfall and floods

#### b) EMERGENCY RESPONSE PROCEDURES

##### **COMMUNICATION**

In the case of an emergency of a mass casualty nature, the following procedures shall be followed:

- Alert mechanism/ raising the alarm
- Person who receives the message/ information contacts ZRP
- ZRP will
  - dispatch officer or officers
  - raise relevant support services, e.g. fire brigade, hospital, ambulance/ medical services or other expert depending on nature of emergency
  - activate Civil Protection Committee through DDC as necessary to render requisite support
  - establish a command centre and or operational post
  - notify members of the public as necessary

#### c) SPECIFIC ROLES AND RESPONSIBILITIES

- i. Incident officer: ZRP
  - Cordon
    - Control ingress (in) and egress (out)
    - Assist support rescue/ support teams
    - Assist in setting up triage area
    - Set up communication network with command centre
    - Log incidents

- Supply relevant information for the press

**ii. Medical Services**

- Notify designated hospital
- Activate hospital emergency plan,
- Set up triage at both accident scene and hospital
- Allocate ambulances
- Set up decontamination facilities as necessary
- Set up reception centre and requisite psychosocial support

**iii. Fire brigade**

- Search and rescue
- Fire fighting
- Call upon support of other Fire services as necessary
- Decontamination

**iv. MET Department**

- Provide information about weather forecast.

**v. Army and Air Force**

Provide support as necessary

**vi. State Roads and DDF**

- creation of detours, urgent repairs

**vii. National Parks**

- attend to problem animals and other logistical support

**viii. OTHER SERVICES**

- Other Government, parastatals, NGOs, religious organisations, private sector provide support services as necessary

**Sub plans**

Emergency plans must be in place for key institutions such as:

Evacuation of major settlements or communities or institutions and to pay attention to:

- possible evacuation sites
- sources of water and sanitation
- food supply strategies
- lighting facilities
- security of property

**ix. Border post**

There must be operational procedures for handling human and vehicular traffic in the case of emergency/ disaster situation. Must also include handling of foreigners

**x. Lessons learnt**

The District Civil Protection Committee will review all major emergencies to draw lessons on the management of same in order to review and update the plan.

**6.2.DROUGHT/ RELIEF FOOD SUBCOMMITTEE (GUIDE)**

**i. MEMBERSHIP:**

- Chair: AGRITEX (Social Services)
- Vice: Water
- Other members;
- CMED, GMB, NRZ, NGOs, ZRP, Livestock Production, ZDF, Ministry of Health, Civic/ voluntary organization, Department of irrigation, Agric Mechanisation.
- Others can be co-opted

**ii. Broad objective**

To ensure effective and efficient preparedness and response to a food and water crisis.

Potential Emergencies:

- Drought.
- Pests outbreak.
- Flooding.

**iii. EMERGENCY RESPONSE PROCEDURES**

**Early warning/ alert mechanisms.**

**Drought**

- Pre-season rainfall forecasts.
- Crop and livestock assessments.
- ZIMVAC Report for confirmation.
- Indigenous knowledge systems.

**Pest outbreaks**

- Pheromone traps- pest counts.
- Border surveillances for locusts.

**Flooding**

- Weather forecasts.
- Implementation of response protocols

**Drought**

- Declaration of drought.
- Mobilisation of resources from government and donor community.
- Identification and selection of beneficiaries.
- Food distribution.
- Supplementary feeding for animals.
- Recovery. (Livelihoods and inputs programme).

**Pest outbreaks.****Army worms**

- Upon receipt of outbreak information, immediate mobilization of chemicals and spraying teams.

**Quelea birds**

- Once noticed identify roosting place and notify parks and wildlife department.
- National parks mobilize spraying teams.

**Flooding**

- Notify local leadership and or police who in turn pass on information to the DDC
- The DDC will mobilize for response.

**Lessons learnt**

The District Civil Protection Committee will review all major emergencies to draw lessons on the management of same in order to review and update the plan.

**6.3. ZOOTICS, EPIZOOTICS& EPIDEMICS-CHIMANIMANI DISTRICT****i. Membership**

- Chair: Ministry of Health and Child Care (District)
- Vice: Veterinary Services
- Other members;
- Ministry of Primary and Secondary Education; ZRP (Health Section), ZNA (Medical Corps), Livestock production, Chimanimani town Council, Social Services), NGOs (World Vision, Plan, PSI, CMED, IRC, Mercy Coops, Faith Based Organisations, DAAC, SPCA, Red Cross Society), Registrar Department.
- Others will be co-opted basing on their expertise / resources

**ii. Broad objective**

To ensure effective and efficient preparedness and response to epidemics, Zoonotics and epizootics through facilitation and co-ordination of: -

- Outbreak prone disease surveillance among human and animal populations,
- Dissemination of information generated by disease surveillance systems
- Community Education and awareness (Use of Social media etc)
- Prepositioning of outbreak emergency stocks
- Carrying out initial assessments of outbreak rumours or reports
- Implementation of response protocols
- Documenting and sharing lessons learnt
- Monitoring and Evaluation of Sub-committee plans
- Capacity building of members

**iii. Potential Emergencies:**

Zoonotics (Diseases that affect animals & people)

- Anthrax
- Rabies
- Avian Influenza

**Epizootics (Diseases that affect animals)**

- Foot and Mouth Disease

**Epidemics- Disease that affect people**

- Cholera
- Typhoid
- Rotavirus
- Other Diarrheal Diseases
- Malaria
- Measles and Polio
- Bilharzia
- HIV/AIDS

**iv. Early warning/ alert mechanisms**

- Veterinary Notifiable Disease Surveillance
- Vet Pvt Practises
- Meat Inspection
- Community Surveillance of animal disease and animal mortality (deaths)

**v. Zoonotics Disease Surveillance**

- Reciprocal reporting of Zoonotics between Vet Department, Ministry of Health and Urban Local Health Departments

**vi. Epidemic Prone Disease Surveillance**

- Weakly Surveillance System of Epidemic Prone Disease ((Malaria, Watery Diarrheal, Dog Bites, Polio)
- Notifiable Disease Surveillance System (T1) (Notification of disease by Health workers Public and Private to MOHCC and Local Health Authority)

**vii. Acute Flaccid Paralysis Surveillance System**

Alert/Action Epidemic Thresholds for selected epidemic prone disease and other diseases of public health and Veterinary Public Health importance in Zimbabwe.

Table 1: Alert/Action Epidemic Thresholds

Disease or condition	Alert Threshold	Action Threshold
Measles	1 suspected cases within a district in a month	1 measles IgM confirmed case
		Note: This also applies to closed settings like Refugee camps, schools, or healthy facilities.
Rabies (suspected rapid bites)	4 case of a bite from suspected rabid animal	1 case of a bite from suspected rapid animal
Typhoid fever	1 case	5 suspected cases per 50,000 population or 20 suspected cases per District's catchment area or Any 1 confirmed case by blood culture
Viral Haemorrhagic Fever	1 suspected case	1 confirmed case
Outbreak of unknown cause	3-5 cases or death with similar symptoms that don't fit most case definitions	Any cluster of cases or deaths that had similar symptoms over a short period of time and fail to respond to treatment for the usual cause of the symptoms.
Acute Flaccid paralysis (AFP)/Polio	1 AFP case	1 confirmed case of polio (virus isolated).
Dysentery	2 cases or more per reporting site per week	A 2-fold increase in the number of cases compared to an expected number usually seen in previous season – specific time period. Any increase in number of deaths due to bloody diarrhoea.
Cholera	1 suspected case	1 confirmed case (where it has been reported before)
Diarrhoea under five	Increasing number of cases in a short time	Doubling of no of cases as compared to the same time period of previous year.
Malaria	Increasing cases above the median	Number of cases that exceed those in the 3rd quartile (the upper limit) of the expected number of cases or Number of cases that exceed the mean plus 1.5 x Standard Deviation (Mean + 1.5 SD).
Human influenza caused by a new Subtype	1 suspected case	1 confirmed case

Severe Acute Respiratory Syndrome (SARS)	1 suspected case	1 confirmed case
Acute Viral Hepatitis	1 suspected case	1 confirmed case
Anthrax	1 suspected case	1 confirmed case
Foot and Mouth Disease		
Newcastle		

An alert threshold suggests that further investigation is needed. Department respond to an alert threshold by:

- Reporting the suspected problem to the next level
- Reviewing data from the past.
- Requesting laboratory confirmation to see if the problem is one that fits a case definition
- Being more alert to new data and the resulting trends in the disease or condition
- Investigating the case or condition
- Alerting the appropriate disease-specific programme manager and district epidemic response team to a potential problem.

An epidemic/action threshold triggers a definite response. Possible actions include communicating laboratory confirmation to affected centres, implementing an emergency response, community awareness campaign, or improved infection control practices.

**viii. Reporting**

- T1 for notification of an infectious notifiable disease (used for up to five cases after which line lists must be filled).
- Weekly Rapid Disease Notification Form
- Vet- Epidemiological Report Form

**ix. EMERGENCY RESPONSE PROCEDURES**

All responses activities shall comply with the appropriate National Guidelines, Sphere Guidelines and LEGS standards. The responses will be evaluated against these standards.

**x. COMMUNICATION**

- Once a threshold is exceeded, a rumour, or outbreak is picked up: -
- The responsible department notifies all members of the committee by phone etc.
  - A rapid response team is dispatched to do an initial assessment
  - Initial Assessment Report is shared with relevant members.
  - If need be a meeting of the subcommittee or the Civil Protection Committee is convened.

**xi. SPECIFIC ROLES AND RESPONSIBILITIES**

- ZRP- Enforcement of legislation
- Vet Dept:-Control of Zoonotics and Epizootics
- Livestock Department: -
- Ministry of Health- Control of Zoonotics and epidemic
- Local Authority Environment/ Health Section: -Control of Zoonotics and epidemic in urban settings
- Ministry of Primary and Secondary Education: - social mobilization
- SPCA: - Animal Welfare and control
- Fire brigade: -Emergency Water Supply and Treatment
- ZNA- Staff mobilization

**7. RESOURCE MATRIX**

<b>Item/ Commodity</b>	<b>Quantity Required in the District</b>	<b>Available Quantity in the District</b>	<b>Location</b>	<b>Quantity Available in the Province</b>	<b>Location</b>
Anthrax Vaccines			Vet		
Polio Vaccine					
Newcastle vaccines			Vet		
Protective Clothing Devices			Various		
Tents					
Insecticides					
ORS					
Ringers Lactate					
Half DD					
Foot and Mouth Vaccine					
Water Tenders/Carriers					
Bladder Tanks					
Fuel					
Transport					

## 8. EMERGENCY PREPAREDNESS INVENTORY

Name of Organization	Address	Details of Equipment	No. of skilled personal	Name & contact no
Local Government		Ambulance	3	J. Misi
Chimanimani RDC	Box 65, Chimanimani	4 Vehicles, 2 tractors, 1 grader, 1 motor bike	13	N. Deure
Ministry of Health		Ambulance , 2 land cruiser	40	
Ministry of Primary and secondary education		1 vehicle, manpower	manpower	Mr. Chikwenjere
Dept of Social Welfare		manpower	3	Mr. Chipfuwa
Dept of Information		Manpower	1	Mr. Zambuko
District development Fund		3 tractors, water bowser, tollgrader	5	Mr. Rakabopa
Forestry Commission		Fire beater, hoes, rakes knapsack sprays	1	Mrs. Mufandaedza
National Aids Council		manpower	1	Mr. Gatsi
Postal Services		manpower	3	
TelOne		1 vehicle	4	
ZEDTC		2 vehicles, manpower	5	Mr. Chituu
District Registrar		1 vehicles	5	
Justice		manpower		
EMA		1 vehicle,	1	Mr Marange
Public Service Commission		1 vehicle	4	
Veterinary Dept		1 Vehicle, manpower	4	Mr. Mtetwa
Min of Women Affairs		Manpower	4	Mrs. Marange
Min of Youth		Manpower	2	Mr. Magijana
GMB Biriri		1 stacker machine	1	
World Vision		Nonfood items: 246 cups 277 blankets 45 sets pots 270 plates 1 vehicle & fuel	Officers 60 volunteers 6 field workers	Mrs. Fadhuku
ZRP		1 vehicle Sub aqua team Air force	As per request	
DDF		2 tractors and trailer 2 water boozers	1 water technician	Mr. Rakapoba

		1 motor bike 1 towed grader	9 tractor drivers 5 water supply operatives	
Wattle Company		1 Fire Tender 1 Tractor drawn bowser Fire beaters	100 10	
Red Cross		Non-food items 15 tents 15 blankets	10 Volunteers	
Parks and Wildlife		1 vehicle	8 Officers	
Plan International		1 vehicles with fuel	1 drivers All staff (3)	Ms Ngirandi
Public Works		1 vehicle Reaches (ladders, scaffolds ) Working tools(saws,ropes picks shovel)	working men building experts	Mr. Rakabopa
AGRITEX		1 vehicle 5 motorcycles	All staff	Mr.Majee
Allied Timber			Manpower	
Border Timbers			Manpower	
TSURO TRUST		3 Vehicles	Manpower	Mr. Muchini

## **9. ACRONYMS**

AGRITEX	Agricultural Technical Extension Services
AIDS	Acquired Immune Deficiency Syndrome
CMED	Central Mechanical Equipment Department
CRDC	Chimanimani Rural District Council
DDC	District Development Coordinator
DAC	District AIDS Coordinator
DDF	District Development Fund
EMA	Environmental management Agency
EPI	Expanded Programme on Immunisation
GMB	Grain Marketing Board
HIV	Human Immuno Virus
IDRS	Indoor Residual Spraying
ITN	Insecticide treated bed-nets
NGOs	Non-Governmental Organisation
RDC	Rural District Council
ZDF	Zimbabwe Defence Forces
ZRP	Zimbabwe Republic Police

## 10. DIARY OF FOCAL CONTACTS

Name	Organisation	Contact phone number
J Misi	District Development Coordinator	0772378798
N. Deure	Chief Executive Officer	0772586699
D. Jenya	Chimanimani East- Constituency Office	0776154962
J. Pedzisai	Zimbabwe Defence Forces	
Majee	AGRITEX	0775091525
C. Zambuko	Ministry Of Information	0712321541
T. Munemo	Ministry Of Health	0773508295
DR Choga	District Medical Officer	0774719434
L. Chidzimba	Public Service Commission	0772603150
T. Chipfuwa	Department Of Social Welfare	0738123610
E. Marange	Environment Management Agency	0773509854
Chikwange	Ministry Of Primary And Secondary Education	0772243235
B. Kadzuraumera	Zimbabwe Republic Police	0772545814
J. Rakabopa	District Development Fund	
R. Marange	Ministry Of Women Affairs	0773155387
Magijana	Ministry Of Your	
Chituu	ZEDTC	0774408486
	Telone	
	Postal Service	
	Justice	
	District Registrar	
Gatsi	National Aids Council	0773219165
	National Parks	
	Veterinary	
Ziyachecha	Department Of Public Works	0773509822

<http://www.chimanimanirdc.org.zw/index.php/civil-protection>

## 11. INVENTORY FOR COUNCILLORS

NAME	WARD	CONTACTS	Population
Cllr M. Nyamatore	1	773951643	5302
Cllr M. Mbandure	2	772551723	3864
Cllr D. Tsandukwa	3	774591385	5561
Cllr T. Chikosha	4	0775977480	8502
Cllr R. Mujee Bvumbura	5	0782954236	7022
Cllr W.Mutsengiwa	6	775028946	2576
Cllr R. Mukamo	7	773666576	7284
Cllr G. Mutetwa	8	774437971	8804
Cllr L. Mauka	9	774133943	1712
Cllr E. Njanji	10	773911470	2705
Cllr T. Shumba	11	771744470	1576
Cllr G. Muusha	12	772273413	5155
Cllr R. Chimbarara	13	716529828	11112
Cllr J. Ndiamba	14	713477453	3701
Cllr P Chirongera	15	774076697	5165
Cllr T. Nyabanga	16	07.7.5350023	13004
Cllr L. Utseya	17	776182948	5799
Cllr M.Tholana	18	773864990	2491
Cllr D. P. Hlukuzo	19	773800292	2787
Cllr I. Chimhete	20	774365368	7265
Cllr J. Dhliwayo	21	773207937	6598
Cllr S. Matayi	22	773768248	9966
Cllr J. Dhumakwezu	23	782343834	6988

### Points to Note:

Cross cutting issues like HIV/AIDS, environment, gender, elderly, children, people with special needs/disability, etc should be given due consideration in membership.

Sphere and livestock minimum standards to be applied in all emergency response situations