



W/O 3/93
Campaigners for Human Rights

21 DAYS LOCKDOWN

"THEIR VOICES MATTER"

Week 2 Report

COMMUNITY RESPONSES TO COVID 19 MEASURES





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Campaigners for Human Rights

“THEIR VOICES MATTER”

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Week 2 Report

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Their Voices Matter: Community Response to COVID 19 Measures in Zimbabwe

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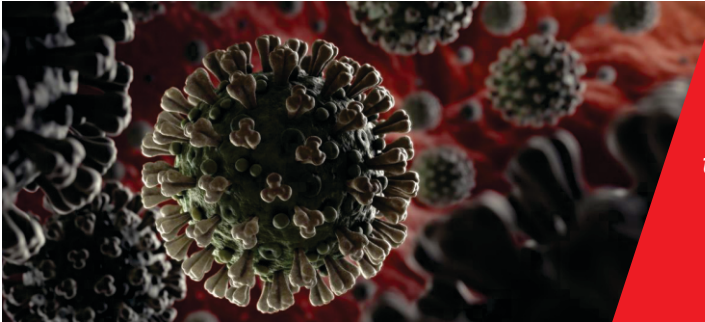
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Coronavirus

*This catastrophe plunging
the industrialised world into darkness
will do more damage for fragile
economies in Africa.*

1.0 Introduction

In the second week of the COVID-19 lockdown in Zimbabwe, the Zimbabwe Human Rights Association (ZimRights) members continued to speak out on their experiences at community level. Two more deaths were recorded in the week under unclear circumstances. This raised concern about government's preparedness to test, treat and manage the disease. It was also this week that reports of police brutality targeting citizens filtered in with at least one person being killed in Bulawayo. There were reports of partisan aid distribution, and selective listing of beneficiaries of the government funds to cushion those in the informal sector. At national level, doctors, lawyers and media practitioners resorted to litigation to force government to act on human rights concerns raised during the lockdown. In this report, we capture how ordinary Zimbabweans interacted with these developments from a human rights perspective and discuss possible remedies to their concerns.

0.2 The Government's Approach to Information Management Regarding COVID 19

"Do we have the right to the truth?"

Information Management in Times of Crisis

When confronted with an invisible enemy like the COVID 19 pandemic, a lot depends on how the information is managed. This helps society appreciate the magnitude of the problem, identify hotspots and inform communities on the approaches at both national level and community level. In countries like the United Kingdom, journalists are treated as an 'essential service' to allow them to disseminate accurate information.

The International Federation of the Red Cross and Red Crescent Societies has this to say about information management during disasters.

*"Effective information management for disasters is a vital component of international disaster response and relief. It is based on the premise that accurate and timely information is available before (early warning and monitoring), during, and after disasters."*¹

They go on to say that information management involves coordination, delivery of relief assistance, beneficiary involvement, marketing and external relations, monitoring and evaluation.

IFRC emphasise that information management:

- saves lives through early warning
- reduces suffering in the wake of disasters, by providing tracing services, concise information on assistance packages, or clearly indicating where and when shelter will be provided.
- promotes better media coverage of the world's neglected disasters so that global assistance might be more equitably allocated.

According to the World Health Organisation (WHO), information is the most valuable commodity during emergencies or disasters. It is what everyone needs to make decisions.

It is an essential aspect of an institution's ability to gain (or lose) credibility. Above all, it is necessary for rapid and effective assistance for those affected by a disaster.²

Communication is not a one-way process: a two-way flow of information is important to ensure people affected by crises are able to provide feedback or complain about the way assistance is being provided.



With these accepted practices globally, it is important to understand how information management has assisted or hampered the fight against COVID 19 and how communities in Zimbabwe have responded to this.

The Role of Government

Government is the main actor in information management in Zimbabwe. This is because government runs and controls most of the media outlets in Zimbabwe. In March 2020, the government was involved in a row with Harare Mayor Hebert Gomba after the mayor had announced two COVID 19 cases in Harare. The government disputed the figures and warned Harare Mayor that only the Minister of Health was allowed to make announcements regarding COVID 19. Since then, the government has maintained a tight lid on information regarding COVID 19, treating it as a security issue.

The Role of the Media

The media in Zimbabwe has faced difficulties in reporting on COVID 19. The government in enforcing the lockdown has come down hard on journalists trying to cover the lock-down. ZimRights has spoken to at least two journalists who have been victims of police

harassment during the lockdown while covering COVID 19 situation.

On 8 April 2020, the police unlawfully detained a TellZim journalist who was verifying the suspected COVID related death of a person at Chiredzi Hospital. Before that, police had also arrested Nunurai Jena in Chinhoyi at a road block despite him showing his media credential. The Media Institute for Southern Africa Responded to this attack in a statement,



The media watchdog stated:

"The media should be allowed to play its critical role in the free flow of information and ideas that will keep the nation informed in the fight against COVID-19 as well as the measures that individual citizens can take to prevent infections and spread of the virus. In fact, the police and the media should play a complementary role in that regard. The police should therefore not view journalists and media workers as enemies and should accordingly be guided by the Constitution in the discharge their duties and responsibilities."

MISA Zimbabwe further filed an urgent chamber application with the High Court seeking an order interdicting police officers and other law enforcement agents responsible for implementing the COVID-19 lockdown from interfering with the work of journalists.

"Is the Government Lying to Us?"

The result of the government gagging other actors like the city councils, as well as a clampdown on journalists has been information starvation. In this vacuum of information, fake news is thriving, creating a dangerous situation. ZimRights members now depending on social media for updates on COVID 19 say the threat of fake news is caused by lack of information as people end up consuming whatever information they get.

"We are wary of fake news but where do we get the truth?"
queried a ZimRights member in Masvingo.

Is the Information from Government Enough?

"The government of Zimbabwe are the masters of fake news."
One citizen responded arguing that communities are witnessing the horrors of COVID 19 while the government was trying to paint a glossy picture.

Two people died during the second week of the lock-down under circumstances that exposed the government's poor management of information. In an update released on 6 April 2020, the government reported the second COVID 19 death, three days after the death. This raised the questions why the government had remained quiet for three days while the community feared that many people were exposed to COVID because the government was 'hiding' information.

On 8 April 2020, fear gripped Chiredzi communities following the death of a person just after

admission with COVID 19 symptoms.³ On the same day, the media was awash with reports from Gwanda of a 'pneumonia' outbreak that had claimed many lives which doctors feared was COVID 19.⁴ Pneumonia is one of the symptoms of COVID 19. It is worth noting that when COVID 19 broke out in China, WHO reported 'cases of pneumonia of unknown aetiology (unknown cause) detected in Wuhan City, Hubei Province of China'.⁵ With this background, many communities believe that the government's management of information is endangering communities.

From Chiredzi, a ZimRights member spoke of fear and anxiety.

"What we do not know is that how many people are walking around and are infected with COVID-19 and we continue to be exposed. Our greatest fear is that even if one has COVID-19, they may never know until it is too late. Worse still, there is no local hospital that can deal with it."

Following this incident, a reporter with the Tell Zimbabwe, Beatific Gumbwanda, who visited Chiredzi to investigate, was briefly detained by police.

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"We do not trust the Government!"

With these concerns being raised by the communities, ZimRights initiated a conversation on whether the people believe in what the government is telling them. 85% of the people who responded to the poll on social media said they did not trust the information from the government.



One member from Mutare had the following to say:

"We are now worried about the second death, why does it take long for them to announce that? Where are the tests conducted because we heard some say SA and some say Harare?"

This was in reference to the second death which was only announced three days after the demise of the deceased.

"Do we have the right to the truth?"

"Do we have the right to know what exactly is happening?"

asked one villager from Murehwa.

The right to information is one of the fundamental rights guaranteed by section 62 of the Constitution of Zimbabwe. Section 62 (1) of the Constitution states clearly:

"Every Zimbabwean citizen or permanent resident, including juristic person and the Zimbabwean media, has the right of access to any information held by the State or by any institution or agency of government at every level, in so far as the information is required in the interests of public accountability."

Subsection 2 goes on to say;

"Every person, including the Zimbabwean media, has the right of access to any information held by any person, including the State, in so far as the information is required for the exercise or protection of a right."

COVID 19 has infected over 1,6 million world-wide, and has killed close to 100 000 people globally. If any information is the possession of government, or within its reach, then the people of Zimbabwe have the right to such information being made public to ensure the protection of the right to life and the right to health. A home where a deceased COVID 19 patient was being treated before his demise deserved to know his status to protect their staff and other patients.

Poor management of information in a time of disaster can expose innocent people to danger in circumstances that otherwise could be avoidable. As the outcry from the communities increased, the Media Institute for Southern Africa - Zimbabwe (MISA) filed an urgent High Court application seeking an order compelling the government to publish and disseminate with immediate effect information on the private and public testing and treatment centres at national, provincial and district hospitals allocated for dealing with COVID-19 cases. The media watchdog criticised the government's management of information regarding COVID 19.

"The matter concerns enforcement of a fundamental right provided for in the constitution. That the right looms large in the current pandemic is self-evident. Without adequate information it will be nearly impossible to fight this pandemic. Information can and will help save lives. Information is vital to people when enforcing the lockdown through the identification of hot zones. It is also



Over 1,6 Million

confirmed cases of COVID-19



100 000

Recorded deaths globally



DANGERS OF LOCK-DOWN WITHOUT A PLAN

Images were received from ZimRights Members from across the country. ZimRights does not claim any copyright to these images.



21 Days Lockdown | "THEIR VOICES MATTER" Community Responses to Covid 19 Measures

also critical in fundraising for resources in the event that the respondents are ill-equipped to fight this pandemic.”⁶

What can be done to improve information management on COVID 19?

“Disaster response is not common sense,” explained a communications expert with a local NGO. It requires proper training and the right experts in place. The government must put in place a crisis management communications strategy, and all members of the taskforce must have already been trained.”

A ZimRights member from Bulawayo had the following views:

“The taskforce must be a multi-stakeholder taskforce, involving experts in communications, NGOs with experience managing disasters, and involving the opposition which runs the majority of our municipalities. The current set up does not show diverse expertise.”

From these conversations, a few recommendations can be extracted:

a. Planning – There is need for a clear communications plan for the disaster at hand. This must follow the best practices in communications in times of crisis. It is not clear if the government has in place a crisis communications plan. From the current observations, it does not look like.

b. Inclusion – A crisis communications plan puts together a communications team for the time of a crisis. The team must be inclusive of various stakeholders who are contributing to the fight against COVID 19 from various angles. This is to make sure that no stakeholders are left behind.

c. Expertise – As was mentioned by the doctor, communications in a crisis is not common sense. The government must bring the experts who will help in the design and implementation of a crisis communications plan. These help in assessing the communications needs, tools, geographical reach and appreciation of the communities targeted by the information.

d. Training – Because many people in government who will be expected to communicate are not experts, there will be need for training to ensure that they understand the plan and are able to play their role in executing it.

e. Resources – Adequate resources must be deployed towards operationalising a crisis communications plan. This is to make sure that various tools necessary can be operationalised for the right audience at the right time.

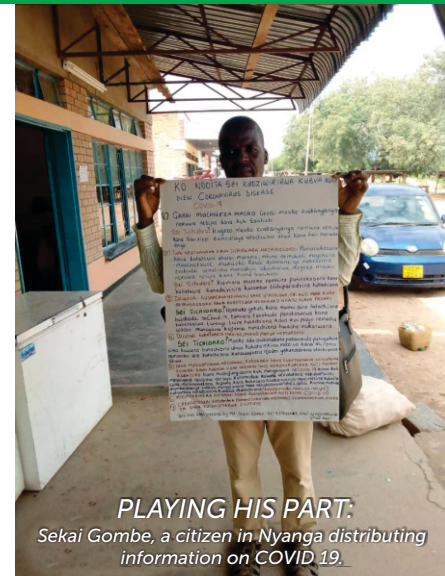


Melinda Crane, commenting on the importance of communication leadership states:

“When citizens have the facts, they can make informed decisions about how to mitigate risks, both individually and collectively. When leaders obfuscate, deny and deceive, they turn a potentially manageable risk into an incalculable danger, sowing anxiety and passivity.”⁷

In a crisis, communicating adequately can save lives.
Poor communication endangers lives.

*Provision of timely and adequate
information for the protection of
human life is not luxury.
It is a human right.*



PLAYING HIS PART:
Sekai Gombe, a citizen in Nyanga distributing
information on COVID-19.

3.0 Appropriation and Manipulation of COVID 19 Aid

"The unity of your country will be very important to defeat this dangerous virus. Without unity, we assure you...any country that may have a better system will be in trouble and more crisis.

No need to use COVID to score political points."

WHO Director, Tedros Adhenom Ghebreyesus

The Hijacking of COVID19 Aid

During the first week of the lockdown, government announced that it would avail a monthly stipend of ZWL200 million to a million vulnerable households. Government further announced a World Bank funded package to assist informal traders whose work has been affected by the lockdown. As such, a registration process of informal traders began. Meanwhile, various multilateral institutions and foreign governments pledged financial and other support to Zimbabwe.

Following this, ZimRights members reported that during the second week of the lockdown, there were incidents of partisan distribution of aid, listing down of names of supporters of the ruling Zanu PF party for aid.

Below are audio reports from ZimRights members in Kadoma and Mutare.

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A ZimRights member from Kadoma speaks on the informal traders funds



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How Zanu PF hijacked the informal traders funds, from a vendor and a ZimRights member in Mutare



These developments come as the United Nations World Food Programme (WFP) has reported that hundreds of thousands more people had slipped into the severely-hungry category in Zimbabwe, where over half of the population faces hunger. It said a recent study revealed that the *"number of acutely food insecure Zimbabweans had risen to 4.3 million, from 3.8 million at the end of last year"*. In total, 7.7 million people, more than half the population were food insecure and needed multi-sectoral humanitarian support. In previous hunger years, mainly the rural population would require food aid, but lately millions of urban dwellers are in need of food aid.

The Water Situation

Meanwhile, a number of humanitarian organisations have responded to the community cry for water. Oxfam Zimbabwe reported that they delivered 30 000 litres of clean water to Zimbabwe’s high density suburbs. Combined Harare Residents Association (CHRA) also reports that city council has deployed water tanks to residential areas without water. This humanitarian intervention comes as most water reticulation systems in most of Zimbabwe urban systems continued to haunt the country’s lockdown. Despite a *High Court ruling* that government was supposed to provide safe water to Harare residents, water shortages across the country continued into the second week of the lockdown.

Section 77 (a) of Constitution of Zimbabwe guarantees the right to safe, clean and potable water. ZimRights members continued to speak out about their experiences, which point to government’s failure to meet this Constitutional obligation.

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Pumula water crisis



Summary of the Translation

A Pumula resident bemoans the water situation in the area. She says they have water supply for a week, and a week without. She speaks about a nearby burst pipe as affecting the water supply. She also speaks about queues when they attempt to get water from a borehole, and how this affects the need for social distancing. She urges council to intervene.

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ZimRights Audible
Speak Out

Water and electricity
problems in Magwegwe



Summary of the Translation

A Magwegwe resident says they have electricity problems and how this is affecting, among other things, their children's holiday work and chiefly, and water supply. In addition, without adequate water supply they cannot observe the necessary hygiene. Without electricity, they cannot follow the information on COVID-19. They also have to go out to look for LP gas.

How can we avoid politicisation of COVID 19 Aid?

Politicisation of aid is usually the business of politicians. WHO Director, Tedros Adhenom Ghebreyesus, has got some good advice for Zimbabwean politicians:

"The unity of your country will be very important to defeat this dangerous virus. Without unity, we assure you...any country that may have a better system will be in trouble and more crises. No need to use COVID to score political points."

In the Midlands province, buckets bearing COVID 19 virus messages have emerged branded with the face of President Emmerson Mnangagwa and others in ZANU PF colours.

Section 56 of the Constitution of Zimbabwe clearly prohibits discrimination and states that all persons are equal before the law. It further prohibits discrimination and unfair treatment.

A number of measures can be taken at both national and local level

- a. There is need for national leadership in both government and opposition to collaborate in the fight against COVID 19. An example of building a united front has been set in South Africa where President Ramaphosa held consultations jointly addressed press conferences with the opposition ahead of the 21-day lockdown.
- b. The COVID 19 taskforce must be a multi-stakeholder platform, inclusive of all political parties including non-state actors like churches and NGOs to heal fault lines and build cohesion in the fight against COVID 19.
- c. Fidelity to the WHO general humanitarian principles on management of humanitarian aid. The WHO has three general humanitarian principles. These are humanity, neutrality and impartiality. All three principles clearly speak against the politicisation of food aid in humanitarian situations. COVID 19 knows no political ideology.
- d. Enforcement of the Code of Conduct for Parliamentarians. In matters documented by ZimRights in the second week of the lock-down, some Members of Parliament were implicated in manipulating food aid along political parties. This conduct is in violation of the Code of Conduct and Ethics for Members of Parliament particularly the principles of public life as outlined in section 5 of the Code. Parliament must therefore take a public stand against members of Parliament who are implicated in the manipulation of COVID 19 Aid.

4.0 Community Access to Health Facilities

"In the line of danger, where do we go?"

Are We Ready?

Zimbabwean communities have over the years lowered their expectations of what the government can deliver when it comes to health. The collapse of the health care system has seen many government officials seeking treatment in South Africa or in China. With the public health system broken, many middle class citizens have resorted to private medical facilities. Unfortunately, these are beyond the reach of many. However, COVID 19 is not an ordinary disease throwing into question even the capacity of private health facilities to provide much needed care. With over 1.6million people infected worldwide, normal health-care systems have not been able to cope. The situation will be worse for Zimbabwe if the outbreak reaches the same levels.

During the second week of the lockdown, ZimRights has accompanied its members across the country in reflecting on what the situation could be if there is an outbreak.



Following the lock-down announced by government, many rural dwellers panicked when their villages were invaded by urbanites raising the risk of infection in communities that are hardly equipped to deal with the deadly virus. During week two, the levels of fear increased as 'strange deaths' were recorded.

Deaths from a 'Strange Disease'

On Tuesday, the eighth day of the lockdown, a woman suspected to be infected with COVID-19, died at Chiredzi Hospital, and despite denying the possibility, government went on to take specimens to test the deceased. This further exposed how unprepared government is in detecting, treating and containing the disease.

Regional newspaper, Tell Zimbabwe reported that nurses at the hospital were said to be refusing to handle the deceased's body as they did not have personal protective

equipment. TellZim told ZimRights that their reporter was immediately arrested after breaking story. They said fear gripped the health workers and the whole town.

In Gwanda, doctors reported an outbreak of pneumonia which claimed many lives. Pneumonia is one of the symptoms of COVID 19. A medical doctor with a local NGO stated that there has been no training for medical professionals raising the fear that most health professionals may be interacting with COVID 19 without knowing it, putting themselves in danger as well as endangering other people. This scenario explains why some patients are only being tested after they die. When this happens, the risk increases.

What Facilities are there to Assist in Communities?

ZimRights asked citizens if they were aware of any facilities that could assist them in their areas. The question was not just about the

availability of facilities, but it was about whether communities in the peripheries were aware of any such facilities and if these facilities are accessible.

In Masvingo, we received feedback from Moses Ziyambi, a journalist with Tell Zimbabwe.

"The facilities in Masvingo are very few and able to take only a few people at a time. Gutu district for example has an isolation centre at Gutu Mission Hospital but it can only take eight people at a time. Chibi can only take 16 people at a time. In Mwenezi they can only take 12 people at a time. Bikita District has three isolation centers but again they are very small. One at Silveira Mission Hospital, which can only take 3 people. One at the District Hospital can only take 4 people. The last one is at Mashoko Hospital can only take 7 people. You find that these isolation centres are also not fully equipped."

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Isolation centres in Masvingo



In Manicaland, we received the following report from Mildred Muzanechita, a member of ZimRights National Council:

"Constituency based health centres are there but they don't have sufficient equipment to help patients but there is need for mobile clinics in some areas in case of emergency. Our main centre, the Mutare Infectious Disease (MID) is under construction. For now, patients are going to Mutare Provincial Hospital where they are being screened at the gate before entering the hospital. If you show symptoms of COVID19, they will not allow you to get inside the hospital premises because

they are saying they don't have enough equipment. So, they will treat you outside with normal treatment and ask you to wait for the next instructions. However, most of our people in the rural areas hardly go to the clinic because of the fees especially this lockdown period where there are no income generating projects."

Conversations with community leaders revealed that most rural health centres that are expected to handle COVID 19 cases are still under construction. Minister Sekai Nzenza was reported to have assured the rural centres that they would be receiving materials to finalise construction. One Member of Parliament reported having visited one of the rural health centres in his district where the nurses had confirmed that they had received training in handling COVID 19 but where still to receive protective equipment and the necessary protocols for transfer of COVID 19 cases.

Click to Listen to Audio



Listen here as Mutasa South Legislator, Hon. Regai Tsunga speaks about the situation in his constituency.



In the Midlands, Anglo American's local unit, Unki Mines donated R10 million to Gweru Provincial Hospital for the establishment of a provincial Covid-19 isolation centre. These funds have been used to build an isolation centre in Gweru. Residents however reported that the isolation centre was sub- standard, only a tent on an open ground and residents felt with the coming winter, the exposure would endanger the patients. Gweru is known for harsh winters.

Outside urban centres, ZimRights members reported that a number of rural centres had been designated for use as isolation centres but construction of the infrastructure was still to begin. One citizen noted that while the centres were designated on paper, if someone was to fall sick today, there may be no help available for them.

"Our approach to COVID 19 preparations do not show a sense of urgency," said a teacher based in Gweru, "You would think we are preparing for a soccer match with a set date. There is no realisation that COVID 19 is already here."

One citizen from Zvishavane sent this report, bemoaning the lack of information on COVID 19 in mining town. You can listen to the report on ZimRights Audible.

While the government has been saying that people in Bulawayo could use Thorngrove

hospital, the reality has turned out that Thorngrove was not ready by the time this report was compiled.

Local government minister July Moyo was then quoted saying that COVID-19 patients could only use Wilkins Hospital in Harare, further fueling fears that the country is poorly prepared to deal with the outbreak and that people could be dying unnoticed across the country.

Local Government Minister, July Moyo said:

"If something had to happen tomorrow, unfortunately they (patients in Bulawayo) would have to go Wilkins. I am saying if something had to happen. I'm not a medical (officer) but depending on the intensity, they would have to go to Wilkins"

It was in that same breath that Moyo announced government would start renovating Thorngrove Hospital in Bulawayo.

ZimRights members, firmly embedded in communities, continued to express worry about government's commitment to making proper preparations to contain COVID-19.

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Government taking long to renovate hospital,
a perspective from a Bulawayo resident



I am a Bulawayo resident who is concerned about Thorngrove hospital which is said to be under renovations as that puts us as citizens on risk. Tests are said to be done in Harare which delays the whole process as it takes four days to receive results back. We have a patient that passed on at Mater Dei hospital and his results only came after he had passed on and that compromised the staff at the hospital as they treated him like any other sick patient. We are therefore pleading with Government to decentralise everything. Ensure that tests are done at NUST, open Ekusileni Hospital as a matter of urgency put the necessary equipment there.

Click to Listen to Audio



Perspectives on Thorngrove
Hospital renovations



Summary of the Translation

A Bulawayo resident bemoans the slow progress in the renovation of ThornGrove Hospital, and urges government to create a testing centre in Bulawayo at the local National University of Science and Technology instead of taking samples to Harare, where it takes up to four days to ascertain if one has COVID-19. She urges government to treat this as a matter of urgency

Inside the Experiences of Health Practitioners

We also took the conversation into the hospitals and spoke to health practitioners, who give their experiences, dedication and determination, even when they are working under what can be considered to be inhumane conditions, without adequate personal protective equipment, and on poor salaries.

This is what one nurse at Parirenyatwa said:

"I am worried that I do not have adequate protective equipment and I work in the Casualty Department where we receive patients, and in the event that we receive a COVID-19 patient, we are all at risk because we are not protected enough"

What can be done to resolve issues of access to health facilities?

The quick survey shows that there is a possibility that some communities are already faced with COVID 19 outbreak. The danger is that the facilities are not ready to deal with the deadly virus. This compromises the right to health and endangers health workers. Below are some suggestions.

a. Information on available COVID 19 treatment centres must be decentralized. People in each district must be able to access this information through social media, mass media and their local leaders. Members of Parliament, rural district offices, local schools and councilors must be able to disseminate this information at community level. The ZEC database can assist in targeted bulk SMS dispatch so that citizens know where their nearest treatment centre is.

- b. Training for local health centres is critical. The situation in Chiredzi is evidence that staff in many community health centres are not trained in identifying and handling COVID 19 cases. This will endanger them and families if they handle COVID 19 cases like any other case.
- c. Health centres must continue to provide care to other patients as usual. The presence of COVID 19 does not mean that the society has to ignore all other issues. In Mutare, ZimRights recorded a case of an asthma patient who was denied access to a health facility because the health workers were afraid of handling a COVID 19 case. This was despite the fact that the person had a well-documented history of asthma.
- d. The ministry of health must publish a regularly updated state of COVID 19 preparedness data disaggregated to ward level. This must be an easily accessible information portal to help local leaders to download information according to the needs of their constituencies.

5.0 Experiences with the Security Services

"Who will watch the watchmen? Themselves?"

In General

In the second week of the lockdown, the conduct of the police in dealing with the public once again came under spotlight with at least 1 person killed by the police in Bulawayo. The Zimbabwe Human Rights NGO Forum recorded 143 assaults on civilians by the security forces and 164 arrests. 9 journalists were arrested while lawfully carrying out their duties. We spoke to Dr. Musa Kika at the Zimbabwe Human Rights NGO Forum.

Click to Listen to Audio



Listen to the weekly roundup for human rights violations by the Zimbabwe Human Rights NGO Forum on ZimRights Audible.



Death at the Hands of the Police

On 7 April 2020, ZimRights received an alert from one of its members in Bulawayo concerning the use of excessive force by the security which resulted in the killing of 1 person in Mabutweni.

ZimRights member and Deputy Chairperson Themba Chiveya managed to verify the case and spoke to relatives of the deceased.

The deceased was born on the 5th of August 1995, he resided at in Bulawayo. The ZimRights team in Bulawayo documented the tragedy.

On the first day of the lockdown, 30 March, at around 7pm, the now deceased was in the company of his girlfriend on the way to buy tomatoes and a cell phone airtime recharge card within their neighbourhood.

On their way back four police officers - three

in uniform and one in plain clothes approached the couple.

The officers allegedly asked the two where they were coming from, and during the conversation, the officer in plain clothes allegedly slapped the now deceased on the face. The victim fell and hit the tarred road with the back of his head and fell unconscious.

The officers allegedly attempted to resuscitate the victim, but with no success, until an ambulance was called and ferried him to Mpilo Hospital, where he was admitted on and was discharged for home treatment before full recovery on 3 April.

The victim died four days later at his home.

In light of these circumstances, there is need to assist family members to do an inquest on the cause of death and take necessary steps to

hold to account those responsible for the death.

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A ZimRights member speaks about Ncubes death and the general police brutality being experienced in the area.



Police are being brutal and they are beating up and sometimes killing people. We have a recent case of a person who was beaten up during this lockdown. He died a few days later. Police are on patrol at night and that is when they beat up people. We live in fear and even as I report this, I am in fear. Government should discipline the police so that we give them the respect they deserve.

Enforcing Lock-down, Spreading the Virus

As reported under week 1, communities witnessed and condemned the conduct of the police officers who enforced lockdown by breaking the social distancing regulations. Police were driving around in crowded trucks without masks or exercising safe social distancing. They went further to beat up people with button sticks and bundling them in trucks. On the next pages are the voices from ZimRights members about their experience with members of the police service.

Click to Listen to Audio



A ZimRights member urges government to avail protective gear for the police on patrol to enforce the lockdown



The police and the army should wear adequate protective equipment when they are out there enforcing the lockdown. It does not make sense that they are out to prevent the spread of COVID-19 and yet they are not protected enough.



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Police brutalising us, unleashing dogs on us, from a vendor in Murehwa North.



I am Thomas Tafirenyika, a vendor in Murehwa North Ward 30. Police are beating us up and confiscating our wares and they are unleashing dogs on us. Government must allow us farmers to supply vegetables door-to-door as this is an essential service. As I speak, a police truck has just passed by, full of people being taken to the camp.

What can be done against police brutality?

Police service falls under Security Services provisions that are governed by Chapter 11 of the Constitution.

Section 206 (3), states that protection of national security must be pursued with utmost respect for the fundamental rights and freedoms, and the democratic values and principle enshrined in the Constitution.

The police in Zimbabwe have not been known for respecting human rights. Over the years, civil society has documented cases of police brutality. Last year in February 2019, the police allegedly tortured to death at least 1 person. Many others are tortured in silence. In that year again, the police were captured on camera assaulting protestors.

Despite wide condemnation, the police continue to act with impunity. This is because perpetrators of human rights violations do not face justice for their conduct. Where there are no consequences for bad conduct, the deterrence effect of the law falls away. No one has been prosecuted for police brutality; hence the police continue to do break the law without hesitation.

In other documented cases, the police officers who shoot civilians appear to get promotions for their bad behaviour. It can be argued that the perpetrators are rewarded for their conduct.

This is evidence that police brutality in Zimbabwe is systematic and structural violence. This has become a culture. Suspects are tortured. Protestors are beaten. It is a way of doing business.



a. Perpetrators must be prosecuted. ZimRights members believe that as long as there are no consequences for perpetrators, this practice will not stop. There must be institutional consequences to the police service for their conduct. They must be prosecuted for the violations. The leaders of the police must be brought to book and answer charges for such a culture of violating section 206 of the Constitution. Secondly, there must be consequences for the individual police officers who commit the violations. There must be sanctions against their continued employment. Additionally, there must be criminal charges against the officers.

b. Perpetrators must be made to pay compensation to the victims of their brutality. If these measures are implemented, there will be a change to the conduct of the police.

c. Section 210 of the Constitution provides for an Independent Complaints Mechanism to receive complaints against members of the security services. This is an accountability measure which Parliament must immediately operationalise.

d. In the absence of the Independent Complaints Mechanism, ZimRights encourages communities to approach the Zimbabwe Human Rights Commission (ZHRC) with any complaints they may have against the police and seek justice.

6.0 Conclusion

Summary of the Recommendations

In any society, it is fatal to disregard the voice of the communities, for they are the ones whose lives reflect the true state of any government policy or declaration. As the country entered its third week of a lockdown, ZimRights members, those from the streets and the villages, continue to contribute to the discourse for a better Zimbabwe where human rights, transparency and accountability, and good health are at the core, and it is in this report that their voices come out. A number of recommendations have been captured on how best to address the challenges highlighted. Below we summarise the recommendations affecting the areas covered in this report:

- a. The government of Zimbabwe must take urgent measures to improve its approach to communicating messages relating to COVID 19. In a crisis, good communication can save life. Access to information that is necessary for the protection of human rights is a right under section 62 of the constitution. This information must be packaged in an easily accessible manner and regularly updated for consumption by communities in the periphery and not be limited to urban centres.
- b. National leadership must adopt a non-partisan approach to fighting COVID 19. This involves ensuring that the platforms established for fighting COVID 19 are inclusive of all political actors as well as non-state actors. Actors in these platforms must have regard to the highest level of ethical

leadership and zero tolerance to corruption. Partisan politics must have no place in the fight against COVID 19.

c. Rural health centres must be given adequate attention, ensuring that all isolation facilities are up and running, staff is trained and all the necessary equipment is delivered on time. A snap survey by ZimRights in this report showed that most rural isolation centres are still under construction.

d. Enforcement of lock-down regulations must be done with high regard to the respect of the human rights and dignity of the people. Members of the security services who are implicated in human rights violations must be prosecuted, and must pay compensation to the victims. Policing must be done without putting communities in danger of contracting COVID 19 or any other injury to a person's body or dignity.

End Notes

1. Information Management in Disasters, IFRC, World Disasters Report, 2018,
2. See the Pan American Health Organisation's Manual for Disaster Response Teams, 2009, Washington DC.
3. See report in the TellZim, 8 April 2020, available here:
<http://www.tellzim.com/2020/04/suspected-covid-19-death-at-chiredzi.html?m=1>
4. See the Zim Morning Post of 8 April 2020, available on the link:
<https://zimorningpost.com/fresh-crisis-as-pneumonia-outbreak-hits-zim-amid-covid-19-scourge/>
5. WHO statement on 5 January 2020. Statement is available on:
<https://www.who.int/csr/don/05-january-2020-pneumonia-of-unkown-cause-china/en/>
6. Read the full statement by MISA on the MISA Zimbabwe website, available here:
<https://zimbabwe.misa.org/2020/04/10/misa-files-urgent-covid-19-court-application/>
7. Melinda Crane, Opinion: Angela Merkel, Queen Elizabeth II shows how to communicate, article published on 8 April on DW. See link for the full article:
https://www.dw.com/en/opinion-angela-merkel-queen-elizabeth-ii-show-how-to-communicate/a-53063350?maca=en-Facebook-sharing&fbclid=IwAR1oJludNEEPkcYjcsMCR8qcXaAW_p4gf7tg1_JlprpPL5RcKsqrZbWhRgA



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