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Vulnerability, Poverty and Coping in Zimbabwe

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Abstract

This paper uses five life histories from three locations in Zimbabwe—one peri-urban, one urban and one rural—to provide a window on current processes of impoverishment and adverse coping. Each case and location highlight key aspects of Zimbabwe’s recent economic and political turmoil. Together the cases suggest that, similar to Hoddinott’s work on the persistence of the 1993-94 rainfall shock in rural Zimbabwe, above and beyond increased mortality rates and morbidity levels, current adverse forms of coping are creating widespread irreversible wellbeing losses. The persistent effects of the current crisis surely adds weight to arguments that the international community should be more, rather than less, proactive in delivering aid to the Zimbabwean people, despite the politicization of aid and logistical difficulties.

Keywords: Zimbabwe, fragile states, fragile groups, vulnerability, coping strategies, life histories, land reform, labour markets, HIV, state repression, urban poverty, input and output markets

JEL classification: O2

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Introduction

Statistics and trends are hardly able to convey the magnitude of the current crisis in Zimbabwe. Its economy is the fastest shrinking globally, with GDP contracting by 40 per cent since 2000. Agricultural production (by volume) has reduced by 50 per cent in the same time period, inflation is currently around 300 per cent per month, an estimated 80 per cent of adults in the economically active age-group are unemployed and over 85 per cent of Zimbabweans are now categorized as poor. The HIV incidence rate is one of the highest in the world and life expectancy for women is now 34 years (down from 65 years a decade ago) and the lowest in the world. In some parts of the country 50 per cent of pregnant women are having their children at home, unattended by a trained medical practitioner. Recent bouts of speculation assert that Zimbabwe is now heading for total collapse and perhaps even conflict (Evans 2007).

There have been many attempts to explain how a once relatively-prosperous country like Zimbabwe has experienced such a profound decline. Adverse climatic conditions and the persistence of HIV/AIDS can only partly explain the high levels of poverty and vulnerability. Many analysts agree that politics, poor governance and the weakening of the rule of law are major causes. Harassment by state actors, insecure land and housing tenure, and macroeconomic meltdown have impacted harshly on livelihoods. Declines in wellbeing have been compounded by declining access to increasingly fragmented local and national markets, to basic agro-inputs, and to public services of even a rudimentary standard.

Particular attention has been paid to government’s policies such as the fast track land reform programme and operation Murambatsvina which have undermined agricultural production, and swept away lives and livelihoods, respectively. Whilst the outcomes of these policies are clear for all to see and judge in media accounts, the reasons for their implementation are harder to discern in populist discourses. Just as politics, in the form of explicit support for ZANU-PF pervades all aspects of life in Zimbabwe now, politics underpinned and drove these destructive state interventions.

It is not the purpose of this paper to catalogue the frighteningly rapid decline of Zimbabwe, nor to offer a partial and long-sighted account of the international and domestic politics that contributed to the enactment and implementation of both aforementioned fiascos (although we do touch upon both below).

The aim of this paper is to use five contextualized life history interviews to act as a window on current processes of impoverishment and adverse coping in three geographical spheres: peri-urban, urban and rural. The study areas (Mhangtivi, Bulawayo and Makoni) were selected purposively and were chosen to (i) be representative of both urban and rural Zimbabwe, (ii) to include Shona and Ndebele

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1 This paper draws, in places on Bird, Hobane and Zimbizi (2006).
2 Recent inflation figure taken from Channel 4 News (UK), 17 May 2007.
3 This figure is based on data collected by WHO in 2004 and may now be down to 30 years (Howden 2006).
4 The names of all people and many places and organizations have been changed in this paper to protect anonymity.
populations and (iii) to include a community of mobile and vulnerable people. Three individual study sites were then selected in collaboration with a local NGO. These sites were (i) Plot Shumba, a peri-urban site 30 minutes drive from Mhangtivi, where households live in small, fragile, temporary structures; (ii) Mzilikazi, an inner city high-density residential area in Bulawayo (iii) Zenzele village, Makoni district, a wealthier-than-average communal area village.

Each location highlights key aspects of Zimbabwe’s recent economic and political turmoil. First, we offer a brief description of each area’s characteristics and livelihoods strategies, and second, further contextualize the life histories by offering a summary of one or two major drivers of impoverishment and adverse coping in each location, as well as relevant wider details.

So, in the case of Plot Shumba, the peri-urban location, we outline the drivers of the fast track land reform programme and HIV/AIDS, in addition to details on labour markets. In the case of Mzilikazi we outline the drivers of the authoritarian state and operation Murambatsvina, as well as details on urban poverty and state repression. And in the case of Zenzele village, we outline the drivers of fragmented and imperfect agricultural input markets and distorted agricultural output markets.

Third, and most importantly the paper catalogues for each location how current adverse forms of coping appear to be creating irreversible losses of wellbeing. In this respect, the paper utilizes arguments made by Hoddinott (2006) based on his work on persistent effects of the rainfall shock in 1994-95 in Zimbabwe.

Hoddinott (2006) assesses the extent to which households at different income levels drew down livestock holdings in the face of a moderate rainfall shock, and the influence of the shock on the body mass index (BMI) of husbands, wives and children. Hoddinott (2006) finds that the rainfall shock substantially reduced crop and total household income; and increased the sale of livestock, with the extent of sales strongly influenced by pre-shock asset-holding levels. Moreover, Hoddinott (2006) notes that whilst the rainfall shock did not affect the BMI of husbands, the BMI of wives did fall, although this was mitigated by the sale of livestock, with wives’ BMI recovering the following year. Highly significantly, the BMI of children aged 12-24 months was adversely affected by the rainfall shock, and whilst children from wealthy households recovered their lost growth trajectory, children in poorer households did not: they suffered a permanent loss in height, human capital formation and potential earnings.5

There are two key points regarding our use of Hoddinott’s (2006) findings as a peg on which to hang our arguments—these relate to methods and inference; and the type of shock. First, Hoddinott’s conclusions are drawn from detailed panel survey data and in this sense are robust using quantitative measures. In contrast, the data that inform this paper mainly use life history data, and the conclusions drawn are tentative and suggestive. This is not to say, however, that qualitative data are necessarily weak or anecdotal. Numerical methods, such as surveys, are good at capturing states or conditions (Ellis 2000), whilst qualitative methods are good at capturing processes (Murray 2002). Whilst not being representative in a strict sense, qualitative research,

5 For further and contrasting approaches to persistent poverty and poverty traps see the Special Issue of the Journal of Development Studies (2006), 42 (2), and Bowles, Durlauf and Hoff (2006).
when conducted properly, highlights key themes and processes which are not only applicable to the individuals in question, but can be seen to be ‘typical’ of individuals with similar sets of socio-biographical characteristic in similar circumstances.

Second, Hoddinott’s (2006) findings are based on a ‘conventional’ singular shock, for which risk-sharing and insurance mechanism have been honed through generations. Current shocks in Zimbabwe are multiple and complex, with conventional shocks overlain by massive governance and macroeconomic failings which, in our view, are undoubtedly increasing the likelihood of permanent losses of wellbeing. Moreover, Hoddinott’s (2006) work is restricted to rural resettlement areas in Mashonaland Central Province (which lies to the north of Harare), in Mashonaland East Province (which lies south east of Harare) and Mutanda in Manicaland Province. While certain current shocks in Zimbabwe are broadly covariant (such as inflation), many hazards are differentiated across urban and rural spheres, creating different patterns of vulnerability and adverse coping strategies.

The structure of the paper is as follows. Section 2 outlines how Zimbabwe relates to the fragile states discourse, summarizes who in the development literature constitute fragile groups, and introduces some important distinctions within the literature on coping strategies and introduces a simple scheme of coping strategies. Section 3 offers contextualized life histories from the three locations outlined above. In the last section, we argue that the tentative findings from this research surely add weight to arguments that the international community should be more, rather than less, proactive in delivering aid to Zimbabwean people.

In future work we aim to pull the findings from the life histories together and relate them to the simple schema of coping strategies, and illustrate how some channels of persistence operate. Unfortunately we were not able to complete this for the current study. Moreover, this paper has not yet drawn out the full implications and themes from the life history cases described, but will do so in due course.

2 State fragility and Zimbabwe

To be able to understand how the Zimbabwean case relates to the fragile states discourse, we need to understand current definitions of fragility and associated terms. Within international development a common classification of fragile states (used for example, by DFID and OECD-DAC) is where the state cannot or will not offer basic services and functions to the majority of the population (Warrener and Loehr 2005). A related but distinct approach is that taken by Torres and Anderson (2004), who recast the notion of fragile states as difficult environments where the state is unable or unwilling to productively direct national or international resources to alleviate poverty. Using this notion of difficult environments, DFID (2005) differentiates developing countries along two axes: (i) political will, and (ii) institutional capacity, creating a four-stage typology:

- **Good performers**: Sufficient capacity and political desire to maintain relationships with development-related international actors;
- **Weak but willing**: Limited capacity;
– **Strong but unresponsive**: Tendency towards repression; and
– **Weak-weak**: Lack both capacity and political desire.

As is described through this paper, the Zimbabwean state currently fits into the third category: strong but unresponsive. The state cannot be seen to be failing as it is too pervasive, and in many ways has become parasitic on the populace, crushing dissent with increasingly ruthless vigour.

However, Cammack et al. (2006) argue that DFID’s definition of fragility fits only one broad donor approach—that of functionality where institutional capacity and political desire to reduce poverty and limit ill-being throughout the territory can reflect a poorly articulated social contract (see Murshed 2006 for a discussion of this). In addition, state fragility is also variously defined by donors in terms of outputs, where the state in question fosters and propagates insecurity and conflict, and relationships, where communication and collaboration with other states are fraught and tense (Cammack et al. 2006).

Zimbabwe performs inconsistently across these varied criteria of fragility. In terms of functionality, the Zimbabwean state certainly has the institutional capacity to reduce poverty and increase wellbeing across all sections of the population, but has none of the political desire. Instead, increased repression, militarization and politicization have been the norm since at least 2000. As for outputs, and despite fears to the contrary, it appears that Zimbabwe has not directly exported many spillover effects thus destabilizing neighbours. Its main export has been people, with mass emigration headed to South Africa and beyond. Moreover, the cloud that has engulfed Zimbabwe has had a silver lining for some regional countries: Zimbabwean tobacco farmers now produce in Zambia, Mozambique, Tanzania and Malawi; some horticultural production has shifted to South Africa; manufacturing to Botswana and South Africa; and tourist receipts from Victoria Falls now accrue to Zambia. State failure in Zimbabwe has certainly led to strained relationships with many development partners (for example, the IMF departed in 1997), but not with SADC governments who have been loathe to criticize Mugabe, or trading partners such as Iran, China and Russia who have recently increased their involvement in the Zimbabwean economy. In sum, Zimbabwe is certainly fragile, if not failed, in terms of functionality, but in terms of outputs and relationships the picture appears mixed.

### 2.1 Fragile groups in Zimbabwe

Whilst the title of the UNU-WIDER conference for which this study was prepared refers to *fragile* groups, the development literature more commonly refers to *vulnerable* groups. These commonly include children (particularly orphans), the sick, people with physical and mental impairments, widows and widowers, the elderly and the landless (Babirye 1999; Mijumbi and Okidi 2001). Moreover, the Chronic Poverty Research Centre has shown that social marginalization, discrimination and disadvantage are linked with *ascribed status* (e.g., ethnicity, race, religion and caste); oppressive labour relations (e.g., migrant, stigmatized and bonded labourers) and being an *outsider* (e.g., migrant labourers, refugees and internally displaced people, those without the documents necessary to access citizenship rights) (CPRC 2003: 45). People identified as belonging to these groups may be more exposed to risk, due to their poor capabilities, their low functionings and their failure to accumulate and retain assets.
However, describing a group as fragile or vulnerable masks the fact that individuals and categories of people may be differentially vulnerable to specific risks at particular times (Bird and Shinyekwa 2005: 73). For example, Marcus and Wilkinson (2002: 37) note that not only can ‘the term “vulnerable group” be stigmatizing’, but that it ‘can be inaccurate, camouflaging the strengths of marginalized and disadvantaged people and their contributions to society, and presenting a falsely homogenous picture of diverse situations’. From this viewpoint the use of the terms fragile and vulnerable encourages a view of groups and individuals as ‘passive’ and non-responsive emphasizing weakness, a lack of agency, and an inability to cope (Hewitt 1998; Bankoff 2001). In contrast, any attempt at understanding individual or group fragility or vulnerability must focus on actors capacity and ingenuity to respond, as Moser (1998: 3) states:

> Analysing vulnerability involves identifying not only the threat but also the resilience or responsiveness in exploiting opportunities, and in resisting or recovering from the negative effects of a changing environment. The means of resistance are the assets and entitlements that individuals, households, or communities can mobilize and manage in the face of hardship.

We now turn to the literature on the strategies and activities employed by those under situations of duress, commonly referred to as coping strategies.

### 2.2 Coping strategies and resilience

The term coping strategy emphasizes the ability of households to decide and select appropriate activities in light of their assets and endowments. This is not to deny that coping activities are circumscribed by constraints and the availability of opportunities, but to flag-up the agency and capacity of individuals, households and communities to strategize. Within the coping-strategy literature, there are some straightforward distinctions. First, between idiosyncratic (individual) and covariant shocks: the effect of idiosyncratic shocks, for example, the illness of a family member, can be insured against within a community to a certain degree. It is more difficult to recover from shocks that operate at an aggregate level, affecting entire communities, countries and regions (covariant shocks), as risk cannot be shared (Dercon 2004).

Second, households adopt a range of sequenced coping strategies in order to respond to shocks. These can be divided into two groups: ex ante risk-management strategies and ex post risk-coping strategies. The former can be further divided into strategies that avoid the impact of shock (sometimes termed shock reduction) and those that ameliorate the worst effects of a shock (sometimes termed shock mitigation). The latter can be divided into strategies internal to the household and within the wider community (external). These simple distinctions are illustrated in Figure 1, which, following Sinha and Lipton (1999), utilizes the term damaging fluctuation (DF) instead of shock.

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6  See also Prowse (2003).

7  This section draws in places from Busse (2006).
A household’s initial conditions (household assets, household characteristics, including dependency ratios and educational status of household members) influence a household’s vulnerability to shocks and the forms of coping open to it. Responses to food insecurity have shown that people adopt coping strategies in a predictable sequence to tradeoff short-term consumption needs against longer-term economic viability. Those with limited long-run costs tend to be adopted first. Once households and individuals have exhausted their less damaging options, they tend to progress to forms of adverse coping and then to survival strategies.

Lack of assets, both private and collective, drives poor people into deeper and more intractable poverty after a shock. Those with few material, financial, natural or social assets are vulnerable to relatively minor shocks, especially if bunched and unpredictable. Without assets to form the basis of effective coping strategies and resilience, people can experience catastrophic declines into persistent poverty and, more to the point, face increased morbidity and reduced life expectancy. Poor people without reserves may adopt forms of adverse coping which may support short-term survival while undermining wellbeing in the medium to long-term. Such adverse coping can entail the liquidation of crucial productive assets, the reduction of consumption in ways that have potentially irreversible welfare effects (eating smaller amounts of less nutritious food, avoiding essential medical expenditures, withdrawing children from school) or the adoption of behaviour that undermines trust and social standing (theft and begging, engagement in commercial sex work, abandoning children with their grandparents) (CPRC 2003).

The following life histories illustrate recent processes of impoverishment in Zimbabwe. These demonstrate how such adverse coping is leading not only to the tragic loss of life and increased incidence of ill-being, but that it is impairing future generations through the creation of irreversible outcomes that will scar Zimbabwe for decades.

3 Contextualized life histories

The five simple life histories presented in this section are as follows.

In Plot Shumba, the peri-urban area, we present case studies of two young women living with AIDS, describe where they live and draw wider observations about life in Zimbabwe from the shocks that have affected their community. To provide some background to key drivers of impoverishment in Plot Shumba, Boxes 2 and 3 offer an overview of the fast track land reform programme and changes in rural labour markets, respectively. We also offer details on the HIV pandemic in Zimbabwe.

In Mzilikazi, Bulawayo, we discuss the experiences of a young man who was orphaned as a child, got drawn into gang-related crime as a teenager and is now unemployed. Again, we use this example to discuss wider issues facing urban Zimbabwe and to show how the sequenced and composite shocks experienced in his life so far will make an exit from poverty extremely difficult, even when economic recovery occurs in Zimbabwe. To offer some contextual detail, we summarize state repression and operation Murambatsvina, and describe recent urban poverty trends.

Finally we present the stories of two rural households where grandparents are struggling with poverty and ill-health to bring up their grandchildren. We use these stories to illustrate how many children are growing up in poverty having been orphaned by AIDS or while their parents seek work in urban areas. To frame this discussion, we offer details on imperfect and distorted agricultural input and output markets in rural Zimbabwe.

3.1 Plot Shumba

Plot Shumba is a privately owned peri-urban site around 30 minutes drive from Mhangtivi, the main regional town, and easy walking distance from the high-density suburb of Matemba. Fifty-eight households live in Plot Shumba in small, fragile, temporary structures which are scattered over three acres of a 66-acre piece of rain-fed agricultural land. The land is used extensively as grazing for a small herd of cattle, sheep and goats belonging to the plot owner. Plot Shumba developed gradually as a settlement between the early 1970s and the late 1990s, with the owner’s permission. Residents tended to move to the Plot because they had nowhere else to go: they had lost their commercial farming or mining job and therefore their home; they were unemployed, had lost contact with their rural home or they had work but could not afford urban rent.

In the late 1990s the community came to the attention of ‘agents of the state’ and since 1998 the community has been evicted and its members had their homes and assets destroyed three times. Community members have suffered various forms of harassment and social, political and economic exclusion, ranging from being refused medical
treatment because of community membership through to retailers refusing to sell them food during the 2003 food security crisis. For about 18 months between 2005 and late 2006 the community received food aid (distributed by IOM and Zvevanhu, a local NGO), but distribution to this community was then stopped because of WFP shortages.

The range of livelihood activities undertaken by women has not changed a great deal since 2000: casual labour (*maricho*) and casual domestic work; small-scale local trading (vending) (food, grass brooms, fresh milk, non-timber forest products [wild mushrooms, edible caterpillars, reeds for making mats, recyclable waste], firewood collection and sale);

8 gold panning and crushing gold ore (for male gold panners); backyard industries (hairdressing, bicycle repair, making doilies, tailoring/needlework); growing horticultural crops; informal commercial sex work; getting support from NGOs.

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**Box 1**

**Vending licences—official requirements**

- Application forms: application forms should be bought from council at a cost of ZW$300,000;
- Health screening: a prospective vendor must be screened at his or her own expense for communicable diseases such as TB. At the time of the research the cost of health screening was ZW$2.5 million which most prospective vendors considered to be too high;
- Police clearance: prospective vendors should be cleared by the police for any criminal record. Those with criminal records are denied licences. (This was introduced during operation Murambatsvina (May/June 2005), when the government argued that a number of informal traders were involved in crime and the sale of stolen goods.);
- Licences for a particular type of vending are issued on the condition that a certain quota for each category has not been exceeded.

Traders who sell herbs and other traditional medicines must register with the Zimbabwe National Traditional Healers Association. The association charges a fee for registration and an annual membership subscription.

**Unofficial requirements for the issuance of a vending licence include:**

- Proof of party affiliation and paid up membership;
- ‘Money for drinks’ for council officials to speed up the process and to ignore official requirements such as health check-ups and criminal records;
- ‘Gifts’ to officials in the form of merchandize to be sold by the vendor.

Each licence stipulates the products a vendor can sell. A licence issued for the sale of fruit and vegetables is not valid for the sale of other products. This limits the vendors’ opportunities to identify and occupy niches, which change as the economy collapses.

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8 Illegal activities. Before 2000 the authorities ignored small-scale collection and sale. Since then, and particularly since 2005, the police and other ‘agents of the state’ have monitored such illegal activities and penalized those caught.
Box 2
Fast track land reform

Frequently, media representations of Zimbabwe’s crisis depict the ‘war veteran’ movement as a militia arm of ZANU-PF. Whilst the war veterans were certainly integral to the chaotic appropriation of white-owned farmland from 2000, relations between ZANU-PF and the war veterans (nomenclature that obscures the much broader constituency, including many retrenched workers from urban areas, of this political force) were not always so close-knit. From 1997 the war veterans were a key political threat to the continued hegemony of Mugabe’s ZANU-PF. To stave off possible political defeat, Mugabe co-opted the veterans through generous payments including pensions. He also gave them the green light to invade white-owned commercial farms.

Legally, Zimbabwe’s fast track land reform is closely linked to the revision of the country’s constitution which attempted to link the constitution with the state’s right to seize land from large-scale farmers for redistribution. A national referendum (February 2000) rejected the proposals. Despite losing the referendum, the government amended the constitution and passed a new Land Acquisition Act in April 2000, which legalized compulsory acquisition (Kinsey 2004). In June 2000 Mugabe announced the fast track land reform programme, stating that it was necessary to correct colonial imbalances in land ownership (CAJ News, 6 March 2007). Farm invasions began during the early months of 2000 (Chaumba, Scoones and Wolmer 2003). These may have been spontaneous or orchestrated by the war vets but they coincided with a regional rainfall shock and harvest failures which were so severe that they precipitated demands for food aid (Potts 2006).

A study of some of those involved in farm invasions at the peak of the fast track land reform process shows that they were either young men with a desire for land, or female-headed households, often widows and divorcees, fleeing social stigma in communal land areas. Settlers were found either the relatively rich or the relatively poor (as proxied by cattle ownership). Wealthier households with large numbers of cattle were found to be able to straddle communal and invaded land, and create patron-client relations with the poorer settlers through the loaning of cattle for draught power in return for the provision of labour. Poorer households had few assets, little to lose, and were found to make their living through casual labour, poaching and possibly theft (Chaumba, Scoones and Wolmer 2003).

In June 2002 around 3,000 white farmers were ordered to leave their farms (Addison and Laakso 2003), and by August 2002 the fast track land reform was completed. More than 5,000 white-owned commercial farms were seized (IRIN Johannesburg, 22 Feb 2007), and by the end of 2002, only 600 white farmers remained in the country (Sachikonye 2003). Over 10 million hectares of land had changed hands, with 300,000 farmers gaining access to plots of 5-10 hectares, and over 50,000 farmers gaining access to plots large enough for commercial farming. The process was chaotic and access to plots was mainly organized through ZANU-PF party structures. Instead of an equitable process of redistribution to the landless, it became highly politicized, and patronage systems came into play. In the end a number of members of the black political elite gained large tracts of high-quality land (Scarnecchia 2006), which they tend to hold speculatively, rather than farming productively.

The land reform process has disrupted production and displaced thousands of farm workers (Busse 2006), many of whom were first, second or third generation immigrants from Malawi, Zambia and Mozambique and were regarded by many Zimbabweans as ‘aliens’ and outsiders.

The tighter application of environmental and licensing regulations has limited opportunities (see Box 1). Bans on gold panning, the cutting and selling of firewood and vending without a license are now observed. If caught by members of the Zimbabwe Republic Police (ZRP) or municipal police—dubbed tight grip—community members risk being physically assaulted, having their commodities confiscated or destroyed or having to pay a fine or bribe (in cash or kind). Evading detection takes time and further reduces the viability of a number of livelihood activities.
In the early 1990s work on commercial farms was mainly shunned by black Zimbabweans. Demand was filled by migrant Malawians, Mozambicans and Zambians. However, by 2000 around three-quarters of farm labourers were Zimbabwean. Both ‘alien’ and domestic farm workers tended to be the poorest sections of rural communities and they were locked into a patron-client system with estate owners. They had weak employment rights and lacked political rights (gaining the right to vote in local elections only in 1998) (Sachikonye 2003). In particular, many child-headed households on the estates suffered from food insecurity, poor education, lack of psycho-social support, abuse and exploitation, the absence of an extended family, poor housing and poor access to healthcare (FOST 2003).

After the fast track land reform programme, newly resettled farmers had little ability or willingness to engage non-household labour, and over 100,000 farm workers lost their jobs and were evicted from their homes (Sachikonye 2003). Some migrant workers were forcibly relocated by the authorities to marginal areas of the country with little infrastructure—such as the Lower Zambezi valley (ibid.). Displacement from farms has reduced farm workers’ access to housing, health and education services, often forcing these to move to squatter camps or informal housing in urban or peri-urban areas, such as Plot Shumba (Sachikonye 2003). Former farm workers were legally entitled to a severance package from their employers but only 25 per cent of these employers received timely compensation from the government, which made it difficult for them to provide their workers with severance pay. Many former workers have been forced deep into poverty and food insecurity (Sachikonye 2003).

Men reported that in 2000 they relied mostly on commercial farm work. Since then gold panning and small-scale vending have become more significant. After 2000, disruption to the agricultural sector, driven by the fast track land reform, resulted in a marked decline in agricultural activity and employment (see Box 2). Some are still involved in unlicensed vending and firewood collection but these activities tend to be ad hoc, due to the risk of arrest.

Overall, people at Plot Shumba struggle to find work. This is partly because of widespread unemployment, but their reputation as supporters of the MDC makes finding work more difficult, as does their lack of ZANU PF membership cards. Many also lack proper ID papers and have ‘alien’ status. In the current political climate, such people are the last to be offered jobs or provided with services. Clearly, the settlement has been strongly affected by the land invasions surrounding fast track land reform processes. Many residents, who were previously casual or regular commercial farm workers, now rely on petty trading and selling firewood collected from the nearby forest—both much riskier following operation Murambatsvina (see Box 3).

In contrast to focussing on those directly displaced by the fast track land reform, the following life histories of Angel and Linah from Plot Shumba further illustrate the channels of decline in the context of collapse and state repression. Both narratives are

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9 Mining has overtaken agriculture as the main foreign exchange earner in Zimbabwe, with gold contributing half of this. The government plans to take a 51 per cent stake in all new mining investments. For example, Impala Platinum from South Africa has recently invested US$800 million in the attempt to double production at one mine. Whilst formal gold output fell by 30 per cent in 2004, informal mining has seen a boom, with an estimated 200,000 deriving livelihoods from gold panning. However, the state recently clamped down on informal mining to control incomes derived from this livelihood strategy, allegedly arresting over 15,000 informal miners (see www//news.bbc.co.uk/1/hi/ world/africa/6214431.stm).
accompanied by a life history ‘map’ which depicts the trajectory of the wellbeing of these girls through time.10

Life history interview with Angel: young, destitute and desperately sick

Angel lives alone with her 19-month old baby in a small tin shack (around 2.2m by 1.7m) in Plot Shumba. She is very ill with AIDS and TB and her illness has made her very weak, making it difficult for her to speak or move. Her skin is dry and her hair is thin, brittle and reddish brown rather than black. She is thin and gaunt, and from her appearance could be either male or female and almost any age from mid-teens to early 40s (although she is actually only 25). Angel’s illness was confirmed only in February 2006 when the NGO in her community offered her HIV testing. She has been diagnosed with TB and cannot start ARVs until her TB has been successfully treated. Unfortunately due to her late diagnosis she started treatment only a month ago and looked so ill at the time of her interview that it seemed likely that she would not survive.

Angel had her first child when she was 12, but continued going to school until Form 2 (the 2nd class in secondary school) when she had to drop out because her family had run out of money. She left her baby with her mother and her mother’s family when he was 21 months old (she was 14) and in 2001 she came to a town in Midlands near Plot Shumba, looking for work. She found work as a maid but left after a year as her ‘madam’ was not paying her. After this, she had nowhere to live and moved to Plot Shumba in 2002 and built a house. In February 2003 houses at Plot Shumba were demolished by ‘agents of the state’. She was severely beaten and spent a while month sleeping in the open at the long-distance bus shelter (along with other members from Plot Shumba). The farmer who owns the Plot Shumba land obtained a court order enabling them to move back and the residents rebuilt their homes.

In February 2004, Angel’s cousin helped her to get a job selling beer at a local small-scale gold mine. While she was there she met a gold panner and fell in love. Unfortunately the mine owner went bankrupt in August 2004; she lost both her job and her home, and had to return to Plot Shumba with her boyfriend. When they first returned to Plot Shumba, she tried to make a living selling firewood. When she made enough money she would buy vegetables for resale.

She fitted into the community well: when she hadn’t earned enough money for food, she would sometimes approach friends in the four households she knew well and would invite herself for a meal, taking firewood as a contribution. Her friends were very kind and did not make her feel bad for asking for support. At times the same people would turn to her for help (for example, mealie meal or salt) and if possible, she would help. She tended to need support more than they did.

She became pregnant in 2004 and gave birth to her son in March 2005. That same month her boyfriend was killed when the gold pit where he had been working collapsed, killing him and three other men. The bodies were never recovered. Angel stayed on in their house until it was demolished during operation Murambatsvina in 2005. Afterwards she had to rebuild again. Her son is growing up without a father and with a mother too sick to care for him properly. He was dirty and hungry, and despite being 19 months old, he did not make eye contact and was not walking or talking.

10 These maps draw on the method of presenting life histories used by Davis in his work.
Orphaned as a toddler. Went to live with grandmother at ‘rural home’.

Grandmother sent her back to school.

Pregnant aged 12. Grandmother refused to let her live with her ‘husband’ when the baby was born.

Left school. Left home. Got a job as a housegirl.

Left job as she was not being paid. Became homeless. Did not go back to rural home (why?).

Mr Kushaya allowed her to build house at Plot Shumba.

Mine closed. She lost her job.

Moved back to Plot Shumba with her new ‘husband’.

Baby born. Husband died a month later in pit collapse.

Became sick.

Started receiving food aid.

Site invaded by police/ army. Beaten, evicted and house demolished.

Dumped at long-distance bus stop with all she had been able to salvage. Told to ‘go home’.

Returned to Plot Shumba after month living at bus rank. Rebuilt house.

Met gold panner and fell in love.

Found catering job at bar, at mine.
Life history interview with Linah: wayward adolescent or victim of child abuse?

Linah is a 16-year old orphan who is both a figure of fun in Plot Shumba and thoroughly socially integrated into her community. One of her nicknames translates as ‘the hedonist’ or ‘fun seeker’, the other (behind her back) is Moneylink (the system for sending remittances home, i.e., easy money). Her engaging and sociable personality means that she is often the centre of whatever fun is going on in the community and she is certainly someone who is hard to ignore.

She was orphaned when she was a toddler and came with her older sister to live with her grandmother in Plot Shumba. Their household also includes two male cousins—her mother’s sister’s sons—who moved in when her aunt died. Linah is living with her grandmother now, but even though Linah is still in her teens, her life has had a number of twists and turns.

She has never been to school and ran away at the age around 10 or 11 to live with a 23-year old man in the local town of Matemba. The relationship broke down when he denied her access to medical care for her acute sexually transmitted infection. He deserted her when she reported the situation to the police, and she returned to her grandmother’s house at Plot Shumba. Her promiscuous and rebellious behaviour caused her grandmother to throw her out when she was around 12 or 13 years old. Linah found herself on the street in the local town. To survive, she turned to informal commercial sex work to obtain food, money and a roof over her head.

During this time she met a man at the Matemba Rural Council and he became her regular boyfriend. She moved back in with her grandmother and stopped sleeping with other men. Then she became pregnant. She is now around 5 months pregnant, and living at Plot Shumba. Sadly she is not sure when the baby is due because she has not been able to afford the consultation charge (US$2) for a pre-natal check. She is HIV positive and without a check-up, it is unlikely that she will be able to have her baby in hospital. Without a hospital birth, it is unlikely that she will receive Nevaraprin during labour to prevent the mother-to-child transmission of HIV, or that the baby will get follow-up treatment. It is also unlikely that she will receive formula to be able to feed her baby and will, instead, breast feed (potentially increasing the risk of transmission). After she was tested and her HIV status confirmed, she told her boyfriend. He told her that he loved her anyway and would stay with her. At the time of the interview, she had not seen him for two weeks.

Both Linah and Angel are HIV positive and their stories show how poverty and marginality combined to increase their chance of risky behaviour. Angel’s story shows how a series of events has driven her into severe poverty, and close to death. Assuming that Angel’s TB is cured and her health improves on a sustained ART programme, having dropping out of school at 14, her employment opportunities will be limited, even if the Zimbabwean economy recovers. Having had her home demolished twice, she has almost no household possessions and no productive or physical assets. Although she is well liked by the people in Plot Shumba, they are similarily destitute. She is disconnected from her rural home and marginalized from mainstream society and will thus find it hard to use social or political networks to improve her wellbeing. Angel’s son is growing up in destitution. He was made homeless by operation Murambatsvina.
Mother died.

Moved in with boyfriend in Matemba (aged 10-12).

One month later, developed STI; Boyfriend would not allow her to seek treatment; Symptoms became very severe.

Received treatment. Moved back in with grandmother.

Behaved badly and became promiscuous. Grandmother threw her out.

Lived on the streets in Matemba. Had sex with men for food, a roof over her head and for money.

Formed a regular relationship with a man with a government job; Stopped having sex with other men; Moved back in with her grandmother.

Became pregnant. Discovered her HIV+ status.
when still an infant and is now affected by his mother’s severe illness. Clearly, the 19-month-old infant’s life chances have been minimized and it is possible that he will fail to recover from this poor start in life.

Linah’s story illustrates, perhaps, how difficult it is for elderly grandparents to raise children alone. Linah needed more guidance and protection than she received. Once her grandmother had thrown her out, earning alternatives other than commercial sex work were limited. With no education, HIV and a baby to support, her options are extremely limited and she will find it very difficult to escape poverty. Like Angel, she has no physical or productive assets and her networks are with other very poor people. In the future, her best hope is to find casual work and accumulate enough to move into livelihood activities with higher return—opportunities that are extremely circumscribed in the current political climate. However, saving through casual work is going to be extremely difficult and it is likely that Linah and her children will be chronically poor through their lifecycles.

HIV is the key element in both of these life stories. The HIV/AIDS pandemic in Zimbabwe has been a significant factor in poverty trends both before and after 2000. Official UN statistics show that HIV infection rate is at 24.6 per cent, one of the highest in the world. Other studies offer varying statistics. A nationally statistically significant sample of women applying for pre-natal care finds the HIV rate to be 21 per cent in 2004, although the high proportion of women giving birth at home suggests that many of the poorest women were not included in this study, thus artificially lowering the rate. A different assessment, based on a survey of micro-credit recipients, finds that around 40 per cent of households displayed signs of being affected by HIV (using chronic illness as a proxy) (Barnes 2003).

What is clearer is that around three million people in Zimbabwe are HIV positive, but only 50,000 of them have access to antiretroviral therapy treatment. Zimbabweans can expect to die younger than anyone else in the world: life expectancy of a Zimbabwean woman today is just 34 years, while a Zimbabwean man can expect to live to 37 years.

HIV-affected households have a greater proportion of household members who are economically inactive, are less likely to seek medical treatment due to a lack of funds, and have a lower monthly income, indicating the vicious circle of impoverishment and HIV positive status (Barnes 2003). The impacts of HIV on wellbeing are multiple and inter-linked. For example, chronically-ill households are more likely to miss meals; eat poorer quality food; use wild foods; and focus food provision to the economically active household members (to the detriment of others).

We can see these factors at work in the case of both Angel and Linah, limiting not only their own life expectancies, but also those of their children who are the future for Zimbabwe in years to come.

3.2 Mzilikazi, Bulawayo

Mzilikazi is an old, fairly central and well-established inner city high-density residential area in Bulawayo that used to house the town’s wealthier skilled and semi-skilled black workers. The area is well laid-out, spacious, and homes have piped water and electricity. Houses tend to be semi-detached brick bungalows with two or more
bedrooms, tin, asbestos or tile roofs and small gardens. However, the appearance of prosperity and calm is misleading. The area has been deeply affected by Zimbabwe’s recession and unemployment is high. A number of households depend on sub-letting in order to cover their basic living costs. Overcrowding has intensified following operation Murambatsvina, when many of the outhouses that residents had constructed in their backyards to provide a source of rental income were demolished. Some of the ‘landlords’ now share their small homes with a second family. Crime is a serious problem in the area with criminal gangs (tsotsies) active keeping street crime and burglary levels high.

Box 4
Livelihood activities of selected men and women in Mzilikazi

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decades ago, when their children were young</td>
<td>The key informants were employed as:</td>
</tr>
<tr>
<td>Husbands of the key informants were employed as:</td>
<td>Domestic workers</td>
</tr>
<tr>
<td>• Employed by the city council (slashing grass by rivers and roads and spraying for mosquitos)</td>
<td>• Vending home made brooms</td>
</tr>
<tr>
<td>• Domestic workers</td>
<td>• Selling vegetables from their urban ‘garden’</td>
</tr>
<tr>
<td>• Post office worker (deliveries) (later a driver for the post office)</td>
<td>• Catering in formal beer halls</td>
</tr>
<tr>
<td>• Salesman/driver for a manufacturing company</td>
<td>• Vendor selling roasted mealie cobs</td>
</tr>
<tr>
<td>• Selling vegetables from their urban ‘garden’</td>
<td>• Vendor selling fruit and sweets</td>
</tr>
<tr>
<td>• Vending: buying bread for resale</td>
<td>• Vendor selling second-hand clothes</td>
</tr>
<tr>
<td>• Electrician for the National Railways (later, self-employed electrician)</td>
<td>• Tailor in a clothing factory</td>
</tr>
</tbody>
</table>

Other men in Mzilikazi at that time
• Furniture makers (carpenters)
• Self-employed builders
• Cross-border traders
• Hairdressers
• Raised and sold poultry

Ten years ago
Four out of the six husbands had died, the remaining two were:
• Electrician
• Salesman/driver

Other men in Mzilikazi at that time
• Some ex-council workers became plumbers (to fill a demand that was previously filled by the council)
• Hairdressers

Domestic workers
• Vending home made brooms
• Vending roasted mealie cobs
• Vending vegetables
• Working in an old people’s home as a cleaner/orderly
• Cross-border trading (until her passport expired. Her father was Zambian so she is finding it difficult to get a new passport. She has to formally renounce her right to Zambian nationality)

Some of the changes in livelihood activity are due to changes in opportunity and others are due to changes in their age.

As of August 2006
Five out of the six women are now widows.
The remaining husband was:
• Salesman/driver

Domestic workers
• Vending sweets
• Vending fruit
• Horticulture

Some people do not have a livelihood. They rely on support from social welfare, who give them food handouts or on whatever their children can give them.

Source: Focus group discussion with a group of older women, August 2006. Mzilikazi, Bulawayo
Only a few of the residents are still in formal employment, and tend instead to rely on income-generating strategies covering illegal, semi-legal and legal activities. Vending is now a key (though risky and unreliable) source of livelihood. ‘Everyone has become a vendor’ is an oft-cited phrase, despite the fact that a vendor without a licence risks harassment. Illegal or adverse coping strategies are increasing: commercial sex work, crime (housebreaking, mugging), illicit beer brewing, gambling and drug dealing. Teenagers and young adults have been drawn into these activities to make a living, deepening the generation gap between the old and young. Older people report that they live in perpetual fear of the youth. Under-aged prostitution is widespread and it is reported that girls become pregnant as young as 13 years.

Many older residents in Mzilikazi receive pensions or welfare grants, but they are almost worthless. Remittances do not provide widespread or reliable support. The average level of wellbeing is reported to have collapsed in recent years. Newly poor residents appeared to be stunned by both the rapidity and the depth of their collapse of wellbeing and were being driven into unfamiliar forms of coping.

The life story of Blessing illustrates how crime has become a livelihood choice for the unemployed and alienated youth of urban Zimbabwe.

Life history interview with Blessing: the livelihood choice of urban unemployed youth?

Blessing (22) is an orphan and currently lives with his step-father. He was an only child, never knew his father, and his mother died when he was 9 years old. He dropped out of school at this age as his step-father would not pay for his education. He has been unemployed ever since. He can remember nothing good about his childhood after his mother died. During the interview Blessing said he was hungry and had no way of getting food. His clothes were dirty and he had not washed recently. He looked miserable.11

Blessing lived for a part of his childhood with his step-father and for a few years with his paternal grandmother. He was thrown out by his step-parents in 1999 when he was 15 and lived on the streets. The following year, he moved in with his grandmother. After realising that his grandmother ‘could not cater for his needs’, he joined the tsotsies and started going into town with them to steal. Caught by the police, he was sentenced to 2-year prison term (2001-02). Life in prison was very tough and he decided that he would like to reform: ‘I am no longer interested in the tsotsies’.

After his release he moved in with his grandmother, tried to find a job but couldn’t because he lacks a national ID or a birth certificate (his paperwork had not been organized by the time his mother died). To keep himself busy, Blessing joined a youth centre and became part of a dance troupe which tours Bulawayo to put on performances. They make some money from dancing but he would ‘like to diversify’ because he recognizes that as he gets older he will not be able to maintain the quality of his performances. Also he does not make enough money from dancing and he often goes hungry. He would like to become a vendor, selling fruit and vegetables, but knows the risks involved from police harassment of vendors. He says that to reduce the risk, he would sell locally in Mzilikazi, rather than in the city centre.

11 Interview by Bird (August 2006).
Figure 4
Wellbeing map – BLESSING DHLAMI

His mother got sick when he was 9 and he had to drop out of school.

Step-father lost his job. They struggled.

His mother died.

At 16, his step-father threw him out of the house. He lived on the streets and joined the tsotsies.

Caught by police and imprisoned for 2 years.

Released from prison and moves in with his grandmother.

His grandmother died.

Moved in with his step-father.

Things getting worse.

Wellbeing

9 yrs 16 18 20 22 (now)
Unfortunately, his grandmother died in August 2005 and he had to rejoin his step-father. Until recently his step-mother was part of the household but she left shortly before I met him. He has a poor relationship with his step-father and since his step-mother left, his step-father’s behaviour has deteriorated. He is a violent man and Blessing is afraid of him. He is locked out of the house while his father is at work and has to spend the day outside. Blessing says that he cannot talk to him and cannot ask him for help.

Sequential shocks have marred Blessing’s life, almost before it began (Figure 4). By the age of nine, both of his parents had died and he had dropped out of school. His step-father did not care enough about him to either educate him or provide him with technical training. His grandmother could not provide adequately for him and, due to the limited opportunities in the context of rapid economic contraction, he got drawn into crime. Now functionally illiterate, long-term unemployed, and with a criminal record, he is unlikely to access formal sector employment, even after the economy begins to recover.

It is difficult to see a way out for Blessing. His best hope is that the economy begins to recover soon, generating employment, and that he can pick up unskilled manual work—an unlikely scenario in the short term. Moreover, networks are likely to play an important role in recruitment processes, and Blessing is poorly connected. His story is replicated many times over in places like Mzilikazi. Illegal or adverse coping strategies are increasingly being adopted, limiting future life chances. Until alternative livelihood options present themselves, it is likely that areas like Mzilikazi, despite its middle-class heritage, will continue to be blighted by crime.

The life story of Blessing, and those in Mzilikazi more broadly, reflect urban poverty trends in Zimbabwe. Urban poverty in Zimbabwe declined through the 1980s. In 1981 around 30 per cent were below the minimum wage in high-density areas in Harare and by 1991 this had fallen to 10-15 per cent, making urban Zimbabweans amongst the wealthiest and most secure anywhere in Africa (Potts 2006). But during the 1990s urban poverty increased, mainly due to stabilization policies associated with structural adjustment, and has mushroomed since 2000 (ibid.). By 2006 the vast majority of Zimbabweans were living beneath the poverty line: over 85 per cent of Zimbabweans were defined as poor by the Consumer Council of Zimbabwe (cited in Potts 2006; see also Hawkins 2006).

The experience of those pursuing disparate illegal livelihoods in Mzilikazi give some indication that the real power brokers in Zimbabwe are the security services: the army, the Central Intelligence Organization (CIO), and the police. Although there are splits within and between these, the soldiers and the CIO ultimately hold power, and they will have to be involved in decisions about Zimbabwe’s future. We close this ‘urban section’ showing how the state security sector misuses its power with a summary of operation Murambatsvina, and through cataloguing recent examples of state oppression in Zimbabwe (see Box 5).

Operation Murambatsvina took place in May/June 2005 and was described by the government as an attempt to control the ‘economic saboteurs’ operating the black market and to improve the quality of urban housing stock by ensuring that planning permissions and building regulations were obeyed. Three alternative explanations have been suggested: (i) the desire to punish opposition supporters, many of whom are urban-based, and to tighten control over the population; (ii) to disperse potential sources of
political agitation from urban areas to rural areas (in rural areas people can be ‘disciplined’ easier and less transparently); and (iii) with the informal sector crushed, the control of the economy returns firmly to the government and the dependence of the population on the state for food increases, reducing scope for opposition.

Operation Murambatsvina targeted illegal structures and informal businesses, demolishing buildings, vending sites and other informal business premises without planning permissions and driving the informal sector underground. The operation resulted in the loss of livelihoods for those previously working in the informal sector. It is estimated that some 650,000-700,000 people were directly affected through the loss of shelter and/or livelihoods (Tibaijuka 2005). Government figures state that almost 95,000 dwelling units were destroyed, displacing some 570,000 people, with a further 98,000 losing their livelihoods in the informal sector (Potts 2006).

The UN also estimated that after operation Murambatsvina, at least 114,000 were living in the open without shelter and the government curtailed international assistance to internally displaced people (Human Rights Watch 2005). Few were able to access alternative government accommodation (operation Garikai) due to strict conditions, including evidence of formal employment and a monthly salary (Human Rights Watch 2005). The police intimidated and beat displaced people and forcibly moved them to

**Box 5**

**Recent examples of oppression**

Examples of the misuse of state power between January and May 2007 include:

- A crackdown on the opposition in early 2007, following accusations from Mugabe that they were trying to topple the regime on behalf of Zimbabwe’s former colonial master, Britain. Violence and repression were used to suppress the independent media, harass human rights defenders and intimidate opposition leaders and peaceful demonstrators.

- In February 2007, in reaction to growing unrest over the economy, police outlawed rallies and demonstrations in Harare and other parts of the country regarded as opposition strongholds. Using teargas, batons and water cannons, police scuttled a rally that Morgan Tsvangirai, leader of the Zimbabwean opposition Movement for Democratic Change (MDC), was to hold at Zimbabwe Grounds in Highfield to launch his 2008 presidential election campaign (Financial Gazette, 1 March 2007).

- In March 2007, Morgan Tsvangirai and several other members of his party were detained in a police raid in the capital, Harare. Scores of police officers in riot gear, wielding AK-47 assault rifles, barricaded all the roads around Harvest House, the MDC headquarters in Harare. Police confirmed a crackdown on ‘perpetrators of violence’ (IRIN Africa, 28 March 2007).

- Four members of the opposition MDC were prevented from leaving Zimbabwe, including one MP, Nelson Chamisa, who was badly beaten when travelling to a meeting in Brussels. A significant number of activists and opposition supporters are still being arrested and tortured throughout Zimbabwe. Trade and student union members have been harassed and arrested (UK MP’s Hear Statement on Zimbabwe, 26 March 2007).

- Opposition supporters were denied state-supplied food aid. In a public statement, Charumbira, president of Zimbabwe’s Council of Chiefs, confirmed that traditional leaders had been ordered to consider only Zanu-PF supporters on programmes initiated by the government. ‘We cannot afford to continue feeding the enemy because they are sell-outs’, he said. ZANU-PF deny the use of food aid as a political weapon (ZIM Online, 31 January 2007).

transit camps, after which the government assigned these to rural regions on the basis of their identity numbers. These relocations have placed an additional burden on rural areas, which now have additional people to house and feed in place of the remittances they may previously have received.

The operation has had a long-run impact. The police have enforced stringent licensing regulations more tightly and the requirement that all vendors sell only from covered stalls or shops generates a powerful barrier to entry for legal vending. Also new regulations have been introduced to control the informal sector and those applying for a vending license now have to obtain police clearance (see Box 1). People without IDs (e.g., ‘aliens’) or with criminal records are denied licences. The police now routinely harass petty traders and other informal sector workers, who have had to adapt their livelihoods, having an adverse effect on their income. Many people are still effectively homeless and the large numbers of urban households who depended on renting backyard property in order to cover their basic living costs have lost an important source of income.

3.3 Makoni

Zenzele village is in Mutoro Ward, about 40 km from Rusape town in the relatively rich Shona heartlands. The village is wealthier than the average village in a communal area, despite its sandy soils with very low fertility. For many households, a year-round income and food source are derived from access to several cultivable wetlands, where vegetables, water yam (*madhumbe* or *magogoya*) and small amounts of rice are grown. For others, annual dryland farming is reliant on the unimodal pattern of rainfall. Many households in the village have both small (chickens, goats, rabbits, guinea fowl and pigs) and large livestock (mainly cattle and donkeys). Poor households tend to be limited to a couple of chickens and livestock numbers are on a downward trajectory, with losses through cattle rustling, diseases, distress sales, slaughter for traditional rituals or as payment to meet contingencies.

The (group) village headman retains strong control over his community, and governs Zenzele and 48 other villages. Zenzele was selected as one of the three field sites to be visited in August 2006 because the Makoni Chief is famous in Zimbabwe for having resurrected the traditional practice of *Zunde ra Mambo*. This is a form of highly localized taxation which, in theory, generates a food store to protect local food security. The Zenzele village is wealthier than many others in the communal areas and has an active *Zunde* scheme. As a result, it is likely that this village would illustrate the best possible conditions in communal farming areas in Zimbabwe. However, as we show below, despite the *Zunde ra Mambo* scheme, and the involvement of WFP and a local NGO, there were a number of food-insecure households.

Agriculture was the main livelihood strategy in Zenzele until recently, and men and women were involved in these activities throughout much of the year. Agro-processing activities converted some of the local produce for local consumption or sale either within the community or onto the local or national market. Whilst agriculture is still

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12 Associated with the suspension of free dipping services and declining access to veterinary services.

13 E.g., to hire transport to take sick family members to hospital or to transport bodies.
significant, many households are now involved in the collection of natural resources from common lands (Boxes 6 and 7 on agricultural input and output markets, respectively). These activities include collecting clay for pottery making\textsuperscript{14} (large amounts of wood are required to fire kilns) or bricks; cutting reeds/grass for roof thatching; cutting and selling firewood (despite being illegal); gathering and eating/selling wild foods (e.g., mopane worms; wild mushrooms, collecting, roasting and selling termites (by women) and catching roasting and selling field mice (by men)).

Considering the frequency of natural resource collection as a livelihood strategy, a surprisingly large number of households have family members in regular salaried employment working mainly in urban areas (39 people in 22 households). However, remittances from these households were unreliable, mainly because inflation reduced the amount they were able to send to families. Instead, reverse remittances were flowing, with rural relatives sending urban-based family members food (mostly grain).

Casual labour (\textit{maricho}) is an important source of livelihood in Zensele village, but is associated (by the non-poor) with the ‘lazy’ poor, who ‘don’t plan’. In addition a minority of individuals are involved in artisanal activities, including carpentry, blacksmithing and tailoring. Some villagers have other income generating activities, including beer brewing and NGO supported projects such as soap making, honey harvesting and oil pressing. Barter appears increasingly important, and individuals from neighbouring villages come to barter for food, utensils, soap, matches and new and second-hand clothes, mostly for maize. The two life histories below vividly illustrate the negative impact of sequenced and composite shocks on the lives of individual children and older people.

\begin{center}
\textbf{Box 6}
\end{center}

\textit{Fragmented and imperfect agricultural input markets}

Before the start of the economic collapse, Zimbabwe had considerable success in improving yields in maize through the adoption of green revolution technologies (hybrid seeds and carefully timed fertilizer applications). This resulted in a rapid increase in maize production during the 1980s and 1990s but as the economy moved into sharp recession, the use of hybrid maize seeds has declined substantially, as they have become scarce and expensive. Over 70 per cent of smallholders are now using open pollinated varieties (OPVs) (Bird, Hobane and Zimbizi 2006). Attempts to support food production have included the distribution of improved OPV seeds and fertilizer by humanitarian programmes (Rohrbach, Charters and Nyagweta 2004). Unfortunately, these programmes have been marred by poor quality seed and poor labelling (including a lack of information about whether the seeds are hybrid or OPV) (ibid.).

Availability of seed and key agro-chemicals is highly variable over time and space and even farmers with the money to purchase the increasingly expensive inputs often have not been able to obtain them during the last four growing seasons. Some inputs are available, but selectively. For example, ‘new farmers’ who benefitted from land allocations following the fast track land reform, now receive subsidized fuel and fertilizer from the state. But they commonly sell these inputs on the parallel markets, finding this more profitable than growing price controlled grains. When seed and agro-chemicals are available on the open market, hyper-inflation puts their cost beyond the reach of many peasant producers.

Without fertilizer, yields from the exhausted soil are reported to have fallen by three-quarters, driving many households into a downward spiral of increased food insecurity, income declines and an inability to purchase the next season’s agricultural inputs (Bird, Hobane and Zimbizi 2006: 7). Diesel shortages since 2000 have made transport scarce and increasingly expensive, hampering rural producers’ access to markets.

\textsuperscript{14} A finished pot will be bartered in exchange for a bowl full of maize or a chicken.
Maize, wheat and white sorghum are now classified as ‘restricted crops’, meaning that they can only be sold to the state-owned and administered Grain Marketing Board (GMB) at below export parity. Liquidity problems means that GMB does not collect these crops post harvest, requiring farmers, even very poor ones, to pay their own transport to GMB depots. Richer communal farmers club together to hire transportation for their harvest, but this is expensive, and is likely to exclude poorer farmers and those with limited marketable surplus. These, and other farmers, rely on illegal ‘side marketing’, local agro-processing including beer brewing which is accessible to the labour-surplus less poor farmers and is retained for own consumption.

The sale of maize by the GMB at subsidized prices further distorts local and national food markets. Anecdotal reporting suggests that trade within GMB warehouses creates margins for certain officials (buying maize at consumer market price, reselling at the higher GMB purchase price) and jokes in circulation during 2006 told of lorries driving round in circles, leaving one exit having bought at the consumer price, entering the facility at another entrance and selling at the GMB purchase price, and on and on without unloading.* Despite commercial maize mills functioning at a fraction of their capacity, new mills are apparently being constructed by senior ZANU PF officials, to take advantage of rent-seeking opportunities, because GMB will prefer party-owned mills rather than go to the private sector.

Shifting into the production of uncontrolled small grains might be anticipated but they tend to be labour intensive, are vulnerable to quelea attack and are no longer a culturally preferred food. Local and national markets are poorly integrated and producers with surpluses struggle to sell them. The effects of decades of AREX promotion of hybrid maize are difficult to wipe away, and farmers are now unwilling to adopt small grains or traditional open pollinated varieties of maize. This unwillingness may also be connected with culturally determined gender norms, with small grains regarded as women’s crops and hybrid maize seen as being a male crop.

Tobacco used to be Zimbabwe’s main national industry and foreign exchange earner, contributing 25-30 per cent of total earnings, and at least 6 per cent of total national employment (Woelk, Mtisi and Vaughan 2001). But since 2000 production has collapsed (from 200,000 to less than 50,000 ton per annum) with many of the large-scale white farmers leaving the country to farm elsewhere in the region.

Cotton in many ways mirrors the development of maize production in Zimbabwe, with a highly successful local breeding programme and integrated pest management techniques. At the end of the 1970s, over 90 per cent of Zimbabwe’s cotton was produced by large farms but through the 1980s, government policy supported increased smallholder involvement and by 1990 they were responsible for over 50 per cent of production (Keeley and Scoones 2003). ‘Single channel’ marketing ensured input provision, high-quality produce, and paid highly competitive prices to growers (Tschirley, Poulton and Boughton 2006). This relied on the monopsony enjoyed by the Cotton Marketing Board (CMB), which enabled prices to be fixed through negotiation with the Commercial Farmers Union (ibid.) and these negotiations delivered to farmers the highest prices in the region (ibid.). During the 1990s the cotton sector was gradually liberalized but strict quality controls were maintained and before economic collapse, cotton farmers were able to access inputs and seed relatively easily. However, by 2001 outgrower schemes had become increasingly important, as they enabled smallholders to access inputs (Tschirley, Poulton and Boughton 2006). Within the context of economic collapse, the conditions of cotton’s success—credit, high productivity, and excellent quality cotton exports—may well be hard to sustain and there is now a danger that quality control will decline and Zimbabwean cotton will fail to maintain the excellent prices it has enjoyed on world markets.

In the context of market collapse, and reduced multinational investment, large-farm to small-farm linkages such as out-grower schemes, and conventional contract farming arrangements, have taken a particular significance in Zimbabwe. Cut flowers and horticultural exports dropped to just US$2 million in 2001-02, but bounced back to US$37.3 million in 2003-4, at a time when production became increasingly smallholder-driven, due, in part, to the restructuring of the agricultural sector following land reform. In the context of input scarcity, the supply chains of some smallholder horticultural crops have been vertically integrated (Masakure and Henson 2005), and contract farming offers some ‘islands of normality’ in the context of widespread market failure (Shepherd and Prowse 2007).

Note: In February 2007 the Grain Marketing Board was reportedly buying maize at ZW$52,000 per ton and selling it to politically connected millers at ZW$600 per ton, who then would sell the subsidized maize at exorbitant prices (Zimbabwe Independent 2007).

Father died.

Mother died.

Grandchildren left with them.

She was very bright and was doing well at school but her father refused to pay her school fees. She had to drop out.


Husband became sick.

Lack of money to buy the basics.

Low, fluctuating wellbeing.

Figure 5
Wellbeing map – NATALIE MUSANHI
Life history interview with Natalie and Isaac: reversible ill-health and food insecurity?15

Natalie (57) and Isaac (66) look after seven grandchildren. Two are orphans, but the others were left with them by their daughters when the children were young because the daughters could not afford to raise them in town. Some of the children were just a few months old when they were left with Natalie and Isaac. The daughters are having a difficult time and none of them has sent any money for over two years. They do not support Natalie and Isaac or even visit their own children, but say they will do so when they have some money. Natalie and Isaac have no money for school fees for the children. Previously one of their sons sent them money, but now he has got married and has other obligations.

In 1999 Isaac lost his job with the dairy board, where he worked as a mechanic. This caused a downturn in the fortunes of the household, which was later worsened by both Isaac and Natalie becoming ill. In 2000 Isaac began to have problems with his legs itching. The illness progressed and he began to have problems walking and now he can only walk very slowly and tentatively, supported with a stick. The local clinic diagnosed high blood pressure. He also has slurred speech, which started in 2002, and a painful shoulder. He was given some blood pressure medication but once the tablets ran out, the clinic had no more to replenish his supply. Natalie has a ‘sore stomach’, which she described as ‘a cold uterus’. She was given some medication by the local clinic, who did not tell her what the diagnosis was but advised that she should be treated at the same time as her husband, implying that the problem was a sexually transmitted disease. Her husband has not gone for treatment, saying that they do not have enough money to pay for the transportation to the clinic. Natalie’s symptoms have returned and they are now so severe that she is unable to work.

Natalie reported that since they became sick, they have taken turns to sleep, and they do not have the strength to farm their land, cultivating only two of their eight acres. This provides them with enough food only for three months of the year, and puts the household into a downward poverty spiral. The children are too young to work the land but sometimes they do casual work and get paid in food. They are regarded as one of the poorest households in their community and over the last couple of years they have received food aid for limited periods from the chief and from the World Food Program, but it has never been enough to last through to the next harvest and they have had to limit their meals.

Growing up in poverty, the children are in danger of becoming poor adults. The lack of money for school fees has already resulted in one child dropping out of school. The saddest aspect of this story is that Natalie’s and Isaac’s health could be easily and cheaply improved, but this would require the intervention of a community health worker and the money to pay for bus fare and treatment. With this easy intervention, the fortunes of the household would be at least partially reversed.

15 Interview by Bird (August 2006).
Wellbeing fluctuating around stable average.

1932 1945 1950 1970s 2000s


His legs swell. She goes blind in one eye. Difficult to cultivate land. Cannot afford transport to reach clinic. Receive food from WFP. Two grandchildren drop out of school. Third on BEAME list but punished for non-payment of school fees.

3 children die during 1970s. Both parents deeply affected by grief and stress.

Wellbeing declines.

Stress affects his ability to work.

7 children born.

Got married.

Moved to Bulawayo for work.
Life history interview with Lovemore and Anna: raising children in a high-dependency ratio household

Lovemore Samuel Zenzele (74) is the brother of the local chief. Despite this, he was described by others in his village as one of the poorest people they knew. He is very frail and suffers from painful and swollen legs. His wife, Anna (84) has only partially sight in one eye. Between them, they look after five orphaned grandchildren ranging in ages from 9 to 20. They struggle to feed the family and to keep the children clothed and in school.

When asked to describe changes in their standard of living over time, Mr and Mrs Zenzele said that they were better off when they were a young couple than when they both were children. During his forties Lovemore lived in Bulawayo and felt that he fitted in well. Later Anna returned to Zenzele village because one of their adult daughters died (2001), leaving her three children to be cared for and the couple could not afford to raise them in the city. Lovemore lost his job and moved back to Zenzele village to join the family. Another daughter died in 2003, leaving two more children to join the grandparents in the village. They have lost income and remittances from their adult children but gained dependents:

When we first came from Bulawayo we had some money, but now it has all gone because we are spending money on the children. Things have gone down and down … Things that have made us go down are no work, no food and no money. There are no other households as poor as us in this village. There is no-one in our situation.

In addition, the couple are really too frail to cultivate their land effectively, meaning that they depend on their older grandchildren. Too few workers, the shortage of inputs and the poor soil in the area result in their harvests being too small to provide for the whole household throughout the year.

The Zenzeles have 2-3 acres of land in the village but must rely on others to cultivate it. They depend on the chief to plough and plant the seeds, and their grandchildren to weed the fields and harvest them. They have friends in the village and get support from different people (e.g., salt and soap from the Kraal head, if they ask; second-hand school uniforms from other school children; a dress for one of their granddaughters from a member of their church). They have also received food aid from the WFP, but the food did not last throughout a whole year.

Looking to the future, Anna needs treatment for her bad eye and for high blood pressure, which is contributing to the problem. She has a referral letter from the local clinic, but cannot afford the bus fare to the clinic. Without a more reliable income (or remittances from the children’s parents), it is likely the household will continue to be food insecure and that the children will all have to drop out of school, affecting their future life chances.

These two case studies illustrate how the loss of work in old age can trigger a downward wellbeing trajectory for a whole household. In both cases, the men lost jobs at a time

16 Life history interview by Bird (August 2006).
when they were too old to find new ones. Without a pension or support from their extended families, they have had to rely on their physical ability to cultivate crops. However, in each case, remittances have stalled and have been replaced with additional responsibilities, and their declining health has limited their ability to maintain the household’s food security. In both households, poverty and disease in the extended family resulted in the elder-led household becoming a household unit with an extremely high dependency ratio.

The children in these households are growing up in poverty. They spend much of each year facing food insecurity and the struggle to stay in education. A poor start in life such as this is likely to have a long-run negative impact on their development. Limited education will be difficult to make up later and physical stunting and (possible) cognitive impairment caused by long-run chronic malnutrition will be compounded by the absence of energetic and pro-active parenting. These children will inherit few, if any, assets, and this limits their chances of marriage and future livelihoods. These factors will combine to constrain their chances of escaping poverty.

4 What more can donors do to limit permanent loss of wellbeing?

Should donors provide support to poor people in fragile and failed states? Bluntly put: yes. Without humanitarian intervention and without the type of intervention that helps to slow the erosion of assets and the decline in livelihoods into adverse forms of coping, the poor and very poor are likely to be driven into long-term chronic poverty that is very difficult to reverse. Therefore, there are strong ethical grounds for providing such support. Many bilateral donors have signed up to the human rights-based approach to development. For those that have, then ‘strong but unresponsive’ states are just the types of environment in which the key duty bearer (the government) is likely to be abdicating responsibility for delivering the sociocultural and economic rights of a large proportion of the population (see Figure 1). In such a situation, other actors arguably should step in, if they can.

An argument against intervention is that intervening (even through NGO partners and those directly in support of poor communities) will delay regime change. This appears to propose a form of political conditionality that presupposes a route to regime change. This, in our opinion, is unproven (i.e., that without humanitarian and development support, the citizenry will rise up to depose despotic leaders and find alternative and more benign leaders to govern the country). Furthermore, evidence suggests that regime change involving violent conflict, rather than broad-based political change, imposes disproportionate costs on the poor, who need longer to rebuild their asset base and to recover pre-conflict levels of wellbeing than other groups in society.

The UK aid programme, in particular, needs to take great care in thinking through aid modalities for ‘strong but unresponsive’ states. This is particularly so in a country where any British involvement is likely to be interpreted through a politicized and highly partisan lens. There may be strong arguments for DFID funding interventions through the EU or UN system.
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