FFM PROJECTS REPORT 2017 AND 2018 LINEUP

INTRODUCTION

The FFM is both least contented and largely downtrodden as it reflect upon the annual activities of 2017 and plan those for 2018. Our little contentedness comes from the determination among Matibi people about their prioritized projects. Departments have restated the same list of projects that they had expected to see in 2017 because many of them remain undone due to a slow pace of operation. The reiterated priority list is an indication that when the projects were articulated they were certainly essential because they remain very central even on second thoughts. On the other side we should be dismayed as a development agency to see this level of slowness in our planned projects. While it is acceptable to have a few projects being deferred to next year for any reasonable considerations, it is rather discouraging to see this happening for the bulk part of the annual plan.

THE LITTLE THAT HAPPENED

The year opened with a project backlog in the EEA Department (Enhanced Educationalization Assistance). We had not completed the construction of school toilets in 2016. The project, which consumed an aggregate 6'890 USD (a gross overspending when compared against the initial plan), resumed with a new contractor Godfrey Dzivakwi after Douglas Waza could not finish it in 2016. The project involved constructing 2 blocks of Blair-type toilets with 5 chambers each. Apart from this project, which is still pending official handover to the responsible authorities, we are still to see the implementation of two other projects for which we have already donated funds. These are: anesthetic training/installation at Matibi Hospital and the fencing of 2 community gardens. Since the funds were wired into the hospital account on October 20th, it is now 7 weeks of unsatisfactory feedback from account signatories. Despite this, we have also received a formal request for medical supplies from the same hospital whose banking situation we are still to submit soon to fundraisers. The four components are parts of the Organic Gardening project, whose gardens we have already funded as the first leg.

THE BULK THAT FAILED TO HAPPEN

The expectation was that the school toilets project would take only a month to give way to new projects. However, the groundwork proved trickier than predicted. Quotations were hard to come by. The suppliers sometimes quoted the items which they did not have in stock. Most of the items had to be sourced from more than a single supplier and this had a risk of complicating the transportation arrangements. We had to visit several stores in Mwenezi, Zvishavane and Masvingo to obtain the needed materials. For some items, the prices were hardly constant, forcing the disorderly tendency to do quotations on the day of purchasing. Worse still, there was no

readily available own transport at Matibi Mission to ferry materials from the city. All these challenges caused the groundwork for this project to take several months instead of just a few days.

When the materials were finally procured, it appeared that some items were still undersupplied. We had to go back to the suppliers to top-up items like roofing sheets and paints. While the idea of working with local village contractors was popular in the first instance, it came out to be rather unhelpful because of the said anomalies. Thank goodness the toilets were finally constructed and finished but it took a whole lot of pressure, some of it coming from things that we could have prevented but most of it coming from the national economic atmosphere.

By the time the toilets were finished in August, a host of 2017 lined up activities were behind schedule already. So we were supposed to pick pace but still we faced challenges. First we turned to the LSI (Livelihoods Support Intervention) department and selected the fencing of gardens for organic agriculture as stated above. Even this project had to be hindered by the same glitches that affected the toilets project: the dried-up supply. At the same time we selected the anesthetic training project in the CHS (Comprehensive Healthcare Support) department for simultaneous implementation. However, although the financers appropriately released the funds, the same old problems associated with Mission protocols seem to be affecting the pace of the projects. The funds for garden fencing and anesthetic training were deposited into the hospital account but the signatories seem to be dragging their feet to release these monies, even to acknowledge receipt. They seem to totally lack a sense of urgency in the projects and this also defeats the whole purpose of depositing the funds into this account in the first place. Yet worse still the same authorities have prevented the setting up of an FFM Trust which would have operated with its own Trust Account with signatories who are not too powerful to cooperate.

The prevailing problems explained above are weighing down the long list of lined up projects. For example, we expected to see medical supplies each year but the year 2017 has passed without such an indispensable project. It is pleasing however that we have stuck to our strategy of funding the projects in small episodes. Otherwise we could be talking about huge sums of money locked up in a church-owned account.

FFM PROJECTS LINEUP FOR 2018				
	Dept.	Project Priorities		Bens. Cont. ¹

5,000

12,000

4.500

5.000

10.000

3,500

3,500

3,000

3.000

3.000

117,800

300

0

2,400

1.500

2,000

2.000

700

700

600

600

600

24,160

60

FEM DDO JECTS I DJELID EOD 4410

Medical Supplies (worth)

Drip irrigation equipment

Completion of staff house

Ceilings (new classes)

Classroom furniture

Incinerator

Surgical visits

Solar boreholes x 2

Ceilings – ECD

New textbooks

GPS gadget

CONCLUSION

TOTALS

CHS

SLI

EEA

The state of affairs in our projects is such that we SHOULD earnestly reconsider our mode of operation. It is surprising to note that the projects are facing challenges unrelated to funding sources. Nationwide the problem is the diminished funding base but at Matibi even the available funding relationships are underutilized and the funds continue to appear unsafe. The beneficiary matrix is divided between the seriously needy underclasses on one side (who have shown keenness to cooperate) and difficult Mission authorities on the other side. For shortage of ready ideas, I would suggest linkage contracts with other agencies like established NGOs so that the projects and the funds are no-longer limited to and controlled by Matibi Mission but by a community of partners (joints). This is what the big funders such as the European Union are advising as a best practice: that the implementers form consortiums to conduct projects collectively for checks and balances. Better still, if it were possible it was advisable for FFM to re-pursue the Trust option once again, which Trust will then enter joint contracts as a proper juristic entity. The sooner we depart from Mission-dominated

% Bens.

Cont.

0%

20%

33%

20%

40%

20%

20%

20%

20%

20%

20%

21%

Donation

5,000

9,600

3.000

3,000

8,000

2,800

2,800

2,400

2.400

2.400

93,640

240

¹ Bens, Cons, is abbreviation of Beneficiaries' Contributions

decision-making, the better for our projects but if we continue to be under the false comfort of the Church we may continue to face disappointments while we also disappoint the disadvantaged villagers.