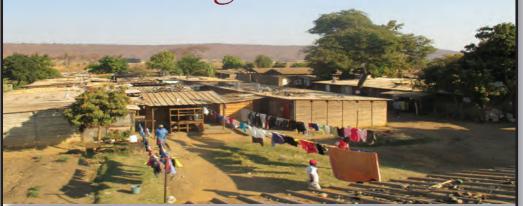
Introducing Cassa Banana







Produced by Cassa Banana Community Health Committee and Cassa Banana community photographers



in cooperation with Training and Research Support Centre (TARSC) and Zimbabwe Association of Doctors for Human Rights (ZADHR)



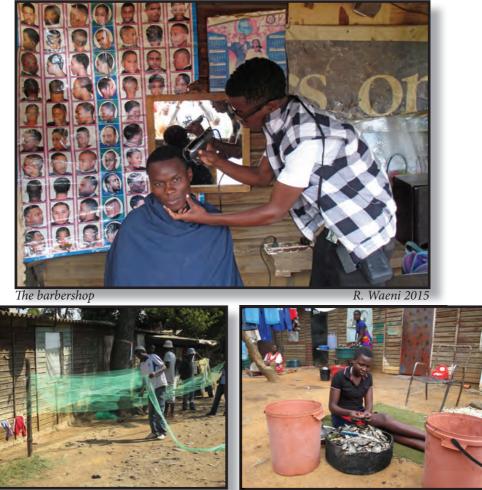
Who we are and how we live

Cassa Banana is an informal settlement situated about 28kms from Harare along the Bulawayo Road, close to the Morton Jeffrey Water Works. Many of us came here in the early 1990s when the Harare City Council offered temporary housing for people on their housing list. There are also a few people who have lived here since the 1970s when one-roomed wooden cabins and communal ablution blocks were built for the construction workers at the Water Works. There are now approximately 850 men, women and children living in Cassa Banana, still using the same ablution blocks and living in either one-roomed or two-roomed wooden cabins. We are supposed to pay USD 17.00 a month per room to the Harare City Council (HCC) which covers our rent, water and sewage rates, but not all of us manage to do this.



At the tuckshop

P. Domingo 2015



Repairing fishing nets

M. Musodza 2015 Prepairing fish

Mharadze 201'

Most of us in Cassa are unemployed. But we live by growing some of our food, selling fish which we get from Lake Chivero a few kilometres away, providing services such as hairdressing or carpentry, or through selling vegetables, meat and other goods we get from town. Some of us also manage to find part-time work in the surrounding farms.

We produced this book so we can tell more people about the issues we see affecting our health and wellbeing and what we are doing about it. We want to build an understanding of our situation, and support for what we are doing to improve it. All the photos you see were taken by 9 members of our community who were chosen to be trained as community photographers so they could present our situation in a visual way.



Porta Primary School in reflection

L. Dhumukwa 2015

The box below tells you a little more about us and our environment. You'll see that we have few resources but, what we do have, we use as best as we can.

Cassa Banana - Facts

- 850 people, 64 single-roomed and 38 double-roomed wooden cabins
- 2 communal ablution blocks: include 48 toilet holes (24 for women, 24 for men), 4 showers (3 for men, 1 for women), and 5 working taps for drinking and laundry
- Our main health problems defined by our community: parasitic infections, diarrhea, TB, HIV
- Nearest public sector clinic: Kuwadzana, 20km away; Norton Hospital, 13km away
- Nearest private sector clinic: BevKing Clinic, 800m away, where we pay USD 5 per consultation.
- 2 government primary schools (Porta and Kintyre) and 1 government secondary school (Porta) close by.
- Organisations: Residents Committee formed in the 1980s, Community Health Committee formed in February 2014, Village Health Worker, HCC worker for cleaning the ablutions; Neighbourhood Watch Committee
- Community groups: church groups, savings clubs, HIV support group, youth group, traditional dancers, soccer and netball teams, Federation housing coop groups
- ...and now we also have 9 community photographers!

These are our challenges...

While we understand that we have many problems related to overcrowding, the condition of our homes, little income, HIV and more, the CHC has identified the water and sanitation crisis as top priority in Cassa Banana. We have serious problems with burst water pipes and a blocked sewage system. Most of our municipal water taps have not been properly repaired or replaced in a long time and sometimes the sewage seeps into our water supply through the broken water pipes. As a result, the sewage is polluting our drinking water.



Burst water pipes at the ablution block

We are trying to keep our communal toilets and surrounding areas clean but this is difficult when the toilet flushing system is not working well due to corroded piping, we have no cleaning materials and no metal bins to throw away our rubbish. The council trucks used to come to Cassa once a week to collect our rubbish, but they haven't come now for many years. So, we dig communal rubbish pits, but these get filled very quickly.



T. Rwanyanya 2015



The toilets

M. Mharadze 2015



The rubbish dump

L. Dhumukwa 2015



A breeding ground for water-borne diseases

M. Mharadze 2015

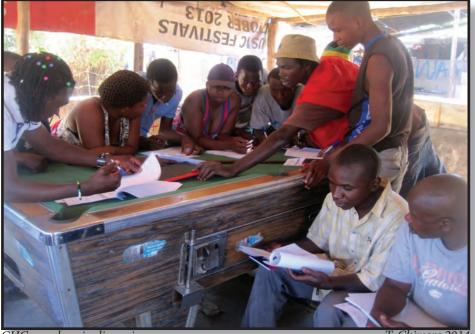


Children exposed to water-borne diseases

L. Dhumukwa 2015

In such an environment, it is not surprising that we have related health problems, such as intestinal parasites and diarrhea.

...and this is what we are already doing about it



CHC members in discussion

T. Chiware 2014

Like many other communities in Zimbabwe, we are not sitting back and waiting for others to help. We are taking the initiative. For many years now, we have been fixing our water leaks, clearing out our overflowing sewage tanks, cleaning our ablution blocks, digging rubbish pits, and organizing community cleanup campaigns. The Community Health Committee developed an Action Plan in 2014 and this has helped prioritise our work. We hold regular community meetings.

We have also strengthened our relationship with Bevking private clinic who have helped us in many ways. This year they provided us with deworming tablets. They have also helped with HIV testing and counselling.

We are in regular contact with the Harare City Council and they are aware of our problems. They say they are struggling to keep up with the overall situation in Greater Harare, but they have agreed to provide the labour and technical knowhow if we can supply the plumbing materials.



Keeping our community clean

L. Dhumukwa 2015



P. Dimingo 2015



M. Musodza 2015



L. Dhumukwa 2015

D. Hondongwa 2015

We want to do more!

We will carry on organizing ourselves and doing what we can to improve our environment. But there is only so much we can do with an old and decaying water and sewage system. Fortunately, we have many willing hands in our community and a few people with plumbing knowledge. The City of Harare has also agreed to provide technical input. But, we don't have the funds to buy the materials. So, this is where we need outside help. The CHC has prepared a plan and budget which lists in detail what resources we need to:

- repair the water leakages close to the ablution blocks and improve our water supply
- install pipelines from the septic tanks into the municipal sewer system to prevent the overflowing of waste
- improve our rubbish collection through the provision of metal rubbish bins

We are eager to share our plan and budget with you, so please contact us through the CHC Chair, Martin Musodza, cell phone 0774 415 652 or the Residents Committee Chair, Paradzai Domingo, cell phone 0772 801 752.

Thank you for reading our booklet, we hope you enjoyed looking at our photos, and we look forward to meeting you at Cassa Banana



Bevking Clinic P. Wachipa 2015



Bevking Clinic T. Rwanyanya 2015



Youth drama on

T. Chikware 2014



D. Hondongwa 2015



Community photographers

P. Wachipa 2015



R. Waeni 2015



M. Ncube 2015

How we produced this booklet

Since February 2014, the Zimbabwe Association of Doctors for Human Rights (ZADHR) and Training and Research Support Centre (TARSC) have been working with people in Cassa Banana to improve our living environment and our relationship with local authorities. Using Participatory Reflection and Action (PRA) approaches, we identified our health needs, developed a community action plan with markers to measure progress, and formed a Community Health Committee to coordinate this work. In recent months, TARSC and ZADHR have helped us train 9 community photographers who took all the photos for this booklet. We wanted to document our experiences and actions through the use of images. We also worked together in designing the content of this booklet and in costing our plan.



Community photographers

We especially want to thank:

The Community Photographers and members of the Cassa Banana CHC and Residents Association involved: Leeroy Dhumukwa, Paradzai Dimingo, Dephine Hondongwa, Misheck Mharadze, Martin Musodza, Mitchell Ncube, Talkmore Rwanyanya, Pamela

Wachipa, Ruth Waeni

Barbara Kaim and Mevice Makandwa from TARSC

Tatenda Chiware from ZADHR

Jon Pilch and Laurie Macpherson from Macpherson Photography

Sister B. Muzambeta from Bevking Clinic

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Front page photos (clockwise) L. Dhumukwa D. Hondongwa M. Mharadze,