



The Journal of the Britain Zimbabwe Society

BZS is 40! See page 15 for details of a special 40th anniversary meeting on 12 June 2021

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At the Deep End

The following is a summary by Dr Sunanda Ray of a paper published at the end of 2020, *COVID-19 Experiences of Zimbabwean Health and Care workers in the United Kingdom*, by Dr Beacon Mbiba and others. For further details, see the box at the base of page 2.

The UK's Office for National Statistics (ONS) census data (2019) gives an official estimate of those born in Zimbabwe living in the UK at 128,000: the third largest African-born group after those born in South Africa (251,000) and Nigeria (215,000). By April 2020, those born in Zimbabwe made up eight per cent of the known UK healthcare workers who had died of COVID-19.

The **Zimbabwean Diaspora Health Alliance** (ZDHA – see page 3, box) set up a Zoom discussion forum in April 2020.

Participants ranged from over 400 during the first two months to around 150 in some weeks after July.

Participants were UK-based Zimbabweans, later joined by individuals from other BAME groups and those living in Zimbabwe. The ZDHA also conducted an online survey to capture key experiences of participants of the Zoom discussions.

Participants were eligible if they were 18 years or

older, UK based, of Zimbabwean heritage and had given consent for their information to be used.

Policy documents, reports and news articles were also reviewed to provide context details for the study.

This paper presents an analysis of data from the online survey of 103 respondents conducted by ZDHA, notes from the weekly Zoom discussions together with the document analysis, to establish and examine COVID-19 experiences of Zimbabwean health and care workers in the UK. A summary of results is presented here.

Key points from the results

1 The availability, accessibility and utilisation of Personal Protective Equipment (PPE) in the workplace was a major issue. For 63 per cent of the respondents, PPE was an issue of concern with 20 per cent indicating that it was of extreme concern. Nurses, especially agency staff, were scared and anxious about availability of PPE and being deployed to work in COVID-19 wards.

Becoming sick meant a loss of income, especially for those on zero hours contracts. This meant they would still go to work even if they were ill or faced working with inadequate PPE.

Some opted to stop working and to forgo the money, but did not know how long this could be sustained. There were also implications of not working for reduced remittances to send to family in Zimbabwe at this time of great need, when many were in lockdown and not working.

2 One in five survey respondents felt that PPE allocation favoured white people relative to non-white people because of underlying institutional racism. The COVID-19 pandemic had exposed longstanding inequalities including of racial discrimination. Others commented on the Zoom discussions that they felt well looked after in their workplaces, especially after it became known that BAME staff were at higher risk of infection.

Guest speakers at the Zoom forums shared personal experiences of how progress can be made in dismantling institutional racism in the NHS.

3 Nurses felt that there were informal institutional unfair practices, especially for those employed by

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agencies. Agency nurses were placed in high-risk areas and reported being victimised if they requested appropriate PPE or requested not to be allocated to COVID-19 wards because of co-morbidities or vulnerability.

There was inexperience with procedures of 'donning and doffing' PPE especially in wards such as in mental health wards, where the use of such equipment was not routine.

In instances where agency staff brought their own PPE, duty managers sometimes asked them to take it off. Knowledgeable and more empowered colleagues intervened to rectify the situation, escalating the matter to more senior managers.

- 4 In the early stage of the pandemic (March – April 2020) workers and managers were not properly prepared for what they would experience during COVID-19; a gap that heightened risks of moral injury (the social and psychological harm that arises from a betrayal of one's core values, such as justice, fairness, and loyalty) and mental ill-health – especially when heavy work-loads and burn-out aggravated the situation.

Individuals reported feeling stressed, fearful, helpless, that they would die if they were infected. This was especially traumatic through being in a foreign land, far away from family.

Many lost work colleagues and close relatives and feared taking the infection from the workplace home to their families.

They knew colleagues who were continuing to work despite having symptoms, while they waited for

results, so were very fearful of the reality of their exposure. Social distancing and lockdown made it difficult for Zimbabweans to support each other when there were deaths due to COVID-19.

- 5 Through the Zoom discussion forums those with more expertise were able to give advice and provide reliable information on procedures and regulations to others. Where official information was slow to come and not trusted, participants were receptive and trusting of the information provided at the forum. Sharing experiences in an environment of trust such as the Zoom forum had a therapeutic effect on some participants.

Socioeconomic and demographic features of respondents

- 1 While most participants were from London and south-east England, there was a significant presence of Zimbabwean participants from most urban and coastal settlements of the UK. This reflects the areas of UK's care deficit and need especially for social care as well as spatial outcomes of the asylum-seekers/refugees dispersal policies of past governments since 2000.
- 2 The majority of survey respondents were women (78 per cent) which fits with the sex distribution of women and men from Zimbabwe. ONS data for 2019 shows that the sex ratio for Zimbabweans in the UK is 71 (men to 100 women) compared to 95 for South Africans and Nigerians, 105 for Kenyans and 92 for Ghanaians. Within the Zimbabwean community, it is women who dominate the health and social care sectors. They therefore had higher occupational risk of exposure to COVID-19, which in turn translated to risk for their families and the resultant reported hospital deaths of more than thirty in the first months.
- 3 Eighty-nine per cent of respondents were born in Zimbabwe; 74 per cent were naturalised British citizens (this is consistent with the 66 per cent from ONS 2019 data); 21 per cent reported to be on indefinite leave to remain (ILR); the remainder were refugees, asylum seekers and those with other legal status to remain in the UK. None of the survey respondents identified themselves as students or as illegal immigrants.
- 4 Respondents were aged between 25–75 years old, with 38 per cent aged 36–45 years and 32 per cent aged 46–55 years, reflecting the workforce age of migrants. The authors comment that older people wishing to migrate to UK were often refused visas and retired UK residents preferred to return to Zimbabwe, which may explain the low numbers of older people in the study group.
- 5 Respondents reported that they came to the UK for employment (34 per cent), to further their studies (18 per cent), for economic reasons (15 per cent) and family reunion (16 per cent), with only 13 per cent

At The Deep End

This article is a summary of a paper: *At The Deep End: COVID-19 experiences of Zimbabwean health and care workers in the United Kingdom (Journal of Migration and Health Volumes 1–2, 2020, 100024) (<https://www.sciencedirect.com/science/article/pii/S2666623520300246>). Its authors are:*

Beacon Mbiba: *Oxford Institute for Sustainable Development (OISD), Oxford Brookes University, Gypsy Lane, Oxford OX3OBP*

Brighton Chireka, Edward Kunonga: *Zimbabwe Diaspora Health Alliance (UK) (See opposite page.)*

Kudzai Gezi: *Independent Researcher, Derby DE23 3EP*

Paul Matsvai: *Zimbabwe Diaspora Network (UK), Sheffield S9 4NT (ZDN) 'a voluntary coordinating body of all registered organizations concerned with social, economic, political development of the people of Zimbabwe.' (See: <https://zdnuk.org/membership/>)*

Zeb Manatse: *Independent Researcher, Milton Keynes and PhD Candidate, University of Northampton.*

reporting political persecution as the reason for exit from Zimbabwe.

Although a small proportion, this last group may need attention as they are likely to be amongst those with traumatic experiences from the contemporary socio-economic and political upheavals in Zimbabwe.

- 6 Respondents were from Harare (31 per cent), Bulawayo (13 per cent), Manicaland (15 per cent), Mashonaland West (11 per cent), Midlands (10 per cent), Mashonaland East (eight per cent) and Central (six per cent). The authors comment that migrants from Masvingo, Matabeleland North and South would tend to head to South Africa rather than UK.
- 7 Almost 63 per cent of respondents were nurses while medical doctors made up only one per cent of respondents. Six per cent were health care assistants; four per cent were social workers; five per cent were key workers other than in health care; the rest identified themselves as midwives, health visitors, radiographers, physiotherapists, occupational health workers, a bio-scientist, and a college lecturer.

The authors comment that many Zimbabweans are qualified as nurses but working as care assistants on zero-hour contracts through agencies (mainly as a second job/agency and bank staff) so would most likely identify themselves as nurses rather than health care assistants.

- 8 The highest academic qualifications were Master's degree (33 per cent), Bachelor's degree (36 per cent), diploma/vocational qualification (eight per cent), other professional qualifications (eight per cent). They are also highly experienced professionals; at the time of study, 57 per cent of respondents had over 15 years of work experience.
- 9 Most respondents were married and lived with their spouses in the UK (62 per cent) compared to two per cent whose spouses were living in Zimbabwe; 27 per cent were single, four per cent divorced, two per cent separated, one per cent unmarried living with a partner and two per cent widowed; 60 per cent were home-owners and 40 per cent lived in rented accommodation; 54 per cent respondents had one child born in the UK with 40.6 per cent reporting at least two or more children born in the UK; 49 per cent of respondents lived in households without children aged below 16 years.

Recommendations from the authors

- 1 Policy-makers need to
 - Take into account the diversity within and between BAME groups rather than generalising from the whole collective non-white experience. This study shows how the Zimbabwean diaspora (born in Zimbabwe) differs from other BAME groups especially in sex and health occupation.

Zimbabwean Diaspora Health Alliance



This organisation's Facebook page describes its purpose as being an 'alliance of all Zimbabwean diaspora groups that are involved in work that promotes, restore and maintain health of the people of Zimbabwe. Coming together is to scale up our projects, learn from each other and also to make sure that we cover every part of Zimbabwe.' See: <https://www.facebook.com/groups/525768257806126/about>

- Go beyond the broad statistics and listen to the qualitative testimonies of different groups such as the workers in this study.
- 2 More support should be provided to community-based social formations so as to enhance their role in the co-production of disaggregated knowledge on old-age health, childcare, decent work, mental health and behaviour change issues occasioned by COVID-19.
 - 3 Monitoring of and research on how individuals and institutions deal with moral injury and mental health in different phases of COVID-19, including the need to better understand the vulnerabilities of foreign-born workers who carry legacies of trauma from their home, concerns with what happens in their home countries, including the inability to participate in critical rituals such as burial of loved ones while facing daily experiences of racism in the host land. This monitoring should lead to sharing of good practices, positive outcomes and experiences. Community therapy to support people trying to deal with these traumas should be provided.
 - 4 In-depth enquiry is needed on issues of dealing with bereavement in the diaspora, issues of resilience and the role of cultural resources, the role of spirituality in communities faced with disasters in western societies; and how to build bridges with knowledge from developing nations.

In conclusion

COVID-19 has given everyone an opportunity to recognise structural racism and inequalities and to take action to dismantle global and local structures perpetuating them.

Summarised by Dr Sunanda Ray

Sunanda Ray is a doctor who has worked in Zimbabwe, Botswana and Britain for more than 30 years, mainly in public sector health services. She has had a longstanding involvement in health and human rights and is now working for the University of Botswana Faculty of Medicine.

For details of literature review, methodology and references see original text citation given in the box on page 2, opposite.

Linking Cambridge and Harare Gracious Musariri describes a partnership between two hospitals in very different places, both facing the COVID-19 challenges

On 9 December 2020, Zimbabwe Health Training Support (ZHTS) and Cambridge Global Health Partnerships (CGHP) collaboratively hosted a Global Health Café (see opposite) on Zoom.

The two bodies sought to explore the scope for global health partnerships and shared learning between Parirenyatwa Hospital (Zimbabwe) and Cambridge University Hospitals (United Kingdom). The partnership was facilitated by Dorcas Gwata, a Global Mental Health Specialist and The Royal Society of Tropical Medicine and Hygiene (RSHTM) Policy Adviser – and co-founder of the Global Health Café.

The Café attracted an audience from all over the world, including Zimbabwe, the UK, Myanmar, and USA. There were insightful presentations from the speakers: Professor Rashida Ferrand, Dr Elinor Moore, Tarisai Bere, Dr Tinashe Goronga, and Lynn Mwawa.

Creative award-winning Zimbabwean poet, Ndi Rayanne, took the audience's breath away with his personal narrative on the anxiety and uncertainty he experienced during the first lockdown.

Background

Parirenyatwa Hospital – also casually referred to as Pari – is located in Harare. It is one of the largest hospitals in Zimbabwe with an in-patient capacity of 1800 beds. The hospital encompasses four units: the main hospital, Mbuya Nehanda Maternity Home, Sekuru Kaguvi Eye Hospital, and Annexe Psychiatric Unit.

The hospital has been around for many years as a teaching hospital that has trained many nursing and medical students from the University of Zimbabwe. In April 2020, The Parirenyatwa COVID-19 Management and Treatment Centre was erected in response to the rising COVID-19 cases in Zimbabwe at the time. Professor Rashida Ferrand is the lead physician managing a team of clinicians in the unit.

Cambridge University Hospitals (CUH) comprises Addenbrooke's hospital and Rosie hospital, both of which are located in Cambridge, in the east of England. Addenbrooke's hospital is internationally known for its research and for providing up-to-date specialist treatments. It has an inpatient capacity of 1000 beds.

Like Parirenyatwa, CUH is a teaching hospital that has trained many medical and health students – these are from the University of Cambridge. Addenbrooke's also had to rapidly respond to the rising cases of COVID-19. Dr Elinor Moore, who is a consultant in infectious disease, is leading a team of clinicians to manage and treat patients presenting with COVID-19.

The discussions

Dorcas Gwata opened the Café with a reflection on the momentous impact COVID-19 had had on the entire world.

Commenting on the necessity for global health partnerships, Dorcas stated, 'Above all COVID has taught us we are all in a global village. This pandemic has impacted the whole world, and because of that, there is need for more collaboration and partnerships in global health.'

The Global Health Café drew a comparison between the experiences of Parirenyatwa hospital and CUH.

Professor Ferrand and Dr Moore each gave their account of the challenges they faced on the ground in their respective hospitals. Professor Ferrand described the lack of basic equipment, vital drugs and PPE at Parirenyatwa Hospital which made it very difficult to provide effective care.

Similarly, Dr Moore discussed the nationwide shortages of PPE in England during the early days of the pandemic and how this invoked panic and fear amongst health workers and the wider public. In the same vein, Professor Ferrand spoke about staffing shortages and low morale amongst the staff who were already working.

This issue was echoed by Dr Moore as she discussed the physical and psychological impact the pandemic is having on the workforces as their resilience is often tested throughout. Professor Ferrand highlighted the lack of guidelines for treatment and she described how this caused further dismay amongst staff and patients.

A key point raised by Professor Ferrand was that there seemed to be a knowledge gap amongst nurses as they often overlooked urgent 'see by doctor' incidents and were not always escalating abnormal vital

sign readings in a timely manner. She acknowledged this is a long-term need for frontline clinicians in Zimbabwe. To summarise the above in few words, one attendee stated, ‘The contrasts between Harare and Cambridge experiences of COVID-19 are not quite as great as one would think.’

There is an opportunity for shared learning between the two hospitals. There appears to be a silver lining: Professor Ferrand and Dr Moore both emphasised that they have witnessed recoveries and observed the unity and resilience amongst health professionals. Both clinicians spoke confidently about the developing insights into COVID-19 as the world learns more about the virus.

Global Health Café

Global Health Café is a hub that discusses and analyses issues in Global Health, inviting new thinking, critiquing and sharing of ideas.

See: <https://www.facebook.com/Global-Health-Cafe-171796883483008/> and <https://www.thet.org/advisors/dorcas-gwata/>

Frontline workers

The Café looked at how the pandemic has caused trauma amongst many frontline workers, in Zimbabwe and the UK alike, who have shared the difficult experiences of losing patients and colleagues.

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The Kiwi and the Zimbabwe Bird

Stanley Makuwe describes how his play Black Lover has educated New Zealanders about one of their most remarkable men

I have lived in New Zealand for over 18 years. Over that time, curious ‘Kiwis’ (New Zealanders) have often asked me where Zimbabwe is, or if Zimbabwe is in South Africa. (‘No it’s not in South Africa, but it IS in AFRICA’.)

I return the favour by asking them if they know that Zimbabwe and New Zealand have strong links, like blood brothers. And of course the question is met by a big ‘NO.’

Then I have gone on to explain the reason why, telling a story about this Kiwi man called Garfield Todd who came from a small town in New Zealand to Zimbabwe (then Rhodesia) as a church missionary only to end up being prime minister of the country, and how he became part of us and fought for our rights and freedom, and suffered for this.

Again, the answer is a big, ‘NO WAY!’

He is bigger than Sir Edmund Hillary! ‘NO WAY!’

And he is as cool as Eminem! ‘NO WAY!’

Then three years ago, I thought, why not write a play about this man so I can educate ‘these people’ about one of their own? And my play, *Black Lover* was born.

The title comes from Sir Garfield Todd’s own words when he explained that fellow whites who were not happy with what he was doing called him ‘a race traitor, a black lover’.

To show their displeasure at his work towards black freedom, fellow whites even released a baboon into the city of Salisbury, (now Harare) carrying the threatening message, ‘Todd – and everything he

stands for – must be shot.’

Black Lover is not meant to rewrite historical facts, but to bring back to the forefront one Kiwi man’s fight for freedom and equality.

About Garfield Todd

Garfield Todd was born 1908, in Invercargill, a remote city, right at the very bottom of New Zealand’s South Island: it is one of the southernmost cities in the world.

Todd arrived in Zimbabwe (then Rhodesia) from New Zealand as a church missionary in 1934. He ran the Dadaya New Zealand Churches of Christ Mission school and a clinic, where he and his wife, Grace, treated minor injuries and delivered hundreds of black babies without any formal medical training.

Todd then got caught up in the political wave that gripped the African nation, winning an election to the colonial parliament in 1948, and then rising to become its prime minister in 1953.

At the time, the country was under white minority rule: black Africans were not allowed to vote, and their education opportunities were limited.

Todd introduced modest reforms aimed at improving the education of the black majority, directing tax money from white property owners and British colonial authorities towards black schools. He also increased the number of blacks eligible to vote from a mere two per cent to 16 per cent of the electorate.

His belief that blacks were as capable as whites did not go down well with fellow whites, whose

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Cameron Rhodes (as Garfield Todd) and Simbarashe Matshe (as Steady).

'Putting an older white male on the stage with a young black man is,' says Makuwe, 'a political statement and a way to reflect on the conversations still to be had.' (NZ Herald (<https://www.nzherald.co.nz>))

Photo © Stanley Makuwe

Todd play: continued from previous page

hostility resulted in him being abandoned by his whites-only cabinet.

In the 60s, a new government led by Ian Smith arrested him and threw him in a prison for blacks. He was later placed under house arrest.

Story background

My play is set in 1965. Garfield Todd has become increasingly critical of white minority rule in Southern Rhodesia and is an outspoken opponent of the current Prime Minister, Ian Smith, who has made a Unilateral Declaration of Independence of Southern Rhodesia (UDI) from the United Kingdom.

Todd has applied for, and been denied, an exit visa to go to the University of Edinburgh to educate British public opinion on the inequalities of white rule. The Rhodesian government has banned his emigration, placing him under house arrest.

House arrest

My two-character play focuses on the period when Garfield Todd was under house arrest, the war was raging, his family are all away in Rome for his daughter's wedding, while he was confined to his house with his black helper/servant.

The two characters are Garfield Todd (57 years old), former Rhodesian Prime Minister (played by Cameron Rhodes), and Steady, his cook/servant (in his 20s or 30s – played by Simbarashe Matshe).

The play is a historical piece, which focuses on race relations in a war-torn African nation while it looks at one man's fight for freedom and equality in Africa.

Though based on true events, the play is not meant to rewrite, but it is the writer's own imagination of what could have been happening in Todd's confined situation and in the outside surroundings, as well as

the mental turmoil resulting from being in such an environment.

Even though the play is set in the 1960s, the story remains relevant today as the world fights to eliminate racial discrimination, human rights abuse and slavery in favour of justice, equality and freedom.

Though the play touches on serious issues, humour drives it from start to end as the two characters, locked away from the outside world with little freedom, with a gunfight going on at their door-step, engage in conversations on issues such as race relationships, marriages, family, sex, religion and the challenges of being black and white in Africa.

Finally

'The whole earth is the sepulchre of famous men. They are commemorated not only by columns and inscriptions in their own country but in foreign lands also by memories graven not on stone but on the hearts of men' – oration by Pericles. (*Stolen from Auckland Museum.*)

Stanley Makuwe is an award-winning playwright based in Auckland, New Zealand.

Writer's note:

I would like to thank the Auckland Theatre Company and The Auckland Arts Festival for bringing this play to life. I am forever grateful to the Todd family – Judith, Geoff and Glenys, ATC's Philippa Campbell, Colin McColl and Lynne Cardy, Playmarket's Murray Lynch and Stuart Hoar, Margaret-Mary Hollins, my good friends Francois Byamana, Glyn Skipp and Tawanda Manyimo, Wanjiku Kiarie, Auckland Council's Creative Communities, Zimbabwean theatre producers Daves Guzha and Cont Mhlanga, and my family and my workmates. *Stanley Makuwe*

Cambridge and Harare – continued from page 5

Tarisai Bere, a clinical psychologist in Zimbabwe, presented her views on the provisions needed to support frontline clinicians' mental health in future. Tarisai was recognised for the support she provided to medical students at the University of Zimbabwe throughout the first wave of the pandemic, and the positive impact this had on their academic outcomes.

During her presentation, Tarisai emphasised the importance of supporting frontline workers now and post-pandemic. She also touched on how we can utilise technology to bring people together to learn about mental resilience and to share experiences.

The last presentation was by Dr Tinashe Goronga and Lynn Mwawa who are both based in Zimbabwe. Dr Goronga passionately spoke about how the partnership can facilitate more discussions about global health equity. He echoed Professor Ferrand's observation of the stigma associated with certain health conditions in Zimbabwe, including COVID-19 and HIV.

Following on from that, he gave insight into the positive outcomes he's observed from delivering educational workshops to the community on subjects such as sexual health, mental health, men's health, and more.

Lynn Mwawa, who works closely with Dr Goronga, presented on her work as project lead for the Gogo Project – a community project supporting

grandmothers in Mbare throughout the pandemic by delivering groceries and offering mental health awareness. Lynn spoke about her desire to become a social worker in Zimbabwe and how mentorship through the Gogo Project has helped her develop essential skills.

Next steps

The Global Health Café set out to explore the scope for a partnership between ZHTS and CGHP. The insights gained from the discussions will help the two organisations to map out the desired outcomes and actions for the partnership. Both organisations will need to start identifying champions from within the hospitals who will help to push the agenda forward.

In the early stages, there is clear scope for both organisations to deliver e-learning workshops to frontline workers at Parirenyatwa Hospital and at CUH. These can facilitate the transfer of knowledge and can focus on topics such as clinical observation, men's health, and mental resilience, to name a few.

Additionally, the partnership can help to create mentorship relationships between clinicians by forming meaningful networks of health care staff from different disciplines and grades.

Gracious Musariri is a mental health practitioner with a clinical background in acute mental health care and mental health assessment and liaison, working in south London.

Time On Your Hands? Murray McCartney chooses some books to raise the spirits in dark times

Greetings from the 'Z' component of the BZS to the 'B' one; from Harare, to the diaspora.

After the year's tear-inducing start, and as you riffle through the Netflix catalogue to find something – is there anything? – that you haven't seen before, we offer balm to ease your confinement. And if you think that Zimbabwe's an odd place from which to summon comfort, think again.

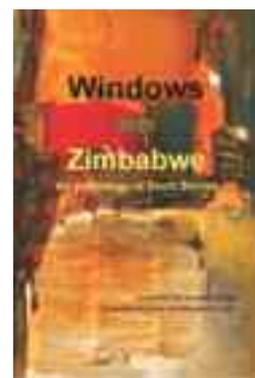
From Weaver Press: anthologies ...

Weaver Press has been nurturing the literary garden here for over twenty years. The harvests have been modest, to be sure – we're not Faber, or FSG, after all – but there are several tasty morsels that you may not have sampled.

For instance, Irene Staunton's



first anthology of short stories, *Writing Still* (2003), is a resting-place for a number of fine writers who've left us in the interim: Julius Chingono, Alexander Kanengoni, Charles Mungoshi, Freedom Nyamubaya, Yvonne Vera, Bill Saidi and Stanley Mupfudza, all of whom deserve a place in the pantheon.



Several anthologies followed, but there's no need to worry yourselves about which stories best reflect the country's recent literary history – the job's already been done for you. A former Weaver Press intern, the Berlin-based Franzi Kramer, got together with her lit-prof father, Jürgen, to compile a thematic selection, *Windows into Zimbabwe* (2019), in which they assemble the cream of the crop, and provide an

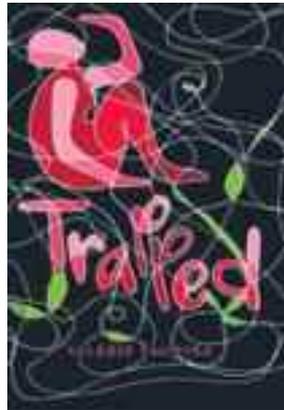
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Pandemic reading: continued from previous page
 introductory overview, casting light on the relationship between fiction and society.

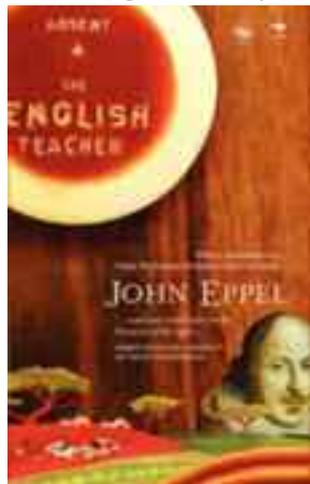
And if you're looking for a single-author collection, it'll be hard to cap Julius Chingono's *Not Another Day* (2006), a cocktail of poems and stories showcasing his playful imagination, narrative lilt, and satirical wit.

... and Harare life

For those of you having trouble imagining what life is really like in contemporary Harare, look no further than Valerie Tagwira's latest novel, *Trapped* (2020), a fine capturing of the zeitgeist. Sarah Ladipo Manyika says: 'For a window into Zimbabwe today, this is the book to read.'



Trapped – necessary though it is – may not be a barrel of laughs, so why not leaven it with John Eppel's



Absent: The English Teacher (2009)?

When I sent a copy to my own former English teacher, the poet John Mole, now retired in St Albans, he responded: 'I've now read John Eppel's novella, and what a fascinating experience. His protagonist, and alter-ego (at times engaged almost as a quarrel with his teacher self?) seems to me a remarkable creation, simultaneously absurd and deeply sympathetic.'

Eppel at his best – which is to say, Very Good Indeed.

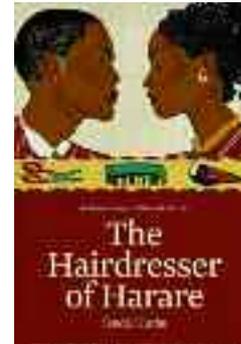


Coming soon

The next to emerge from the tunnel, will be an affecting short novel, *Then a Wind Blew* by Kay Powell (née Sayce, which may ring a few bells – her mother was the author of *A Town Called Victoria*, published in 1978). *Then a Wind Blew* is set in the dying days of

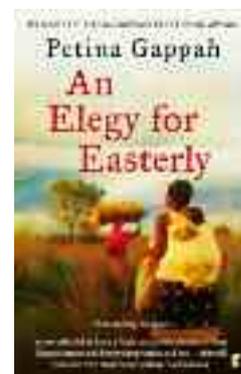
the war in Rhodesia. Brian Chikwava described it as: 'A fascinating, ambitious and brave novel that will leave a lasting impression on the reader'.

Taking risks

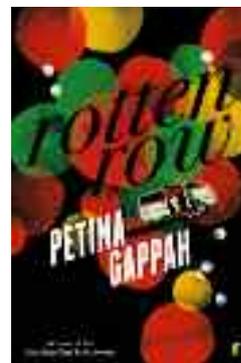


We've been asked more than once in the past, if there are political limits to what we can publish. The answer? Not that we've yet come across. Tendai Huchu's *The Hairdresser of Harare* (2010) – 'A novel of morality, prejudice and ambition told with humour and tragedy' (Brian Chikwava) – offered a mild test of the limits, but passed that easily enough. It offered a sharp social commentary, it's true, but no wrath descended.

Other publishers ...



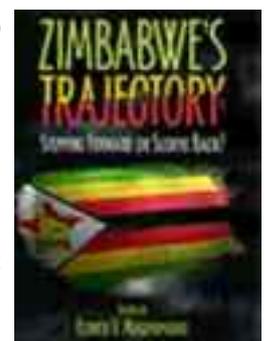
All of that said, modesty demands that we don't claim to embosom every Zimbabwean literary light ... Petina Gappah is probably on every BZS shelf, but if you have any gaps, you can thank Faber & Faber, and fill them with *An Elegy for Easterly* (2009) and *Rotten Row* (2016). The latter, in particular, 'hums with life, and delivers one of the keenest and simplest pleasures fiction has to offer: a feeling of true intimacy, of total immersion, in situations not our own, in the selves of others' (F.T. Kola).



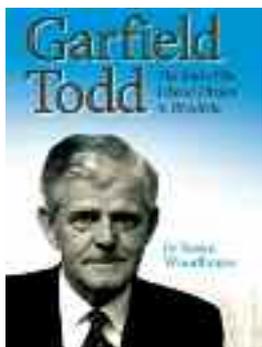
Nonfiction

What about the non-fiction side of the enterprise?

Our latest state-of-the-nation review was Eldred Masunungure's *Zimbabwe's Trajectory: Stepping Forward or Sliding Back?* (2020), '... one of the most valuable contributions to the literature of this unhappy country for a long time ...' (Roger Southall). Not a very cheery lockdown read, then, but one to bring a little comfort to those who are in B, rather than Z.



In terms of life-writing, the most recent milestone was Susan Woodhouse's magisterial *Garfield Todd*:



The End of the Liberal Dream in Rhodesia (2018). Todd's words, hopes and actions will resonate with the aspirations of Zimbabweans of all ages and backgrounds as they walk towards the next stage of their history: a hopeful future.

Finally...

... a 2020 re-issue. Irene Staunton's *Mothers of the Revolution*, one of the most remarkable chronicles to emerge from the liberation war, was first published

by Baobab Books in 1990, when the Weekly Mail claimed that 'Staunton must have borrowed God's eyes for a while to get as close as she did to the pulse of a story so human that its warmth is almost visibly glowing'.

A book that well deserves a renewed readership.

Happy reading!

Murray McCartney is director and co-founder with Irene Staunton of Weaver Press, Harare



Rhodes Must Fall Richard Pantlin describes OZAP – an arts partnership that aims to contribute to re-setting UK-Zimbabwe relations after Brexit



The city of Oxford has had strong links with Zimbabwe, nurtured by Professor Terence Ranger of St Antony's College, and the link between the city and the Society has always been a strong one.

Now the Oxford Zimbabwe Arts Partnership (OZAP) provides an opportunity to link academic work with the arts and to resolve a major issue for the university in a creative and progressive way. The OZAP team is composed of artists and organisers in Zimbabwe and Oxford. We came into being as a response to Black Lives Matter and the Rhodes Must Fall Campaigns.

In June 2020, when we still had a lockdown, over 1,000 students, academics and townspeople demonstrated in the High Street for the statue of Rhodes to come down, as a symbol of the end of the colonial era.

As a team, we are also convinced that our project could contribute to a re-setting of relations between the UK and Zimbabwe – so badly needed after Brexit and the accelerated land reform/farm invasions/third Chimurenga.

Cecil Rhodes still stands, a proud businessman and politician, above two British monarchs, staring down on the people below. And the country that retained his name until 1980 still lies within its original imperial borders. The building where his statue stands became known as the Rhodes Building. It is an integral part of Oriel College.

And now, after the killing of George Floyd in the USA and the resulting revulsion of state-sanctioned racism around the world, Oriel College has a problem: what to do with the statue and the legacy it represents and which, in some ways, still enjoys?

What now?

OZAP offers a solution: the creation of a new sculptural installation, honouring the African and other liberation movements.

This new artwork will be initiated by two Zimbabwean artists: one Moses Kandemwa, from Bulawayo, Matabeleland, a young man at the start of his artistic career, and the other an internationally renowned Shona stone sculptor from Chitungwiza, Harare Province, Norbert Shamurariya.

Once their creations are installed, we expect other former Commonwealth countries over time to add their contributions

We are inspired by the incredible 'Long March to Freedom' installation of 100 life-size bronze statues outside the Cradle of Humanity museum in South Africa. Of course, a version of each artwork would also be installed in the hometowns of the creators. The artworks would represent 'The Present', a response to the Cecil Rhodes statue representing 'The Past'.

We also plan a single further sculpture made of recycled materials representing 'The Future', designed online by a team made up of a diverse group of youngsters from Oxford's less affluent areas of Cowley and Blackbird Leys in collaboration with young artists from the Chitungwiza Arts Centre. The team for this includes:

- Lorraine Muwuya, who has a track record in arts project management and photojournalism in Harare; and
- Groovy Sue Frizzell, a respected community artist in East Oxford who has long worked with young people, using recycled materials. She will work through the Ark T Centre in Cowley.

Continued on next page



Norbert Shamurariya (see previous page) whose work is influenced by his family history and his natural environment. His sculptures often examine human relationships and personal feelings. Photo © Norbert Shamurariya

African history

Alongside the art, we will organise an education programme on African history. William Beinart, Emeritus Professor of the Oxford University African Studies Centre, and Professor David Pratten, the current Director, have both given their support in principle to work with the African School and Mobile Library based in Blackbird Leys.

Online seminars will be available to Oxford

students and the general public in Oxford and Zimbabwe.

OZAP's input will be led by Natty Mark Samuels, an expert on African history and art supported by Nigel Carter, founder of the Oxfordshire Community Association, an umbrella group for all the ethnic community organisations across the county.

Poetry

We also hope to organise a poetry competition for submissions in English, Shona and Ndebele to reflect on the legacy of Cecil Rhodes from a contemporary perspective. This work will be led by Femi Nylander, star and inspiration behind the recently released film *African Apocalypse* and co-founder of the Oxford Rhodes Must Fall movement.

Documenting the process

The entire process will be documented by the young people who will be trained in Participatory Video by Insightshare.Org. They have been empowering indigenous communities to tell their stories on video for over 20 years, under the leadership of Nick Lunch.

Oriel College has set up a Commission whose members are very interested in our proposals. Details of the terms of reference and evidence sessions already held are available here: <https://www.oriel-rhodes-commission.co.uk>.

To support our work either financially or in other ways, please email us at ozapworld@gmail.com. You can keep up-to-date with developments on our Facebook page: <https://fb.me/OZAPworld> or by following us on Twitter: @OZAPworld

And for anyone interested in a personal description of the impact of Cecil Rhodes: <https://www.theguardian.com/news/2021/jan/14/rhodes-must-fall-oxford-colonialism-zimbabwe-simukai-chigudu>

Richard Pantlin is Project Co-ordinator of The Oxford Zimbabwe Arts Project (OZAP).

COVID-19 AND GENDER DISPARITIES IN ZIMBABWE

Sophia Chirongoma looks at the particular problems women face from COVID-19

Self-location: I am an African woman who is passionate about writing and publishing on the interface between gender justice, health and well-being in Africa, with special reference to my country, Zimbabwe.

As an academic-cum-gender-activist, most of my academic reflections are drawn from my Karanga-Shona worldview in Zimbabwe, which is my cultural heritage. My reflections have also been shaped by my lived realities as a female academic and the gender dynamics in my context.

In this article, I reflect on how the outbreak of the COVID-19 epidemic has entrenched the inherent gender disparities in Zimbabwe in highly patriarchal traditions within the indigenous communities. The impact of the epidemic has disproportionately impacted on women who were already at the bottom of the heap well before the epidemic made inroads in the motherland. I conclude by proposing possibilities for redressing these gender imbalances in Zimbabwe.

Introduction

When the novel virus COVID-19 was initially discovered in Wuhan, China, in 2019, it seemed it would remain as one of the epidemics devastating lives far from our comfort zone. But it soon started filtering through the Zimbabwean borders, and people started falling sick and dying from COVID-19-related complications.

On the 21 March, 2020, the first case of COVID-19 was detected in Zimbabwe and the first COVID-19-related death was subsequently recorded on 23 March, 2020. Since then, the Zimbabwean populace has been wrestling with the epidemic and the nation desperately seeks either a vaccine or a treatment. By the 13 February 2021, Zimbabwe had a total of 35,104 recorded COVID-19 cases, of whom 1,398 had died. These statistics are worrisome, with Zimbabwean women and girls bearing the brunt of the burden wrought by COVID-19.

Financial implications

The Zimbabwean unemployment rate is over 90 per cent, and most people, particularly women and girls, subsist through the informal sector. This entails cross-border trading and part-time/ informal employment, domestic work, working on farms or in the hospitality industry in neighbouring countries, such as South Africa and Botswana – or anywhere in the world where they can eke out a living. Unfortunately, most of the income-generating activities in the informal sector have been brought to a halt by the lockdown measures implemented by Government in an endeavour to stem the tide of COVID-19.

Even some university students may underestimate the dangers COVID-19 brings – and, in any case, may have no other recourse but to take risks because they need to raise money to pay for their university education.

Out of desperation, some women and girls are risking their safety, health and well-being, by illegally crossing the borders – making them susceptible to being raped or robbed. Some are hired to physically transport heavy goods across the South African border – only to be paid as little as R50 (RSA) per load.

Others are in danger of being exploited by regional truck drivers who smuggle them across the borders.

Those who remain at home try to earn an income through selling second-hand clothes, or fruits and vegetables around their homesteads – which increases their chances of exposure to COVID-19. They also risk having their goods confiscated by law enforcement agents, who brutally beat up people for breaching the lockdown measures.

Countless women traders have lost most of their investment because, when the Zimbabwean government initially announced the lockdown measures in March 2020, there were no clear instructions regarding the sale of farm produce. As a result, most women incurred heavy losses because either their produce became rotten or they were destroyed by the police who indiscriminately

destroyed truckloads of farm produce. The government later apologised and asked them to come forward and claim compensation only if they are registered traders.

Unfortunately, they are caught between a rock and a hard place because most of them are not registered traders, hence, they are afraid that if they come forward to claim compensation, they will expose themselves as law-breakers for trading without being registered.

Domestic violence and violence against women and girls in general

According to Musasa project, a Zimbabwean organisation that provides shelter to abused women, cases of domestic violence have increased since the lockdown came into effect. The incidences of domestic violence have been precipitated by men who are frustrated because they feel incapacitated by the lockdown restrictions. They take their frustrations out by physically or emotionally abusing the women and girls among whom they live.

As families are spending more time at home, this increases women and girls' domestic responsibilities. For instance, in most low-income urban communities there are poor sanitation facilities. Residents have to contend with limited or no access to running water. As a result, it is usually women and girls who are responsible for fetching water from the communal water sources, often far from their houses, where they may have to queue for hours every day – compromising their ability to practise social distancing.

Several consecutive years of drought in Zimbabwe mean that most families were already suffering from food insecurity and poor nutrition well before the outbreak of COVID-19. The ongoing lockdown measures exacerbate the economic constraints which compromise the women and girls' capacity to prepare proper meals for their families. Their male counterparts often blame them for failing to execute their domestic chores and this can culminate in domestic violence.

Rape, sexual violence and infringement of women's and girls' sexual, reproductive health and rights (SRHR)

Since women and girls are mainly responsible for preparing meals, the intermittent power cuts in most low-income urban communities can mean they must walk long distances in search of firewood to be used for preparing meals. They must often collect this from places on the outskirts of their residential areas. This too can put them in danger of being attacked.

The prolonged closure of schools due to the lockdown has also negatively impacted on adolescents' SRHR. There are high chances that they will use idle time to experiment with sex – leading to an upsurge of teenage pregnancies and child marriages.

With men spending more time at home, access to SRHR for married women who used to conceal contraceptives from their spouses has been heavily restricted.

Continued on next page

Gender disparities: continued from previous page

This has resulted in numerous unplanned and unwanted pregnancies.

All in all, rape and sexual violence have intensified, especially in the slums and informal settlements. For instance, the survivors of Cyclone Idai, where homesteads and livelihoods were destroyed in Chimanimani and Chipinge in 2019, as well as the survivors of Cyclone Chalane who are in temporary shelters in several low-income urban areas across the country, are faced with a double tragedy. Besides having lost all their belongings, they are either forced to commoditise their bodies to gain donations or they simply fall prey to the unscrupulous men who take advantage of their vulnerability in their insecure accommodation.

Women as front line workers

Health care personnel in the public hospitals sometimes lack adequate Personal Protective Equipment (PPE) which makes them and their families vulnerable to getting infected by COVID-19. Most home-based caregivers for COVID-19 patients are women. This also exposes them to infection, particularly in the absence of PPE and in resource-constrained families.

Conclusion

The challenges Zimbabwean women encounter in the wake of COVID-19 reminds us of the deeply entrenched gender disparities. This emphasises the urgent need for

the Zimbabwean government, religious and community leaders, academic institutions and other humanitarian agencies to make concerted efforts towards eliminating these gender injustices.

It entails a rethinking of how masculinities and femininities are moulded at the household, community and national level.

There is also a pressing need for a gender equitable socialisation among children to ensure that none of them grow up with a twisted sense of either inferiority or low self-esteem (among girls) or a misplaced sense of importance and (superiority among boys).

Equitable representation of women and girls in key policy and decision making forums is also pivotal because as the age-old mantra goes, 'Nothing about us, without us women.'

Women must inform policy and decision-making processes in business, politics, academic institutions, in their homes and in their communities so that they can properly transform all that disempowers and dehumanises fellow women.

Dr Sophia Chirongoma is currently serving as a senior lecturer in the Religious Studies Department at Midlands State University, Zimbabwe. She is also an Academic Associate/Research Fellow at the Research Institute for Theology and Religion (RITR) in the College of Human Sciences, University of South Africa (UNISA).

Online Sounds and Exchange Philip Weiss describes a special link between his home town of Sheffield in the UK and Zimbabwe

COVID-19 has devastated the livelihoods of singers, along with many other performing artists.

It takes great resilience and imagination to find alternative or additional means of support: online is no solution, as it's technically extremely difficult to get individuals who are not in the same space to sing in unison or in harmony.

Despite that, SOSA-XA! Sounds of Southern Africa Choir in Sheffield has continued to meet online every week during this year – its twentieth anniversary.

In physical form it's normally led by Tonderai Phiri, based in Manchester, who was previously touring with Siyaya Dance from Bulawayo. However while he is at home with his children he has handed the reins to Charlie Banda in Pumula, Bulawayo. Charlie has proved a technical and sonic genius at creating practice parts for his songs and making training videos with members of Sunduza Dance Theatre in Bulawayo for the song and dance elements. In addition, with his team, Charlie has

revived the fortunes of Sunduza, creating a 35th anniversary concert for online distribution. So we are now taught by Charlie in Zimbabwe with dispersed members checking in from Holland, Crete, Cleveland in the USA, and Johannesburg.

SOSA-XA!

The Sheffield SOSA-XA! Choir has been working on songs in iSindebele provided by Charlie and Sunduza and songs in chiShona provided by Mafaro, led by Baltimore Mudepu and the Mudepu family in Harare.

The arts trust that created the Sheffield project in 2001 folded in 2017, a victim of local authority cuts. Now the SOSA project is moving towards full charity status, it will still aim to support Zimbabwean artists working in schools and other centres in the UK, but also primarily to support management training and infrastructure for the arts teams in Zimbabwe, including Sunduza, which has also been supported in interaction with the Bayimba centre in Kampala, Uganda. Sunduza attended the International Association of Theatre for

Children and Young People (ASSITEJ) World Theatre Congress for Children's Theatre (<https://www.assitej-international.org/en/>) in Cape Town for a week and the Arterial Network Conference, also in Cape Town (<https://contemporaryand.com/place/arterial-network/>).

Sunduza have had some training in Bulawayo through the Arterial Network and hosted workshops in arts management at the National Gallery and at the Es'pakeni centre through our linked local arts trust, Amasiko Lemvelo. We have also taken two revived productions to the National Arts Festival in Grahamstown (Makhanda), and an arts festival in KwaMashu in Durban – all in the last seven years.

Cultural imperialism?

The SOSA-XA! Choir was formed with members of Sunduza and me being taught originally by the late Simon Banda (Charlie Banda's father), and then taken over by the late Mandla Sibanda. Both enriched Sheffield for many years. Simon Banda's last major stage show in the UK was as the lead in *The Leopard* at Sheffield's Crucible Theatre. SOSA went on to develop the premier of the UK performance of the *Poverty Requiem* by Peter Maisaan.

Are we culturally appropriating Southern African music in a new form of cultural imperialism? We would argue no – it's the best way to share culture. We have been delighted at the positive responses from Zimbabwean community groups and also, some years ago, from the South African High Commissioner. All members are volunteers but the artistic directors get their rewards and, over the years, thousands have been raised for other charities ranging from the Born Free Foundation to more local diversity schemes and hundreds of schools. After all, if UK choirs can sing in German, French, and Italian and African choirs perform in English and French, why should majority English speaking choirs not work in African languages?

The Sheffield choir specialises in the *isicatamiya* (or *imbube*) performing style. Literally, it means 'to tiptoe like a lion' and it has many influences both from Zulu, American Music Hall line dancing and various harmonic traditions. The idea that somehow African music remains purely traditional, not interactive with the world, is a purist and dated. Music is the most international of languages with diverse origins.

And, in its turn, Sunduza takes some of its harmonic influence from around the world, including beatbox, but stays true to the acapella tradition. They have for many years combined their work with dance and theatre. So many people associate Southern



Charlie Banda, also known as Mahlaba, is Sunduza music director who has been leading SOSA-XSA! through COVID online. He's just won the Zimbabwe Music Industry Award (ZIMA) for best Jazz Artist with his other hat – Mahlaba Bulawayo's newest exciting performance supported by the Counterpoint band. Photo: Veins media, Bulawayo

African music with drums – yet historically in Zulu tradition this seems to have been more of a Hollywood-inspired concept: the voice has always been supreme. exchange for centuries. The style popularised by Paul Simon and Ladysmith Black Mambazo performed in Graceland has remained popular for decades in Southern Africa.

Engaging young people

Theatre remains the quintessential skill needed to engage with community and with young people to spread ideas and information. It is largely ignored by aid agencies and marginalised by schools because its results are not easily quantified: yet I have seen in Zimbabwe and the UK how the arts positively activate inactive truculent individuals and those young people needing to discover their true talents.

The arts are at the centre not just of creative industries, but of creating anything. Modern society depends on design and innovation, on the media in self expression through publishing. It is tragically a sector in Zimbabwe that is often censored, vilified, marginalised because it is seen as radical, informal, engaging with self-employment. Yet, for example, take someone like Daves Guzha of Rooftop Promotions – a case of exemplary talent combined with

Continued on next page

SOSA-XA! Continued from previous page

business skills. But he is overlooked and society still believes that wearing a tie and having a degree is the only route a successful child should take.

Economic importance

Within the UK 10 per cent of our GDP is from the creative industries – in Africa it is less than one per cent. Think of the tax potential loss to national governments. It isn't easy to achieve self-sustaining creative industries, but that has to be a desired objective.

Too much is spent emulating the models expounded by Western models of arts growth. Centralised city theatres, colleges and almost any central structure that can be set up will then disperse its crumbs to the actual artists. I believe that spatial disbursements to local and regional growth points will create more jobs and will provide accessible arts activities to communities but the centre has to devolve resources.

Bulawayo has many community centres, all of which are under-funded – each providing a potential leasing facility from the Council to the community. SOSA-XA!'s projects work through Amasiko Lemvelo (the Cultural Environment) Learning Trust – a very small NGO set up to provide support

training and to manage the Es'pakeni Centre in Pumula. It is voluntarily managed by the people or artists for the people. Whilst Sheffield has provided resources for the improvement of the centre, progress has been painfully slow, and most of the time the area has been without electricity though it now has water.

Singing for change

The project was captured most effectively in its exchange through the *Singing for Change* programme in 2011/12 funded by the British Council under its then Global partnerships schemes. We created a joint DVD and CD linking Bulawayo, Sheffield and various schools. It is available through me at *Philip.weiss@me.com* and normally online via the SOSA website <http://www.sosa-xa.org.uk>. It will shortly be part of a teachers' pack which will include a new book of stave notation. This forms a document of some thirty songs all transcribed by John Salway into four part harmony stave notation taken from the Sunduza/SOSA almanac of music. It will include the DVD and two pre-recorded CDs by SOSA-XA!

Philip Weiss is project director for Sounds of Southern Africa (charity) and Sunduza and Mahlaba Producer, and a member of the BZS Executive.

News

Remittances – a lifeline

How has the pandemic affected that lifeline for many Zimbabweans – remittances?

On 29 October, a World Bank forecast suggested that the COVID-19 pandemic would bring about a significant decline in remittances sent from richer countries to poorer ones. For sub-Saharan Africa, the forecast was that this would have been nine per cent in 2020 and six per cent in 2021.

(<https://www.worldbank.org/en/news/press-release/2020/10/29/covid-19-remittance-flows-to-shrink-14-by-2021>).

Yet it seems that far from remittances to Zimbabwe declining, they are increasing significantly. On 24 February 2021, Newsday reported a rise of 58 per cent to US\$1 billion last year, 'generating more foreign currency than gold and tobacco, the country's top export commodities, according to data released by the central bank last week.' (<https://www.news->

day.co.zw/2021/02/diasporans-remit-us1bn-back-home/)

So, is Zimbabwe a special case – and if so, how? The flyer for a SAPES (Southern Africa Political Economy Series) webinar on 21 January on Zimbabwe-US relations carried the information that about 75 per cent of all professional and skilled Zimbabweans are now in the diaspora. With so many working in the UK's health and public services (see pages 1–3), this suggests that Zimbabweans are still at work and able to send money home (though not always through formal channels). But at what cost has this been to their health and even their lives?

We hope to find out more in the coming months about remittances and their importance to the Zimbabwean economy, so any BZS members who can contribute to this discussion, please get in touch.

Jenny Vaughan

Award for Tsitsi Dangarembga

The worldwide organisation of writers, Pen International, which

campaigns for freedom of expression, has awarded Zimbabwean author Tsitsi Dangarembga its International Award for Freedom of Expression 2021 – PEN's centenary year.

Introducing the award at the Winternachten International Literature Festival in The Hague, PEN International President Jennifer Clement said: 'It is an honour to give (her) the PEN Award ... Her brave work as a writer, filmmaker and activist in Zimbabwe was once again in the spotlight last year when she was arrested for anti-corruption protests. Dangarembga's work centres on the lack of freedoms for women in Zimbabwe's patriarchal world. I am particularly delighted to give the award to Tsitsi today, a special day which marks the 50th anniversary of the PEN Emergency Fund, an international fund for writers in dire straits, of which we are extremely proud.' (<https://pen-international.org/news/tsitsi-dangarembga-wins-the-pen-award-for-freedom-of-expression-2021>)

Jenny Vaughan

The Britain Zimbabwe Society 40th Anniversary
Life after 40
1981- 2021

Saturday 12 June 2021, 13.55 – 19.05 BST (14.55-20.05 CAT)

Online Zoom event – free of charge. Register with Eventbrite at
<https://www.eventbrite.co.uk/e/the-bzs-1981-2021-life-after-40-tickets-142222199427>

Explore and celebrate the BZS's links with Zimbabwe, debate
the way forward, music and performance

Programme:

13.55 – 14.00hrs Welcome and Introduction
14.00 – 15.00hrs Panel 1: Life After 40 –The Britain Zimbabwe Society 1981-2021
15.00 – 16.00hrs Panel 2: Arts and Culture in Zimbabwe and the Diaspora
17.00 hrs – 19.00hrs Performance: Zimbabwean Creatives – Arts and Culture

Speakers and performers include • Conrad Mwanza, CMG Media/Zimbabwe Achievers Awards • Roselyn Masamha, University of Hull • Tomas Brickhill and Joe Njagu, Zimbabwean film-makers • Dorcas Gwata, Zimbabwe Health Training Support (ZHTS) • Tariro neGitare, musician/arts mentor • Pelagia Nyamayaro, poet • Ethel Maqeda, creative writer • Nomalanga Nyamayaro, cookery writer • Simon Bright, Zimmedia/filmmaker • Tomas Brickhill, musician

Further information: Knox Chitiyo chitiyoknox@yahoo.com
(programme) Margaret Ling margaret.ling@geo2.poptel.org.uk (registration)



Contact the Britain Zimbabwe Society

President: Knox Chitiyo

2021–2022 Officers and Executive

Chair: Kathy Mansfield Higgins
Vice-Chairs: Millius Palayiwa, Rori Masiane
Secretary (Minutes/Correspondence): Pat Brickhill
Secretary (Membership): Margaret Ling
Information and Publications Officer: Jenny Vaughan
Web Officer: Philip Weiss
Treasurer: Margaret Ling

Other Executive members:

Pauline Dodgson-Katiyo
Diana Jeater
Pelagia Nyamayaro Victor de Waal
Julius Mugwagwa
The Stevenage-Kadoma Link Association
Vacancies exist on the BZS Executive.
If you are interested in joining the Executive, please contact Pat Brickhill at
[<zimgekko@googlemail.com>](mailto:zimgekko@googlemail.com)

Britain Zimbabwe Society Membership Form

To join and receive your regular copy of the Zimbabwe Review, postings on the members e-mail discussion forum, and Research Day discount, please print and send the completed form below with your subscription cheque to:

Margaret Ling, BZS Membership Secretary, 25 Endymion Road, London N4 1EE

For alternative means of payment, contact <margaret.ling@geo2.poptel.org.uk>

Please enrol me/us in the BZS at the following annual rate (tick relevant box).

Rate

Ordinary	£21	<input type="checkbox"/>	Unwaged/student, retired	£10	<input type="checkbox"/>
Joint (two at one address)	£25	<input type="checkbox"/>	Institution	£50	<input type="checkbox"/>

Membership runs by calendar year, renewals are due on 1 January each year.

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BRITAIN ZIMBABWE SOCIETY RESEARCH DAY 2021

Zimbabwean Migration – People, Ideas and the Arts in Motion

Saturday 19 June 2021

9.30–17.30 (CAT 10.30-18.30, EST 4.30-12.30)

In partnership with the Oxford African Studies Centre

Online with Zoom

All welcome - register with Eventbrite at

<https://www.eventbrite.co.uk/e/zimbabwean-migration-people-and-ideas-in-motion-tickets-137153833809>

PROGRAMME

Please note that details may change

- 9.30-9.45 *Welcome and Introduction*
Kathy Mansfield Higgins, Chair, Britain Zimbabwe Society
Professor Miles Tendi, African Studies Centre, Oxford University
- 9.45-11.15 Panel 1: Narratives of Home, Return and Belonging
Speakers: Dr Beacon Mbiba, Oxford Brookes University
Dr Tinashe Nyamunda, Northwest University, Potchefstroom, and Dr Patience Mukwambo, University of the Free State, Bloemfontein
Dr Loreen Chikwira, Edge Hill University
- 11.15-11.30 *Break*
- 11.30-12.45 Keynote speaker: Ethel Kuuya, Managing Director, Advisory K
Chair: Knox Chitiyo
- 12.45-13.00 Presentation of Lifetime Achievement Award
- 13.00-13.45 *Break*
- 13.45-15.15 Panel 2: Migration of People, Ideas and Memory
Speakers: Dr Ushehwedu Kufakurinani, Economic History Department, University of Zimbabwe
Dr Zoe Groves, University of Leicester
Lloyd Nyakidzino, Director, Zimbabwe Theatre Academy, Harare
- 15.15-15.30 *Break*
- 15.30-17.00 Panel 3: Migration of Health and Health Care
Speakers: Dr Sunanda Ray and Dr Farai Madzimbamuto
Dr Brighton Chireka
- 17.00-17.30 *Summing up and close*
Speaker: Professor Diana Jeater, University of Liverpool