

Cyclone Idai Situation Report 5: 08 - 12 April 2019

Highlights

- There has been a significant reduction in the number of displaced people with 73,296 people currently hosted in 70 accommodation centres; down from 142,327 people the week before.
- A total of 4,979 cholera cases were recorded in Beira, Dondo, Buzi and Nhamatanda and the death toll has reached eight.
- With UNICEF support, 814,293 people were vaccinated against cholera representing 99 per cent of the target population.
- UNICEF continues supporting FIPAG (the water supply institution), Government and operators to run water supply systems in affected areas providing drinking water to 771,856 people.
- UNICEF provided education supplies to the Provincial Education Department in Sofala province for 14,000 students;
- UNICEF-supported Child- Friendly Spaces in Sofala and Manica with 4,837 children receiving psychosocial services.
- During the reporting period, UNICEF supported 900 social mobilizers who reached 30,000 families in the most critical areas of Beira promoting preventive WASH-related behaviours to stop the spread of the cholera infection, bringing the total of people reached to 449,000.

MOZAMBIQUE Humanitarian Situation Report #5

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SITUATION IN NUMBERS

1.85 million

People in need by the cyclone/floods (2019 Humanitarian Response Plan)

1 million

Children in need by the cyclone/floods **500,000**

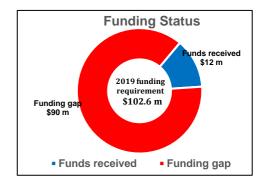
Children targeted through humanitarian interventions by UNICEF

965,000

People targeted through humanitarian interventions by UNICEF

4,979

Cholera cases reported in Sofala Province



UNICEF's Response with Partners

Cluster	Cluster	Target	LINICEE		Target
					Target
target	Result	achieved	target	Result	achieved
1 435 000	907 259	63%	965 000	771 856	80%
1,435,000	507,255	0378	905,000	//1,050	8078
			500,000	330,567	66%
328,000	10,542	3.2%	328,000	10,542	3.2%
F00 000	2 260	0.70/	200 000	2 260	0.00/
500,000	3,300	0.7%	380,000	3,300	0.9%
			20.000	4 0 2 7	240/
			20,000	4,837	24%
			700,000	449,000	64%
	Cluster target 1,435,000 328,000 500,000	target Result 1,435,000 907,259 328,000 10,542	target Result achieved 1,435,000 907,259 63% 328,000 10,542 3.2%	target Result achieved target 1,435,000 907,259 63% 965,000 1,435,000 907,259 63% 965,000 1 1 500,000 500,000 328,000 10,542 3.2% 328,000 500,000 3,360 0.7% 380,000 500,000 3,360 20,000 30,000	target Result achieved target Result 1,435,000 907,259 63% 965,000 771,856 1,435,000 907,259 63% 965,000 771,856 2 500,000 10,542 500,000 330,567 328,000 10,542 3.2% 328,000 10,542 500,000 3,360 0.7% 380,000 3,360 500,000 3,360 0.7% 380,000 4,837 6 6 6 6 6 6

Situation Overview and Humanitarian Needs

As of 11 April 2019, there were a total of 4,979 cholera cases recorded in Beira, Dondo, Buzi and Nhamatanda and the death toll had reached eight. Most of the cases have been reported in Beira (3,621 cases), followed by Dondo (697), Nhamatanda (544 cases) and Buzi (117). Half of the deaths were recorded in Beira and the remaining in Dondo and Nhamatanda districts. The cholera vaccination campaign carried out in Sofala province (four districts affected by the cyclone and floods) from 3– 10 April was successfully implemented and about 814,293 people were vaccinated; representing 99 per cent of the target population. Most of the vaccination occurred in Beira city, where about 422,958 people (98.5 per cent of the target) were vaccinated.

From 27 March to 9 April a cumulative 7,534 cases of malaria were detected in Beira, Dondo, Nhamatanda and Buzi districts. In Buzi the notification system for malaria resumed on 5 April due to communication constraints.

During the reporting week, the number of displaced persons hosted in accommodation/transit centres has reduced significantly. As of 12 April, 73,296 people remained displaced due to the cyclone and flooding. The displaced people are largely hosted in 70 transit centres in Sofala, Manica, Zambezia and Tete provinces. The largest number of transit centres are in Sofala, where at least 40,767 people are hosted in 30 centres. From 8 - 12 April the Government reported that about 94 centres were closed, most of them in Sofala province. However, ten schools are still serving as transit centres. According to Government officials, some of the population had returned to their areas of origin, while others were re-located to the new sites. On 11 April, the National Institute for Disaster Management (INGC) presented a plan to relocate 15,549 families in four districts of Sofala. In Manica, the Government has also started the relocation of 24,000 people currently in 26 accommodation centres in the Dombe region. The Government is delineating land plots for displaced people on a daily basis with about 2,681 plots in three provinces available to be transferred to the population.

Overall, INGC estimates that at least 1,514,662 people were affected by the cyclone and floods in the central region of the country. According to the INGC, at least 335,132 students are affected by the floods and cyclone due to the damage of 3,504 classrooms in Sofala, Manica, Zambezia and Tete provinces. At least 55 health facilities are affected in Sofala, Manica and Zambezia.

Humanitarian leadership and coordination

In the past week, the provincial authorities have taken over the leadership and coordination of the response from INGC. The Emergency Operation Centre for the coordination of the response in the central region is still in Beira. A monitoring mission led by the Minister of Agriculture has been in Beira since 8 April to monitor the response provided so far and support the team on the ground to address existing challenges.

This week, the Government convened daily multi-sectoral coordination meetings with the participation of partners, including UNICEF. In Maputo the Inter-cluster Coordination Group (ICCG) is active in supporting the Humanitarian Country Team (HCT) leadership. Clusters are operational with UNICEF leading the Nutrition, WASH and Education and actively participating in Health and Protection clusters. An inter-agency cholera task force brings together the Health, WASH and community engagement players.

UNICEF staff were deployed to the field to support cluster coordination and operationalise UNICEF response in the affected areas. UNICEF has cluster coordinators for WASH, Nutrition and Education in Maputo and Beira, and for WASH in Chimoio, and Quelimane. UNICEF is using its close relations with central and local government to strengthen the link of the cluster system to the Government of Mozambique's leadership, especially in Beira. UNICEF activated the Child Protection sub-cluster in Beira and at the national level. In Beira it is co-chaired by UNHCR and at the national level an NGO co-chair will be identified by next week.

UNICEF is supporting government agencies, as primary providers of services and duty bearers, and NGOs to provide and coordinate the international response to all affected target groups, set out above, and to accelerate sustainable outreach in hard-to-reach areas by securing and allocating adequate funding, supplies, logistics and technical supervision. In an effort to support the government on information sharing, UNICEF is supporting the INGC to develop an information management platform to encourage collaboration on data sharing amongst humanitarian partners, government, and civil society. (https://cycloneidai.onalabs.org/)

Humanitarian Strategy

UNICEF's key priorities are to treat and prevent cholera with WHO, MSF and the Government, and to support interventions in WASH, Health, Nutrition, Education and Protection in the flood and cyclone affected areas, namely Tete, Manica, Zambezia and Sofala. Interventions are coordinated and complement the efforts of the Government and HCT. The outstanding issue lately in the strategy to support the people affected when returning to their areas of origin. UNICEF has defined its package of interventions to support the returnees.

UNICEF has established its field presence in three hubs in the most affected Provinces - Manica, Sofala and Zambezia in Chimoio, Beira, and Quelimane respectively, to ensure operational efficiency and a timely response. UNICEF has enhanced its capacity to provide operational support, undertake higher frequency monitoring and quality assurance for both governmental agencies and partners, especially for outreach interventions in hard-to-reach areas.

UNICEF is actively engaging government and NGOs partners in promoting an environment free of Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH). A joint UN toll free call centre will be established shortly by WFP and supported by UNICEF, UNFPA and other UN agencies to enable effective referral for potential victims. The UNICEF Gender Specialist is deployed to Beira to lead the process of operationalizing the PSEA system, additionally, the child protection team will conduct a quick mapping of existing services.

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UNICEF is actively participating in the assessment working group established in Beira as well as in a recently formed analysis cell. UNICEF is also supporting the clusters and teams on the ground to use standardised tools for data collection and reporting.

UNICEF has completed a feasibility assessment for the potential use of cash and voucher assistance as part of its response package. A viable entry point has been identified to transition some of the logistically heavy in-kind distributions of hygiene supplies to a voucher approach so people can replenish critical household hygiene items from local markets, where these commodities are found to be available. WFP is rolling out a scaled market voucher approach and UNICEF is looking to establish key partnerships, including with WFP, in order to address households needs in an integrated manner. The planned approach, would prioritize areas receiving returns of displaced persons, as well as some of the worst hit areas by the storm and flooding. This approach also intends to establish strong linkages for subsequent transition to national social protection mechanisms that will come to serve affected people in the coming months.

Summary Analysis of Programme Response

WASH

A WASH cholera response strategy has been developed under the framework of the Ministry of Health (MoH) led taskforce and is under implementation. In line with the strategy, over 900 community volunteers have been deployed for cholera prevention and hygiene/sanitation promotion in Beira and Dondo. UNICEF has supported the targeted distribution of over 55,000 bottles of CERTEZA (water treatment product) in Sofala province. Water quality monitoring (residual chlorine) is being reinforced for all water distributed to accommodation centres/camps, and throughout the municipal system. Additionally, UNICEF has coordinated cluster partners to lead in the cholera response for specific districts. Partners then respond to MoH daily cholera line data by conducting targeted rapid WASH interventions.

UNICEF continues supporting FIPAG, Government and operators (through a combination of equipment, fuel and water treatment chemicals) to run water supply systems in Beira (covering also Dondo), Nhamatanda, Sussundenga, Mocuba, Gurue and Alto Molocue, with 771,856 people provided with access to safe water. Besides people directly benefiting from the system, FIPAG water is also being trucked to accommodation centres, schools and health centres (including cholera treatment centres).

Sanitation remains an issue, despite some progress through the construction of additional temporary latrines in accommodation centres and resettlement areas. There is a need to speed-up construction of latrines, particularly in high-water table areas, for which the cluster has developed technical guidelines for implementing partners working in camps. In addition, UNICEF is supporting the Beira city sanitation services agency to re-establish the operation of the wastewater treatment plant for final disposal of latrine fecal sludge, as well as supporting families in returning and relocation areas for latrine construction. In addition, UNICEF has supported the distribution of over 2,500 hygiene kits to affected families, mainly in accommodation centres and relocation areas.

WASH clusters continue actively leading the coordination in the three most affected provinces (Sofala, Manica and Zambezia) and at the national level, under the lead of National Directorate of Water Supply and Sanitation (DNAAS) and the Provincial Directorates of Public Works, Housing and Water Resources (DPOPHRH). UNICEF is co-leading the WASH cluster coordination at all levels and has deployed dedicated capacity for coordination at province level, in addition to technical staff. For cholera, dedicated capacity has been made available to lead coordination within the Health sector and amongst WASH cluster partners as part of the cholera taskforce.

Health

Reported cases of cholera in Beira, Dondo, Nhamatanda and Buzi districts reached more than 4,900 in the reporting period. UNICEF and partners are working closely with health, WASH and communication partners to accelerate efforts to contain infectious diseases, particularly cholera and guard against outbreaks of measles, malaria and pneumonia. UNICEF is working closely with partners to ensure all women and children have access to a basic package of primary and secondary health care services, including treatment of common childhood illnesses and routine prevention and promotion services (e.g. EPI, ANC), as well as referral for delivery and newborn care.

The Oral Cholera Vaccine (OCV) campaign reached 814,293 (99 per cent of the target) in the four districts most affected by cholera. In addition, UNICEF with the support from the US Government, and partners, supported the MOH in distributing 112,536 insecticide treated bed nets (ITNs), targeting the districts (Dondo and Nhamatanda) with a high number of reported malaria cases. UNICEF is shifting efforts to prepare and implement child health week with an integrated package, including measles and polio vaccines, vitamin A, deworming, nutritional screening and a restart of Maternal Child Health (MCH) services targeting 21 priority districts targeting children under-five by the end of April. UNICEF supports the operational deployment of MOH mobile brigades, mobile teams provide curative and preventative services with more than 7,800 consultations including 1,697 for children under-five.

The overall response is stabilizing, though gaps remain primarily in financing across the sector including restricting the scope of the planned health weeks to the most affected districts, rather than the proposed 41 Cyclone Idai affected districts.

The MOH is currently revising the immediate three-month appeal to systematically include all priority areas, particularly including more attention for ensuring on-going treatment for people living with HIV, urgent remedial repairs to infrastructure and support for health workers directly affected by the cyclone. UNICEF is working alongside WHO, the cluster co-lead, to mobilize additional funding for the appeal.

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The nutritional needs of infants, young children, and pregnant and lactating women, are a priority for the cluster, promotion and support of continued breastfeeding, and optimal complementary feeding. UNICEF is supporting active screening of children in affected areas to identify and treat severe and moderate acute malnutrition (SAM and MAM). Coordination of health and nutrition activities is taking place both at the provincial and national level.

Screening for acute malnutrition is being implemented in the cyclone affected districts, UNICEF and partners screened a total of 10,542 children under five for acute malnutrition; out of these, 86 were diagnosed as SAM and 229 as MAM. UNICEF supported the procurement of 21,000 cartons of RUTF and supported delivery of 4,578 cartons of RUTF to Beira.

Key gaps include timely funding among some of the nutrition cluster partners, prioritization of the emergency response by MiSAU in lieu of other regular activities, adherence to SAM treatment protocols and capacity gaps at field level.

Education

UNICEF and education partners, in close collaboration with the Ministry of Education and Human Development (MINEDH), are providing support to reach children in need. To date, UNICEF and cluster members have reached 3,360 children aged 6-15 and 1,000 children aged 3-5 years through provision of Temporary Learning Centers (TLC) and Child-Friendly Spaces (CFS) in collaboration with the child Protection sector. Also, education materials were provided such as learner's kits, School-In-a Box and ECD kits. Four TLCs have been set up in the compounds of damaged schools and accommodation centres. CFS provide the opportunity for children to participate in creative activities and play before and after their classes, in collaboration with Save the Children (SC).

UNICEF has also provided education supplies to the Provincial Education Department in Sofala province this week to support 14,000 students to go back to school. While the focus area has been Beira and Dondo district, UNICEF is expanding its support to other locations in collaboration with its implementing partners. In Buzi district, one of the most affected districts, UNICEF conducted a rapid assessment to obtain first hand data. UNICEF will send education supplies to Manica province (second worse affected province) once list of priority schools for distribution has been received from the provincial education authorities.

On cluster coordination, UNICEF is playing a major role as co-cluster lead with Save the Children in Maputo, Chimoio, Beira and Zambezia. In these locations, UNICEF and SC support MINEDH to organize regular cluster meetings with the active participation of thirty-six partners. Currently, UNICEF and SC are compiling all the support provided by partners to date and potential support in the near future.

Child Protection

UNICEF is leading the child protection sub-cluster in Sofala and Manica province. The number of children supported by UNICEF Child-Friendly Spaces in Sofala and Manica has nearly doubled over the past week, with 4,837 children receiving psychosocial support services. Through combined efforts by agencies, over 22,000 children are currently enrolled in child-focused activities. To document the presence of unaccompanied or separated children, assessments have been conducted in remote areas of Sofala and Manica. The data collected through the assessments found children who were orphans before the cyclone and are accompanied by adult relatives. Follow-up is ensured through the regular case management system. Agencies in Sofala continue to be involved in the relocation process of the affected population and follow established SOPs for assistance to children particularly at risk of separation and abuse, including girls and children with disabilities. Agencies are also coordinating to ensure comprehensive response to gender-based violence (GBV). Eight agencies are currently providing GBV services in six affected districts and four national NGOs are providing community-based case management services and an additional two have community-based networks for referral at provincial level. Progress is being made by IOM, UNICEF, UNFPA and UNHCR towards an integrated approach between protection and GBV in Sofala. Police officers, health and social workers will pilot this initiative in six camps to ensure a holistic response is embedded in government mechanisms.

Communication for Development (C4D)

With UNICEF support, more than 900 social mobilizers reached 30,000 families in the most critical areas of Beira promoting preventive WASH-related behaviours to stop the spread of the cholera infection. Thirteen radio messages were broadcast daily on national and community radios. Mobile unites spreading audio messages at community level and video projection focused on adoption of WASH-related behaviours, reaching an estimated 19,000 people. In Manica province, an advocacy meeting was held with mass media and social mobilization partners (TV Mozambique, Radio Mozambique and the Institute of Social Communication), and mapping of 17 social mobilization potential partners was completed. PSEA and GBV key messages and training is being coordinated by UNICEF, UNFPA, Save the Children and Government.

Partnerships have been established with implementing partners to extend the community mobilization in Beira to the district of Dondo, Nhamatanda and Buzi.

UNICEF's partnership with Mozambique Red Cross/IFRC has been finalized to establish 15 oral rehydration points and for the deployment of 200 social mobilizers in Beira and Dondo.

Supply and Logistics

The first wave supply plan has been developed and deliveries are ongoing. While the second wave supply plan, which is under development, focuses on local and regional sourcing and sea shipments for offshore supplies, where possible.

The main logistics base was established in Beira, with two warehouse locations and total storage capacity of 800 m² which will be increased to 1000 m² based on anticipated storage needs. Agreements have been established with local logistics partners in Beira to support in-country logistics and transport needs. More than 90 per cent of delivery points are now accessible by road. Delivery points not accessible by road are being served by air through the Logistics Cluster.

A secondary logistics base is being established in Chimoio, Manica. Warehousing will be provided via the Logistics Cluster, with a total capacity of 1000 m². UNICEF will assess the need for an independent storage capacity to serve its needs in the longer-term.

Emergency supplies are subject to an expedited custom clearance process. UNICEF obtains exemptions and clearance is carried out by the contracted clearing agent in Maputo and Beira.

The Logistics Cluster provides air transport services between Maputo, Beira and Chimoio. In addition, land transport is covered through UNICEF's transport long term agreements.

Funding

Based on the initial assessments and needs, UNICEF is requesting US\$102.6 million to meet the humanitarian needs of people affected by Cyclone Idai, as well as to support the recovery phase of the response. The UNICEF appeal covers March to December 2019. The UN Flash Appeal for Idai response has a funding requirement of US\$281.7 million and covers the first three months of the response supporting 1.72 million people, of which UNICEF's portion is US\$30 million.

As of 13 April 2019, UNICEF secured funding of almost US\$ 12.5 million from CERF (WASH, Health, Nutrition, Protection, Education), DFID, Sweden and several National Committees, including the German National Committee, and is engaging other public and private sector partners. UNICEF Mozambique also released US\$1 million of its contingency reserve from internal regular resources and accessed US\$8 million emergency loan from HQ (EPF).

UNICEF Mozambique Humanitarian Action for Children (HAC) initial estimated Requirements for IDAI cyclone response		Funds available	Funding gap	
Appeal Sector	Requirements (US\$)	Funds received current year (US\$)	US\$	%
Water, sanitation and hygiene	\$30,000,000	\$4,628,693	\$25,371,307	85%
Nutrition	\$6,000,000	\$210,940	\$5,789,060	96%
Health	\$11,000,000	\$2,586,256	\$8,413,744	76%
Child protection	\$4,000,000	\$982,117	\$3,017,883	75%
Education	\$20,000,000	\$2,349,058	\$17,650,942	88%
Communications For Development	\$1,600,000	\$616,023	\$983,977	61%
Logistics and Operations	15,000,000	\$1,120,000	\$13,880,000	93%
Resilience and Recovery	15,000,000	\$0	\$15,000,000	100%
Total	\$102,600,000	\$12,493,087	\$90,106,913	87%

Next SitRep: 19 April 2019

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ANNEX I: UNICEF targets for Cyclone Idai response

	Cluster/sector		UNICEF		
WASH	Cluster Target	Cluster Results**	UNICEF Target	UNICEF Results	
People provided with access to safe water (7.5-15L per person per day)	1,435,000	907,259	965,000	771,856	
People benefiting from sanitation, hygiene promotion activities, including point-of-use water treatment safe practices	435,000	326,625	267,500	250,000	
Health					
Children aged 6 months to 15 years vaccinated (OCV/Measles)			500,000	330,567 ¹	
Children under-five receiving a consultation			229,500	1,697	
Nutrition					
Children under five years of age screened for acute malnutrition	328,000	10,542	328,000	10,542	
Pregnant and lactating women reached with IYCF services	100,000	468	100,000	468	
Education					
Children aged 6-15 years old in humanitarian situations accessing education	500,000	3,360	380,000	3,360	
Children aged 3-5 years old in humanitarian situations accessing play-based learning	100,000	1,000	76,000	1,000	
Child Protection					
Children receiving psychosocial support through Safe Spaces			20,000	4,837	
Separated and unaccompanied children are identified and are in family-based care or an alternative care			400	12	
Communications for Development					
Number of people reached with key lifesaving and behavior change messages on health, nutrition and safe and appropriate sanitation and hygiene practices.			700,000	449,000	

¹ 1-14 yrs are estimated to 41.2% of the population. This proportion was to calculate the oral cholera vaccination achieved.