

GOMBE EMERGENCY RESPONSE PLAN MOZAMBIQUE

JUNE 2022



Table of Contents

05	Crisis overview
07	Strategic objectives
12	Financial requirements by sector
13	CCCM
14	Education
15	Food Security and Livelihoods
16	Health
18	Logistics
19	Nutrition
21	Protection
22	Refugees
24	Shelter / NFIs
25	Water Sanitation and Hygiene
27	Coordination
28	METHODOLOGY
29	Annex: List of participating organizations
30	Acronyms
31	End notes
32	How to support this Emergency Response Plan

Gombe Emergency Reponse Plan at a Glance

PEOPLE AFFECTED

736K

PEOPLE IN NEED

697K

PEOPLE TARGETED

387K

REQUIREMENTS (US\$)

48.07M

WOMEN & GIRLS

52%

CHILDREN

62%

WITH DISABILITY

15%

ELDERLY

2%

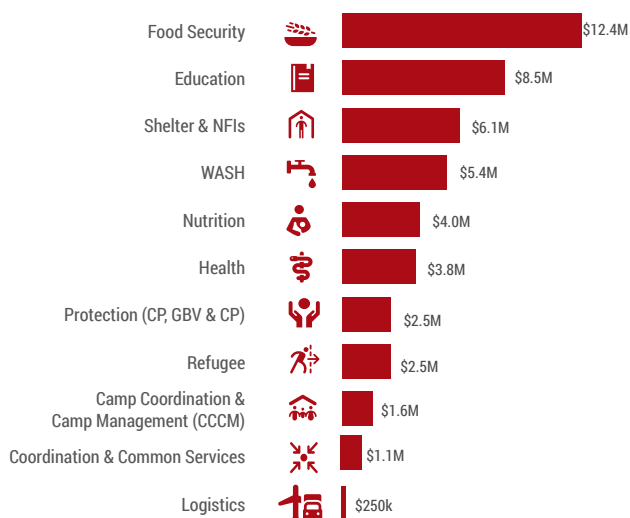
WITH HIV

11.5%

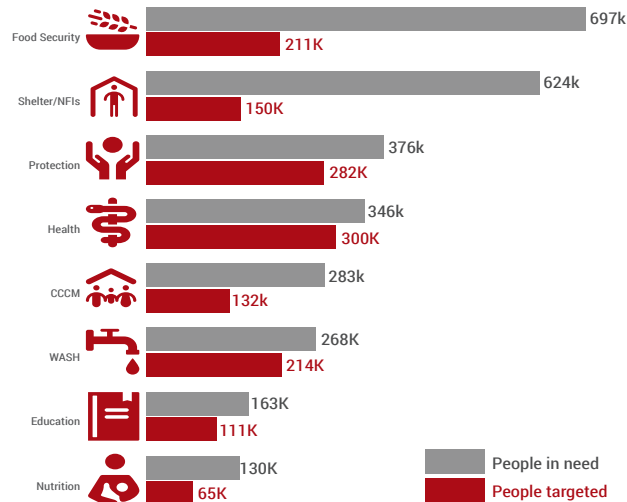
Strategic Objective:

Save lives and livelihoods by providing an integrated package of humanitarian assistance and protection to people impacted by Cyclone Gombe by the end of September 2022

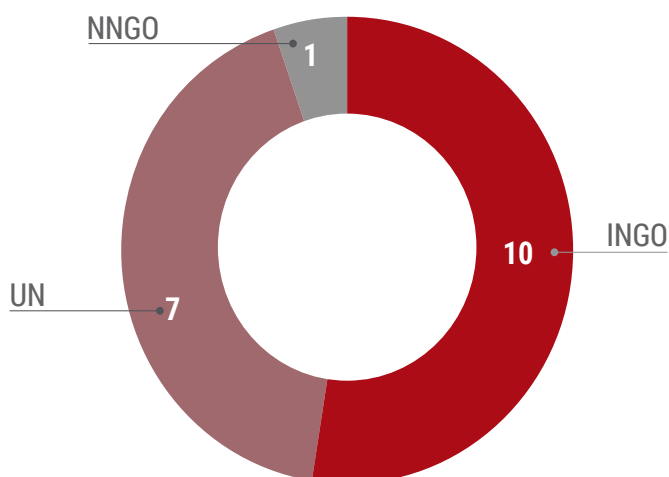
Financial Requirement by Cluster



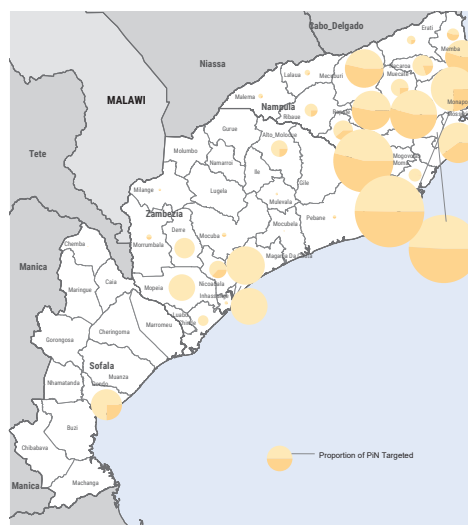
People in Need & Targeted by Cluster



Operational Partners by Type



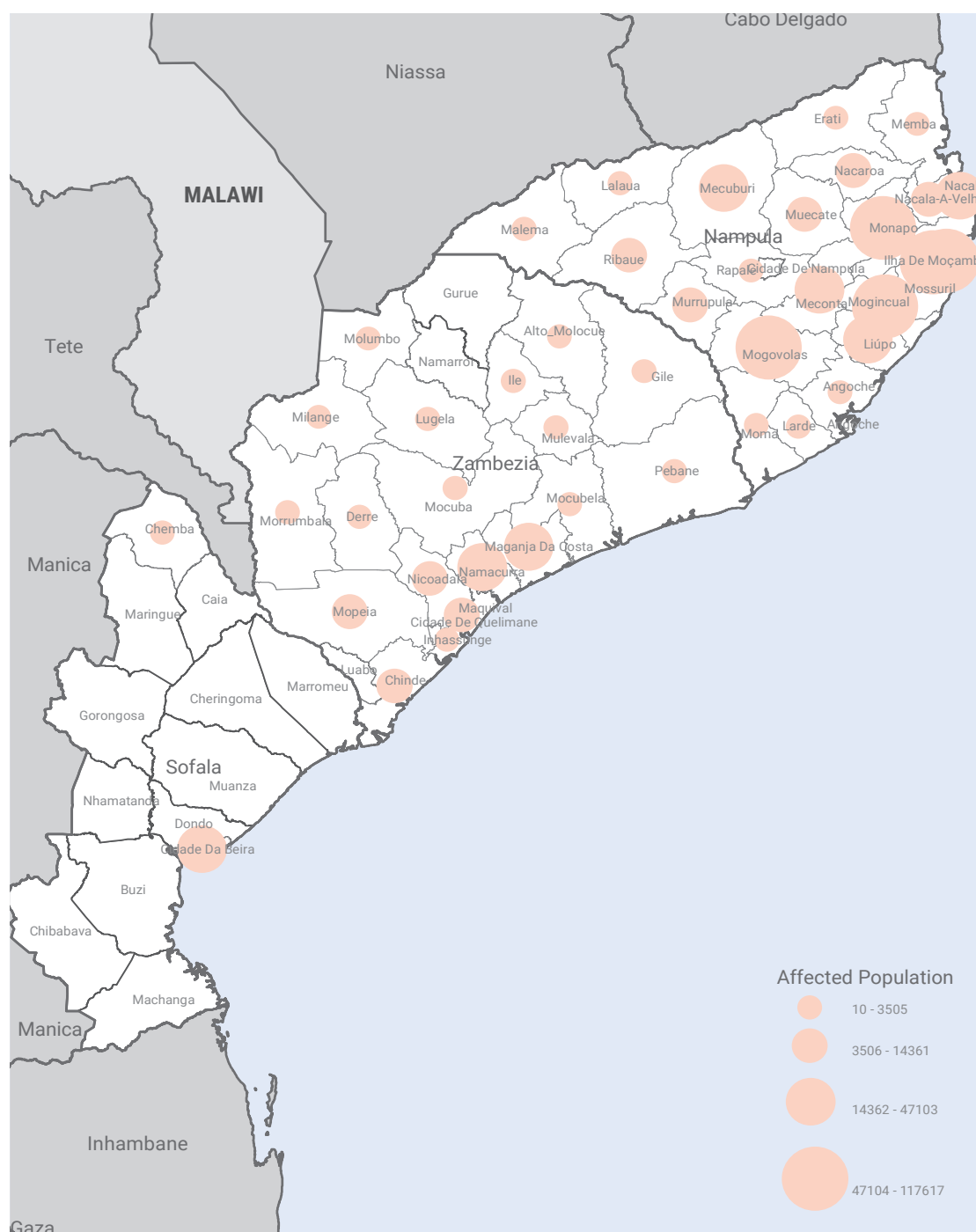
Proportion People in Need Targeted



AFFECTED POPULATION	PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
736K	697K	387K	\$48M

UN AGENCIES, FUNDS AND PROGRAMMES*	NGOS AND RED CROSS*
7	11

* Included in this Emergency Response Plan



CRISIS OVERVIEW AND IMPACT

Communities in Mozambique are suffering from the impact of Tropical Cyclone Gombe, which left a trail of severe damage and devastation in its path. Tropical Cyclone Gombe made its first landfall in Mozambique in Nampula province on 11 March, hitting as a Category 3 cyclone and bringing torrential rains (200mm/24h) and violent winds (150-185km/h). The fury of Gombe's winds toppled trees and ripped off roofs of buildings, destroyed houses, schools, and health centers, and washed away roads and crops. Overnight, hundreds of thousands of people were affected, and thousands were left homeless.

At the height of the crisis, more than 736,000 people were affected, and 23,000 people were displaced. The displaced persons sought shelter in schools, churches, mosques, abandoned buildings, and government administrative headquarters posts, turning these into over 68 temporary accommodation centers across the affected provinces (44 in Nampula province and 20 in Zambezia, along with four relocation sites). Corrane resettlement site, which hosts over 1,605 families (7,235 individuals) displaced from the conflict in Cabo Delgado, was greatly affected by the cyclone, with more than 742 shelters severely damaged as well as some 400 more shelters and numerous other infrastructures partially damaged.

The cyclone made landfall near the areas where Tropical Storm Ana and Tropical Depression Dumako had already struck six weeks prior, exacerbating pre-existing vulnerabilities. The combined effects of Tropical Storm Ana, which hit the country in January, and Tropical Depression Dumako, which struck in February, affected more than 200,000 people in Nampula, Zambezia, and Tete provinces. After hovering over Nampula province, Tropical Cyclone Gombe moved out into the sea, only to track back into Mozambique and make a new landfall in Zambezia province at the stage of a tropical depression.

The new landfall brought new rains, which triggered further flooding.

The magnitude of needs and damage is widespread and severe. The final data on the impact released by the Institute for Disaster Management and Risk Reduction (INGD) indicated that Gombe affected at least 736,015 people (148,253 families) across Nampula, Zambezia, and Sofala provinces, causing 63 deaths and injuring 108 people. As of mid-April, a total of 141,854 houses were partially damaged or destroyed, along with 69 health centers, 2,265 classrooms (affecting 216,003 students), 2,764 electricity poles, and 21 water systems. Some 91,177 hectares of crops were lost, with grave concern for the food security outlook of the affected areas. A total of 1,243 km of roads were severely damaged.

Nampula province, the area most affected by Gombe and a very densely populated one, is an economically and culturally dynamic part of Mozambique due to the Nacala port and railway connecting Malawi and Zambia with the Indian Ocean. The province accounts for 14.8 per cent of Mozambique's Gross Domestic Product (GDP) and hosts Ilha de Moçambique, a UNESCO World Heritage Site. In addition to being densely populated, Nampula hosts more than 100,000 IDPs from the conflict in Cabo Delgado.

The Government's preparedness and response efforts played a critical role in preventing further loss of lives and quickly responding to the unfolding needs of the displaced people who had lost everything. Pre-emptive evacuation and early warning messaging broadcasted by INGD alerted communities of the impending danger. Response efforts included prepositioning and distributing food and non-food items, search and rescue operations, evacuation of the stranded population, and establishment of temporary accommodation centers, among others.

National authorities and the UN teams have worked hand in hand to gain access, assess needs, and deliver

urgent assistance to those in need. As the scale of the disaster became apparent, humanitarian partners continued working to scale up the ongoing response in coordination with the Government.

In the last few weeks, the early multi-sectoral response mechanisms of the Government and humanitarian partners, coupled with individual resilience, enabled a rapid return process for many displaced families to their areas of origin. Nonetheless, several displaced persons could not return to their places of origin due to the complete or partial destruction of their homes and property. Others were unable to return due to their specific vulnerabilities, as was the case for elderly, child-headed families, single-headed families, and persons living with disabilities. As of mid-April, only four temporary accommodation centers remained open in Ilha de Moçambique.

However, the humanitarian needs generated by Gombé are currently outstripping the capacity of humanitarian organizations to respond. Resources to respond to the crisis in the north were already scarce at the beginning of the year when Tropical Storm Ana and Tropical Depression Dumako impacted Mozambique and created new needs. Additional support is urgently needed to cover the people's basic needs.

More resources are needed to do more as needs are severe. People require safe, temporary shelter and repair kits to rebuild their homes and their lives. Many of them still require food, potable water, medicines, and sanitation and hygiene facilities to prevent water-borne diseases and support weakened communities that have been exhausted by three consecutive natural disasters. Health facilities must be urgently repaired to enable them to provide essential services, particularly nutrition and reproductive services. Schools must also be repaired to ensure the continuity of education and prevent those thousands of children drop out of school. These children had already seen their education jeopardized during the pandemic. They now cannot go back because their classrooms were damaged or destroyed or used as accommodation centers by people who had lost their houses. People who lost their livelihoods will require immediate assistance and agricultural support to

avoid facing higher levels of food insecurity and further exposure to risks of sexual exploitation and abuse.

Humanitarian partners are particularly concerned about heightened food insecurity amongst the affected communities, particularly if the waters do not recede soon. Flooding could lead to a harvest loss and a substantial increase in food prices when Mozambique faces a fragile food security situation, with approximately 1.9 million people estimated to be food insecure (IPC Phase 3 or above).

There are widespread protection concerns in the aftermath of the cyclone as families have been separated. The risk of gender-based violence (GBV) is rife, and many of the displaced or evacuated people have lost civil documentation. People impacted by the cyclone require mental and psychosocial support to cope with the uncertainty about their situation following the loss of property and livelihoods in the medium to long term. In such a context, harmful coping mechanisms such as transactions sex, child labor, and human trafficking are also a risk.



Photo: UN Mozambique

Strategic Objectives

Strategic Objective 1

Save lives and livelihoods by providing integrated package of humanitarian assistance and protection to people impacted by Cyclone Gombe by the end of September 2022

Humanitarian programming will prioritize assistance to people with the most acute needs and in life-threatening situations. The response will encompass the provision of food and non-food assistance, the restoration of access to quality basic services, such as education and health, psychosocial support, nutrition, water sanitation and hygiene, and the provision of shelter. In addition, partners will implement a protection-centred

approach to humanitarian programming that alleviates the suffering faced by the most vulnerable population.

Specific Objective 1:

Humanitarian programming will prioritize assistance to people with the most acute needs and in life-threatening situations.

Specific Objective 2:

The response will encompass the provision of food and non-food assistance, as well as restoration of access to quality basic services, such as schools and health, nutrition, water, sanitation and hygiene as well as shelter.

Specific Objective 3:

Humanitarian partners will work in an integrated approach that concomitantly addresses both humanitarian and protection needs of cyclone impacted persons – including gender-based violence, child protection and PSEA - as well as uphold commitments to the centrality of protection across the humanitarian response.

RESPONSE STRATEGY AND COORDINATION

This Emergency Response Plan focuses on delivering life-saving, and life-sustaining assistance and protection to 387,000 people out of 697,000 people estimated to be in need between April and September 2022. The Emergency Response Plan was formulated on the premise that a multi-sectoral and integrated response to the crisis is critical to providing a holistic response to people's needs.

This response will be geographically focused on the most affected districts of Nampula, Zambezia, and Sofala provinces, to maximize the impact of collective humanitarian action. The emergency response plan requires U\$48 million, of which \$4 million has already been mobilized through the United Nations Central Emergency Response Fund (CERF) Rapid Response Window. To ensure that partners can rapidly scale up their response, it is critical that additional funding is received swiftly under the Emergency Response Plan. The quick scale-up is urgent for sectors that need to procure supplies, some of which face imminent pipeline breaks.

This Emergency Response Plan complements the Government's ongoing response efforts by focusing on the immediate actions that humanitarian partners can support in the coming six months. Humanitarian partners with projects in the emergency response plan have considered the Government's planned activities in their responses, ensuring optimal complementarity and synergies whenever feasible. The emergency response plan brings together the work and funding requirements of the humanitarian community in Mozambique, including the United Nations, International Non-Governmental Organizations (INGOs), and National NGOs (NNGOs). In particular, the appeal acknowledges the critical role of organizations working with and for their communities.

The projects and financial requirements presented in the Emergency Response Plan for Cyclone Gombé are separate from those included in the 2022 Humanitarian Response Plan (HRP), which targets the humanitarian needs driven by conflict and displacement in Northern Mozambique. The 2022 HRP and Emergency Response Plan for Tropical Cyclone Gombé remain distinct in

their scope of work, timeframe, geographical focus, and targeted caseloads. The Humanitarian Country Team (HCT) in Mozambique reiterates that efforts to respond to the humanitarian needs arising from the impact of Tropical Storm Gombé should not draw capacities or resources away from the response in Northern Mozambique.



Photo: WFP Mozambique

CENTRALITY OF PROTECTION, ACCOUNTABILITY TO AFFECTED PEOPLE AND PROTECTION AGAINST SEXUAL EXPLOITATION AND ABUSE

The Emergency Response Plan ensures the Centrality of Protection, including protecting children from violence, abuse, neglect, exploitation, and harmful practices. This approach also includes protecting the most vulnerable groups' rights, such as persons with disabilities and the elderly, focusing on preventing and responding to GBV, particularly among displaced people. The implementation of complementary protection actions across sectors promotes an inclusive and tailored response that addresses the unique needs of women, men, girls and boys, people living with disabilities, people living with HIV/AIDS, and the elderly.

Government-led response. The organizations included in the Flash Appeal have a well-established presence in the affected provinces. They have scaled up their activities to respond to the needs generated by the cyclone.

Tropical Cyclone Gombe significantly affected physical access to several areas, particularly in the Nampula and Zambezia provinces, damaging logistics infrastructures (including warehouses and power lines), critical road networks, culverts, and bridges. Together with private sector partners, national and provincial authorities are rehabilitating roads, bridges, and power lines. However, some of these works are temporary, and there continues to be limited transport capacity and insufficient fuel in affected communities.

COORDINATION

INGD is leading the coordination of the response to Tropical Cyclone Gombe through its National Emergency Operational Centre (CENOE), with support from humanitarian partners, including INGOs/NNGOs, UN entities, and donors. Provincial Operational Emergency Centres (COE) were active in Nampula, Zambezia, and Sofala provinces, coordinating action in the hardest-hit districts. The District Operational Emergency Centres (COE) played a crucial role in ensuring a coordinated, timely, and predictable approach to the humanitarian response at the district level.

The Humanitarian Country Team (HCT) includes heads of UN entities, international and national NGOs, donors, and observers. This team is chaired by the Humanitarian Coordinator (HC), who convenes bi-weekly HCT Team meetings to ensure coordinated and principled response operations.

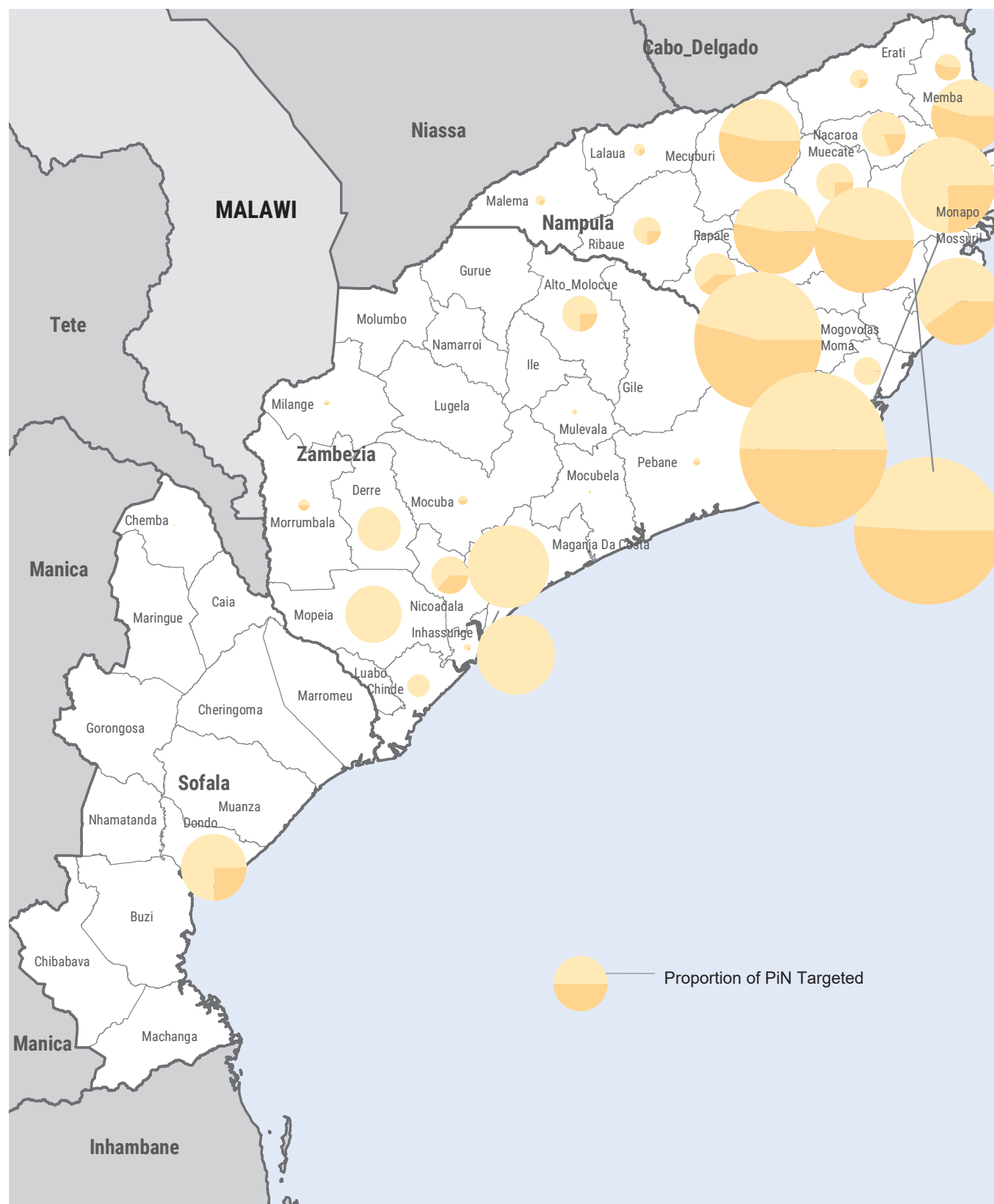
OPERATIONAL CAPACITY, ACCESS & FEASIBILITY

Under this emergency response plan, 18 humanitarian partners—including one NNGO, ten INGOs, and eight UN entities—will implement activities supporting the



Photo: WFP Mozambique

Inter-sectorial People in Need Targeted



Cluster Financial request, PiN and Target Pages



CAMP COORDINATION AND CAMP MANAGEMENT



PEOPLE IN NEED

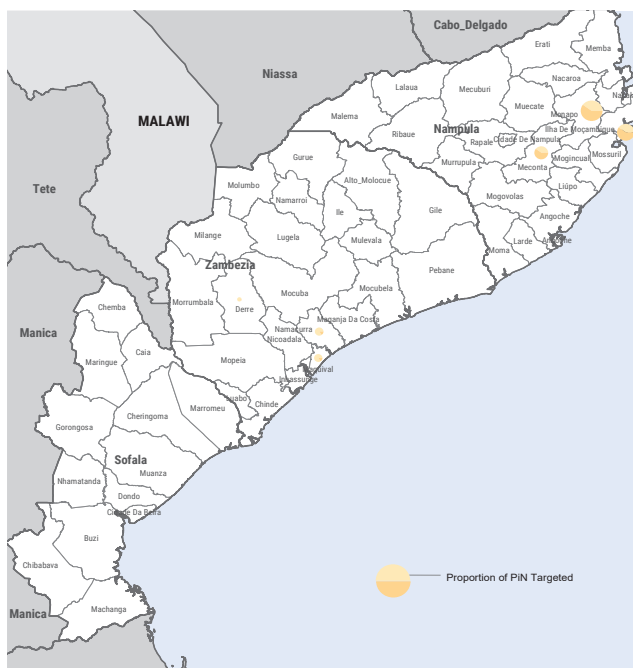
283K

PEOPLE TARGETED

132K

REQUIREMENTS (US\$)

\$1.6M



RESPONSE STRATEGY

More than 283,000 require camp coordination and camp management services, including reception management in critical displacement hotspots and community engagement. The CCCM Cluster will target 131,728 displaced persons in sites and site-like settings within the Nampula and Zambezia provinces with a service package that includes site facilitation and maintenance, site planning, service mapping, and monitoring, information management and coordination support, community engagement and protection mainstreaming in site management and response, and support to relocation or return processes. In coordination with the Government authorities, CCCM partners will deploy dedicated static and mobile teams personnel and remote approaches in hard-to-reach locations where infrastructure was impacted. Additionally, the CCCM Cluster will support the Government in reaching affected populations within host communities through the out-of-camp process, where information centers are established to enable affected persons to access available humanitarian services. The cluster will carry out capacity-building activities and information management support to strengthen INGD, district government administration, and community leadership and coordination structures. CCCM teams will be deployed in different areas of operation, mainly using in-kind service provision to strengthen the resilience of displaced persons and affected people in the host communities.

PRIORITY ACTIVITIES

1. Provision of community engagement support in camp settings and human settlements.
2. Capacity-building of Government counterparts on minimum humanitarian standards and camp management and coordination, including humanitarian reception management in displacement hotspots receiving an influx of new arrivals.
3. Community engagement process to ensure consultation with host communities and IDPs in the establishment of the new sites.
4. Site planning, including plot demarcation, clearing of sites, and preparation to ensure adherence to the minimum humanitarian standards.
5. Extension of the CCCM mobile approach in critical displacement hotspots.

EDUCATION



PEOPLE IN NEED

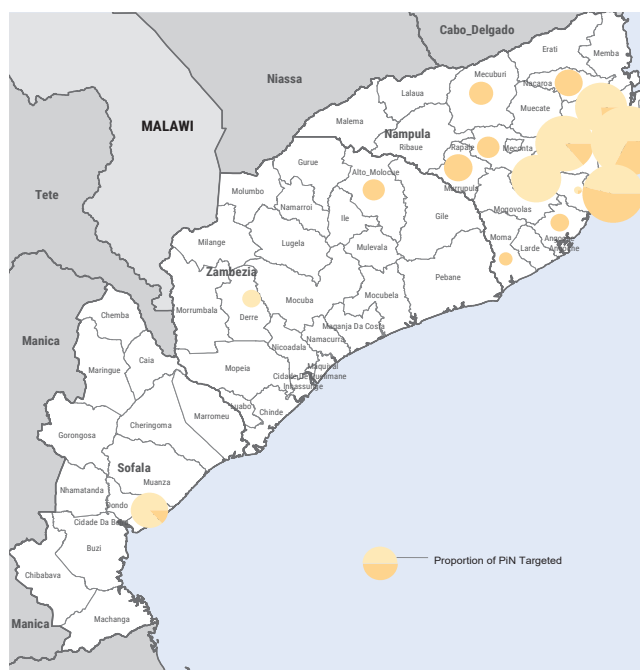
163K

PEOPLE TARGETED

111K

REQUIREMENTS (US\$)

\$8.5M



PRIORITY ACTIVITIES

1. Rehabilitation of damaged schools.
2. Construction of temporary learning spaces (TLS) and provision of school meals to facilitate the return to school.
3. Rehabilitation of damaged latrines and bathrooms in schools affected to ensure safe conditions for the return of children to educational activities.
4. Distribution of learning and teaching materials.

RESPONSE STRATEGY

An estimated 2,265 classrooms were damaged or destroyed after Cyclone Gombe, affecting over 216,000 children and 4,420 teachers. The damage to schools includes damage to teaching and learning materials. Additionally, as thousands of people lost their homes and became displaced, several schools were being used as accommodation centers for local people causing

further damage to classroom infrastructure, including bathrooms and latrines. As a result, many schools have not started classes, and children have remained out of school since 11 March 2022. With 49 per cent of children living below the poverty line, student absenteeism, and low level of girls' retention already being an obstacle for Mozambique, schools cannot afford to lose enrolled children following the emergency created by Gombe. If schools remain closed for extended periods, children are more likely to drop out. In Nampula, where high rates of early marriage were reported, government officials in Ilha de Moçambique expressed particular concern for girls who faced the risk of not returning to school due to the pressure of social norms. At the same time, boys turned to forms of child labor to support their families. The focus of the Education Cluster is to ensure that 105,000 children between the ages of 5-and 18 affected by Cyclone Gombe are supported in returning to school and provided with a safe place to continue their social, emotional, and educational development. The Education Cluster aims to provide as much coverage as possible on school grounds through the rehabilitation of 740 classrooms and rapid temporary learning spaces construction. Repair of damaged latrines and bathrooms will be supported to facilitate the resumption of educational activities in safe conditions. To motivate children to return to school, the Education Cluster will support the distribution of learning and teaching materials and provide school meals in locations where temporary learning spaces are being established.

FOOD SECURITY AND LIVELIHOODS



PEOPLE IN NEED

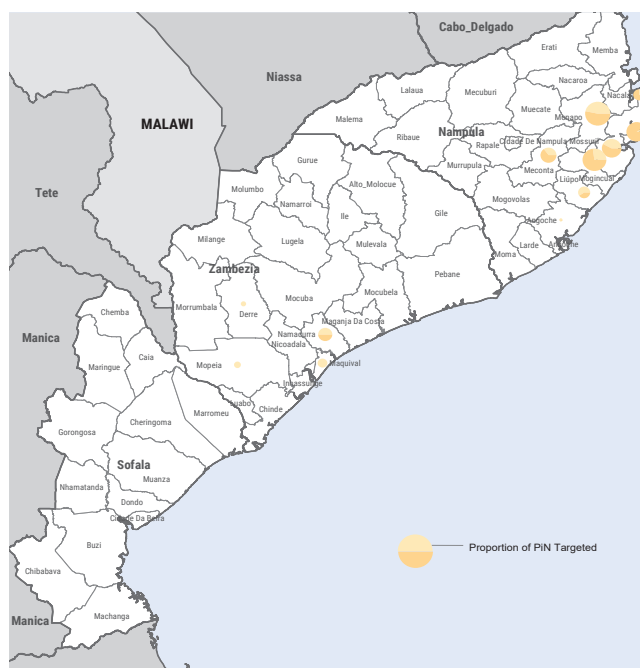
697K

PEOPLE TARGETED

211K

REQUIREMENTS (US\$)

\$12.4M



impacting the development of the main crops with long-term consequences for the food security of the affected population. INGD reported that Cyclone Gombe destroyed up to 91,177 ha of crops, leading to a possible food shortage for two to five months. While the Food Security and Livelihoods Cluster is still waiting for the results of the remote sensing analysis that FAO is conducting in the affected locations to measure the actual impact on the crops, it is easy to predict that all those whose houses have been destroyed (78,635 according to the final figures shared by INGD), as well as many of the flooded ones (9,608 ha), might have lost all their food stocks, and most likely all their productive agricultural assets. Before Cyclone Gombe, Nampula already had 7 per cent of its population in IPC3 (crisis) level, 8 per cent in Zambezia, and 6 per cent in Sofala (IPC November 2021). However, likely, a high percentage of the population in IPC2 (stressed) level had reached IPC3 following the shock, possibly leaving more than one million people in need of assistance.

PRIORITY ACTIVITIES

1. Provision of food assistance to the most affected populations covering approx. fifty per cent of the essential needs per month for a total of three months.
2. Enhancement of agricultural production through short-cycle crop seeds, agriculture hand tools, and fertilizer.
3. Provision of capacity building to improve agriculture production practices.
4. Provision of livestock support and income Generating Activities (IGAs) focusing on women.

RESPONSE STRATEGY

The affected population is in dire need of food assistance, and livelihoods support to recover productive agricultural assets. Cyclone Gombe hit areas that had already been affected by extreme rainfall brought by Tropical Storm Ana, thus further

The Food Security and Livelihoods Cluster will provide food assistance (fifty per cent of the essential needs) to 211,000 people for three months until the first harvest of short-cycle crops is ready. The Food Security and Livelihoods Cluster will continue targeting the affected areas with resilience-building activities through other funding sources to ensure that livelihoods are sustainable and more resilient to future shocks. Provision of agriculture extension, training of farmers, restoration of agriculture and community assets, and promotion of alternative livelihoods will remain key focus areas of engagement to ensure better resilience to similar shocks in the future.



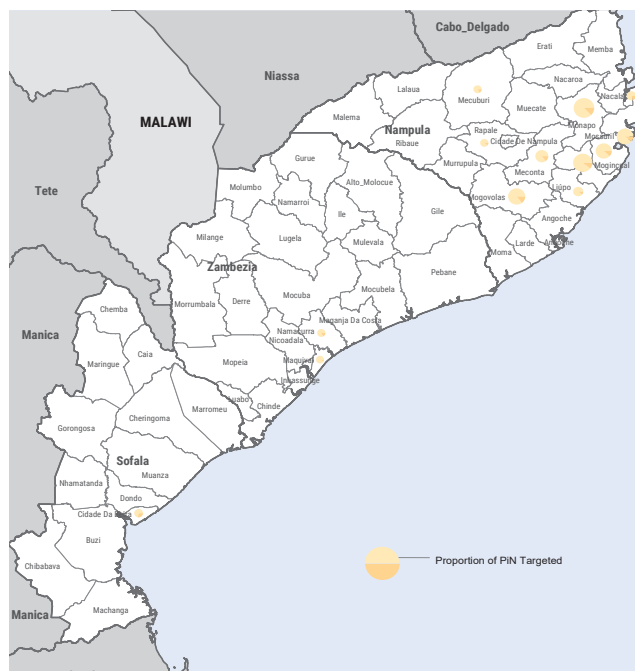
PEOPLE IN NEED

346K

PEOPLE TARGETED

300K

REQUIREMENTS (US\$)

\$3.8M

PRIORITY ACTIVITIES

1. Support medical stock replenishments by procuring and delivering life-saving essential medical and emergency supplies, including emergency medical kits (IEHK, Cholera kits, ERHK), medical equipment (cold chain, viral load machines, etc.) required to re-establishing services essential health services.
2. Reduce morbidity and mortality in the most affected areas by increasing access to integrated primary health care packages for the prevention/treatment of common diseases.
3. Ensure maternal and newborn child health through mobile brigades, re-establish services in static health facilities, and provide lifesaving sexual reproductive health and clinical management of SGBV cases.
4. Integrate mental health and psychosocial support in Health facilities and mobile brigades.
5. Ensure support for the Community Health Workers (CHW) network to resume delivering critical services

at the community level.

6. Strengthening measures to prevent, promptly detect, and ensure a multisectoral response to health outbreaks (including cholera, measles, malaria, polio, COVID-19).
7. Ensure inter-sector coordination to deliver effective, efficient, and coordinated services to the affected population.

RESPONSE STRATEGY

The destruction wrought by Gombe has compromised the provision of essential health services, thus increasing the likelihood of mortality and morbidity. In the three most affected provinces affected by Cyclone Gombe, 69 health facilities were damaged. The continuity of care and the delivery of life-saving interventions, including sexual, reproductive, maternal, newborn, child, and adolescent health and chronic conditions such as HIV/AIDS, TB, and non-communicable disease have been compromised; it is estimated that more than 345,819 people require health care services. Among the affected population, there are approximately 17,291 pregnant women. Reduced access to essential health services may lead to increases in preventable maternal, newborn, and child deaths, among others. These risks are further exacerbated when combined with pre-existing vulnerabilities, including uneven coverage for routine immunization and the stressed food insecurity situation in many affected areas. In previous years, immunization gaps have resulted in measles and other communicable disease outbreaks. The rapid recuperation of health services and healthcare delivery capacity is a priority to ensure timely and efficient medical care and continuity of essential services for pregnant women and those exposed to GBV. Lack of water in the affected areas and the deterioration of living conditions increase the importance of strengthening

HEALTH



epidemiological surveillance systems through networks of health facilities to support the early detection of disease outbreaks. Considering the high potential for communicable diseases, strengthening outbreak prevention and response is a high priority for Health Cluster partners. Efforts to reach remote health facilities through mobile clinics and referral to closer facilities using motor ambulances and the existing community health workforce are critical in saving people's lives.



PEOPLE IN NEED

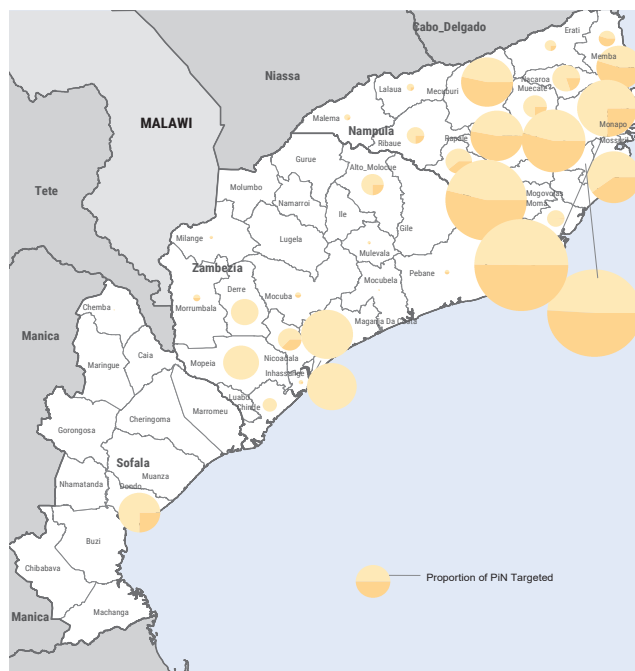
697K

PEOPLE TARGETED

387

REQUIREMENTS (US\$)

\$250K



the waters of the Monapo river rising to the level of the road, Lunga in the Mussoril district became inaccessible by land. For the locations that can be reached by road, WFP will support the transport of relief items for the humanitarian community and the Government using the appropriate capacity trucks and alternative roads available. Coastal transport using dhows with 7.5 to 10Mt capacity ex-Lumbo (Mozambique island) has been used as an alternative for people and goods movements; WFP will employ the same modality necessary to move the relief items. In terms of warehousing, WFP has a presence in Nampula and a logistics hub in Nacala, which will be used to organize the response. Since only small payload trucks can reach the distribution sites, commodities will be prepositioned in both locations. These activities will be undertaken under the guidance of the humanitarian coordination structures (the Inter-Cluster Coordination Group and HCT) to ensure timely and well-coordinated logistics service provision to the humanitarian community and, indirectly, to the general population

PRIORITY ACTIVITIES

1. Transport, by road and water of relief supplies.
2. Storage and handling of relief supplies in support of the humanitarian operation

RESPONSE STRATEGY

Humanitarian access is hampered by physical constraints due to the extensive damage to road infrastructure, with partners currently using boats to access the isolated populations. Most of the significant infrastructure damage occurred along the coastal areas of Nampula, with the following districts being the most affected; Liupo, Angoche, Mongicual, Moma, and Larde. A logistics assessment mission that WFP and INGD conducted between 23 and 25 March confirmed that over 1,182 kilometers of roads were reportedly affected by the rains. As of 25 March, some 238 km remained unpassable due to the collapse of bridges and transport infrastructure or high-water levels along riverine areas. Following the collapse of the bridge on road R1155 and

NUTRITION



PEOPLE IN NEED

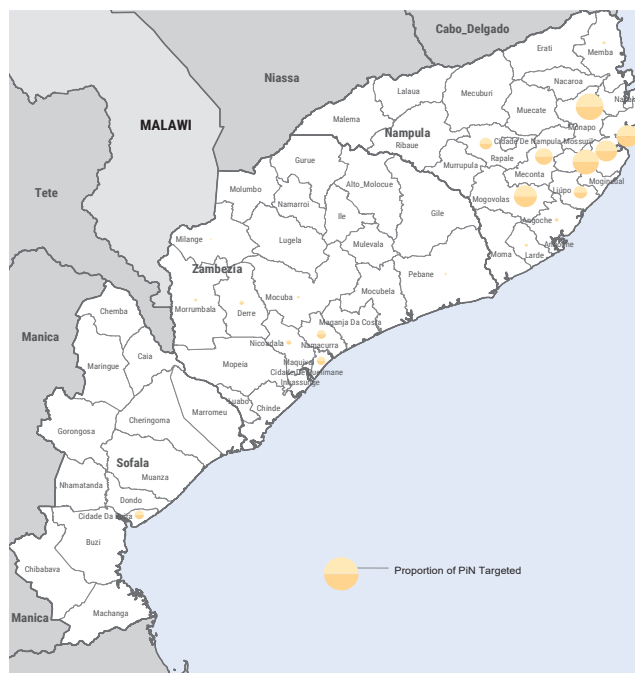
130K

PEOPLE TARGETED

65K

REQUIREMENTS (US\$)

\$4.0M



RESPONSE STRATEGY

Malnutrition is a pervasive concern as the nutrition sector is among the most affected by Cyclone Gombé. With 69 health facilities severely damaged across the affected areas, the capacity of health staff to provide life-saving nutrition support and care to people in need has been severely curtailed. Vast quantities of medicines, nutrition supplies, and materials for nutrition service delivery were lost during the cyclone. Chronic malnutrition was highly prevalent in the affected provinces, which are among the top five most nutritionally deprived, as evidenced by the highest wasting rates across the country (9.1 per cent in Nampula province, 3.1 per cent wasting in Zambezia province, and 3.4 per cent in Sofala province).

Fifty per cent of the children under five years of age screened during rapid needs assessments at the temporary accommodation sites had a fever; high malaria rates were reported along with 6 per cent proxy-prevalence of wasting (both moderate and severe malnutrition). Areas affected by Cyclone Gombé had already registered a high level of admissions in the previous three months for Severe Acute Malnutrition (SAM). A total of 4,757 children aged 6 to 59 months suffering from SAM and 6,463 children aged 6 to 59 months affected by MAM were admitted in Nampula, Sofala, and Zambezia in the first quarter of 2022. Among the 736,015 affected population, approximately 30,910 pregnant and lactating women (PLW) and 116,800 children under 5 need immediate humanitarian assistance, including critical nutrition interventions. Furthermore, reduced access to essential healthcare, WASH services, and life-saving nutrition services may exacerbate the nutrition status, leading to preventable maternal, newborn, and child deaths.

The Nutrition Cluster estimates a potential increase in people in need of nutritional support, due to the significant impact on agriculture and livelihoods of the

PRIORITY ACTIVITIES

1. Support nutrition supply stock replenishment through procurement and delivery of life-saving nutrition supplies and equipment required to re-establish services to treat severe and moderate wasting.
2. Screening, referral, and treatment of acute malnutrition cases and support community-based outreach activities to increase coverage of acute malnutrition services and provide an integrated package of health and nutrition interventions, including HIV.
3. Infant and Young child feeding counseling and support, including enforcement of Breastmilk Substitute Code in emergencies.
4. Implement rapid nutrition post-shock assessments for sectoral evaluation of the needs.

NUTRITION



affected population, alongside the disruption of health, water, and sanitation services. While the specific impact in the nutrition sector remains to be assessed in-depth, the situation is likely to deteriorate. Lessons learned from the response to Cyclone Idai in affected districts have shown a long-term impact on the population's health, as evidenced by the ongoing Pellagra outbreaks in Sofala and Manica provinces three years after the event.

The main objective is to provide life-saving humanitarian

support to prevent and reduce the burden of nutrition-related disease and wasting among affected people, with a two-pronged approach of i) restoration of nutrition service delivery and ii)implementation of high-impact nutrition interventions to prevent further deterioration of the nutrition situation in affected districts of Nampula, Zambezia, and Sofala.

PROTECTION



PEOPLE IN NEED

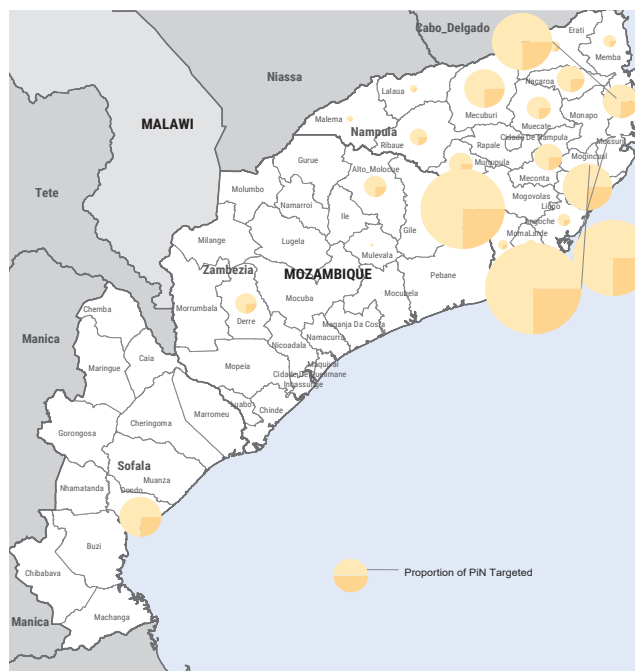
376K

PEOPLE TARGETED

283K

REQUIREMENTS (US\$)

\$2.5M



RESPONSE STRATEGY

There is an urgent need to ensure that individuals impacted and displaced by Gombe are protected and receive specialized and appropriate care and support. The Protection Cluster will focus its activities around the three pillars of Child Protection, Gender-Based Violence, and cross-cutting General Protection issues. Response modalities will include providing individualized protection services to those most in need, including through referral systems and deployment of mobile units to reach those not in transit centers with awareness creation and sensitization campaigns on GBV and child rights MHPSS, GBV, and child protection services. Support will be given to the authorities with regard to the provision of civil documentation to those who have lost their documents during the cyclone. Mobile units will also ensure that elderly persons and persons with disabilities are reached. The Protection Cluster will work to ensure that the capacity of community-based protection mechanisms and local protection actors are reinforced through the engagement and training of displaced people, host communities, local civil society, and local authorities and the provision of training and awareness sessions on protection, and PSEA to community leaders.

PRIORITY ACTIVITIES

1. Profiling, family tracing, monitoring, provision of civil documentation, and support to authorities of case management of affected people to facilitate access to essential life-saving services and humanitarian assistance.
2. Establish protection mechanisms such as mobile units to address individual protection needs, including civil documentation for people with specific needs and other vulnerable groups.
3. Provision of case management services to GBV survivors including SEA.
4. Strengthening psychosocial support (PSS) programming and nonspecialized Mental Health and Psychosocial Support Services (MHPSS) to individuals, families, and communities that have been exposed to displacement.

REFUGEES



PEOPLE IN NEED

26K

PEOPLE TARGETED

18K

REQUIREMENTS (US\$)

\$2.5M



PRIORITY ACTIVITIES

1. Provision of basic shelter kits to 932 households in Maratane refugee settlement to support housing repairs.
2. Provision of durable shelter model to 620 households in Maratane refugee settlement and 180 households from host communities, representing the most vulnerable and/or most affected by the cyclone.
3. Distribution of core relief items (CRIs) to 1,552 households in Maratane refugee settlement and 900 households from host communities.
4. Rapid infrastructure repairs in Maratane refugee settlement, namely: primary school; health center; UNHCR warehouse; vocational training center; transit center, and agriculture-related infrastructure.
5. Provision of basic repair kits to support repairing the damaged infrastructure related to livelihoods, such as poultry sheds and egg production sheds, and other livelihoods-related infrastructure in

Maratane refugee settlement and surrounding host communities.

6. Provision of capacity-building training on gender-based violence to Government counterparts and community leaders in Maratane settlement and host communities – including referral pathways – and mental health and psychosocial support (MHPSS) to refugees in the settlement and surrounding host communities.
7. Enhanced Preparedness and Emergency Response: Preposition of CRIs and upgrading the warehouse infrastructure and capacity development for the government and other partners.

RESPONSE STRATEGY

In the Maratane refugee settlement, 80 per cent of refugee households had their shelters severely damaged by Gombe and are in urgent need of safe shelter; the remaining 20 per cent are at risk of being severely damaged if not urgently repaired. Maratane hosts 9,300 refugees of multiple nationalities and has some 18,000 host community members living in villages around the settlement. Hundreds of vulnerable individuals are affected, particularly families with elderly and female-headed households who need support to repair their houses and core relief items (CRIs). Certain portions of the primary health centers were also severely damaged, and four primary school classrooms were damaged entirely and require new windows, doors, and roofs. Four primary school classrooms were damaged entirely. Severe damages were also reported in the settlement administration unit, the UNHCR warehouses, and the vocational training centers. Additionally, many refugees living in Maratane and host communities surrounding the settlement had their crops damaged. There are also pressing needs in mental health and psychosocial support (MHPSS) since the refugee population has

REFUGEES



already experienced trauma due to the conflict and violence. UNHCR's response strategy for refugees' needs is based on multi-sectorial and comprehensive activities that contribute to the strengthening of the protection environment. Based on the protection needs assessment conducted in Maratane refugee settlement and host communities, and a subsequent prioritization analysis exercise, UNHCR aims to ensure that the activities under this appeal will assist and protect

persons of concern in need, with increased focus on the most vulnerable groups. Additionally, through a rights-based and community-based approach, community engagement will remain at the center of planning and decision-making of UNHCR's key priorities in the cyclone Gombé response.affected people in the host communities.

SHELTER / NON-FOOD ITEMS



PEOPLE IN NEED

624K

PEOPLE TARGETED

150K

REQUIREMENTS (US\$)

\$6.1M



household items to secure safe, dignified, and healthy living conditions that provide at least basic protection from further adversities. The latest data from INGD indicates that Cyclone Gombe affected at least 736,015 people and 148,253 families in need of humanitarian assistance. Additionally, a total of 141,854 houses have been partially damaged or totally destroyed. The number of people displaced and hosted at accommodation centers has remained stable at 6,981 people. These figures are subject to change once detailed shelter assessments are conducted but, in the meantime, indicate that people continue to return to their homes to rebuild their lives. In terms of damaged and completely destroyed houses, DTM data is validated by INGD and reveals at the district level the caseload of people in need of support.

The Shelter Cluster aims to support 150,000 individuals to repair their partially and totally destroyed houses. The Shelter Cluster's strategy revolves around three categories of need: 1) IDPs or non-displaced hosting communities in need of emergency shelter support and NFIs, 2) people whose houses were destroyed in flood-affected districts and 3) people whose houses were partially damaged. The Shelter Cluster has conducted a severity ranking exercise based on the results of assessments completed and consultations with partners and authorities on the ground. The Shelter Cluster will prioritize IDPs in temporary accommodation centers (of which most have been closed already), resettlement sites where IDPs were previously relocated due to conflict, and the most vulnerable households residing with host families.

PRIORITY ACTIVITIES

1. Provision of immediate lifesaving shelter assistance, including basic household items such as blankets, sleeping mats, mosquito nets for most vulnerable groups.
2. Provision of shelter repair support for transitional shelter, distribution of shelter material with essential household kits, distribution of common pipeline toolkits and technical assistance for the repair or upgrade of totally damaged houses.
3. Provision of emergency support in more resilient housing, roof repair, provision of basic household items and training on resilient construction.

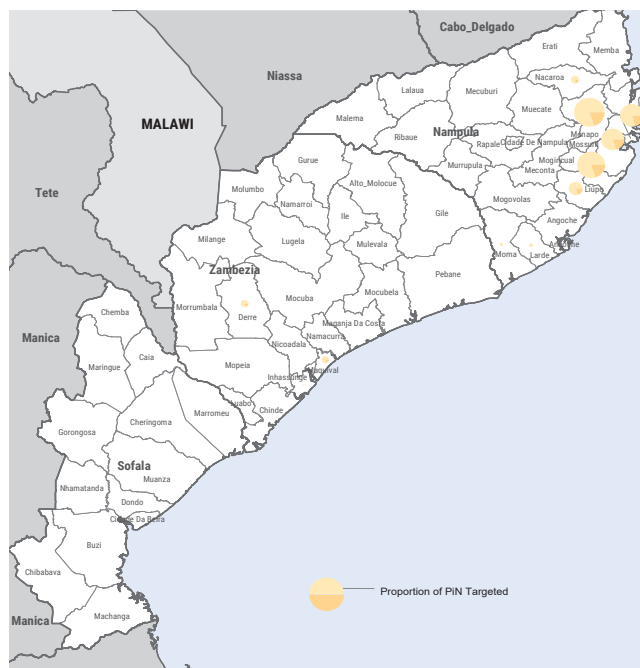
RESPONSE STRATEGY

It is estimated that more than 624,000 people are still living in precarious sheltering conditions. The displaced people and their host communities urgently need emergency shelter support, including essential

WATER, SANITATION AND HYGIENE



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
268K	214K	\$5.4M



PRIORITY ACTIVITIES

1. Rehabilitation and disinfection of existing water points and water systems damaged by Gombe.
2. Restore operations of centralized water supply systems in affected urban centers and provision of water trucking in urban areas during the restoration activities.
3. Distribution of basic hygiene and dignity kits.
4. Construction of emergency latrines in accommodation centers, and decommissioning of the latrines once the centers are closed.
5. Provision of an emergency WASH package to resettlement centers by ensuring water trucking until new water points can be built, emergency latrines, and then promoting the construction of household latrines including subsidies, payment of community hygiene volunteers to ensure the operation, maintenance, and cleaning of the communal infrastructures and hygiene promotion, and

distribution of complete hygiene kits for three months.

6. Strengthening of district health authorities' capacity to respond to water-borne diseases outbreak through the provision of cholera kits, implementation of household and water point disinfections, and sensitization about hygiene and cholera prevention
7. Rehabilitation of damaged WASH system in priority school and health care facilities, in coordination with Health and Education clusters.

RESPONSE STRATEGY

Cyclone Gombe's damage to critical WASH infrastructure has further decreased access to water, sanitation, and hygiene in areas that already suffered from inadequate coverage. It is estimated that prior to the disaster, 57 per cent of people in Nampula Province did not have access to water and 64 per cent lacked access to water in Zambezia Province. Inadequate access to safe drinking water, poor sanitation and hygienic conditions, and stagnant pools of water are conducive to the emergence of water-borne diseases such as cholera and acute watery diarrhea. This is a significant public health concern as a cholera outbreak has been declared in the southern regions of Malawi along the Mozambican border and suspected cases were reported in Sofala and Zambezia provinces. Acute Watery Diarrhoea cases have been reported in Sofala province (district of Caia) and in the nearby districts of Mopeia and Morrumbala, which were also affected by Storm Ana and Cyclone Gombe. These three districts require the immediate deployment of rapid response teams to investigate and disinfect water sources and prevent the spread of water-borne diseases. The WASH sector response strategy will have two main components: 1) Life-saving activities aiming to carry out immediate emergency interventions to meet basic water, hygiene, and sanitation needs to prevent WASH-related outbreaks such as cholera,

WATER SANITATION AND HYGIENE (WASH)

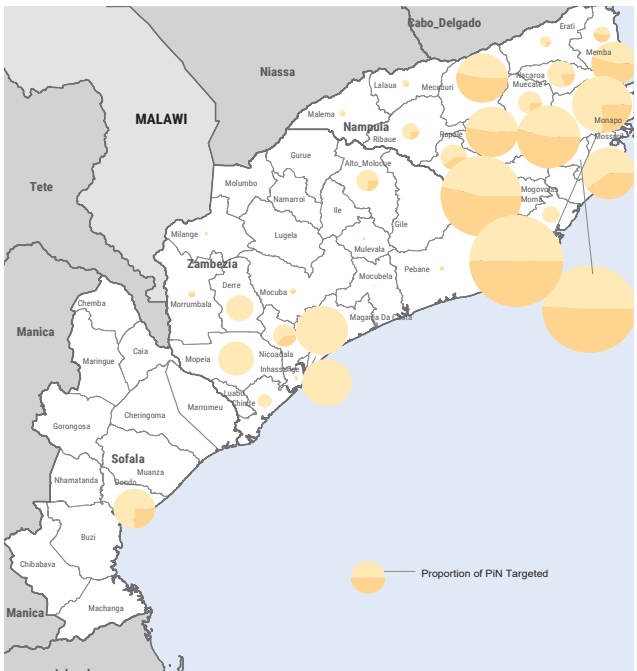


and 2) Life-sustaining activities to support the most affected communities - IDPs and host communities - to restore their WASH services to pre-disaster levels. The response will prioritize the IDPs and the most affected districts. The response strategy will consider key issues such as gender, gender-based violence, child protection, disability, and age.

COORDINATION AND COMMON SERVICES (CCS)



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
697K	387K	\$1.1M



allows an in-depth understanding of the needs and the required response. DTM promotes respect for humanitarian principles and standards in response, the integration of sex, age, and basic vulnerability, disaggregated data along with Protection and PSEA safeguards and messaging throughout all assessments of disaster-affected communities.

PRIORITY ACTIVITIES

1. Support data collection and analysis on the mobility, vulnerabilities, and needs of displaced and mobile populations.

RESPONSE STRATEGY

A qualitative understanding of the pattern of displacement and population movement is essential to enable decision-makers and responders to provide populations with context-specific assistance. The Displacement Tracking Matrix (DTM) maintains an operational presence across Cyclone Gombe affected districts of Nampula, Zambezia, and Sofala provinces, functioning as a shared data source for planning an effective humanitarian response for the Government and the humanitarian community. DTM methodology relies on primary data collection through key informant interviews and focused group discussion with the involvement of affected people in identifying critical humanitarian priorities. Such a qualitative approach

METHODOLOGY

The overall People in Need (PiN) caseload has been calculated following a mix of primary and secondary data collections by partners and the Government. As a result, 697,000 people out of 734,000 affected people have been identified to be in need of life-saving, life-supporting, and protection assistance. The overall number of PiN was determined by reviewing the number of people in need by sector (by selecting key needs indicators) by districts and selecting the highest sectoral number of people in need to reflect the overall needs while reducing duplication, as per standard practice. As

a subsequent step, each sector engaged in an in-depth prioritization exercise to derive the people targeted in the most impacted districts. The overall number of people targeted (387,000) was then calculated by selecting the highest sectoral number across all sectors to avoid duplication and double counting. This approach has ensured a more focused and targeted Flash Appeal, strictly prioritizing the most vulnerable individuals for the humanitarian response.

Annex: List of Participating agencies

ORGANIZATION	REQUIREMENTS (US\$)	ORGANIZATION	REQUIREMENTS (US\$)
CARE Mozambique	500K	World Vision Mozambique	3.2M
Doctors with Africa CUAMM	200K		
Food and Agriculture organization of the United Nations	3.1M		
HelpAge International	257K		
Helpo	153K		
International Organization for Migration	6.7M		
JAM International	290K		
Kubatsira Association	120K		
OIKOS - Cooperação e Desenvolvimento	755K		
Plan International	1.5M		
Save the Children	3.6M		
Street Child	1.4M		
United Nations Population Fund	500K		
United Nations High Commissioner for Refugees	4.6M		
United Nations Children Fund	11.6M		
United Nations World Food Program	8.0M		
World Health Organization	1.5M		

Acronyms

CCCM	Camp Coordination and Camp Management
CENOE	National Emergency Operational Centre
CERF	Central Emergency Response Fund
COE	Provincial Operation Emergency Centers
CRI	Basic Package of Health Services
DTM	Displacement Tracking Matrix
GBV	Gender- Based Violence
GDP	Gross Domestic Product
HCT	Humanitarian Country Team
IDPs	Internally Displaced Persons
IGAs	Income Generating Activities
INDG	Institute for Disaster Management and Risk Reduction
IPC	Integrated Food Security Phase Classification
MAM	Moderate Acute Malnutrition
MHPSS	Mental Health and Psychosocial Support
NNGOs	National Non Governmental Organizations
PLWs	Pregnanant and Lactating Women
PSEA	Prevention of Sexual Exploitation and Abuse
SAM	Severe Acute Malnutrition
TLS	Temporary Learning Space
UNESCO	United Nations Educational, Scientific and Cultural Organization
WASH	Water, Sanitation and Hygiene

5.4

End Notes

<https://reliefweb.int/report/mozambique/mozambique-tropical-cyclone-gombe-flash-update-no8-1-april-2022>

<https://reliefweb.int/report/mozambique/mozambique-tropical-cyclone-gombe-flash-update-no9-13-april-2022>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-maganja-da-costa-district-zambezia-province-28-march-2022>

<https://reliefweb.int/map/mozambique/mo-ambique-prov-ncia-de-nampula-mapa-de-presen-das-organiza-es-resposta-do-ciclone-0>

<https://reliefweb.int/map/mozambique/mo-ambique-prov-ncia-de-nampula-mapa-de-presen-das-organiza-es-resposta-do-ciclone>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-nicoadala-district-zambezia-province-28-march-2022>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-namacurra-district-zambezia-province-28-march-2022>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-monapo-district-nampula-province-28-march-2022-enpt>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-mossuril-district-nampula-province-28-march-2022-enpt>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-liupo-district-nampula-province-28-march-2022-enpt>

<https://reliefweb.int/report/mozambique/mozambique-assessment-report-ilha-de-mo-ambique-nampula-province-28-march-2022>

How to Contribute

Contribute towards Mozambique Humanitarian Response Plan

Donors can contribute directly to aid organizations participating in the international humanitarian coordination mechanisms in Mozambique, as identified in this Humanitarian Response Plan.

Contribute through the Central Emergency Response Fund

CERF is a fast and effective way to support rapid humanitarian response. CERF provides immediate funding for life-saving humanitarian action at the onset of emergencies and for crises that have not attracted sufficient funding. Contributions are received year-round.

www.unocha.org/cerf/donate

About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. The Humanitarian Response Plan is a presentation of the coordinated, strategic response devised by humanitarian agencies in order to meet the acute needs of people affected by the crisis. It is based on, and responds to, evidence of needs described in the Humanitarian Needs Overview.

Gombe Emergency Response Plan

MOZAMBIQUE

Get the latest updates



OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system.

www.unocha.org/mozambique

twitter: @MozambiqueOCHA

Humanitarian RESPONSE

Humanitarian Response aims to be the central website for Information Management tools and services, enabling information exchange between clusters and IASC members operating within a protracted or sudden onset crisis.

www.humanitarianresponse.info/operations/mozambique



Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

www.hum-insight.info



The Financial Tracking Service (fts) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

<https://fts.unocha.org/>

ISSUED JUNE 2022