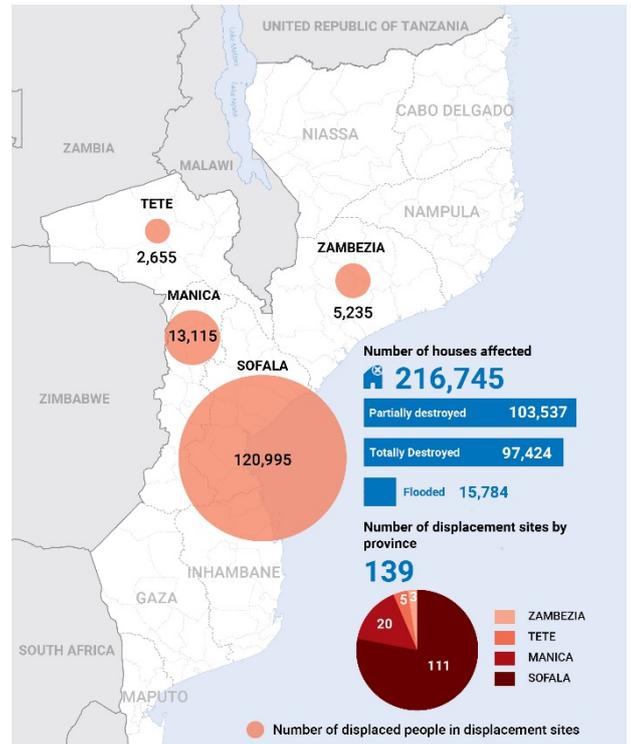


This Situation Report is produced by OCHA Regional Office for Southern and Eastern Africa in collaboration with humanitarian partners. The Situation Report builds on Flash Updates #1 through #15 and provides more detailed information on the situation and response by sector. The next report will be issued on 6 April 2019.

HIGHLIGHTS

- Some 336 new cases of cholera and 3 deaths were reported on 5 April, in Beira (246 cases; 1 death); Nhamatanda (26 cases; 1 death) and Dondo (64 cases; 1 death).
- More than 217,000 people had received the Oral Cholera Vaccine as of 5 April, representing 26 per cent of the total targeted.
- The number of displaced people sheltering in collective sites increased to 142,000 people as of 5 April.
- Buzi area is now reachable by road and phone services are operational, but only light vehicles being tested for now, according to the Logistics Cluster.



1.85M

Affected people

2,426

Cholera cases

>217K

People reached with Cholera Vaccine

598

Deaths

>142K

Displaced people in 139 collective sites

~584K

People assisted with food

SITUATION OVERVIEW

As of 5 April, the total number of registered cholera cases was 2,426 cases, including an unconfirmed number of cases reported in a new outbreak in Buzi town, in Sofala Province. The majority of the new cases on 5 April were reported in Beira (246 cases; 1 death); Dondo (64 cases; 1 death) and Nhamatanda (25 cases; 1 death). At least 217,000 people were vaccinated as of 5 April, representing 20 per cent of the people targeted. Cholera is endemic to Mozambique, which has had regular outbreaks over the past five years. About 2,000 people were infected in the last outbreak, which ended in February 2018, according to WHO.

The death toll and number of people injured stood at 598 deaths and more than 1,640 injuries, as at 5 April. The number of crops and houses damaged remained at 715,000 hectares of crops and nearly 217,000 houses, since 4 April. Meanwhile, the number of internally displaced people living in collective sites increased by more than 12,200 to 142,000 as of 5 April, according to government figures. In Sofala Province, the number of sites increased by 10 from 4 to 5 April.

More than 262,120 school-age students have been impacted by the crisis, as more than 3,340 classrooms have been destroyed, and many continue to be used as shelters for the more than 142,000 IDPs in Manica, Sofala, Tete and Zambezia provinces. Humanitarian partners continue to call for any relocations out of schools or elsewhere to be safe, dignified and voluntary. Key priority needs in the new accommodation sites include access to clean and safe drinking water, shelter materials and sanitation facilities. Psychosocial support and counseling for families who have lost loved ones and all their belongings, particularly men who are presenting with emotional instability, will continue to be needed both in the accommodation sites and places of return.

FUNDING

The revised Humanitarian Response Plan, which calls for US\$337.2 million (including \$282 million for the Cyclone Idai response) was just under 20 per cent funded. Multiple Member States have provided financial contributions for the humanitarian response in Mozambique, with at least US\$82.4 million recorded in the Financial Tracking System (FTS) as of 5 April. This includes funding received for both the pre-existing drought response and the floods/Cyclone Idai response. Member States whose contributions are not yet reflected in FTS are encouraged to report as soon as possible: <https://fts.unocha.org/content/report-contribution>

On 5 April, Finland announced that it will support Mozambique's recovery from Cyclone Idai through the Finnish Red Cross and the United Nations Central Emergency Response Fund (CERF) and by providing technical assistance. The Ministry for Foreign Affairs has granted EUR 200,000 to the emergency field hospital being set up in Mozambique by the Finnish Red Cross. The field hospital, run by Finnish and Canadian Red Cross workers, operates in an area with approximately 300,000 inhabitants. Finland's emergency relief plans include preparedness for sudden crises. The support provided by the Finnish Red Cross is part of the assistance operation coordinated by the International Federation of Red Cross and Red Crescent Societies (IFRC).

The African Development Bank [announced](#) on 5 April a multi-pronged response plan for the three countries impacted by Cyclone Idai. The first phase of the plan consists of a special relief fund of \$1.7 million for Mozambique for the immediate humanitarian relief effort in the worst affected areas. In the second phase, the Bank will set up a response and reconstruction programme, committing up to \$100 million for Mozambique, Malawi and Zimbabwe to kick-start economic recovery and rehabilitation.

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management

Needs:

- At least 142,000 people were sheltering in 139 accommodation sites, as of 5 April, across Manica (20); Sofala (111); Tete (5) and Zambezia (3), according to government figures.
- Women reportedly make up at least half of the population in the sites, and they are at heightened risk of gender-based violence due to overcrowding and the fact that families are sleeping in open spaces with no separation.
- The Displacement Tracking Matrix (DTM) identified nearly 53,000 people in need of assistance in 30 sites in Beira; five sites in Dondo and six sites in Nuamatanda.
- Site planning, site improvement, provision of amenities and support for relocation, are among the Cluster key priorities.

142K

People sheltering in 139 sites

Response:

- The Cluster is supporting the establishment of several relocation sites on the outskirts of Beira to support the relocation of internally displaced persons to vacate public-school and hospital buildings where many sought safety after Cyclone Idai. Cluster members are advocating with authorities for any relocations to be safe, voluntarily, dignified and informed, with appropriate notice to enable planning.
- On 4 April, an IOM team supervised the final installation of 56 tents donated by the Italian Agency for International Development and Cooperation (AICS) on the outskirts of Beira at Sao Pedro Claver parish grounds, on land made available by Beira's Catholic diocese. The site was graded with earth movers and tents were put up with the assistance of 25 firemen deployed by Brazil's national army.

- Site preparations are ongoing in Samora Machel secondary school, closer to Beira's commercial centre. The site will shelter 410 Mozambicans thanks to a large donation of tents provided by Turkey's Red Crescent. Student volunteers working with Mozambican soldiers supported setting up the tents. IOM's site planner, a secondee provided by Switzerland's Development Cooperation Agency, directed teams placing the tents to ensure the site adheres to safety standards and allows enough room for installation of water and sanitation facilities.
- Operations are expanding in Sofala (Beira City district), Manica (Sussudenga district) and Tete (Mocanga district); with 30 locations targeted for 5 April.

Gaps & Constraints:

- Shelter materials, water and sanitation facilities are needed in new accommodation sites. WASH capacity is still insufficient to keep up with the installation of latrines and water required for the accommodation centres.
- Expansion of coverage and capacity in CCCM to newly identified locations is pending due to funding constraints.
- CCCM support to cholera referrals, problems with accommodation sites in education facilities and consolidation of sites are all ongoing challenges.

Education

Needs:

- The number of classrooms destroyed stood at 3,344 as of 5 April, according to the Government, affecting more than 262,100 school-age children.
- In Buzi district alone, 680 classrooms are reportedly damaged and 53 tents and 724 tarpaulins are needed. In Nhamatanda district, 138 out of 140 schools are reportedly totally destroyed, according to government sources. In Dondo district, 38 out of 57 schools are reportedly destroyed.

>262K

school-age children
affected

Response:

- The Ministry of Education released a circular on 3 April noting that, while there is an urgent need to resume the normal operation of schools currently being used as accommodation centres, the local education administrative system should coordinate with the INGC and other administrative structures to inform the population, with 72 hours of notice period, for any relocations from schools. This order should be given once livable conditions have been created in transit centres or return areas.
- Education partners are working with CCCM on the relocation process; three schools in Beira (EPC Madadoure, ES Madadouro, Scola Axel Do IFP) were evacuated on 5 April and moved to newly established accommodation centres in São Pedro and IFP Inhamissua.
- Cluster partners are supporting the Provincial Directorate of Education and Human Development in disinfecting and cleaning schools previously used as accommodation centers.

Gaps & Constraints:

- Psychosocial support remains a gap for both children and adults in the accommodation centres.
- Education partners continued to emphasize the need to ensure that the norms and standards defined for relocation of people, including the need for the process to be voluntary and done in a safe and dignified manner are respected. Continued advocacy and sensitisation is ongoing, in collaboration with the Community Engagement Group. Yet, people were moved into the São Pedro site, while water and sanitation facilities were not fully completed.
- The focus of the first response has been in Beira. The DPEDH have recommended that the support is also decentralized to other districts, based on information received regarding the level of damage and destruction of schools, as highlighted under the Education needs.

Emergency Telecommunications (ETC)

Needs:

- Internet connectivity is improving but several areas remain cut-off from telecommunications, including due to continued power outages and delayed reconnection as ETC equipment is withheld by customs.

>1,100

Humanitarians accessing
ETC internet services

Response:

- 1,129 humanitarians are registered to access ETC Internet connectivity services at the Emergency Operations Centre (EOC) at Beira and in the 13x sites around the town.
- The ETC is now providing Internet connectivity to humanitarians working in the forward operations base in Buzi.
- The ETC Services for Communities (S4C) advisor conducted an assessment to Nhangau village on 5 April to determine the feasibility of setting up a space for the community to access ETC Internet connectivity.

Gaps & Constraints:

- Equipment that the ETC ordered has been stuck in customs since 19 March, hindering the Cluster's planned activities.
- The local ISP connection that is being deployed in the EOC is having some technical problems, negatively impacting the internet connectivity.
- The ETC requires \$1.2 million to provide critical communications services in up to four EOCs for three months, with a number of connection sites for accommodation centres, health centres, distribution points and joint location NGOs. So far it has received \$100,000 from Central Emergency Response Fund (CERF).

 **Food Security**
Needs:

- Food Security partners will target some 1.8 million with food assistance over the next three months, through general food distribution, using in-kind or vouchers and livelihood support.
- More than 315,000 hectares of crops have been damaged by the impact of Cyclone Idai and flooding, which occurred just before the annual harvest.
- The number of crops destroyed, fisheries and livestock affected is expected to rise as the full extent of the damage becomes known. Food insecurity is therefore expected to rise significantly in the coming months
- The hard to reach population are in need of immediate life-saving assistance, including through the distribution of High Energy Biscuits (HEBs), Corn Soya Blend (CSB) and Ready to Use Supplementary Feeding (RUSF). The population that is more accessible will receive the standard Food Security Cluster (FSC) food ration.
- Provision of agricultural inputs through the distribution of seeds (corn, beans and vegetable seeds) and tools, has been deemed necessary to ensure farmers capitalise on the 1 to 3-week planting window.
- Fishing assets and livestock as well as the rehabilitation of agricultural infrastructure and veterinary services should be provided in the coming months, following this "emergency" seeds distribution



~584K

Number of people reached with food assistance

Response:

- More than 583,900 people have received food assistance in the provinces of Sofala, Tete, Zambezia and Manica. The FSC has defined a standard FSC food ration package to cover two weeks with cereals, oil, beans and CSB.
- FSC has coordinated with the Education Cluster and the Municipality of Beira for the first school ready-to-eat meal activity in the school of Matadouro in Beira, targeting 10,000 people on a daily basis. This pilot will be replicated in an additional 10 schools. The pilot occurred on the first day of schools reopening after the cyclone.
- WFP is capitalizing on receding floodwaters to activate a plan for delivering food to 1.2 million people over the next few weeks in 40 districts in the four most affected provinces. The scale-up of food assistance will primarily focus on rural areas that can be reached by road. However, WFP and partners will continue delivering lifesaving food assistance by air and boat as required.
- WFP and its partner Food for the Hungry have started distributing food parcels using paper voucher (commodities voucher) from 5 April.
- Seeds distribution will start on 8 April, beginning in Manica province and then Nhamatanda. The FSC has defined an agricultural package for the current intervention with MASA (Ministério da Agricultura e Segurança Alimentar). FAO, CESVI, WHH, CWW, Belgian Red Cross with Mozambique Red Cross, will be distributing over 180 tons of second season seeds (maize and pulses) in the coming weeks, together with tools. Around 18,000 households will be targeted for the seeds and tools support. A few other organisations may join and increase the caseload.

Affected Province	Number of beneficiaries reached
Sofala (Beira, Buzi, Chibabava, Dondo, Gorongosa, Maringue, Muanza, Nhamatanda)	427,565
Tete (Tete City)	7,415
Zambezia (Lugela, Maganja da Costa, Molumbo, Namacura, Nicoadala,)	26,409
Manica (Gondola, Macate, Mossurize, Sussundenga)	122,512
TOTAL	583,901

Gaps & Constraints:

- According to FTS, only 25.9 per cent of the FSC funding requirement has been received. Additional funding is urgently required, both to replenish agencies budgets, which have pre-financed the response to date from their own emergency funds, and to enable the expansion of operations.
- Access in some areas remains difficult without a helicopter. An unknown number of people have reportedly received no assistance.



Health

Needs:

- 2,424 cholera cases were reported as of 5 April, including at least 336 new cholera cases reported on 5 April: 246 in Beira (1 death); 26 in Nhamatanda (1 death); 64 in Dondo (1 death); and some suspected cases in Buzi, which could not be confirmed due to communications challenges.
- 478 malaria cases were reported on 5 April in Beira City (152), Nhamatanda (166) and Dondo (160).
- The risk of communicable diseases has increased as people remain exposed to stagnant flood water and lack access to safe drinking water, as well as over-crowding in collective centres. Major risks include cholera and other acute watery diarrhoea, vector-borne diseases; increased cases of malaria, dengue, and other epidemic-prone diseases (measles), and malnutrition.

2,424

Cholera cases

Response:

- At least 217,356 people had been vaccinated in the ongoing oral cholera vaccination (OCV) campaign as of 5 April as follows:
 - Beira = 138,012 (32 per cent)
 - Buzi = 11,426 (18 per cent)
 - Dondo = 32,267 (18 per cent)
 - Nhamatanda = 35,660 (21 per cent)
- More than 350 trained mobile teams have been deployed to conduct the vaccination, which is scheduled to run from 3 to 9 April in Beira and 4 to 10 April in Dondo, Nhamatanda and Buzi. The World Health Organisation (WHO) is supporting the Ministry of Health to coordinate the oral cholera vaccination campaign, including working with partners to ensure an appropriate cold chain storage and providing logistical support.
- The Early Warning, Alert and Response System (EWARS) is being rolled out. A Trainer of Trainers was completed on 5 April and partners and systems are being put in place in coordination with the Ministry of Health.
- Health partners are conducting an assessment in Ifapa Camp to determine whether a health facility should be installed in the camp or whether to reinforce the existing facilities in the area, based on the distance and the capacity of the existing health centers to receive the additional population. Community consultation to avoid any potential tensions with the host community was proposed.
- The Cluster has requested support from the Brazilian Military in assessing the roof of Beira Central Hospital in order to quickly repair and restore critical services. The Hospital provides services for a catchment population of about two million people. Two engineers from WFP are also available to support the team. Meanwhile, the Angolan military has conducted some repairs of the hospital in Dondo.

- Messaging on cholera, malaria prevention as well as HIV/AIDS and gender-based violence (GBV) are ongoing through various communication channels, including three mobile units by the Government Institute of Social Communication– vehicles mounted with megaphones – which are spreading messages.
- Eleven Emergency Medical Teams (EMTs) are operational. Essential health service delivery is ongoing in the government health facilities, accommodation sites and functional EMTs and mobiles clinics.

Gaps & Constraints:

- The Ministry of Health has requested assistance with cars and fuel to support the OCV campaign.
- Additional human resources are needed for surveillance and epidemiology, information management, reporting and health operations. There is limited surveillance information outside of Beira, Dondo and Nhamatanda due to poor communication network and access.
- Poor access to health facilities, which have been cut-off by the cyclone and floods, is hampering restocking of essential drugs and medical supplies in the health centres.
- Poor communication network, which has affected collection and collation of health information.

Logistics

Needs:

- Increased road access is diminishing reliance on air assets.
- The road from Maputo to Beira, and from Maputo to Chimoio are both fully accessible.
- The N280 road between Beira and north Buzi is open for all vehicle types up to Guaraguara. However, the road connecting south of Buzi to Guaraguara remains difficult to pass.

Response:

- On 5 April, the cluster conducted an assessment in south Buzi to look at the arrangements in place, including accommodation and warehouse capacity.
- An assessment in north Buzi was completed on 5 April. The area is reachable by road and the phone services are operational. However, it takes 5 to 6 hours to travel by road from Beira in 4x4 or small trucks. WFP conducted a successful road test with a small truck.
- USAID is operating an airbridge between Maputo and Beira and making available to the humanitarian community two C-130 aircrafts (capacity 12-15 mt). The Logistics Cluster team is collecting Service Request Forms (SRFs) from partners to move their cargo on these two aircrafts. The aircraft will only be available for a limited time and as such, partners are requested to urgently inform the Logistics Cluster of foreseen requirements to ensure appropriate planning over the next few days in order to maximise the remaining rotations. Partners should send their Service Request Forms (SRFs) at least 24 hours in advance to Mozambique.clustercargo@wfp.org.

Gaps & Constraints:

- Given funding constraints, as well as increased road access, the Humanitarian Coordinator endorsed the reduction of one of the MI8 WFP contracted helicopters in the coming weeks.
- However, important constraints remain and a number of isolated populations are only reachable by boat and air. The latest Access Constraints map is online [here](#).
- Partners are strongly encouraged to share all access constraints from their field teams to ensure that the Access Constraints Map is as accurate as possible.

Nutrition

Needs:

- More than 41 percent of Mozambique's children were physically stunted prior to the Cyclone Idai emergency.
- Mid-Upper Arm Circumference (MUAC) screening of children 6-59 months has begun in affected areas and data should be reported accordingly, using forms from the provincial health department.

41%

Stunting rate in
Mozambique

- A joint nutrition mission by WFP and the Ministry of Health to two accommodation centers in Beira City identified 27 cases of moderate acute malnutrition in children under age 5 and 3 cases of acute malnutrition in pregnant and lactating women.

Response:

- On 4 April, UNICEF accompanied the Sofala provincial Nutritionist on a mission to an isolated community in Chibabava district with almost 2,000 people who had hardly received any support to date. They screened 13 children, of whom 4 had moderate acute malnutrition. Immediate food, water and shelter support was requested and liaison was made with the relevant clusters for follow up. The team delivered supplies for the treatment of acute malnutrition at the health centre, which was out of stock of some critical supplies.
- WFP has deployed nutritionists to the four priority provinces, initiated moderate acute malnutrition (MAM) treatment at displacement centres and devised a six-month plan to treat at least 100,000 children and women for MAM.
- WFP conducted a field mission to Mopeia and Morrumbala districts of Zambezia to assess the nutrition situation. Both districts have stocks of ready-to-use supplementary (food) and Super Cereal (CSB) for the treatment of moderate acute malnutrition in children 6 – 59 months and pregnant and lactating women, including those with HIV.

Gaps & Constraints:

- In Morrumbala district, Zambezia four of the 20 health facilities that provide services for the treatment of acute malnutrition are inaccessible (Chire, Chilomo, Goro, and Reis health facilities).
- Compiling proxy data on global acute malnutrition (GAM) rates in accommodation centres and affected communities (based on MUAC screenings) is a priority.
- Arrival of Cluster IM and field cluster coordinators is expected to improve communication between nutrition partners at national and sub-national levels.
- Due to unreliable network coverage and other effects related to the cyclone, data collection for many sites is still incomplete, but systems are getting back in place.
- Template for nutrition partner reporting on MUAC screenings for children under age-5 and pregnant and lactating women (PLW) are being developed and were circulated on 5 April.

Protection

Needs:

- IDPs are sleeping in classrooms, with women and children occupying one classroom and men the other, raising the risk of GBV – a key concern in accommodation centres. The school is well equipped with water and sanitation facilities and the community has access to clean water.
- The Government has identified 27,764 vulnerable people – including children, people with disabilities, female-headed households and the elderly – living in IDP sites as of 5 April.
- Need for sustained advocacy on relocations.

27,764

Vulnerable people identified by INGC

Response:

- On 5 April, several teams were mobilized and in collaboration with the CCCM Cluster began monitoring the relocation process of IDPs to new sites.
- Cluster partners supported the relocation of 135 families from three schools to two accommodation centers. IDPs were informed about relocation time, destination and a focal point for any protection issues.
- The Cluster has requested the Social and Gender Directorate to co-lead the GBV sub-group.
- Partners continued advocating for the establishment of child protection activities in programmes and in the relocation sites that are established near or within programme areas.
- PSEA messaging is going out to all clusters and is being broadcast via media in affected areas; along with messaging for other sectors. A key message to all sectors has been the reminder that protection is a collective responsibility that must be embedded in all clusters.

Gaps & Constraints:

- Rapid assessments needed on child protection and SGBV and protection monitoring needs to be systemized and expanded.
- Protection desks need to be set up in the camps to support with protection related response.
- More safe spaces are needed for SGBV survivors and child-friendly spaces are needed for children.
- There is an urgent need for dissemination of information on GBV management and child protection referral pathways. In Beira, it is difficult to get staff for the referral pathway mechanism, which requires two persons in Police cabinet (for issues related to minors), two persons in Health centers and two persons in Gender and Social action Directorate (for social support). The Ministry of Gender will need to identify people to support in the different sites with specialized police female officers – to assist with incident identification, reporting and referral mechanisms.
- There is a gap in social workers in IDP camps. On 5 April, the Directorate of Social Affairs requested the Cluster to provide social workers to cover the new relocation sites.

Shelter & NFI

Needs:

- As of 5 April, the number of houses affected stood at over 216,700 houses either totally destroyed (97,424), partially destroyed (103,537) or flooded (15,784).
- At least 142,000 people were displaced in 139 collective sites as of 5 April, according to government figures.
- As a bare minimum package, displaced people need shelter kits, including toolkits to ensure recovery and return as soon as possible.
- Road access is improving, markets are recovering and affected people are beginning their own self-recovery, where they have land and capacity to do so. However, many remain cut off from roads, or displaced in evacuation centres, and unable to return home.

>83K

People reached with shelter assistance

Response:

- Some 83,000 people had been reached with some form of shelter and NFI assistance as of 5 April, including plastic sheeting and blankets for nearly 58,000 people across the affected districts. The cluster has also supported health facilities, by providing tarpaulins for temporary repairs.
- On 4 April, the Mozambique Red Cross delivered assistance to more than 2,300 people in Buzi, who had been cut off from large-scale assistance for more than two weeks. The community received shelter kits, jerry cans, kitchen sets, tarpaulin, buckets and tools, in addition to being provided with clean water and mosquito nets. The supplies were delivered by boat and air as road access had been impossible. The distribution will target 20,000 people in the area.
- Deliveries via air and road have started in three provinces (Sofala, Manica, Zambezia), in the districts of Beira, Buzi, Dondo, Nhamatanda, Gondola, Gorongozo, Mocuba, Morrumbala and Sussendenga

Gaps & Constraints:

- Full household kits, including toolkits, are necessary to begin recovery and prevent long-term camp situations. More supplies are expected in the pipeline and should arrive on 7 April. However, if there is any delay it may cause a gap in response. A current pipeline gap of 61,000 tarpaulins has been reported.
- Operational partners are urgently required to scale up ability to distribute emergency shelter and NFI.
- The Cluster strategy is to move to more targeted and longer-term planning, including promoting quality programming.

Water, Sanitation and Hygiene

Needs:

- Provision of safe water, appropriate sanitation and health and hygiene education to affected communities is critical to minimize the risk of WASH related disease outbreaks, including cholera.
- Handwashing stations and practices are not/rarely present or properly maintained and waste management is a general problem in affected areas.

1:20

Sphere standard for latrines/person in camps

Response:

- WASH has activated a sub-group in Beira focusing only on Sanitation. This working group will work on sanitation and hygiene promotion in camps. The cluster conducted training for volunteers on hygiene promotion in Beira.
- Water supply has been restored for Beira city and fuel has been provided for the pumping station. Control of water quality with the Government is on-going, including the water network and the pumping station in Beira. Installation of WASH facilities in relocation camps is ongoing but needs to be improved and scaled-up.
- The cluster is working on the Buzi water treatment plant and has requested support from the Logistics cluster
- First Response Radio (FRR) colleagues have completed their assignment of supporting Radio Buzi. In collaboration with the Government the FRR team aired messaging and relevant information on cholera, malaria and hygiene promotion and emphasized the need for psychosocial support for people going through Post Traumatic Stress Disorder (PTSD).
- WASH partners are supporting the Government in health, hygiene promotion campaigns through mobile units, as well as batteries to sustain the megaphones. 50,000 Information Education Communication (IEC) materials were reprinted and given to the Government and partners for further dissemination in Beira, Buzu, Dondo and Nhamatanda.
- UNFPA and partners trained 30 religious leaders on WASH behaviors, including social mobilization/hygiene promotion in the context of cholera prevention and response.
- U-Report flow to monitor rumors was developed and shared with partners today.
- The Community Engagement Group is providing support for community Radio Aguia in Dondo for the next 10 days, to run a motorbike for disseminating health, hygiene promotion messages in the district.

Gaps & Constraints:

- Certeza (for water purification) is available in camps but is not systematically or appropriately used. Some volunteers are not trained on how to use it.
- Water sanitizers have reportedly run out in Beira – other alternatives such as chlorine are being explored.
- Waste management capacity of Beira municipality was low prior to the cyclone and has deteriorated, creating significant gaps.
- Installation of WASH facilities in relocation camps is ongoing but needs to be improved and scaled up.

GENERAL COORDINATION

The humanitarian response in Mozambique is led and coordinated by the Government through the National Institute of Disaster Management (INGC) and related emergency coordination mechanisms. This is supported by the Humanitarian Country Team (HCT), which is composed of UN agencies, International NGOs, Red Cross and donor representatives. The HCT is supported at the operational level by an Inter-Cluster Coordination Group (ICCG).

Coordination arrangements are taking place at the national level in Maputo and through the three coordination hubs activated by the Government at the provincial levels in Beira (Sofala), Chimoio (Manica) and Quelimane (Zambezia). Humanitarian partners have established presences in each of these locations to facilitate operational coordination and support the Government-led response. Multiple humanitarian partners have surged additional capacity to Mozambique in order to ramp-up emergency operations. OCHA has deployed surge staff to support coordination and United Nations Disaster Assessment and Coordination teams have been deployed to Beira and Chimoio.

For further information, please contact:

Maputo: Truphosa Anjichi-Kodumbe, OCHA Humanitarian Reporting Officer, Email: anjichi@un.org; Cell +258 850 482 549; WhatsApp +254 722 839 182

Beira: Saviano Abreu, OCHA Public Information Officer, Email: deabreuisidoro@un.org; Cell: +254 722 513 503 (WhatsApp)

Nairobi: Guiomar Pau Sole, Head, Communications Unit, OCHA ROSEA, Email: pausole@un.org; Cell: +254 786 633 633

For more information on the "Mozambique – Cyclone Idai & Floods" response, please visit

<https://www.humanitarianresponse.info/en/operations/mozambique>

To be added or deleted from this Flash Update mailing list, please e-mail: anjichi@un.org