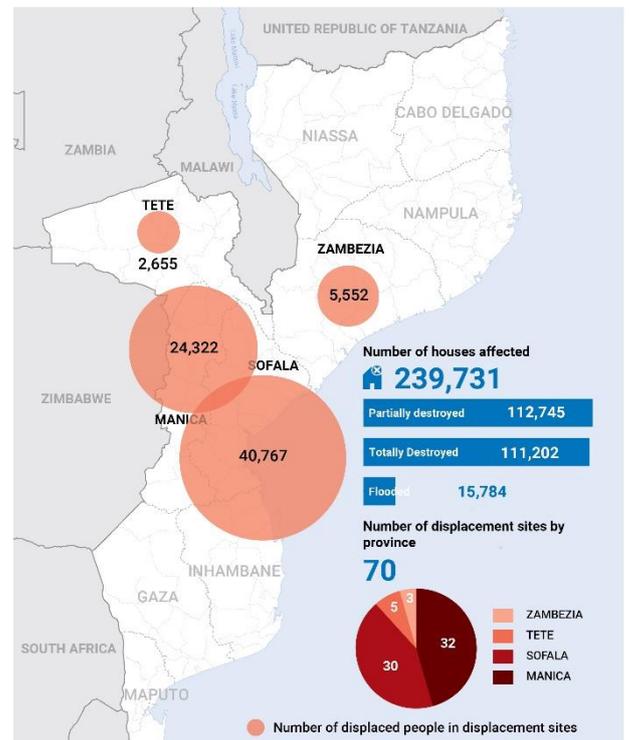


This Situation Report is produced by OCHA Regional Office for Southern and Eastern Africa in collaboration with humanitarian partners. The Situation Report builds on Flash Updates #1 through #15 and provides detailed information on the situation and response by sector. The next report will be issued as of 13 April 2019.

HIGHLIGHTS

- Over 1 million people had received food assistance as of 12 April and distribution of seeds for the winter harvest was underway in Sofala province.
- Over 907,000 people have received water support, over 155,000 have received hygiene support and over 18,230 have received sanitation support
- On 12 April, 312 new cholera cases were reported, bringing the total reported cases to 4,979, according to the Ministry of Health.
- Distributions of seeds and tools are underway, with farmers receiving agricultural kits containing hoes, machetes and early-maturing maize and bean seeds that, once sown, will be ready to harvest after just 90 days.
- Damage to the Beira City port's infrastructure and connecting transport routes could impede the importation of grains - approximately 1 million tonnes of wheat and rice are imported annually into Mozambique, according to FAO.



1.85M
People in need

4,979
Cholera cases

603
Deaths

~73K
Displaced people in 70 collective sites

1M
People assisted with food

907K
People reached with water support

SITUATION OVERVIEW

As of 12 April, the official death toll was 603 people, and the number of houses destroyed was 239,731, including 112,745 houses totally destroyed, 111,202 partially destroyed, and 15,784 flooded. Meanwhile, the Government reported a reduction in the number of people sheltering in collective sites and the number of such sites; as of 12 April, 73,296 displaced people were living in 70 collective sites, down from 73,643 people in 77 sites on 11 April. Many more displaced people are thought to be staying with friends and family.

According to the Ministry of Health, as of 12 April, the total number of registered cholera cases reached 4,979, with 312 new cases reported from Beira (214), Dondo (57), Nhamatanda (44) and Buzi (3). Of the 4,979 cases reported, over 4,946 have received treatment and are recovering. Meanwhile, the Oral Cholera Vaccination campaign ended on 9 April, with

803,125 people vaccinated; 98.6 per cent of the target. At the same time, malaria cases have risen to 9,501 cases since 27 March, in Beira (2,832), Dondo (2,981), Nhamatanda (3,609) and Buzi (79 since 5 April).

In Manica Province, roads and power lines are being repaired by companies contracted by the Government, the Lucite river bridge has been fixed and the road in between Dombé and Espungabera is expected to open for traffic soon. However, some areas, particularly Mossurize and Sussundenga districts, are still difficult to reach and several communities in the Chefe de Posto Administrativo in Dombé, report being cut-off

FUNDING

Funding towards the revised Humanitarian Response Plan, which calls for US\$337.2 million (including \$282 million for the Cyclone Idai response) is nearly 23 per cent. Multiple Member States have provided financial contributions for the humanitarian response in Mozambique, with at least US\$102.3 million recorded in the Financial Tracking System (FTS) as of 12 April, of which \$76.9 million has been allocated against the appeal. 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 11 April, the Southern Africa Development Community launched a [regional appeal](#) to mobilise additional funding for the Government-led responses to Cyclone Idai's impact in Malawi, Mozambique and Zimbabwe. During the event, it was announced that the Chairperson of SADC, His Excellency, Dr. Hage G. Geingob, President of the Republic of Namibia had approved the allocation of US\$500,000 to the affected Member States to assist with immediate relief efforts.

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management

Needs:

- The number of people in the accommodation sites in Sofala and Manica continues to decrease. As of 12 April, government figures showed 73,296 people left in 70 sites across Manica (32); Sofala (30); Tete (5) and Zambezia (3), according to the government. These people still need support.
- The government's relocation plan is being expedited, increasing the need for CCCM's support in relocation sites and the need to support safe, voluntarily, dignified and informed population movements.

73K
People sheltering in
70 accommodation sites

Response:

- CCCM continues advocating for well-coordinated, prepared safe and principled relocation.
- CCCM has supported the establishment of seven consolidated sites in Beira to receive IDPs relocated from public-schools and hospital buildings.
- CCCM is working with CCCM partners as well as Health, WASH, Protection clusters to ensure adequate life-saving services to people who are in the collective sites as well as those who are being relocated.
- CCCM is working with the Education Department to support return intentions surveys in 13 schools in Beira where people continue to seek shelter.

Gaps & Constraints:

- The CCCM Cluster has received no funding, according to the FTS.
- WASH and Shelter capacity is required to keep up with the demand during the relocation.



Early Recovery

Needs:

- The Ministry of Labour is requesting the Early Recovery Working Group's support for the rehabilitation of its training center, which has the capacity to train 1,000 people per year on construction, carpentry, and mechanics.

Response:

- Post Disaster Needs Assessment (PDNA) design is ongoing. The PDNA team has arrived in Maputo and initiated consultations with the cluster coordinators. Tools to conduct the PDNA were developed and shared at Maputo level, and will be shared with the ICCG members in Beira in the next few days.
- The Ministries of Public Works and Environment have developed a resettlement plan to relocate 15,549 families to the districts of Dondo, Nhamatanda, Buzi and Caia. The Ministries have called on WASH, Shelter, Food Security, Protection, Education and Early Recovery to support the process. Humanitarians are engaging with the Ministries to ensure that any resettlement is principled, well-planned and builds on lessons learned from previous resettlement processes in Mozambique.

Gaps & Constraints:

- For the next month, \$600,000 is urgently required to implement critical activities to support rapid recovery, including waste management and debris clearance.

Education**Needs:**

- The number of destroyed classrooms remains at 3,504 as of 12 April, according to the Government.
- The number of school-age children affected rose significantly, from 263,181 on 8 April to 335,132 on 12 April.

>335K
school-age children
affected

Response:

- To date, the Education Cluster, as part of the relocation task team, has supported the relocation of families from 16 schools, leaving 13 schools still used by IDPs. The cluster has also ensured that the provincial and district directorates of education are involved in the process.
- Cluster partners continue to support the Provincial Directorate of Education and Human Development in disinfecting and cleaning schools previously used as accommodation centers.
- Temporary Learning Spaces have been established and are functioning in ESG Josina Machel, EPC 12 de Outubro, Ifapa 1 camp, Picoco 1 camp, Ifapa 2 camp, EPC Ndunda, EPC Palmeiras, IFP Inhamizu, Sao Pedro camp, EPC Amilcar Cabral, EPC Julius Nyere, EPC Muhave Matope (all in Beira district) EPC Chipinde (Dondo).
- So far, UNICEF has released 7,465 learner kits through NGO partners and 2,400 directly to the DPEDH.
- 4,000 tarpaulin sheets have been made available to NGO partners for temporary learning spaces in affected areas. An additional 700 tarpaulin sheets were provided to the DPEDH for temporary repair of damaged schools' roofs.
- The Cluster is working on harmonization of tools for assessing structural damage to schools, including WASH.

Gaps & Constraints:

- 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.

Emergency Telecommunications (ETC)**Needs:**

- Internet connectivity is improving but several areas remain cut-off.

Response:

- 1,354 are humanitarians registered to access Internet connectivity in Beira and Buzi.
- On 12 April, ETC cluster connected the UNHCR Office in Beira to the internet. In total, ETC has provided internet connectivity to 16 humanitarian agencies in and around Beira.
- The ETC team in Grudja has successfully installed a Eutelsat satellite terminal at Johanniter's camp; this enables all responding stakeholders in that area to access ETC connectivity.

1,354
Humanitarians registered
to access ETC services

Gaps & Constraints:

- ETC requires US\$1.2 million for the provision of services for six months.

Food Security

Needs:

- Farmers in Manica and Sofala – the two provinces hardest-hit by Cyclone Idai and the subsequent catastrophic flooding - produce approximately 25 percent of the national cereal output, according to [FAO](#). Most lost all or large portions of their seed stores as well as the standing crops they were about to harvest when the storm hit.
- The Beira City port is a key trade gateway for the country. Extensive damage to the port's infrastructure and connecting transport routes could impede the importation of grains - approximately 1 million tonnes of wheat and rice are imported annually into the country, according to [FAO](#).
- At least 715,378 hectares of agricultural land have been damaged, according to the Government, affecting 500,000 producing families. The World Bank estimated that this damaged land area is equivalent to 13 per cent of total agricultural land in Mozambique and that the agricultural losses are between \$141 and \$258 million.

>1M
people reached with
food assistance

Response:

- As of 12 April, 1,041,446 people have received food assistance in the provinces of Sofala, Tete, Zambezia and Manica and 21 organizations are involved in the food assistance. The food ration package will include cereals, oil and beans to cover two weeks.
- World Central Kitchen, in coordination with the FSC, Education Cluster and Municipality of Beira, continues distribution of cooked meals targeting 10,000 people daily in Beira.
- Seed distribution started on 9 April 2019, in Sofala province, followed by Manica province. Over 180 tons of second season seeds (maize and pulses) are being distributed. Over 20,000 households have been targeted for the seeds support for the winter harvest, and 12 organizations are involved in the livelihood recovery, including WFP for seed protection.
- Farmers will receive agricultural kits containing hoes, machetes and early-maturing maize and bean seeds that, once sown, will be ready to harvest after just 90 days. The distribution will take place alongside food rations from the World Food Programme (WFP), which will help to deter beneficiaries from consuming the seeds immediately rather than planting them.

SUMMARY OF BENEFICIARIES REACHED BY PROVINCE	Number of individuals
Sofala (Beira, Buzi, Cheringoma, Chibabava, Dondo, Gorongosa, Maringue, Muanza, Nhamatanda)	799,264
Tete (Tete City)	15,435
Zambezia (Lugela, Maganja da Costa, Molumbo, Namacura, Nicoadala,)	99,392
Manica (Gondola, Macate, Mossurize, Sussundenga)	127,355
TOTAL	1,041,446

Gaps & Constraints:

- According to FTS, 26.7 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.

Health

Needs:

- As of 12 April, the total number of registered cholera cases increased to 4,979 (up from 4,661 cases on 11 April), according to the Ministry of Health. The outbreak is expected to decline from next week due to vaccinations. However, the risk of cholera remains very high and needs to be followed up closely with WASH interventions.
- Cumulatively, 9,501 malaria cases have been reported, in Beira (2,832), Dondo (2,981), Nhamatanda (3,609), Buzi (79 since 5 April). Unlike cholera, malaria cases are likely to increase given the conditions (stagnant flood water, decreased access to clean water and over-crowding in accommodation centers) in the affected area.

9,501
Malaria cases

Response:

- The Health Cluster will prioritize its support for Malaria National Program interventions in all four districts in Beira. The immediate focus is on bed net distributions in Dondo, Nhamatanda and Beira. Access challenges are expected in south Buzi.
- The Health Cluster has defined a minimum package of health services for health posts, centers and mobile clinics. Forty-six organizations are providing direct health services or support to health facilities in affected areas, with activities covering 11 provinces, predominantly in Sofala (refer to Health cluster 4Ws - 11 April).
- The Health Cluster continues to work closely with INS, MOH and partners to strengthen surveillance of cholera and other epidemic-prone diseases or conditions, including measles. This has included: a) rolling out a field data collection tool (EWAR in a box) in all four districts at higher risk (Beira, Buzi, Nhamatando and Dondo), accelerating and streamlining the flow, analysis and reporting of data to orient the response; b.) working with the WASH cluster to assess WASH infrastructure in the health facilities as well as improving sanitation in communities; and c) messaging on cholera, malaria prevention as well as HIV/AIDS and gender-based violence (GBV) through various channels of communication.
- Eight sets of maternity starter kits (for Health Centers and Hospitals) arrived in Beira last week and a distribution plan has been prepared based on assessments by UNFPA and PHO and in close coordination with the reproductive health working group to avoid duplication, particularly for the kits for the hospitals.

Gaps & Constraints:

- Apart from funding from the CERF and WHO emergency budget, the Health Cluster has received little additional funding required to continue health interventions.
- Additional human resources are needed for health operations and information management.
- Restocking of essential medicines and medical supplies in remote health care facilities is challenging due to access.

 Logistics**Needs:**

- Accessibility is improving; delivery modalities are adapting to ensure maximum efficiency of the response. The Logistics Cluster will advise on the most efficient means of transportation based on locations and priorities.

Response:

- The access map was updated on 12 April. The road from Guara Guara to Buzi is now accessible to trucks up to 20MT. The map is available at <https://logcluster.org/ops/cyclone-idai19>.
- The Logistics Cluster is working with Handicap International/Atlas Logistique to conduct road assessments in order to serve locations in Muanza (Sofala) and Chinde (Zambezia) areas.
- Between 11-12 April, the Logistics Cluster facilitated the reception of four planes, offloading approximately 260MT of cargo on behalf WHO, WFP and World Vision.

Gaps & Constraints:

- The engine equipment (K Loader) offloading wide bodied aircraft will be demobilized on 19 April. Large cargo planes cannot be offloaded after this date.

 Nutrition**Needs:**

- It is estimated that 10,937 children under five years old will face severe acute malnutrition over the next nine months. UNICEF is targeting 8,750 cases.
- The nutritional needs of infants and young children, and pregnant and lactating women, are a priority for the cluster. Cluster members are working to promote and support continued breastfeeding, and optimal complementary feeding to save children's lives in emergencies.

400

Health centres targeted for Moderate Acute Malnutrition support

Response:

- As of 12 April, Nutrition cluster partners (Ministry of Health (MISAU), National Institute for Health (INS) and WFP) have carried out 81 emergency nutrition support interventions across Sofala, Manica, Tete and Zambezia.

- The Nutrition Cluster will support MISAU to carry out Mass Mid-Upper Arm Circumference (MUAC) screening in Beira, Dondo and Nhamatanda (selected accommodation centres) on 13 and 14 April. The sites selection was based on vulnerability criteria. Screening will be extended to reach all camps in the future. An orientation session on MUAC screening took place on 12 April in Beira for MISAU and partners.
- On 22 April a “national health week” will start in four provinces; MoH will conduct screening at health centers and mobile services, including distribution of vitamin, routine vaccination, folic acid for adolescents. Support from partners has been requested.
- Through WFP, 400 health centers are targeted for the treatment and prevention of moderate acute malnutrition (MAM) for a period of six months in Manica, Sofala, Zambezia and Tete. This intervention will require logistical support. CSB will be provided for Pregnant and Lactating Women, and plumpy nut for children under 5.

Gaps & Constraints:

- There is a need for plumpy nut in mobile services, as there is a high risk that referral mechanisms to health centers is not followed by parents.

Protection

Needs:

- As of 12 April, the Government had identified and registered 41,742 vulnerable people – including children, people with disabilities, female-headed households and the elderly – who were subscribed in the National Institute for Social Action (INAS) programme for support.

>41,700

Vulnerable people
government-identified
and INAS-registered

Response:

- Together with CCCM, the Protection, gender-based violence (GBV) and child protection (CP) sub-clusters will be part of the Integrated Protection Centers (Centro de Atendimento Social) planned in all accommodation centers in Beira. Locations for the centers have been identified for Samora Machel and Ifapa and will be set up in the following days. Five social workers from Ministry of Gender, Children and Social Action are in place in all centers.
- The Protection Cluster continues to support capacity building of government social workers to deliver psychosocial support and scale up the capacity of community-based organizations to respond to GBV in emergencies.
- The GBV sub-cluster is working in 16 districts across Sofala, Manica, Tete and Zambezia, with nine partners active.
- Through the GBV sub-cluster, 2,341 dignity kits (450 kits in Domba by UNFPA) have been distributed. (refer to GBV service provision map).
- On 12 April, UNFPA met with the Mozambican Federation of People with Disabilities (FAMOD) in Manica. FAMOD expressed concern that aid is not reaching the most vulnerable. FAMOD will share data on disability with UNFPA and discussions will continue to ensure interventions are fully inclusive, including for people with disabilities.
- The CP sub-cluster is planning to set up another 35 child-friendly spaces (CFS) in Buzi collaboration with Como Sana. Assessment is ongoing. So far, 3,192 children have been reached through CFS and Psychosocial Support (PSS) in Beira and Buzi.

Gaps & Constraints:

- Gaps in protection activities outside of Beira.
- Currently, distribution of dry relief items focuses on those living in accommodation centers/camps. It should target all people in need.
- Lack of knowledge on GBV reporting mechanism and referral pathways in most sites and areas outside of Beira.

Shelter & NFI

Needs:

- The number of houses reportedly destroyed or damaged remained at 239,731 houses as of 12 April, including 112,745 houses totally destroyed, 111,202 partially destroyed and 15,784 flooded, according to government figures.
- As a bare minimum package, displaced people need shelter kits to ensure recovery and return as soon as possible. Priority items include tarpaulins and rope tool kits; blankets; sleeping mats; buckets; solar lamps.

>239K

Houses destroyed or
damaged

Response:

- The Shelter Cluster has reached more than 23,431 households out of 239,000 targeted. More information from Shelter cluster is available on <https://www.sheltercluster.org/africa/mozambique>.
- IFRC has developed Shelter IEC material which can also be used by other partners.
- The Shelter Cluster, as a member of the Relocation Taskforce, continues to advocate for principled population movements and assist Government in the relocation process. The Shelter Cluster will focus on providing support to people returning and being relocated. Shelter partners are also supporting return intentions surveys to better understand the return constraints and do better planning.

Gaps & Constraints:

- Shelter materials are available for shelter cluster intervention but coverage gap remains. Partners interested in distribution should contact the Shelter Cluster. Emphasis will be area with the low coverage.

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.
- Proper WASH services and practices need to be put in place as soon as possible.
- The WASH cluster is shifting its focus from collective sites to affected communities and return areas, as relocation has started.
- There is a need to enhance WASH programming in Buzi district.

~900K

People received water support

Response:

- The WASH cluster is working to complement Government's WASH activities.
- To date, 44 WASH cluster partners have provided water support to over 907,000 people, hygiene support to over 155,000 people and sanitation support to over 18,230 people.
- WASH partners have distributed 93,000 Certeza.
- WASH cluster partners have also distributed over 6,249 Hygiene kits and will continue that while discussing with Health, CCCM, Shelter and Protection clusters how best to do so. For the immediate phase, distribution priority is for accommodation sites and those that are planning to relocate back to their homes. The longer-term strategy will focus on settlement areas and returning areas.
- A Working Group on WASH rehabilitation has been established, working on the rehabilitation of boreholes and handpumps

Gaps & Constraints:

- Overall, WASH and waste management capacity in the affected area was low prior to the cyclone and has deteriorated, creating significant gaps.

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.

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

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

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