

This Situation Report is produced by OCHA Regional Office for Southern and Eastern Africa in collaboration with humanitarian partners. The Situation Report, which covers the period 30 April to 6 May, builds on Flash Updates #1 through #15 and provides detailed information on the situation and response by sector. The next report will be issued on or around 13 May 2019.

HIGHLIGHTS

- Nearly 1.5 million people have been reached with food assistance in Manica, Sofala, Tete and Zambezia provinces.
- The number of displaced people sheltering in accommodation sites in Sofala province decreased to 21,384 people (4,639 families) as of 5 May.
- Malaria cases in Sofala have continued to rise, with 25,758 cases registered as of 6 May; the highest number of cases has been reported from Nhamatanda (11,652).
- Cholera cases continue to decline, with only four new cases reported from 5 May to 6 May, compared with 400 cases reported daily during the peak of the outbreak.
- More than 286,000 people (57,222 families) have received shelter assistance. However, more shelter materials, including tents, are still needed.

1.85M

People in need

6,743

Cholera cases

~1.5M

People reached with food assistance

>286K

People reached with shelter assistance

22,758

Malaria cases in Sofala Province

>1.25M

People supported to access clean water

SITUATION OVERVIEW

The number of displaced people seeking shelter in accommodation sites in Sofala has decreased to 21,384 people (4,639 families). The Government, under the leadership of the Sofala Provincial Governorate, is coordinating the movement of internally displaced people (IDPs) to new resettlement sites.

There are now 17 accommodation centres in Sofala, 9 in Buzi, 5 in Beira and 3 in Nhamatanda. About 13 schools were still being used as accommodation centres as of 5 April in Buzi, Beira, Dondo, Tete, Gondola and Nhamatanda, impacting the resumption of learning for affected students. To date, 4,127 plots have been demarcated, of which 2,612 have been assigned. Only 240 people (48 families) remain at the IFP accommodation centre, while more than 1,800 (360 families) families have been relocated from the IFAPA accommodation centre to Dondo and Nhamatanda, leaving 485 people (97 families) at the site. In Picoco, more than 49 per cent (2,255 people) of the previous 4,620 IDPs in the site have been relocated, leaving about 2,365 people (473 families) at the site. The humanitarian community continues to advocate for safe, dignified, voluntary and informed population movement, as well as for adequate service provision and sustainable resources in return areas. More than 286,000 people (57,222 families) have been reached with shelter assistance, representing about 63 per cent of the targeted population of 450,000 people, as of 5 May. More shelter materials are, however, still needed especially in the relocation areas.

Concerns persist regarding the likelihood of increasing food insecurity due to Cyclone Idai. All communities in Manica and 80 per cent in Sofala have reported harvesting less than half of their maize due to the disaster, according to the findings of the “[Post Cyclone Idai Mozambique rapid agricultural livelihood needs assessment](#)”, conducted in 21 affected districts of Sofala, Manica and Zambezia provinces. Many communities harvested only small quantities of maize, which will not keep for long and cannot be used for seeds. At the same time, income from the sale of staple crops has decreased for over 90 per cent of communities, while income from animals has decreased for 80 per cent of the communities who used to rely on it, and income from fishing has decreased for 70 per cent of the communities who rely on it. Sesame – which was the main cash crop in the fields when Cyclone Idai hit - was severely impacted, with 60 to 80 per cent of communities estimating that they will harvest less than 25 per cent. As communities begin to recover from the impacts of Cyclone Idai, markets are being revitalized. Markets in Bandua and Buzi are now operational, with good available stock and established supply chain, according to findings from a market assessment conducted by Plan International in Bandua, Buzi and Inanjou. As of 1 May, 1,496,400 people have been reached with food assistance in the provinces of Manica, Sofala, Tete and Zambezia. The

second round of distributions had reached 68 per cent (905,947 people) of the 1.34 million target, as of 1 of May. About 137,150 people have been reached with voucher distributions.

More than 335,000 school-age children (5-17 years) and over 7,800 teachers were affected by the impact of Cyclone Idai and floods, according to the Government and partners. The floods have had a significant psychological impact on many children. Some children are reportedly scared to move around because they are afraid of the floods, while caregivers report that children are afraid of the dark and are crying at night, according to a [rapid assessment in Buzi carried out by Plan](#). At least 36,542 children and youth (49 per cent female) and teachers have benefited from education interventions. However, access to education – particularly for girls – remains constrained.

The displacement and destruction caused by Tropical Cyclone Idai have increased protection risks, particularly for women and girls. In Buzi, some girls and women are reportedly having sex for money– mainly in market areas such as Bandua market, according to the [Plan rapid assessment](#). Women reported that more money is typically offered if they do not use condoms, exposing them to heightened risk of sexually transmitted disease. Due to damage to infrastructure, girls and women are having to walk longer distances to collect firewood and water, and there have been reports that women have been raped while engaging in these activities, according to Plan. Already prior to the cyclone, one in six adults in Sofala were living with HIV, according to [MSF](#).

FUNDING

Funding towards the revised Humanitarian Response Plan, calling for US\$337.2 million (including \$282 million for the Cyclone Idai response) had reached 29.7 per cent as of 6 May. Multiple Member States have provided financial contributions for the humanitarian response in Mozambique, with at least \$156.6 million recorded in the Financial Tracking System (FTS) as of 16 May; of which \$82.1 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>

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management

Needs:

- The number of displaced people sheltering in accommodation sites in Sofala province decreased to 21,384 people (4,639 families) as of 5 May: Beira had 5 accommodation centres, hosting 3,314 people; Nhamatanda had 3 accommodation centres, hosting 2,010 people; and Buzi had 9 accommodation centres, hosting 16,060 people.
- The Sofala Provincial Governorate is leading the resettlement process for IDPs in Beira, Buzi, Caia, Dondo, and Nhamatanda districts. CCCM cluster partners are coordinating with government counterparts and humanitarian actors and have shared guidelines on how to ensure that population movements align are voluntary, safe, dignified and informed. Access to basic social services at the relocation sites is a major concern.

Response:

- In IFP, only 240 people (48 families) are hosted at the site, while in IFAPA, more than 1,800 (360 families) families have been relocated to Dondo and Nahmatanda, leaving 485 people (97 families) at the site. The relocating families were provided with food and hygiene kits, but no shelter material. However, families leaving the sites have been reported as not taking tents with them.
- In Picoco, more than 49 per cent (2,255 people) of the previous 4,620 IDPs in the site have been relocated, leaving about 2,365 people (473 families) at the site. About 62 per cent (280 families) of those leaving have received resettlement kits comprising of food, blankets, mosquito nets. However, some 855 people (171 families) reportedly left without taking the kits offered and instead asked for alternative support, including provision of shelter material.
- The last Dondo accommodation centre was closed on 3 May and families from Dondo are moving to Mandruzi (272 households at site) and Mutua (155 households at site), where plot demarcation is ongoing. Field reports indicate that initial works on road opening have begun and FIPAG is carrying out water trucking in these areas. IOM led a multi-sectoral site visit on 28 April in coordination with the WASH cluster and Protection cluster partners to assess needs and provide recommendation for Mandruzi and Mutua sites in Dondo. Similar visits will be carried in other resettlement sites as the movements continue.

21,384

People remaining in IDP sites in Sofala

- In Nhamatunda, the “Agua Rural” site was closed after households moved to Cura resettlement site. There are now 156 households (452 people) residing at Cura, Nhamatanda. More resettlement movements expected from Samora Machel Mafambisie to Mandruzzi, Matua and Buzi.
- CCCM and DTM teams are coordinating with INGC to get further information on the resettlement sites. In addition, site assessments have commenced in the resettlement sites to identify gaps in service provision. DTM’s Interactive Dashboard can be accessed @ <http://displacement.iom.int/content/mozambique-%E2%80%94-tropical-cyclone-idai-displacement-movement-tracking-daily-update-beira..>
- CCCM is continuing to expand its operational presence in Buzi, Beira and Dondo and Dombe, and has established an information hub to provide service mapping and referrals to support the ongoing movements.

Gaps & Constraints:

- Service provision remains limited at the resettlement sites with no access to water or latrines, according to the Cluster. WASH and Shelter capacity remain a critical requirement to meet the demands during relocations.

Education

Needs:

- In Sofala province alone, more than 2,700 classrooms have been destroyed or damaged, impacting on the education of nearly 237,200 school-age children.
- Affected teachers require tents, as some reportedly do not have a place to live; contributing to teacher absence.
- Some 13 schools are still being used as accommodation centres, hosting about 5,300 people in Buzi, Beira, Dondo, Tete, Gondola and Nhamatanda, according to DTM. This continues to affect the resumption of learning for affected students.
- Many children need books, school bags and uniforms, as they lost everything during the cyclone and floods.
- Partners have reported lack of enough school spaces dedicated for children in the resettlement areas.

>36,500

Teachers and students provided with assistance

Response:

- More than 36,500 children and youth (49 per cent female) and teachers have benefited from various education interventions, including receiving learning materials, teacher training, recreational materials and repaired classrooms and latrines
- For the reconstruction of schools, partners will use the MINEDH - UN-Habitat “Formulario de levantamento tecnico das infraestruturas escolares afectadas pelas calamidades”.
- On 25 April, eight tents were supplied to EPC Thalavareta in Metuchira, Nhamatanda for teachers (OLAM).
- A mapping of psychosocial support (PSS) interventions is ongoing to ensure harmonization and effective coordination of PSS.

Gaps & Constraints:

- The Cluster is mobilizing resources to cover the gap in tarpaulins that are needed for rapid school repairs.
- More funding is needed to reach as many children as possible; Education was only 1.1 per cent funded on 5 May.
- The relocation of families to new resettlement areas is ongoing. However, limited access to information about the plan (target areas, schedule of relocation, education needs) is making it difficult for education partners to ensure that education services and resources are available in the new areas.

Emergency Telecommunications (ETC)

Needs:

- Internet Service Provision (ISPs) by private companies is reportedly unstable, following the closure of the Emergency Operation Centre in Beira on 26 April.

1,700

Humanitarians accessing ETC services

Response:

- Nearly 1,700 internet users have been supported by the Cluster, across Beira (1,523); Buzi (91), and Nhamatanda (23). The Cluster has installed a VSAT in Buzi to support internet connectivity for seven agencies in the area. ETC also covers Grudja and the Die Johanniter NGO site with internet connectivity VSAT but does not have the capacity to register users there.

- The Cluster will continue to provide emergency support to 15 organisations (NGOs) in Beira City until Mid-May, with plans to phase out operations in Beira by end-May. The Cluster is negotiating better internet and telecommunication rates for humanitarian agencies as the ETC scales-down emergency support to partners.
- Support to field locations will continue until normal services are restored, particularly in inaccessible areas.

Gaps & Constraints:

- The 3G and local Internet Service Providers (ISPs) by local companies is reportedly slow and unstable impacting humanitarian operations.
- The sector has received around 50 per cent (\$600,000) of the \$1.2 million funding appeal.

Food Security

Needs:

- Food security is likely to deteriorate over the coming months, once whatever small quantities of maize harvested have been finished.
- About 45 to 75 per cent of affected communities are reportedly in need of seeds to support farmers to plant for the next main season, according to the Cluster.
- At least 715,378 hectares of agricultural land have been damaged, according to the Government, affecting 500,000 producing families.
- In Sofala, 314 fishermen were affected by the impact of Cyclone Idai, resulting in 77.25 tons of lost production. The fishermen have requested the authorities for a moratorium for 60 days to help them organise the payment of their licenses.

~1.5M

People reached with food assistance as of 1 May

Response:

- As of 1 May, FSC partners have reached 1,496,400 people with food assistance in the provinces of Sofala, Tete, Zambezia and Manica. The 2nd round of distributions has reportedly reached 68 per cent (905,947 people) of the 1.34 million targeted, as of 1 of May. About 137,150 people have been reached with voucher distributions.
- FSC partners distributed seed-and-tools kits (maize, beans, hoes and machete) to 21,416 households, including in Sofala province (Nhamatanda - 8,500 HH; Buzi (3,500 HH) and Manica province (Sussundenga (5,976 HH) and Macate - 3,440 HH). As the window for these crops is now closed, the distribution of seeds has stopped.

Gaps:

- Nearly \$73.2 million has been received for the food security response, which is almost 47 per cent, according to FTS. However, more is urgently needed.
- The FSC has confirmed access challenges in reaching several areas, including Chissange (Dondo), Wirikizi, Honve and Nhamassinzira (Muanza) and Cheadea, Nhampoca and Macorococho (Nhamatanda).

Health

Needs:

- Malaria cases in Sofala have continued to rise, with 25,758 cases registered as of 6 May; the highest number of cases has been reported from Nhamatanda (11,652).
- Cholera cases continue to decline, with only four new cases reported from 5 May to 6 May, compared with 400 cases reported daily during the peak of the outbreak.
- More than 90 health centres are either damaged or destroyed and sanitation facilities remain inadequate.

22,758

Malaria cases reported as of 01 May

Response

- Health partners continued to support the Ministry of Health and INS for improvement and expansion of Early Warning and Response System (EWARS), including establishment and training of Outbreak Investigation Teams.
- The health week campaign will be conducted from 6 to 10 May, covering all affected areas of Sofala province. A package of health services will be provided to children 0-59 months and women from 15-49 years and will include vaccination against measles, rubella and Polio, Vitamin A supplementation, deworming, nutritional triage, Fe supplementation and family planning.
- To mitigate the impact of malaria, more than 474,400 long-lasting insecticidal nets (LLINs) have been distributed and an indoor spraying campaign is ongoing targeting 628,455 people.

- There are currently four Emergency Medical Team (EMT) operating in the area.
- Twenty health workers from outbreak detection teams were trained on Risk Communication and Community Engagement.
- WHO is supporting rapid investigation and sample collection for laboratory testing for cholera, bloody diarrhoea and other epidemic-prone disease.
- With the contribution of partners and close collaboration with the MoH, the M&E Framework has been revised and finalized. The compendium of indicators has been validated with a data matrix and shared with the focal points assigned by the MoH at both national and provincial levels for consideration and use.

Gaps & Constraints:

- More funding is needed to continue health interventions.
- MISAU/DPS with WHO and Health Cluster partners have done microplanning. However, insufficient transportation has been identified. Health Partners are requested to support.
- Lack of power has disrupted the vaccination programme and immediate action is required to either restore power or provide solar energy
- Expansion of EWARS to health facilities in inaccessible and hard-to-reach areas is challenging, as well as in areas with no electricity/solar chargers for EWARS reporting devices.

Logistics

Needs:

- Access, particularly by road, remains a challenge in many parts of Manica and Sofala provinces.
- The ferry crossing from Guaraguara to the N280 remains non-functional as of 29 April.
- Expansion and fixing of the electricity network continue. Since 23 April, 250 energy transformation points in Beira (80 per cent) were connected. Out of the 26 Beira neighbourhoods, 18 are already connected. Buzi line is undergoing work; materials are being provided as the system recovers

Response:

- One WFP Aviation helicopter (Mi-8) will remain available until the end of May to ensure the delivery of urgent cargo to areas that remain impassable by road. Extension of the service beyond this date will depend on the availability of funds.
- Cluster partners are coordinating with the INGC and Ministry of Transport to share information on road access and mapping. An assessment mission to areas that remain hard to reach is planned for the week starting 6 May.
- The temporary airport storage facility remains available for cargo to be transported by air. Storage facilities are also available in Beira, Buzi, Nhamatanda (Sofala) and Chimoio district (Manica).

Gaps & Constraints:

- Mossurize district continues to be difficult to reach as the bridge over the Buzi river is still under repair. Three points south of Buzi are yet to be reached with assistance, according to the authorities.
- More power cuts are anticipated in Beira as the network is being repaired gradually.

Nutrition

Needs:

- Nearly 11,000 children under-5 years of age are projected to be severely acutely malnourished (SAM). UNICEF is targeting 8,750 cases.
- More than 41 per cent of Mozambique's children were physically stunted prior to the Cyclone Idai emergency.
- Several health facilities remain destroyed and reportedly without facilities and resources in Govuro (Inhambane), Chibabava, Gorongosa, Muanza, Cheringoma, and Machanga (Sofala), and Muanza (Sofala), impacting treatment for malnutrition, according to health partners.

11,000

Children under - 5 years old estimated to be SAM

Response:

- Monitoring and Evaluation (M&E) partners from Maputo are in Beira to support the development of a database and conduct orientations for provincial health nutritionist (DPS) and M&E focal persons on how to compile weekly emergency nutrition data from facilities and districts. The content includes data on MUAC screening for children, pregnant and lactating women (PLW), Severe and Moderate Acute Malnutrition cases (SAM/MAM), vitamin A supplementation, deworming medication and BP5 supplementation.

- In Nhamatanda, Save the Children has recruited 12 IYCF counsellors and one nutrition coordinator and has established mobile clinics in six hard-to-reach areas. Nearly 250 caregivers have been reached with messages on infant feeding (IYCF).
- Out of the 340 children and 143 PLW screened in Nhamatanda using the Mid-Upper Arm Circumference (MUAC); 10 children have been identified as SAM, while another 10 children and two PLW have been identified with MAM. In Associação ComuSanas Centre in Dondo, more than 621 people were screened for malnutrition, out of which six were identified with SAM and 141 with MAM. Overall, more than 15,405 children (6-59 months) had been screened for acute malnutrition by end April; partners are planning to scale up screening during child health week.
- WFP dispatched 19.3 CSB+ in the 12 health facilities of Beira district in Sofala for MAM to cater for 1,930 Pregnant and Lactating Women (PLW) for one month.

Gaps & Constraints:

- WHO has recommended that authorities send an official letter to all health units instructing them to conduct MUAC screening for all children at triage, well-baby clinic and sick baby clinic. Currently MUAC screening is only done at triage and not in well-baby or sick-baby clinics.
- Health workers have reported a shortage of MUAC tapes. Provincial and district health nutritionists, in collaboration with nutrition partners, will distribute MUAC tapes to facilities available in all contact points. Health workers from all departments will also be trained on MUAC screening.
- A health assessment team investigating four health centres in Nhamatanda reported that, except for Dondo, the other hospitals did not have equipment (scales are not calibrated, height plates are old, oxygen concentrators) and generally the hospitals do not meet minimum standards. Medical knowledge and skills of staff varied from medium to sub-standard. The proposal is to train health workers in the four hospitals using the national protocols. Two pediatricians will be brought from Maputo in collaboration with the DPS to support the facilities.
- Health partners led by WHO are planning to improve nursing to minimum standards and procure medical kits (treatment of DAG with complications) for hospitals. Each kit is enough for 50 patients for three months.
- Lack of/limited funding to date for the response.
- Two districts in Zambézia are still inaccessible - Chinde due to road conditions and Inhassuge because of technical issues with transportation – due to be resolved by end of May according to WFP.

Protection

Needs:

- The Child protection sub-Cluster Partners conducted a mission to resettlement sites in Dondo; Madruzi and Mutua on 3 May and identified the following needs: girls and young women are facing an increased risk of gender-based violence (GBV), including sexual violence, exploitation, early pregnancy and forced marriage; there is little to no evidence of unaccompanied children in the locations visited, however, there are some separated children and families; the status of separated and orphaned children in spontaneous and kinship care needs to be formalized in addition to an assessment of the risks of exploitation within the care arrangement; children and caregivers suffer from psychosocial distress because of loss of belongings and a lack of access to basic needs, since the cyclone and flooding disaster in the area on 16 March.
- There is a need to build on existing national community level capacities to strengthen the protective environment around children and families. Child protection agencies are to work with the Ministry of Gender in this regard.

Response:

- Community Engagement (CE) partners continued to disseminate response information to the affected community, using the media and the information and communication materials such as posters. Staff and volunteers are being trained on community engagement and Protection and Sexual Exploitation and Abuse (PSEA) guidelines.
- WFP, in collaboration with humanitarian actors are working towards the establishment of Linha Verda Inter-Agency Hotline; to be used by the community to report PSEA incidents. Focal points from each partner/organization at district level are to be identified to support the monitoring of reported cases and any foreseeable errors and risks.
- The Health communication team is recording drama series on cholera prevention on Radio Buzi. UNICEF radio dramas are being aired by local community radios in Portuguese, Sena, Ndau; trainings by C4D team still ongoing.
- During a mission to an accommodation centre in Mafambise, Protection partners identified four persons with disabilities, who have reportedly not received any targeted support from the community, despite them writing letters to various organisations. The needs range from lack of food assistance, shelter material for reconstruction and psychosocial support. Data on people with disabilities remains scarce due to the lack of community based organisation handling their specific vulnerabilities.
- The GBV Sub-cluster shared the strategy for the next six (6) months which includes the sub-cluster's objectives, key programme areas, performance indicators, and implementation plans post-emergency into recovery phase.

- UNFPA has setup 10 women friendly spaces (Beira, Dondo, Nhamatanda, Buzi) and is conducting life skills and Mental Health and Psychosocial Support (MHPSS) activities in the area, in coordination with Ministry of Gender. UNFPA has relocated the Women Friendly Space (WFS) and integrated protection tents that were in Chipende Transit Center to Magandafuwa Resettlement Site. In addition, the one at Samora Machel Dondo accommodation centre was removed and erected at Mandruzi resettlement site. Awareness activities have started in Women Friendly Spaces in Beira - Picoock and Samora Machel - under the supervision of Ministry of Gender, Child Protection and Social action. A total of 262 individuals (167 female and 95 male) were reached with GBV prevention messages in Picoock accommodation center during the reporting period.
- UNFPA, IOM and Ministry of Gender, Child Protection and Social action participated in an inter-agency field mission to assess Gender Based Violence and protection risks for populations being relocated from Dondo and Chipende to Mandruzi and Mutua resettlement sites. Through 4 focus group discussion with 51 women and 42 men, it was noted that there were no basic services and facilities e.g. WASH, health, shelter and schools in place, especially for the most vulnerable groups. Some households slept in the open, putting women and children at risk of GBV. The Ministry acknowledged the poor conditions and lack of adequate preparation of land and facilities in relocation sites and promised to follow up.
- A protection mainstreaming checklist was issued to assist clusters in ensuring a protection-sensitive response. The Protection Cluster has also started systematic vulnerability assessments in accommodation and resettlements sites to identify persons with specific needs for targeted responses (protection and assistance).
- UNHCR conducted a training for ten (10) Protection Focal Points in Guara Guara, nominated by the community. The focal points are to act as a link between the affected population and service providers, assist in dissemination of key messages to the community, identification of protection, SGBV and CP incidents and follow up.
- More than 8,600 children continue to benefit from activities in the Child Friendly spaces (CFS), through various locations in Manica and Sofala, according to UNICEF. Aid workers are planning to pilot listening boxes (a voice recorder) in a few schools and child-friendly spaces to be used as feedback mechanisms that will be linked to the Linha Verde Hotline feedback. Five Women and Girls Friendly Space tents have been successfully set up in Picoock and Samora Machel accommodation site in Beira, Bandua and Chipembe and Samora Machel in Dondo.

Gaps and constraints

- The seemingly rapid return and relocation movements of IDPs in unprepared sites has potentially heightened protection risks, particularly the most vulnerable.
- The Ministry of Gender, Children and Social Affairs (MGCAS) has reported a chronic lack of resources to scale-up response in affected areas and sustain service response in the recovery phase.
- There are limited multi-sectoral services for referrals in remote areas. Government and sub-cluster capacity is needed to respond to vulnerable children identified in FTR and the low number of response partners (11).
- Lack of funding – most organization have secured funds for not more than three months.
- Lack of basic facilities, particularly in WASH and Health, and functioning school and support for livelihoods continue to expose the population to protection risks.
- Funding gaps for the sector continue to be reported. Partners are calling on donors for support with the long-term recovery process. Most of the affected populations are from poor rural areas and the extent of damage to their livelihood is severe.

Shelter & NFI

Needs:

- The Shelter Cluster is targeting approximately 450,000 people (90,000 households) and is recommending emergency shelter assistance as well as household non-food items, with a gradual shift to support self-recovery of shelter
- Some of the affected populations are well into the process of self-recovery. In rural areas, where the simple stick and mud homes are common, there is an opportunity to include simple techniques to make the homes more resistant.
- Nearly 240,000 houses were either partially (112,202) destroyed, completely destroyed (111,745) of flooded (15,784), according to the Government.

>286K

People reached with shelter materials out of the 450k targeted

Response:

- The number of people reached with shelter assistance has increased to more than 286,000 people (57,222 families); representing about 63 per cent of the targeted population of 450,000 people, as of 6 May. The assistance consists primarily of basic non-food items, including tarpaulins or plastic sheeting, rope and blankets.

People identified as most vulnerable have been provided with shelter kits and basic NFI (2 tarpaulins, shelter tool kit, kitchen set, blankets and sleeping mats).

- Shelter Cluster Partners are working alongside the CCCM cluster with the Return, Relocation and Resettlement working group, to ensure principled assistance to relocation and resettlement is provided.
- The Cluster is mapping partner support for the relocated families and is conducting a new gap analysis, available on the shelter cluster website @ <https://www.sheltercluster.org/africa/mozambique>.

Gaps and Constraints:

- Although the number of tarpaulins distributed and in the pipeline are nearing the numbers required to assist the 87,500 HH target, other essential NFIs - like the tool kits that are required for setting up temporary shelters, repair and reconstruction - are insufficient (9,206 tool kits distributed).
- If no further funding is made available to adequately respond, Shelter Cluster partners will necessarily have to prioritize assistance to target most vulnerable households in most affected areas, only.



Water, Sanitation and Hygiene

Needs:

- More than 1.7 million people out of the 1.85 million people in need are being targeted with WASH assistance, with priority being given to;
 - displaced people in accommodations centres, returnees and those in new settlement areas;
 - people living in communities most affected by cyclone and floods; and
 - people cholera-affected areas, particularly in Sofala Province.
- There is a need to speed-up construction of latrines, particularly in high-water table areas to address the poor sanitation concerns in affected areas.
- The risk for increased disease outbreaks remains high amid limited access to clean water and poor sanitation.

>1.2M

People assisted with drinking water

Response:

- Health partners have reached some 1,253,039 people with access to clean drinking water, of which more than 697,000 have been reached with Certeza in cholera-affected areas, according to health partners.
- Nearly 37,000 people have been assisted with emergency sanitation through the construction of latrines and showers. More than 167,000 people have been reached with hygiene promotion and distribution of hygiene kits.
- Emergency water support continues in Nhamatanda and Sussundenda (Manica), while rehabilitation continues in Zambezia.
- Emergency WASH services provision are being provided in the new resettlement areas but are reportedly insufficient for the increasing needs in the camps. Emergency water provision has been provided in Dondo (Mandruzi and Mutua), Buzi (Guara Guara), Nhamatanda (Metuchira), Manica and Zambezia provinces.
- Emergency communal sanitation solutions, including latrine construction and garbage pit preparation is being encouraged through in-kind donations such as latrines slabs and tree saplings.

Gaps & Constraints:

- WASH stocks in Beira have been redirected to Pemba to cover immediate needs; creating the need for replenishment so to not have a negative impact on the Idai-response activities.
- Fuel shortages and access constraints are hindering WASH interventions, with an unknown number of people yet to be reached in several areas, including in southern Buzi (Bandua and Nova Sofala areas), central Muanza and north of Nhamatanda – Sofala province, as well as Mossurize and Sussundenga districts in Manica province, which have been receiving assistance by boat.
- Partners are needed for the recovery phase in southern Buzi (Bandua area and Nova Sofala area) and central Muanza that have received only emergency WASH response. No WASH partners have been identified.
- North of Nhamatanda has minimum WASH coverage and is of concern due to cholera cases registered recently. Identification of WASH partners to work in these areas ongoing.
- Funds for recovery (15 million USD) phase needed; most of the funds received are for first phase emergency. Several water infrastructure systems and almost all sanitation facilities in flooded areas were destroyed and will need long-term investment in recovery.
- WASH stocks being stored in Beira are shipped to Pemba to cover immediate needs, creating the need for replenishment so to not have a negative impact on the Idai-response activities.

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).

The Emergency Operations Centre (EOC) in Buzi was deactivated on 26 April. 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.

In addition, coordination hubs have been established in: Buzi City – covering Buzi; and Nhamatanda – covering Nhamatanda. These hubs will initially operate until the end of April to support the INGC and local government authorities to coordinate with humanitarian partners working in the designated areas. OCHA has deployed surge staff to support coordination and United Nations Disaster Assessment and Coordination teams have been deployed to Beira, Buzi, Chimoio and Nhamatanda.

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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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