HIGHLIGHTS

- More than 1.62 million people have been reached with food assistance in Manica, Sofala, Tete and Zambezia provinces following the devastating passage of the Cyclone Idai weather system through Mozambique in March.
- The number of people sheltering in accommodation centres had reduced to 14,044 (3,065 families) as of 12 May, down from 21,384 (4,639 families) on 5 May.
- Malaria cases in Sofala have continued to rise, with 26,787 cases registered as of 9 May; 44 per cent of the cases (11,652 cases) have been reported in Nhamatanda district.
- Efforts are underway to mobilize parents and children to ensure that children return to school as soon as possible.

SITUATION OVERVIEW

Nearly two months on from Cyclone Idai and the devastating floods that followed, many people affected have begun to rebuild their lives. However, while humanitarian assistance has helped to save lives and alleviate suffering, the impact of the storm continues to be felt by people across the central region of Mozambique, many of whom face the risk of rising food insecurity in the months ahead due to the destruction of crops and other livelihoods.

Resettlement of people who will not be able to return home following the cyclone and flooding is continuing. The number of displaced people sheltering in accommodation centres in Sofala province decreased from 21,384 people (4,639 families) on 5 May to 14,044 (3,065 families) as of 12 May, according to the National Disaster Management Institute (INGC). The IDPs were accommodated in twelve accommodation centres in Beira (five centres, 3,314 people) and Buzi (seven centres, 10,730 people) districts. All accommodation centres in Dondo district have now been closed. Some 4,519 plots have been demarcated for resettlement, of which 3,815 have been assigned. In the interim, many families have been relocated to transit sites, where they are awaiting resettlement. Humanitarian actors continue to engage with the Sofala Provincial Governorate to ensure that returns, relocation and resettlement are safe, voluntary, dignified and informed, that people will have access to basic social services in the areas they are moving to, and that potential tensions between people being resettled and host communities are averted.

The cholera outbreak has been largely contained, including due to the success of the rapid Oral Cholera Vaccination campaign. However, the risk of other communicable diseases remains high. Malaria cases in Sofala continue to rise, with 26,787 cases reported as of 9 May. The spread of HIV also remains a major concern, including due to the financial hardship caused by Tropical Cyclone Idai. In Sofala Province, one in six adults live with HIV, according to Medecins Sans Frontiers, which has heard multiple reports that transactional – or survival – sex may have increased, including among people who had never engaged in sex work before.

FUNDING

Funding towards the revised Humanitarian Response Plan, which calls for US$337.2 million (including $282 million for the Cyclone Idai response) remained at 29.7 per cent as of 12 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 12 May; of which $82.1 million had 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 people sheltering in accommodation centres had reduced to 14,044 (3,065 families) as of 12 May, down from 21,384 (4,639 families) on 5 May.
- The Sofala Provincial Governorate is leading the resettlement process for IDPs in Beira, Buzi, Caia, Dondo, and Nhamatanda districts. Several IDPs await resettlement to permanent plots. CCCM cluster partners are coordinating with government counterparts and humanitarian actors and have shared guidelines on how to ensure that population movements are voluntary, safe, dignified and informed.

Response:

- The number of people sheltering in IFP increased to 380 people (78 families), after the INGC moved 30 new families from a school in EPC Palmeiras to the site. CCCM will support the Government in the resettlement of the 78 families from IFP.
- About 50 new arrivals (10 families) were received at Sao Pedro site, increasing the number of IDPs at the site to about 875 people (175 families). Relocating families continued to receive resettlement kits comprising of food, blankets, mosquito nets.
- Two families moved from IFAPA this week; about 475 people (95 families) remained at the site as of 10 May. Families in these sites are waiting to be resettled to Mandruzi and Mutua where land preparation, demarcation, and land-clearing are in progress prior to their relocation.
- Picoco site continues to host some 2,365 people (473 families) following the relocation of more than 2,200 people to the new sites. About 1,375 people (275 families) are hosted at the Semora Machel site.
- Families from Dondo are moving to Mandruzi (296 households at the site) and Mutua (200 households at the site), following the closure of the accommodation center in Dondo on 3 May. Tarpaulins, solar lights and shelter tool kits have been distributed to all families in Mandruzi and Mutua except for about 120 new arrivals (24 new families).
- About 814 people (163 families) have resettled in Cura site in Nhamatanda, where 109 tents have been provided while work on latrines progresses. About 1,130 people (226 families) have resettled in Metichura; and tents have been provided to all families. Water is available, and work is in progress for the provision of latrines. A Women-Friendly Space and an Integrated Protection tent have been erected in Cura and Metuchira, with the support of protection partners.
- More than 1,000 people await resettlement at the transit sites in Mauda (161 families) and in Tica (45 families). Only 84 tents have been provided at these sites and this is inadequate.
- In Guara Guara transit site, more than 6,000 people (1,214 families) are waiting to be resettled, while in Buzi transit sites some 7,480 people (1,496 families) are waiting to be resettled. Site planning training sessions were conducted on 10 and 11 May, while site improvement activities were carried out at the transit centers in Guara Guara, including the construction of communal kitchens and community spaces. At the resettlement sites in Guara Guara, site planning teams provided technical support to INGC for pitching tents at the site. This included providing training to casual laborers for pitching tents and carrying out carpentry activities.
- A Return Intention Survey was completed in nine accommodation centers in Beira and Nhamatanda districts and Multi-Sectoral site assessments were conducted in 10 resettlement sites in Dondo, Nhamatanda, and Sussundenga districts. Both reports are available on DTM website: displacement.iom.int/reports/Mozambique
- For more information and daily updates, DTM’s Interactive Dashboard can be accessed at the following URL: http://displacement.iom.int/content/mozambique-%E2%80%94tropical-cyclone-idai-displacement-movement-tracking-daily-update-beira.
- CCCM is continuing to expand to its operational presence in Dombe, Buzi, Beira, and Dondo, 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 limited access to water and latrines and insufficient tents.
- WASH and Shelter capacity - among the least funded in the HRP - remain a critical requirement to meet needs during relocations.
**Education**

**Needs:**
- In Sofala province alone, more than 2,700 classrooms were destroyed or damaged, impacting on the education of nearly 237,200 school-age children, according to the Government.
- Authorities have requested tents for the construction of classrooms for the affected students, as well as for teachers whose homes were destroyed.
- Learning materials, including books, school bags and uniforms are needed for students who everything during the cyclone and floods.

**Response:**
- The number of teachers and students provided with educational assistance has increased to at least 87,260.
- About 24 school tents have been supplied to Sofala and erected in the districts of Beira, Buzi, Dondo and Nhamatanda.
- Education partners conducted a joint visit with the Government in Dondo and Nhamatanda, during which they observed that:
  - Apart from schools in Metuchira, which are already receiving students, primary schools in all other areas are reportedly a long distance from the new resettlement sites; a major concern in the ability of children to access education.
  - In Kura, children are reportedly travelling to their old school, located about 600m from the camp.
  - Education Cluster partners will follow up with the camp managers and the authorities on exploring the possibility of nearby schools to absorb some of the affected students.
- Cluster partners will support the Government with 12 school tents for both districts.
- The cluster is developing a one pager Q&A that will be shared with schools and camp managers in the effort to mobilize all parents to send their children to school.
- The Government is reportedly unable to allocate teachers to the affected schools in a timely manner; disrupting the learning process.

**Gaps & Constraints:**
- Partners have reported insufficient school spaces for children in the resettlement areas.
- Need to open paths to shorten the distance from resettlement centers to schools that are reportedly about 2 to 5 kilometers away; the increased distance traveled has increased security risks for school-going children.
- The Cluster is mobilizing resources to cover the gap in tarpaulins that are needed for rapid school repairs and tents for construction of schools near the resettlement sites.
- More funding is urgently needed; Education was only 26 per cent funded on 10 May 2019.

**Food Security**

**Needs:**
- Losses in agriculture and other livelihoods continue to heighten the risk of worsening food insecurity in the months ahead.
- About 2 million people (407,749 households) need seed assistance, including farmers whose farms were destroyed and livestock killed and fishermen whose fishing equipment was destroyed. Cluster partners estimate fishing losses of almost $4 million, with the destruction of boats and fishing gear over $16.7 million.
- More than 136,000 domestic animals, including 3,213 dairy cows, 1,274 other cattle, 2,089 small ruminants, 3,134 pigs and 126,329 birds, reportedly died as a result of the impact of Cyclone Idai.
- More than 4.9 million animals require vaccination, including 173,555 cattle, 1,387,750 small ruminants, 109,776 pigs, 3,232,357 birds, according to Food Security Cluster partners.
- An estimated 4,310 hectares of irrigation land require rehabilitation.

**Response:**
- Some 1,620,680 people had been reached with food assistance in Sofala (1,148,932), Tete (125740), Zambezia (140,502) and Manica (205,507), as of 10 May. A third cycle of distribution targeting about 1,518,619 beneficiaries is scheduled for 15 May.
- The World Central Kitchen is leading the provision of hot meal interventions in Beira, reaching 5,000 people daily in 10 accommodations centers, including three cholera centers.
• FSC partners have provided seed-and-tools kits (maize, beans, hoes and machete) to more than 21,416 farming households living in Sofala and Manica provinces.
• FAO has distributed tools in Manica and Sofala, including 37,766 hoes (21,334 in Sofala, 15,832 in Manica) and 18,583 machetes (10,667 in Sofala, 7,916 in Manica).

Gaps:
• Over $74.5 million has been received, which is almost 48 per cent of the needs, according to FTS. However, more is urgently needed.
• The FSC is facing access challenges in several areas, including Chissange (Dondo), Wirikizi, Honve and Nhamassinzira (Muanza) and Cheadea, Nhampoca and Macorococho (Nhamatanda).

Health

Needs:
• Malaria cases in Sofala continue to rise, with more than 1,000 new cases reported from 6 to 9 May, bringing the total to 26,787 malaria cases as of 9 May, Nhamatanda, with about 11,652 cases, continues to report the highest number of cases.
• Health partners continued to monitor the hygiene and sanitation conditions in cholera-affected areas in the four districts of Beira, Buzi, Dondo, and Nhamatanda in Sofala Province. Cumulative 6,750 cases and eight deaths (case fatality rate: 0.1%) were reported as of 9 May.
• Medical evacuation and referrals to Beira are still compromised due to lack of ambulances. About 88 health centres were either damaged or destroyed impacting access to health service.

Response
• The Emergency Medical Team Coordination Cell (EMTCC) closed the operations phase on 6 May and started the transition phase, with four Emergency Medical Teams still fully operating.
• As part of Health Week campaign some 386 teams are covering 12 districts of Sofala, targeting 438,243 children under five years and 179,222 women. Primary interventions include, measles, rubella, and polio vaccination, supplementation with Vitamin A, deworming, administration of iron and folic acid, counselling and family planning. Contributions advanced from WHO, UNICEF, USAID, and UNFPA to implement the campaign are valued at $1.2m.
• Support is being provided by 20 partners for the rehabilitation of damaged infrastructures. As of 6 May, out of 88 health facilities impacted, 28 emergency rehabilitations are ongoing, 23 are planned, and seven are pending availability of resources. In 28 health facilities, the assessment of needs is ongoing.

Gaps & Constraints:
• There are still critical pockets in Buzi and Nhamatanda that are only accessible by helicopter or boat. This is exacerbated by damage to health facilities and resettlement of families in areas with limited infrastructure.
• Restoration of services and rehabilitation of health facilities require more resources.
• Community mobilization is a challenge due to lack of awareness and information about the Health Week Campaign.

Logistics

Needs:
• Damage to infrastructure and lack of suitable storage space for the humanitarian response continues to necessitate the need for common storage in multiple locations.
• Road access remains a challenge; air transport is the only option for the transport of relief items to some areas.
Response:

- The Mi8 helicopter that has been conducting airlifts from Beira to areas cut off by road will finish operations on 23 May. Following the end of air operations, the Logistics Cluster storage facility at Beira airport will be dismantled. However, common storage will still be available to the humanitarian community at the Logistics Cluster warehouse in Beira City. Common storage is also available in Buzi, Nhamatanda and Chimoio.
- This past week, the Logistics Cluster facilitated the transport of 16.5 mt of relief items on behalf of MedAir, WHO and COSACA to areas of Sofala Province, still inaccessible by road.
- The Logistics Cluster and partners are coordinating with the INGC and Ministry of Transport to share information on road access and mapping. A road assessment mission to areas that remain hard-to-reach in Nhamatanda took place on 7 May.

Gaps & Constraints:

- Road access remains a challenge for responding organisations with many areas, particularly in Buzi, still difficult to reach.
- The ferry crossing from Guaraguara to the N280 remained non-functional as of 10 May.

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.

Response:

- About 7,826 children aged 6-59 months and 1,859 Pregnant and Lactating Women (PLW) were screened for malnutrition in the last month, out of whom 166 children and 13 PLW with SAM were enrolled for treatment and 375 children and 119 PLW with MAM were enrolled for supplementary feeding, according to the provincial department of health (DPS). 129 IYCF counseling sessions were conducted for 1,236 pregnant and 2,700 lactating women.
- WFP reached 777 PLW with CSB+ and 1,440 children with RUSF in Gorongosa and Maringue from 6 to 10 May.
- Data collection (SETSAN-SMART survey) by teams deployed in Buzi, Caia, Nhamatanda, Beira and Dondo is ongoing.

Gaps & Constraints:

- Monthly data from the Provincial Health Department (DPS) on vitamin A, deworming medication and BP5 for PLW has not yet been received.
- Follow up with nutrition monitoring and evaluation ongoing.
- Lack of partner support to SMART survey.
- No updates from some nutrition partners on key progress and numbers of beneficiaries reached.

Protection

Needs:

- People with disabilities, especially persons with mobility restrictions, are disproportionately affected by natural disasters and have specific needs.
- Protection partners in collaboration with government representatives conducted three joint protection monitoring visits to Nhamatanda (Cura and Metuchira), Dondo (Madruzi and Mutuain) and Guara Guara districts to assess the humanitarian situation in accommodation centers and resettlement sites, identify protection gaps and advocacy areas for purposes of planning better coordination during service delivery by the Government and humanitarian actors.
- In Cura Site, plots were reportedly all demarcated and tents erected. However, some 52 households (some 260 people), out of 163 households at the site, lacked tents. There was an urgent need to enhance lighting within the site, including to curb risks of SGBV. Medical services, including childbirth services, were reportedly lacking.
• In **Metuchira resettlement site**, all 1,125 people (225 households) are well settled in clearly demarcated plots, according to protection partners. Each household was allocated a hand-held solar lamp; a GBV risk mitigation measure. The site, however, has inadequate water supply as each household is limited to 40 liters of water per day, from an available tank, forcing women and children to walk far to fetch water from a nearby river. This has increased the risk of GBV incidents, snake bites and other forms of attack. The proximity of the resettlement site to the closest village is creating agitation from the village during distributions.

• In **Mandruzi resettlement site** in Dondo district, lack of capacity has slowed down the demarcation of plots. About 10 female-headed households are reportedly sleeping out in the open; while several others and children are sheltering in the Women-Friendly Space (WFS). Solar lamps have been distributed per household. Construction of additional toilets is ongoing. Access to health services is reportedly missing in the site.

• In **Mutua - Magandakufa resettlement site** in Dondo district, only 300 people (61 households) out of about 700 people (137 families) at the site had tents for shelter; while the rest were reportedly sleeping under trees. Several women were engaged in pottery and weaving using local materials in the WFS. However, they requested for machetes and knives for cutting the sisal used in weaving.

• In **Guara Guara**, WASH facilities are being established; one side of the site lacks latrines or segregated bathrooms, according to protection partners.

• In general, the resettlement sites lack Child Protection programmes/activities and child-friendly spaces and programming for adolescents are urgently required. Being out of school means that families may subject children to more chores at home. Families will need support and encouragement to enroll children in schools. Support with strengthening community-based child protection and family strengthening remains a key focus of the response.

**Response:**

• From 7 to 10 May, UNFPA, IOM, WHO and the Ministry of Gender and Coalition trained 100 activists/volunteers, including 31 females, on GBV basic concepts, good camp management and how to identify persons with special needs and other vulnerable groups in Buzi, Dondo and Nhamatanda.

• During the week of 6 May, UNHCR conducted training for 40 protection focal points in Dondo and Nhamatanda districts. The focal points act as a link between the affected population and service providers and manage the protection integrated desks together with volunteers, activist, and social workers from the Ministry of Gender, Children and Social Affairs. The Protection Desks have been integrated into the existing national referral pathway, ensuring coordination with Government structures and avoiding overlapping of responsibilities.

• Protection partners distributed Non-Food Items to about 800 people (159 households) identified as having specific needs; of whom 140 received a full kit.

• A total of 1,339 women and girls were reached with messages on GBV and Health promotion and 19 individuals were referred through the protection desk for specialized services in Beira.

• The GBV Sub-Cluster held a meeting to validate the GBV referral pathways for new settlements sites, which are far from central services. The meeting recommended that pictorial referral pathways be designed for communities to visualize the approach to use, in line with guidance from the Community Engagement Group.

• A mapping of GBV service providers will be conducted at the settlement level and shared with the community to facilitate easier contact with affected people.

**Gaps and Constraints:**

• The rapid return and relocation of IDPs into unprepared sites potentially heightened protection risks.

• The Ministry of Gender, Children and Social Affairs (MGCAS) has reported a 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 family tracing and reunification (FTR).

• Most organizations have secured funds only for three months. Partners are calling for support with the recovery process. Most affected populations are from poor rural areas and the extent of damage to their livelihood is severe.

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**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. In rural areas, where 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.

**Response:**
- 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. Discussion are underway regarding the necessary preconditions for partners to provide shelter support to relocation sites; and clear agreement has been reached between clusters on this, for dialogue with provincial authorities.
- 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 is nearing the numbers required to assist the 87,500 HH target, other essential NFIs - like the tool kits required for setting up temporary shelters, repair and reconstruction - are insufficient (9,206 tool kits distributed).
- As return to original community locations continues, new needs are arising. Initial assessments and figures on needs should become apparent in the next two weeks.
- If no further funding is made available to adequately respond, Shelter Cluster partners will have to reprioritize assistance to target only the most vulnerable households in the most affected areas.

**Needs:**

**Water, Sanitation and Hygiene**

- Key priority needs include the provision of WASH services 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.

**Response:**
- At least 1,557,612 people have been reached with water, sanitation and hygiene (WASH) interventions, including 722,828 reached with water assistance, 658,700 reached with certeza in cholera-affected areas; 141,553, reached through hygiene promotion and distribution of hygiene kits and about 34,531 people reached with emergency sanitation.
- Emergency water support continues in Nhamatanda and Sussundenda (Manica), while rehabilitation continues in Zambezia.
- WASH agencies are redirecting their capacities to be able to support resettlement, which covers approximately 50,000 people. Emergency WASH services are being provided to the best of the humanitarian agencies' capacity. No prior presence in the designated settlement sites makes long-term water provision planning slow. Resettlement sites with emergency water provision in place are in Dondo (Mandruze and Mutua), Buzi (Guara Guara), Nhamatanda (Metuchira and Ncura), together with others in Manica and Zambezia provinces.
- Emergency communal sanitation solutions are being provided while arriving families are involved in household sanitation programmes where latrine construction and garbage pit preparation is being encouraged through in-kind donations comprising latrines slabs.

**Gaps & Constraints:**
- WASH stocks in Beira have been redirected to Pemba to cover immediate needs; creating the need for replenishment for the Idai-response activities.
- Geographical gaps remain in southern Buzi (Bandua area and Nova Sofala area) and central Muanza. New WASH actors are arriving to cover gaps around Nhamatanda (North) and Gorongosa in Sofala. Mossurize and Sussundenga districts in Manica still need WASH partner presence.
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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