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# Emergency appeal operation update

## Mozambique: Floods

 International Federation  
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRMZ010  
GLIDE n° FL-2013-000008-MOZ  
**Operation update n°1**  
19 February, 2013

**Period covered by this Ops Update:** 1 February to 15 February, 2013

**Appeal target (current):** CHF 662,337

**Appeal coverage:** 31% [<click here for updated donor response report, here for contact details >](#)

#### Appeal history:

- This **Preliminary Emergency Appeal** was initially launched on 1 February 2013 for CHF 662,337 for 6 months to assist 15,000 beneficiaries.
- **Disaster Relief Emergency Fund (DREF):** CHF 300,000 was initially allocated from the Federation's DREF to support the national society to respond.
- Since the launch of the Preliminary Emergency Appeal, a **field assessment and coordination team (FACT)** has been deployed to Mozambique and is currently undertaking field assessment and facilitating coordination in support of the Mozambique Red Cross (CVM) in government and cluster mechanisms
- Two **Emergency Response Units (ERUs)**, a Mass Sanitation Module (MSM20) and a Community Health Module (CHM) have been deployed to Gaza Province



Emergency shelter distributed by CVM in Chiaquelane accommodation camp, Gaza Province. Source: IFRC

#### Summary:

The CVM has been working since the onset of heavy rains and subsequent floods by evacuating families, providing first aid, implementing health campaigns, distributing NFIs, and participating in coordination meetings with the Government and international agencies.

Since early January 2013, heavy rains have fallen in southern and central Mozambique and throughout the southern Africa region. These torrential rains have caused destruction of houses, schools, health centres and crops, forcing the affected populations to leave their homes in search of safer areas, mainly in Maputo City, Gaza and Inhambane Provinces. As of 12 February, the number of affected people is 238,302, with a total of 109 deaths. The total number of people displaced is 186,238, of which 175,693 are in Gaza province.

It is estimated that of the original population of 90,000 people in Chokwe City, Gaza Province, 55,000 people are presently living in the Chiaquelane accommodation camp. The exact figure is difficult to assess since many people, in spite of the red alert issued by the Government, have started moving back to their home towns. The Government has initiated allocating plots to those who live in high risk areas in Chokwe.

A FACT team comprising of a team leader (IFRC), relief (French Red Cross), logistics (British Red Cross), shelter (Australian Red Cross), emergency health (Spanish Red Cross), WatSan (Netherlands Red Cross), finance

(Finnish Red Cross), and reporting (Danish Red Cross) has been deployed to assist the National Society designing the Red Cross response.

A Shelter Cluster Team exclusively dedicated to the task of cluster coordination, independent of IFRC and CVM operations, has been deployed to work closely in support of the Mozambique Government and CVM to fulfil the mandate as shelter cluster lead agency.

Contributions to the Emergency Appeal have been received from Danish Red Cross (from Danish Government), French Red Cross and Japanese Red Cross Society. IFRC on behalf of Mozambique Red Cross would like to thank the donors for their contribution.

## The situation

Since early January 2013, heavy rains have been experienced in southern and central Mozambique. These torrential rains have subsequently caused destruction of houses, schools, health centres and crops, forcing the affected populations to leave their homes in search of safer areas, mainly in Maputo City, the Gaza and Inhambane Provinces. The rains have moved northwards with Sofala and Zambezia Provinces now also affected. The situation in the Zambezia which has experienced heavy rains during the last couple of days is being closely monitored.

The authorities maintain an institutional red alert in the entire Gaza province and reports water levels 4-6 metres above normal.

As of 12 February, 109 cases of confirmed cholera in the Cabo Delgado Province had been reported, two of these cases have died.

The Mass Sanitation Module ERU (MSM20), supported by the British (and Swedish Red Cross) and the Health Mobilization ERU (CHM) supported by the Canadian Red Cross has been deployed to the field. The IASC Cluster Coordination Team (including a cluster coordinator and an information management delegate) has arrived as well as the fleet manager delegate (IFRC) and an RDRT two member team (WatSan and logistics/relief from the PIROI).

The FACT team leader finished her mission on 14 February and has handed over responsibilities to the interim Operations Manager.

## Coordination and partnerships

The FACT team members participate in the daily GODE meeting lead by the CVM. Partner National Societies (PNS) are present at these meetings. The FACT team leader and the Regional Disaster Management Coordinator have met regularly with the Humanitarian Country Team (HCT) working group chair for coordination and information sharing.

A Post Disaster Needs Assessment by the World Bank will involve further sectoral assessment and will take place in the coming weeks.

A USD 5 million CERF has been approved. As soon as the contract is signed, the National Society will receive up to USD 58,000 from CERF for shelter (through IOM) and US Dollars 59,000 (through WHO) in reimbursement of administrative expenses occurred during the initial stage of the relief operation.

The humanitarian response of the CVM is noticed by private companies and individuals. The CVM internal solidarity fund has received pledges from Europe Car Mozambique, the mining company Mozal and others. Approximately Mts 29,000 (CHF 864) has been received from individuals.

In Maputo, the population is donating spare clothing for the affected population with volunteers from the National headquarters sorting the clothing for further distribution. However, despite the huge needs from the affected population, the Government is concerned about the spread of diseases via the second hand clothing.

From the onset of the operation CVM volunteers have been supporting all humanitarian agencies in the distribution of food items and NFIs. The volunteers – themselves victims of the floods – live with their families in the accommodation camps.

The Spanish Red Cross has activated its agreement with Spanish Agency for International Development Cooperation (AECID) to implement a mass sanitation project (WASH) in the Bilene district, Gaza province estimated at EUR 100,000 for four months. The German Red Cross is implementing a disaster risk reduction project in the Chibuto and Chokwe districts. The Danish Red Cross is supporting the development of CVM's Disaster Management master plan and a Community-Based Disaster Risk Reduction programme. The Belgium Red Cross is conducting a bilateral integrated health programme in the Manica province and supporting the branch in organizational development. In addition, they support an Orphans and Vulnerable Children (OVC) programme in Tete province.

**National Society Capacity Building:** CVM has extensive experience in emergency response as a result of responding to the devastating floods of 2000 and 2001 and being auxiliary to GoM in emergency response and preparedness. CVM has also responded regularly to disasters in the last decade, most recently in 2012 to several tropical storms, cyclones and floods.

The community-based approach has been mainstreamed in all CVM programmes and proven successful. It is now being used by the GoM and other organizations as the most effective way of building capacities and disaster risk reduction at local level. In the recent disasters, the number of casualties and injured people has been very low compared to the disasters in the previous decades and demonstrates that communities have a better understanding of disaster preparedness and contingency plans. CVM will continue to use this approach and will expand intervention areas in coordination with the Government and other agencies' programmes.

Since the onset of the disaster, more than 200 CVM community volunteers were mobilized and are participating in the emergency response operation in the affected provinces as well as being involved in assessment, relief, health and water and sanitation activities.

In Gaza province, 372 volunteers are trained in Community-Based Health and First Aid, of which 131 are active. A total of 30 volunteers are working in the Chiaquelane accommodation camp.

## Red Cross and Red Crescent action

### Overview

Based upon the initial assessment by the FACT Health & WatSan delegates, a mass sanitation (MSM-20) ERU and a Community Health Module (CHM) ERU have been deployed to Gaza Province. The mass sanitation module has been deployed to Chokwe where in particular vector control, waste management and sanitation and hygiene promotion is essential before and while families return to their homes. The CHM delegates will support the CVM Gaza Branch in epidemics control, awareness building and community mobilisation.

The FACT teams have together with CVM conducted rapid assessments. The findings are:

- The Chiaquelane accommodation camp is located 30 km from Chokwe in an existing resettlement area initiated by the Government during the 2000 floods. Since then it has become the designated contingency area in the Government disaster management plan.
- Insufficient camp management and planning capacity exists in this resulting in inadequate and insecure settlements where people tend to group by their neighbourhood of origin (community network being an identified resilient factor) and sprawling over a vast area. The accommodation conditions provided are substandard.
- There are inequitable emergency shelter solutions ranging from very limited number of tents to barely standing tarpaulin structures (no poles) and makeshift polythene coverings. A significant number of families take shelter under trucks.
- Insufficient and substandard sanitation facilities consisting of only 37 latrines, exposed rubbish tips located in close proximity to shelters and water points.
- NFIs such as mosquito nets, hygiene kits, kitchen sets, blankets, jerry cans and sleeping mats are insufficient.

- The assumed quantity of potable water (2 x 5,000 litre tank, 1 x 10,000 litre bladder and 5 water points) is insufficient and of an undetermined quality.

In **Macia**, the most significant accommodation centre is the Evangelic Church compound (approximately 1,500 families reported). Accommodation conditions provided are also substandard and scarce:

- Inequitable emergency shelter solutions ranging from a very limited number of tents to barely standing tarpaulin structures (no poles) and a significant number of vulnerable people, in particular women and children (approximately 300 people reported);
- Insufficient and substandard sanitation facilities: 7 latrines, 1 bathroom, exposed rubbish tips;
- Insufficient quantities of NFI's: mosquito nets, hygiene kits, kitchen sets, blankets, jerry cans and sleeping mats;
- Assumed insufficient quantity of potable water (5,000 litre tank) of an undetermined quality.

It is reported that people are already taking steps to return to their homes provisionally even before the red alert is lifted. This confirms recommendations from FACT Health and WatSan to combine relief efforts in accommodation centres with early recovery aiming to ensure that the return of displaced people to Chokwe district will take place without jeopardizing their health.

## Progress towards outcomes

Relief distributions (basic non-food items)	
Outcome: Immediate non food items needs of 15,000 flood-affected persons (3,000 families) are met, through NFI emergency assistance (with on-going evaluation to determine if further assistance is required).	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> <li>• 3,000 households are provided with appropriate non food items in line with sphere standards</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct emergency needs and capacity assessments in Gaza (Chókwe, Chibuto, Guijá and Xai - Xai Districts).</li> <li>• Develop beneficiary targeting strategy and registration system to deliver intended assistance.</li> <li>• Beneficiary selection and registration of most at risk individuals and families.</li> <li>• Set up the regional emergence operative centres in the affected area and supply them with office working materials.</li> <li>• Distribute Non Food Items (NFI: 1 kitchens set per family, 2 blankets per family, blankets, 5 piece of bar soap per family) to 15,000 affected people, equivalent to 3,000 families.</li> <li>• Monitor and evaluate the relief activities and provide reporting on relief distributions.</li> </ul>

### Progress:

Since the onset of the operation, the National Society has been engaged in the distribution of relief items in the entire Gaza province on behalf of other actors. Distributions include tents, water tanks, bladders, food and non-food items, bottled water and clothing.

In addition, the National Society has distributed relief items from its own emergency stock already in-country in the Chiaquelane camp. Distributions were carried out with the assistance of 30-50 volunteers. Most items were distributed during the first weeks of the emergency in a very chaotic setting with a huge number of displaced persons arriving during a short period of time. Consequently it was not possible for the volunteers to carry out a proper assessment and beneficiary targeting prior to the distributions.

Activities to ensure beneficiary selection according to criteria will be reinforced with the arrival of the RDRT relief delegate.

The IFRC FACT team conducted a rapid assessment with CVM local staff which was followed up by a more in-depth assessment focusing on CVM capacity. During the latter the needs for additional technical staff and

volunteers was revealed. Without support for these additional resources, CVM will continue to be limited in reaching a large proportion of those in need.

### Challenges:

The limited number of volunteers (30) available to the present operation remains a challenge which CVM has indicated it plans to address by recruiting and training new volunteers. A considerable number of volunteers are already committed to the German Red Cross disaster risk reduction project in the Chibuto and Chokwe districts, while the Spanish Red Cross is implementing an emergency WASH project in the Bilene project for four months initiated early February to which a number of volunteers from the available volunteer base have been assigned. In addition, the remaining available community volunteers are assisting the distribution of other agencies present in the area.

CVM technical staff at provincial and district level presently assigned to the bilateral projects as well as to the emergency operation level are overstretched and additional support is required – a concern that will be taken up with CVM.

### Emergency shelter

**Outcome: 3,000 flood-affected households have improved living conditions through provision of adequate shelter during the emergency period.**

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> <li>• 3,000 displaced families are provided with shelter items/materials.</li> </ul>	<ul style="list-style-type: none"> <li>• Assess the existing coverage with a view of ensuring availability of an adequate water supply</li> <li>• Coordinate in-country Shelter Cluster in the capacity as the in-country lead agency;</li> <li>• Conduct shelter kit training sessions;</li> <li>• Conduct damage and needs assessments</li> <li>• Procure and distribute one shelter tool kit per five families and two tarpaulins to affected households whose houses have been completely destroyed</li> <li>• Procure and distribute fixings (including rope and nails) to each affected household</li> <li>• Assess the needs in relation to construction materials</li> </ul>

### Progress:

Joint field assessments were carried out in Gaza Province, with Shelter, Relief and Communication FACT delegates. Shelter has been identified as the biggest challenge in the camps, mainly due to inadequate resources. The plan of action will take into account these findings. The shelter component will be two pronged, aiming to assist displaced people in accommodation camps, with shelter tool kits to construct temporary shelters, which then can be reused upon their return to their original communities.

Shelter cluster coordination will be boosted through the deployment of a Shelter Cluster Coordination team. CVM is cluster lead in partnership with IOM but has not been able to take on this role effectively. The Shelter Coordination Team will be exclusively dedicated to the task of cluster coordination, independent of IFRC and CVM operations, and will work closely in support of the Mozambique government and CVM as cluster lead agency, providing technical advice, coordination and information management services to ensure the implementation of appropriate shelter solutions and a seamless transition from emergency shelter to shelter recovery.

### Emergency health and care

**Outcome: To reduce the risk of communicable diseases (including malaria) for 15,000 flood-affected people through community health activities focusing on the community-based health and First Aid (CBHFA) approach.**

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> <li>• The health status of the affected population is improved through early detection and prevention</li> </ul>	<ul style="list-style-type: none"> <li>• Undertake further detailed assessments to determine the extent of the needs</li> <li>• Deploy and monitor community-based volunteers on CBHFA and hygiene promotion;</li> </ul>

measures.	<ul style="list-style-type: none"> <li>• On-going monitoring of malaria and other public health risks due to flooding;</li> <li>• Set up eight First Aid Posts;</li> <li>• Distribute 6,000 mosquito nets to 3,000 families (2 nets per family);</li> <li>• Purchase 20 first aid bags</li> <li>• 1,000 IEC material for printing</li> <li>• 20 loud speaker (1 per supervisor)</li> <li>• Refresher training in CBHFA (emergency module) for 200 volunteers</li> <li>• Refresher training in PHAST for 200 volunteers</li> <li>• Carry out health education campaigns within the affected areas focusing on the prevention of malaria, cholera and other water-borne diseases;</li> <li>• Support and provide printed and other materials to be used in the health promotion campaign (such as posters, flyers, manuals, educational materials).</li> </ul>
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### Progress:

The emergency health component was designed to reduce health risks among affected communities through the provision of preventive measure at community level in the province of Gaza.

The national society has set up two health posts in the Chiaquelane and the Chibuto accommodation centres. From the onset of the disaster, trained CVM community volunteers have conducted basic health messages twice a day among the population in Chiaquelane.

A CVM counterpart has been identified to be focal point for the MSM team. He is from the Chokwe branch, responsible for the volunteers and is himself a resident of Chiaquelane camp

Further assessments have been undertaken in the Chiaquelane accommodation camp and the city of Chokwe by the newly arrived ERU Community Health Module (CHM) team, the FACT health delegate and CVM counterpart with a view to prepare the intervention. In addition, the team has met with other relevant actors in the field such as UNICEF, WHO and the Ministry of Health officials. A harmonisation of the activities between CHM and the MSM ERUs is under preparation.

### Water, sanitation, and hygiene promotion

**Outcome: The risk of water-borne and water-related diseases (including cholera) is reduced through the provision of safe water, adequate sanitation facilities and hygiene promotion to 15,000 people (3,000 families) displaced or relocated to accommodation centres and particularly in provinces affected by cholera**

Outputs (expected results)	Activities planned
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<ul style="list-style-type: none"> <li>• Safe water is provided to 3,000 families while damaged systems are restored.</li> </ul>	<ul style="list-style-type: none"> <li>• Assess the existing coverage with a view of ensuring availability of an adequate water supply;</li> <li>• Assess the existing sanitation coverage with a view of ensuring availability of latrines and sanitation facilities</li> <li>• Conduct training/information programmes for Red Cross volunteers and beneficiaries, in particular regional hygiene promotion and the safe use of Water Treatment Products (chlorination tablets);</li> <li>• Treat 60,000 litres per day of water and distribute to affected communities in Gaza Province for 90 days (three months);</li> <li>• Provide two jerry cans to 3,000 families to flood affected families;</li> <li>• Provide water purification tablets for 3 months (20 litres of drinking water/family/day), i.e. 180,000 tablets will be needed for 3,600,000 litres of water.</li> </ul>
<ul style="list-style-type: none"> <li>• The health status of the population is improved through behaviour change and hygiene promotion activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct hygiene promotion campaigns within the affected population, focusing on behaviour change;</li> <li>• Disinfect the contaminated water points;</li> <li>• Provide information, education and communication (IEC) materials on hygiene promotion (printed posters, flyers, manuals, educational materials).</li> </ul>

### Progress:

Achievements during the reporting period include hygiene and health promotion campaigns conducted within the affected population in the Chiaquelane accommodation camp. From the early days of the disaster trained community based volunteers have conducted basic hygiene promotion messages among the population in the camp.

With a view to follow up on the initial assessment done by CVM local staff members and the FACT technical delegate, the newly arrived ERU Mass Sanitation Module (MSM20) team members have conducted a field assessment together with the ERU Community Health Module (CHM) team members and the FACT WatSan delegate in order to assess present water supply coverage and the availability of latrines and sanitation facilities mainly in the Chiaquelane accommodation camp.

The training programme for volunteers is in the design phase while the communication materials such as pre-designed posters on hygiene promotion arrived with the MSM20 team and will be put to use very soon. An RDRT WatSan delegate will reinforce the activities.

### Logistics

#### Progress:

The achievements during the reporting period include the cleaning and creation of space in the main warehouse in Maputo. In Macia, Gaza province, space has been created for the MSM 20 module kits which have been transported directly from the airport to the warehouse. The warehouse is strategically located between the MSM20 camp and the Chiaquelane accommodation camp. WHO is supporting the operation by providing free transport and also storage costs for items stored in their rub-halls in the Chiaquelane accommodation camp.

At the onset of the disaster, CVM had prepositioned NFIs both in the central warehouse in Maputo and at a provincial level. Initial figures are available regarding the items distributed to date and levels of stock remaining, however, the Warehousing/Transport delegate will continue working with CVM in strengthening systems for managing stock and recording stock movements. A half-day refresher course has been prepared and field training will held in the coming week.

An appropriate LLIN supplier with standard IFRC specs in-country stock has been identified. Most other IFRC standard emergency items will be sourced from region and zone prepositioned stock the moment funding is confirmed. An appropriate supplier with standard IFRC specs in-country stock has been identified.

The mobilisation table has been published on DMIS.

## Communications – Advocacy and Public Information

The regional communications officer and the CVM communications officer visited the flood affected areas of Gaza province, including the accommodation camps. Interviews with CVM staff and volunteers were carried out to create awareness and publicity on the floods and highlight the work of CVM in the emergency response. Interviews with beneficiaries convey the impact of the floods at a human level and the personal impact on lives and communities.

To date two stories, a blog and photo gallery has been published online. A further blog for the ECHO website will be published next week.

Preparedness pays as hundreds of thousands flee from floods in Mozambique: <http://www.ifrc.org/en/news-and-media/news-stories/africa/mozambique/preparedness-pays-as-hundreds-of-thousands-flee-from-floods-in-mozambique-60664/>

Volunteers provide critical aid to flood survivors in Mozambique <http://www.ifrc.org/en/news-and-media/news-stories/africa/mozambique/volunteers-provide-critical-aid-to-flood-survivors-in-mozambique-60704/>

ECHO photo gallery

<http://www.flickr.com/photos/69583224@N05/sets/72157632752216664/with/8468105072/>

A communications strategy has been developed to run alongside and support the operation. Included in this is further field visits by the regional communications officer and the CVM communications officer will update the operation and capture stories from the affected communities.

The regional communications officer and zone communications manager will continue to work with and support CVM to build its communications capacities and develop appropriate communications tools and products to support effective operations, including the dissemination of the principles and values of the Movement during their response operation.

The National Society has been allocated up to three hours daily on national television (TVM). The Secretary General has appeared with messages and reports on CVM activities together with MoH and government (INGC) officials.



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## Contact information

### For further information specifically related to this operation please contact:

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## How we work

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