



NFI's distribution, during Eloise Tropical Storm, in Buzi district, Sofala

<p>Emergency appeal №: MDRMZ016 First launched on: 25 January 2021</p>	<p>Glide №: TC-2021-000008-MOZ</p>
<p>Final report issued on: 30/04/2023</p>	<p>Timeframe covered by final report: From: 23 January 2021 to 31 January 2023</p>
<p>Number of people targeted: 441,686</p>	<p>Number of people assisted: 226,500</p>
<p>Funding requirements (CHF): CHF 5.5 million Secretariat Ask CHF 7.5 million Federation-wide CHF 1,872,284 received, 24% funded.</p>	<p>DREF amount initially allocated: 2021: CHF 359,689 (this was later reimbursed) 2022: CHF 500,000 (including CHF 140,041 for imminent disaster).</p>

A. SITUATION ANALYSIS

Description of the crisis

Tropical Cyclone Eloise, a category 2 storm, made landfall in the first hours of 23 January 2021, 20km south of the Beira City in Sofala Province, bringing winds of 140km/h and wind gusts of over 160km/h as well as extreme and widespread rainfall in Beira, 250mm in 24h, and many districts in Sofala, southern Manica, northern Inhambane, Zambezia and eastern Gaza. The areas were already experiencing significant flooding as a result of heavy rainfall from 15th January 2021. The discharge of water from Chicamba dam and the Mavuzi reservoir had also affected residents in the district of Búzi. The same areas were also affected by tropical storm Chalane on 30th December 2020, resulting in thousands of displaced people. These areas were still recovering from cyclone Idai and 2020 floods.

In February 2021, the National Institute for Disaster Management (INGD) closed the accommodation centres and sent people back to their communities or to resettlement areas. Part of the reason this was done was to minimize the high risk of COVID-19 transmission among displaced people in close living spaces. IFRC and CVM continued to work with community leaders in the recovery process. This was done by connecting them to available programs, such as through psychosocial support, within the organization and with relevant government partners.

Summary of response

The Mozambique Red Cross (CVM) was ready and positioned with two emergency teams to support populations prior to the disaster, with volunteers sensitizing and supporting the preparedness of populations and evacuating people from flood-prone areas. CVM was one of the first actors to respond to the emergency on the ground. Ahead of the landfall, CVM staff and volunteers disseminated early warning messages to communities in the path of the cyclone in order to minimise the impact. As a result, many families were moved to safer areas, where they received support from Red Cross teams.

CVM started to help evacuate people into accommodation centres, even before the disaster, supplying mosquito nets, chlorine, and facilitating cholera, malaria, conducting COVID-19 prevention activities, hygiene promotion and providing psychosocial support. Immediately after Cyclone Eloise made landfall, CVM volunteers were engaged in search and rescue activities in affected areas. As the volunteers were already trained and equipped it was possible to provide an immediate response.

CVM performed the following activities for the emergency response²:

- Deployment of two teams from headquarters level to Inhambane, Manica and Sofala Provinces in preparation for landfall. The team in Sofala was deployed for a long-term mission, to be the CVM counterpart for all the projects implemented with the IFRC support.
- Dissemination of **Early Warning messages** and support in evacuation the days before landfall through sound systems on cars and volunteers in Búzi and Beira.
- **Search and rescue** of 150 families (882 persons, 78 men, 458 women, 346 children) through volunteers by boat in Búzi. People were rescued from rooftops and treetops. First aid was provided to the families.
- CVM supported **24,301 persons** to cross the river in Nhamatanda district by deploying the emergency **search and rescue** boats, in cooperation with UNAPROC, the national unit for civil protection, and INGC, the national institute for disaster management.
- CVM supported the government by mobilising and allocating **96 volunteers** in the transit centres and put on **standby** a further **150 volunteers** in the Sofala Province.
- Distribution of **500 mosquito nets** in accommodation centres (Nhamatanda District) and 1,128 bottles of certeza/chlorine distributed to **4,224 community members** accompanied by presentation of household

water treatment (Districts of Búzi, Dondo, Beira, Nhamatanda). Approximately 61,467 litres of water were treated.

- CVM volunteers carried out sensitization on acute watery diarrhoea, malaria and COVID-19 in 8 accommodation centres and 7 neighbourhoods through 96 volunteers. 135 presentations were held, reaching 19,249 people. An additional 305 **Focus Group Discussions** were held in the accommodation centers which reached **19,225 people**.
- **Psychosocial Support (PSS)** to staff, volunteers and community members. 1,040 sessions were held and **5,005 people** were reached.
- A total of **9 handwashing stations** were set up in accommodation centers reaching **17,414 people**.
- Cleaning sessions were done in Nhamatanda and Caia accommodation centers to disinfect the public areas as part of COVID-19 prevention. There were 19 cleaning sessions done reaching **4,987 people**.
- CVM participated in different coordination meetings such as at CENOE (Centro Nacional Operativo de Emergência = Emergency Ops National Center), led by INGD and HCT at all levels.
- CVM actively participated in different Sector Clusters and led the Shelter Cluster with the IFRC and Movement partner support to ensure better coordination and harmony of response activities.
- In Zambézia and Manica, 180 CVM volunteers were involved in the rapid assessments integrated into the multisector led by INGD. Three teams were sent for multi-sectoral assessments in the districts of Nhamatanda, Búzi and Machanga in the province of Sofala.
- **28 volunteers were trained in Emergency Shelter construction** to instructor directly support families that receive shelter kits to build safe and adequate shelter. They were also trained on data collection of distribution participants using KOBO for future assessment and registration activities.
- 100 **permanent shelters** built for vulnerable households in Guara Guara, Búzi.
- 35 local artisans were trained through shelter programming, with 17 CVM volunteers 7.
- 45 CVM volunteers were trained in **Build Back Safer** methods to help families improve the resilience of their houses. Whenever kits were distributed, CVM volunteers gave trainings on how to assemble them and instruction in Build Back Safer techniques. The most vulnerable persons received assistance to assemble their kits and improve their shelters.
- CVM actively participated in different Sector Clusters, whilst IFRC led the Shelter Cluster nationally.

CVM helped communities plan to be more resilient in the future, through coordination with community leaders, local government, and the disaster management sector. There are plans to establish disaster management committees in vulnerable communities to allow them to make specific contingency plans for common disasters such as floods and cyclones.

Overview of Red Cross Red Crescent Movement in country

On 24 January 2021, the IFRC released a CHF 359,689 disaster relief emergency fund (DREF) to provide immediate assistance to 5,000 people. The DREF funds increased the assessment and operational bandwidth of the National Society. Informed by the increasing humanitarian needs on the ground from the rapid assessments, an Emergency Appeal amounting to CHF 5.1 million was launched to support 100,000 in the province of Sofala with the possibility of including more provinces pending detailed assessment findings.

In coordination with CVM, IFRC activated its regional surge team and deployed Logistics, Operations and Communications staff to the area.

For the response to Cyclone Eloise, there was a Federation-wide approach for coordination. IFRC coordinated the Federation member's bilateral contributions and surge deployments. CVM led daily briefing meetings with the participation of the Movement partners and created a Movement operation cooperation group to facilitate information sharing and effective use of resources for the response. The Canadian Red Cross deployed a Shelter Cluster Coordinator to support CVM/IFRC in the Shelter Cluster leadership role for three months. This support had initially been planned to enhance coordination of the response to Tropical Storm Chalane, which hit Mozambique in late December 2020, and preparedness activities throughout the cyclone season. CVM/IFRC convened Shelter Cluster partners to map activities, agree on a common shelter response strategy and

ensure the quality and coverage of shelter needs. Norwegian Red Cross deployed a WASH ERU to support assessment and provision of safe water supply as part of the recovery.

IFRC membership contributed to the response as follows:

- The IFRC released a CHF 359,689 disaster relief emergency fund (DREF) to provide immediate assistance to 5,000 people.
- The IFRC released 1,188 kits that included a combination of shelter, WASH and health items.
- Spanish Red Cross: activated the crisis modifier from ECHO for cash/voucher assistance to 525 affected households in Machanga for a value of 2,500MZN/household (31CHF).
- Belgium-Flanders Red Cross supported the CVM with the dispatchment of humanitarian goods to Beira.
- German Red Cross (GRC) supported with Early Action Protocol (EAP) for which were triggered for 500 families. According to existing needs, the GRC activated emergency funds from its financial resources for a bilateral response. The interventions were aligned with the activities in the Appeal.
- PIROI - French Red Cross Centre for Disaster Management dispatched 520 shelter toolkits, 1,040 tarps, 2,000 buckets, 1,000 jerrycans, 4,000 bars of soap, and 3,000 mosquito nets from its contingency stock in La Reunion.

Overview of non-RCRC actors in country

The National Institute for Management and Disaster Risk Reduction (INGD) closely monitored the weather system’s trajectory and worked with various humanitarian partners to prepare and deliver the necessary response. The Emergency Operational Center (CENOE) was activated at the national and provincial levels. Response actions involved distribution of relief assistance such as food, shelter kits, NFIs, hygiene kits, and dignity kits. Accommodation centres and temporary safe spaces were also set up for displaced communities.

CVM is an integral part of Mozambique’s Disaster Management structure as an auxiliary to the government, particularly on disaster response. CVM has an official seat in the CENOE and has established good working relationships at different levels with INGD, and the National Civil Protection Unit (UNAPROC). CVM and IFRC have actively participated at government-led coordination meetings on provincial and district levels. The Humanitarian Country Team (HCT), coordinated by the UN, supported at the operational level by an Inter-Cluster Coordination Group (ICCG) have been active in Mozambique since Cyclone Idai. CVM /IFRC led the Shelter Cluster for disasters induced by natural hazards, UNICEF the WASH Cluster, WHO, the Health Cluster, WFP, the Food Security Cluster, and Save the Children, the Protection Cluster. Note that the Shelter Cluster was active and operational since the response to Cyclone Idai.

Operational risk assessment

Identified constraint	Analysis
Access	In the initial phase of the emergency, roads and rail network became impassable for vehicles carrying both food and non-food items, sending referrals to district hospital. However, the teams continued to explore alternative routes until main roads became usable.
Procurement and supply chain management	IFRC continued supporting the National Society to enhance its logistical and procurement capacities.
Scale of operation	The geographical areas impacted by the floods were significant as six of the eleven provinces in Mozambique were affected. Needs of communities were diverse cutting across WASH, shelter, food, health and security


Human resources	Staff capacity was overstretched. Surge deployments complemented the HR gap at different intervals of the operation.
Information management	Missing data (cluster data, segregation). The Regional Office IM team had been instrumental in supporting the IM component of the operation.
Unfavorable weather conditions	Unfavourable weather conditions coupled with bad state of roads made it difficult to deliver consignment to the affected population, although with time a solution was found to deliver to the needy communities.

B. OPERATIONAL STRATEGY

This Final Report reflects the work carried out 23 January 2021 to 31 January 2023 under the Floods and Cyclones 2021-2022 Emergency Appeal. Initially launched to address the needs caused by Tropical Cyclone Eloise, this Emergency Appeal was later revised to integrate the response to Tropical Storm Ana and Tropical Cyclone Gombe, that affected the provinces of Nampula, Zambézia and Sofala early 2022. This revised Emergency Appeal was published on 31 January 2022 and can be found [here](#)

The Secretariat funding ask of CHF 5.5m was only 24% covered at CHF1.872m covered (including the DREF outstanding loan). As such many targets could not be reached and prioritisation had to take place based on the needs on the ground and coordination with affected communities, local and national government and other relevant stakeholders.

C. DETAILED OPERATIONAL REPORT

 Shelter, Housing and Settlements		People Reached	Female > 18: 6,450	Female < 18: 6,908
			Male > 18: 4,866	Male < 18: 5,951
Objective:	<i>Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions</i>			
Key indicators:	Indicator		Actual	Target
	# of households provided with emergency shelter and settlement assistance		4,920	2,500
	# of households who have durable shelter solutions that meet national and/or Cluster standards for recovery for the specific operational context		100	100
	% of surveyed people who report that the shelter solution they implemented has helped in their long-term recovery		100%	85%
Households provided with emergency shelter and settlement assistance				
<ul style="list-style-type: none"> Support under shelter and house settlement have achieved more than 50% of the expected target, due to the in-kind contribution that was received from the PIROI as well as well as NFIs prepositioned from under the Early Action Protocols (EAPs). 				

- 28 volunteers were trained in **Emergency Shelter construction** so they can instruct directly support families that receive shelter kits to build safe and adequate shelter. They were also trained in data collection of distribution participants using KOBO for future assessment and registration activities.
- **PIROI - French Red Cross Centre for Disaster Management** dispatched 520 shelter toolkits, 1,040 tarps, 2,000 buckets, 1,000 jerrycans, 4,000 bars of soap, and 3,000 mosquito nets from its contingency stock in La Reunion.
- CVM, with the support of the IFRC **distributed 1,188 kits** in Nhamatanda District, locality of Nhansato, to respond to the emergency. An integrated, multi-sectoral approach was adopted to support the communities. All families received training to set up emergency shelters with on-site monitoring.

Kits distributed in Nhamatanda		Amount per HH
Shelter	IFRC standard Shelter toolkit	1
	Tarps	2
	8cm stakes	10
	Bamboo poles	17
	Kitchen sets	1
	Mat for sleeping (esteira)	1
	Blanket	1
	Rope (meters)	60
WASH	Bars of Soap	4
	20L buckets	1
	Jerrycan 10L	1
	Plastic slabs (for latrine)	1
	Latrine kits	1
Health	Cloth face masks	5
	Bottles of Chlorine solution (Certeza)	3
	Mosquito nets	3

Table 1: Items distributed per household in Nhamatanda

Note: 1,000 masks were also distributed in Nhansato with all 465 community members receiving a mask. The others were sent to the John Segredo Centre. The remaining 4 kits (116 out of 120 distributed in Nhamatanda) were given to the local government to distribute.

- With the support of the crisis modifier, CVM distributed 1,000 shelter kits each in Zambezia and in Manica Provinces.
- Following notification by INGD that an accommodation centre in Beira would be deactivated, CVM/IFRC supported the distribution of emergency shelter and NFI items to 80 families being relocated to a resettlement site in Mutua District. This distribution was also coordinated with IOM who provided some of the items for distribution. All Cyclone Eloise accommodation centres were closed by the end of April 2021, with participants moved to their home communities or resettlement areas.
- CVM distributed locally procured tarps in December 2020 to 1,200 families living across the existing resettlement sites of Guara Guara in preparation for the rainy season and they were used to reinforce Cyclone Idai tents and emergency shelters, minimizing the weather's impact for these families.
- In March 2022 CVM distributed a total of 500 shelter kits in Ilha de Moçambique, Marromone, and Lumbo Administrative Post, Nampula.

Households who have durable shelter solutions

Participant Household Selection

- A joint committee of CVM staff, CVM volunteers, IFRC Information Management (IM), community leaders, and government stakeholders met to verify the beneficiaries and apply the vulnerability criteria to select the **100 most vulnerable persons** to participate in the permanent housing distribution, that number include **70**

woman's and 30 Men. A total of 480 families were registered in Guara Guara as needing shelter assistance. These were households that had not received shelter assistance beyond tarps that had relocated to the resettlement areas following Cyclone Idai in 2019.

- The selected persons were from two neighborhoods, **Buzi's Guara Guara Maxiquil 2 and 3.** Of the 210 families registered in Maxiquil 2, a total of 47 were approved and in Maxiquil 3, a total of 175 households were registered and 53 were selected.

Block production

- The project used a new form of blockmaking and was the first to produce and use these blocks in Mozambique. The blocks are a composite of 70% soil and 30% cement, which is a more sustainable solution than blocks entirely of cement, that is also locally sourced and durable. The International Labour Organization (ILO) introduced this technology for CVM to use throughout the project. ILO provided the technical training and equipment to produce these blocks, mainly a block press as it is a dry-production method. Additionally, they worked with a total of 5 local associations to teach them how to use this technology. ILO supported the associations throughout their production, including with transport.
- There were 2 associations in Búzi, 1 in Caia, 1 in Dondo and 1 in Nhamatanda. On average, two associations would receive 50 sacks of cement to produce 3,500 blocks, enough for two houses. Each association produced an average of 400 blocks a day. CVM supervised this process under their direct partnership with ILO and oversaw all field activities in Búzi.
- The blocks must cure for 28 days before use, with 7 days in a humid environment, generally under a tarp with regular watering, and then 21 days of dry curing. The blocks had to be produced in line with government standards. GREPOC, the Office for Post-cyclone Reconstruction, provided technical support throughout the project. GREPOC works with many organizations for standardizing construction practices. They ensured that the bricks and construction methods were in line with government standards for resilient housing.
- Blocks were produced at a cost of 11 meticaís per brick and sold for 18 meticaís, creating a source of income for the associations producing them.
- The entire project, 100 houses, required the production of 170,000 blocks which is 1,700 per house. 31% of these blocks were produced by the associations mentioned above. The remaining 69% came from an external supplier, as the demand was higher than what the associations could produce.



Figure 1 Block curing

Training of Master Builders

- To recruit master builders for the project, first announcements were made on the local radio in Búzi District. Then there were community meetings in Búzi and Guara Guara with the interested builders where they were evaluated.
- The assessment of builders began with theoretical training, then practical training on the different phases of construction for these specific houses.
- The builders who were successful in the training were hired for the work. In the first phase, 18 master builders were selected. They came from Buzi, Guara Guara, and the region (example, Beira). Hiring within the communities ensured that the master builders were familiar with the local context, provided a means of income for families that were not directly benefiting from the program, and allows localized knowledge for future projects including if the builders started small businesses using the same designs.
- An additional 17 CVM volunteers were selected and trained to serve as builders for a total of 35 master builders. Finding qualified artisans in the selected communities proved a challenge, which is why the recruitment expanded to the regional level. CVM and IFRC held community discussions to explain the situation and to handle any disputes.



Figure 8: Practical training with master builders

Training

- For the two model houses, four personnel from CVM/IFRC led training for 35 master builders, 10 CVM volunteers, and the two vulnerable families that were going to receive the house. The training covered a summary of the project and construction process. This practical training led to the construction of the first two houses. Each master builder had two to three assistants to help in the construction.
- After the training, for the construction of the other 98 houses, the teams were split evenly between the two locations. Each location had 17 master builders and 74 helpers that were divided into teams to build the different houses.

Material Distribution

- As materials were received from the various suppliers, they went to a local warehouse in Guara Guara for storage. Materials were then given to the participant households in phases for them to store and use. These phases followed the phases were also used for determining the construction level and artisan payments for the houses. The first phase was the foundation, second the walls up to the roof, and the final phase is the roofing.
- As the teams of builders worked at different paces on the various houses, materials were delivered to each family upon completion of the previous phase and tracked by the field supervisors.
- Giving the families the materials simplified transport and reduced costs, each family had to sign a contract before construction which included that the selling of materials would disqualify them for project participation.
- Additionally, each community was given a first aid kit as part of the integrated disaster management of CVM to equip them to respond to emergencies.

Roles of CVM and IFRC

- CVM proposed a more permanent solution to assist vulnerable families in cooperation with GREPOC and local government. GREPOC then suggested the soil block production in partnership with ILO. CVM and IFRC designed the project, budget and house design according to these recommendations.

- Throughout the project, CVM and IFRC worked in close cooperation. They divided tasks with IFRC handling procurement and administration and CVM leading the implementation in the field. The district branch of CVM in Búzi, both at the leadership level and their volunteers, were involved in all phases of the project and work. They were the focal point for all activities, meeting with participating households and assisting them throughout the process.
- The CVM volunteers helped to supervise the project, work with the construction teams, and to unload the materials delivered in the field. There were a total of 7 volunteers present each day, divided between the two locations to help supervise the construction groups. The engineers of CVM and IFRC handled any technical issues raised by the supervision team. This model of coordination worked very well for all parties and is one of the successes of the program.

Warehouses

- Two warehouses were set up for the project, with one in Maxiquiri 2 and one in Maxiquiri 3. As mentioned above, materials were distributed to the construction sites in three phases and the households helped to store and protect those materials.

Designs

- The designs for the construction were developed by GREPOC, with input from CVM and IFRC. After the artisan training and construction of the two model houses, GREPOC and ILO also provided feedback for areas to improve that were applied later to increase resiliency (roofing connections, security of houses).
- The 98 houses were slightly shorter than the model houses, to help decrease costs and construction time due to budget constraints. This did not have major impacts for the overall strength of the structure or space available for the families.

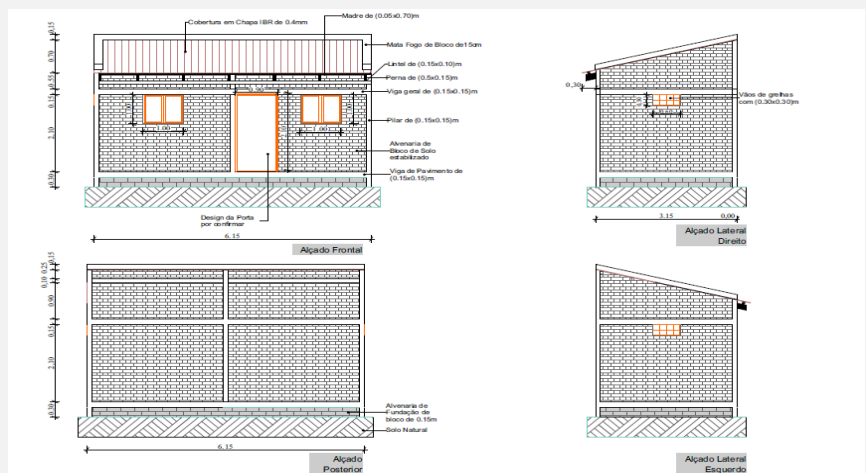


Figure 9: Permanent, resilient shelter designs.

Construction


- Each house was planned to take a minimum of 21 days to construct. Each construction team would work on one to three houses in a location at a time. When they had completed all three phases, they would begin others. The phased payment served as motivation. The teams that built faster had more opportunity to build additional houses and have additional income. The artisan payment was a cash for work initiative that was found highly successful. The artisans received training and practical skills and were paid for work that directly benefited the most vulnerable households in their communities.
- The families that benefitted from resilient houses expressed appreciation as they no longer have to go to evacuation sites, and they are also able to host other families during floods season. The trained local artisans will continue to be an asset in those communities replicating the application of building back safer.




Figure 10: Completed resilient house.

Challenges

- One of the challenges for the construction was the final house phase, with roofing, doors and windows. It was difficult to find suppliers with the required quality of work within the anticipated timeframe, which in the end lengthened the construction period.

 Livelihoods		People Reached	
		Female > 18: 688	Female < 18: 737
		Male > 18: 519	Male < 18: 680
Objective:	<i>Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods</i>		
Key indicators:	Indicator	Actual	Target
	# of households supported to meet immediate needs through cash transfers	150	4,000
	# of students trained through vocational training programs	0	80
<ul style="list-style-type: none"> • Note that this Emergency Appeal's planned activities mentioned in the 6-month Operational Update, but it did not occur due to a lack of funding. Instead Mobile training did happen under a different funding source, the Operational Plan for 2021, to reach 150 students in Nhangau, but it was not possible to arrange for the 5 from Búzi. Similarly, the Farmer Field Schools previously established continued to operate independently, with 31 in Sofala Province and 27 in Tete Province. 			
Challenges			
<ul style="list-style-type: none"> • As mentioned in the 6-month Operational Update did not occur due to lack of funding. 			

 Multi-purpose Cash		People Reached	
		Female > 18: 688	Female < 18: 737
		Male > 18: 519	Male < 18: 680
Objective:	<i>Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods</i>		
Key indicators:	Indicator	Actual	Target
	# of households provided with multipurpose cash grants, including for livelihoods recovery	525	4,000
	% of target households that have enough sources of food and income to meet their survival threshold (including cash grants)	13%	85%
<ul style="list-style-type: none"> • By activating the crisis modifier from ECHO bilateral support by the Spanish Red Cross enabled CVM to reach 525 families with food vouchers in Machanga for a value of 2,500MZN/household (31CHF). 			

Challenges

- Due to lack of funding, it was not possible to benefit more beneficiaries.

 Health & Care <i>(Mental Health and psychosocial support / Community Health / Medical Services)</i>	People Reached	Female > 18: 47,248	Female < 18: 50,600
		Male > 18: 35,644	Male < 18: 46,708

Objective: *The immediate risks to the health of the affected population are reduced and the psychosocial impacts of the emergency are lessened*

Indicator	Actual	Target
# of people reached with Psychosocial Support services	5,005	34,000
# of people reached with community-based disease prevention and health promotion programming	180,200	226,500
% of target population who can recall 3 or more protective measures for target diseases	75% est	>70%
# of volunteers and health staff trained on EPIc (Epidemic Preparedness and response in Communities), BTIT, Nutrition, MHPSS	169	825
# of household reached through Branch Transmission Intervention Teams (BTIT), in which volunteers conduct actions to break transmission of waterborne diseases at household level	40,180	20,000
# of persons reached on nutrition through cooking demonstration and MUAC screening	6,278	5,500
# of persons supported on diseases prevention and hygiene promotion at Community Health Mobilization Posts	19,249	12,000
# of persons reached through Malaria prevention and response through distribution of mosquito nets and RCCE activities	48,989	18,000
# of Household reached with mosquito nets	4,848	1,500
# of persons reached through search and rescue	625	None

Support under health to the affected population, has **reached around 80%** of the targeted beneficiaries.

- 1,040 sessions of Psychosocial Support (PSS) to staff, volunteers and community members were held reaching **5,005 people** which is **about 15%** of the forecasted target. Volunteers focused on the people who were clearly

showing depression signs for assistance. This was due to the budget limitations and led to this criterion being adopted to select the beneficiaries.

- A total of 169 staff and volunteers were trained. 12 staff were trained in Branch Transmission Intervention (BTIT) approach for cholera response. Posteriorly 157 volunteers were trained in BTIT for Cholera Response, in Sofala Province.
- In Manica province where there were clear signs of malnutrition, aggravated due to the cyclone effects, MUAC screening and cooking demonstrations were done to improve food preparation and dietary nutrition. 150 volunteers were involved in the activities in Gondola, Macate and Sussundenga districts reaching 2,512 people with cooking demonstrations and 3,766 in MUAC screening.
- CVM volunteers carried out **sensitization** on acute **watery diarrhoea, malaria, and COVID-19** in 8 accommodation centres and 7 neighbourhoods through 96 volunteers. 135 presentations were held, reaching 19,249 people. An additional 305 Focus Group Discussions were held in the accommodation centres which reached 19,225 people.
- In total 8,852 **mosquito nets** have been distributed, reaching out around **4,848 households**. Families were disintegrated due to the cyclone which resulted in more families being allocated nets than had been foreseen.
- Distribution of 10,000 face masks and 3,000 mosquito nets, in Sofala province.
 - Distributed 8,000 face masks in accommodation centres to 1,120 families in Búzi, Sofala.
 - Distributed 1,000 face masks in resettlement sites and accommodation centres in Nhamatanda, Sofala
 - Distributed 2,500 mosquito nets to 2,495 families an accommodation centres in Búzi, Sofala
 - 500 Mosquito nets and 1,000 face masks were distributed to 116 households in Nhamatanda, Sofala and to the John Segredo center.
- Distribution in Búzi District, localities of Bandua and Inharongue:
 - 4,990 mosquito nets: 746 in Chiquezana, 1,260 in Macurungo, 948 in Massane, 234 in Comp Búzi, 670 in Mandir 1 and 2, 434 in Martinote, 304 in Muchanessa, 394 in Inhabirira.
 - 3,000 masks: 1,493 in Chiquezana, 1,260 in Macurungo, and 247 in Comp Búzi.
- During TS Ana (2022), 853 households were reached with mosquito nets as part of the EAP distribution, and 1,706 people were reached with health messaging about waterborne disease prevention and health promotion.
- COVID-19 activities were extended to resettlement sites. The sites have agglomerations of people, and many IDPs shared tents with a large number of people (6 to 12). In Búzi, Beira, and Nhamatanda the volunteers trained on Community-based Health and First Aid and COVID-19 led presentations on COVID-19 preventive measures. The volunteers informed people to maintain a two meters distance in the centres.
- The accommodation centers were cleaned and sanitized by CVM volunteers in Nhamatanda and Caia to prevent the spread of disease. There were 5 cleaning sessions in Nhamatanda that benefitted 1,783 people and 14 sessions in Caia for 3,204 people.
- Search and rescue and boat transport for 625 people.

	Water, Sanitation and Hygiene	People Reached	Female > 18: 47,248	Female < 18: 50,600
			Male > 18: 35,644	Male < 18: 46,708
Objective:		<i>The risks of water related diseases in the communities targeted in recovery phase are reduced in a sustainable manner</i>		
Indicator		Actual	Target	

Key indicators:	# of people reached by hygiene promotion activities using the Branch Transmission Intervention Approach	180,200	226,500 ppl
	# of waterpoints constructed	0	10
	# of waterpoints rehabilitated	5	30
	# of latrines constructed	126	200
	# of Household hygiene kits distributed	641	2,000
	# of communities equipped and supported in regular clean-ups of neighbourhoods to reduce vectors	0	40
	# of volunteers trained in PHAST	28	120
	# of Household reached with WASH NFIs	969	1,500
	# of handwash stations set up	9	N/A
	# of households reached with NFI's kits	1,823	N/A


- 78% of the planned target have been achieved on activities for hygiene promotion and BITT approach.
- 5 damaged boreholes were rehabilitated and restored for use in Tete Province, in Chimambe, Catipo, Mameme II, Chitsita, and Nhamitsate districts. All rehabilitated wells were delivered to the community in March 2022. This activity was underachieved due to lack of funds under the appeal. The same reason is applicable for the construction of new water points, in which none was constructed.
- 6 school latrines were built in March 2022 in target communities in Tete province, in Mitsanha, Katsanha, Nhankoma, Chimambe, Chidimba, Catipo, Benga, Chitondo, Cachoeira and Mpadue districts, and CVM trained volunteers supervised the construction of the 116 Rapid Latrines, providing technical assistance and hygiene promotion awareness to households. Additionally, 4 latrines were built by volunteers in Tete at the Matundo accommodation center, reaching out 63% of the target.
- A total of 9 handwashing stations were set up in accommodation centers reaching 17,414 people.
- In total, **around 1,823 households** were reached with **NFI kits**.
- 1,128 bottles of CERTEZA/chlorine were distributed to 4,224 community members accompanied by presentation of household water treatment (Districts of Búzi, Dondo, Beira, Nhamatanda). Approximately 61,467 litres of water were treated.
- Distribution in Machanga
 - 1,050 Buckets (2/HH), 525 20L Jerrycans (1/HH) and 2,100 Bars of Soap (4/HH)
- Distribution in Nhamatanda to 116 households:
 - Emergency WASH items, including Jerrycans (20 Litres), buckets (14 Litres) and bars of soap.



Figure 2: NFI's prepositioning during Tropical Storm Ana

- During TS Ana (2022) a total of 853 households were reached with NFIs in preparation for the floods in the Licungo under the flood EAP activation.

Many activities were not done due to a lack of funding, as noted in previous updates. Priority was given to the Shelter response.

 Protection, Gender and Inclusion	People Reached	Female > 18: 15,960	Female < 18: 12,040
		Male > 18: 12,540	Male < 18: 9,640

Objective: *Communities become more peaceful, safe, and inclusive through meeting the needs and rights of the most vulnerable*

Key indicators:	Indicator	Actual	Target
	# of people reached with PGI and prevention and response to SGBV awareness messages	50,000 est	111,500 ppl
	# of RCRC volunteers and staff trained on PSEA, Child Protection and Safeguarding, Sexual and Gender-based Violence (SGBV), mandatory reporting and zero tolerance policies, gender equity and inclusion	389	825
	# of people reached through safe spaces at Community Health Mobilization Points	0	7,435

- In the first year of the operation (2021), a total of 389 CVM volunteers were trained about Protection, Gender and Inclusion including Preventing Sexual Exploitation and Abuse (PSEA), child protection, SGBV, gender equity and inclusion. Protection issues are integrated into all aspects of the programming, with awareness sessions included as a standard topic in trainings, in discussions with communities about the importance of targeting the most vulnerable persons, and as a way to maintain these values throughout the institution.
- Due to lack of funds, priorities have been given to shelter.

 Risk Reduction, climate adaptation and Recovery	People Reached	Female > 18: 3,719	Female < 18: 2,805
		Male > 18: 1,212	Male < 18: 914

Objective: *Communities in high-risk areas are prepared for and able to respond to disaster*

Key indicators:	Indicator	Actual	Target
	# of people reached through DRR and Climate Change Adaptation activities	11,650	80,000
	# of people reached through Early Warning messages	11,650	21,500
	# of local disaster management committees trained and equipped for disaster risk mitigation and response	0	30
	# of CVM volunteers and staff trained in preparedness and response to disasters	50	80
	# of boats for search and rescue procured	0	5
	# of people reached with search and rescue activities	882	1,000
	# of people reached through climate change awareness campaigns	0	42,500

- In total **2,330 families** (15% of the target people) were reached through DRR and Climate Change Adaptation activities. In Zambezia out of the initially listed 1,500 families, **CVM assisted 853 families** with the anticipatory action, during Tropical Storm Ana. During Tropical Storm Gombe, the re-activation of the **EAP reached 1,477 families** in three communities (Nate sede, Mugoloma e Mamiua) in the district of Maganja da Costa, administrative post of Nante.
- Early warning messages were disseminated before the cyclones and floods, using information that were shared by the government of Mozambique. The messages were distributed in two ways, through household and group discussions in the communities by the local CVM volunteers, and mass messaging through the use of sound systems on vehicles. As the forecast was known 3 days before landfall, these messages started circulating at that time in the project areas of impact to promote preparation and evacuation in Búzi and Beira. The dissemination of early messages enabled families to prepare well in advance, take necessary steps to save their assets and also decisions related to relocations.
- **Search and rescue** of 150 families (**882 persons**, 78 men, 458 women, 346 children) through volunteers by boat in Búzi. People were rescued from rooftops and treetops. First aid was provided to the families.
- CVM supported **24,301 persons** to cross the river in Nhamatanda district by deploying the emergency **search and rescue boats**, in cooperation with UNAPROC, the national unit for civil protection, and INGC, the national institute for disaster management.
- In Zambézia and Manica, 180 CVM volunteers were involved in the **rapid assessments** integrated into the multisector led by INGD. Three teams were sent for multi-sectoral assessments in the districts of Nhamatanda, Búzi and Machanga in the province of Sofala.
- Due to lack of funding many activities under this sector were not undertaken.

Enabling approaches



National Society Strengthening

Objective: <i>Communities in high-risk areas are prepared for and able to respond to disaster</i>			
Key indicators:	Indicator	Actual	Target
	# of volunteers insured	400	800
	National Society has elaborated a new four-year strategy	No	Yes
	# of digitalization systems implemented to improve finance management, logistics and volunteer management	0	1
	Communication and coordination within the National Society has improved	Yes	Yes
<ul style="list-style-type: none"> • 400 CVM volunteers were insured during the response to TS Ana (2022). • The communication policy put in place in July 2021 by the CVM was implemented, with clear guidelines for the various communication channels of the National Society. Combined with the efforts of IFRC to increase coordination, there was an improvement over the past year in this area. • Due to lack of funding many activities under this sector were not undertaken. 			



Coordination and Partnerships

Objective: <i>Strengthen Coordination and Partnerships within the Movement and with relevant external actors</i>			
Key indicators:	Indicator	Actual	Target
	Number of new CVM partnerships formed	2	2
	Number of Movement Coordination Agreements formed	0	1
	# of external partnership supporting the NS in the response	2	2
	# regular coordination meetings ensuring alignment and coordination with all Movement partners	1	12
	# of CVM staff trained in partnership development	0	50
<ul style="list-style-type: none"> • As mentioned under the Shelter section, the permanent shelter construction included new partnerships with GREPOC (the Post-Cyclone Reconstruction office) and the International Labor Organization (ILO). • The first partnership meeting was held at the beginning of the operation with the aim of briefing them on the immediate needs on the ground and strategy of the National Society response with the support of its partners. • IFRC deployed the southern Africa Cluster Partnership and Development Senior Officer to support fundraising efforts at the country level. Informal discussions on fundraising were held with both IFRC and NS teams during the deployment period of the Partnership Coordinator. • In January 2022 IFRC restarted its bi-monthly coordination meetings with PNSs and ICRC. 			

- Training partnership for CVM staff was not done as the Appeal was underfunded.



Secretariat Services

Objective:		<i>Strengthen Secretariat services</i>	
Key indicators:	Indicator	Actual	Target
	# of surge and temporarily outside support of IFRC	2	4
	# of IFRC national staff supporting CVM through capacity building	10	10

- In January 2022, IFRC brought in a surge **Communications** officer and a **Shelter Cluster Coordinator** to support the response and this support contributed to enhanced visibility of the response and IFRC fulfilment of its global mandate for Shelter Cluster Coordination.
- Programs and support national staff of the IFRC work closely with their respective counterparts in CVM to build their technical capacity. In 2021 key positions such as the **Disaster Management and Health Coordinators** were nationalized within the IFRC Maputo Delegation.



Community Engagement and Accountability

Objective:		<i>Have the communities at the center throughout the project implementation by involvement of community leaders, RCCE sensibilization activities and establishment of feedback collection systems</i>	
Key indicators:	Indicator	Actual	Target
	% of queries / feedbacks received through the feedback mechanisms established that were responded to	TBC	80%
	# of community leaders trained and involved in the response	TBC	200
	# of CVM staff and volunteers trained on CEA and RCCE and involved in the response	389	825
	% of operational decisions made based on community feedback	TBC	100%

- CVM uses the **linha verde** anonymous reporting system, along with other local humanitarian actors. During distributions, a team member was available to receive feedback and also during the post-distribution monitoring surveys community members were provided an opportunity to share comments

with the Red Cross. Some complaints were also registered in the field by CVM and shared with the administrative shelter colleagues in IFRC for follow up.

- Training of **389 CVM volunteers** to carry out the response.
 - 150 volunteers were trained in the technical areas of the operation – shelter, health, WASH, PGI, CEA – as well as data collections methodologies, tools and reporting. This was to assist in the long-term response. An additional 31 CVM volunteers (14 men and 17 women whose ages range from 18 - 58 years) were trained in multi-sectoral issues.
 - In Zambézia and Manica CVM, 180 volunteers were involved in the **rapid assessments** integrated the multisector led by INGD. Three teams were sent for multi-sectoral assessments in the districts of Nhamatanda, Búzi and Machanga in the province of Sofala.
 - Rapid training for 28 volunteers on multi-sectoral issues and CEA basic points, such as collecting and responding to feedback, 2-way communication channels and how to deal with community rumours. Help desks were set up at distribution locations to support communities with information, manage complaints, etc. They were also trained in Emergency Shelter construction and data collection of distribution participants using KOBO.
- The decision to build permanent shelters as opposed to the transitional shelters such as built during the Idai Operation involved listening to various actors, including the affected communities, CVM, local government, and GREPOC. The project was then designed with all parties’ input and IFRC guidance.



Shelter Cluster Coordination

Objective:

Promote coordination among humanitarian and government actors to meet shelter needs throughout the affected area and prepare for future events

	Indicator	Actual	Targets
Key indicators:	# of active shelter actors engaging with SC and participating in coordination meetings	6	15
	A shelter response strategy in place, agreed upon by all shelter actors	1	1
	Cluster coordination capacity and information management system in place to monitor and improve the quality of the shelter response and eliminate duplication and gaps.	1	1

- A total of 6 stakeholders were actively participating in the regular Shelter Cluster Coordination meeting. There is a need for long term shelter coordination capacity at the Cluster level to ensure timely support to the Cluster.
- CVM/IFRC cooperated with shelter Cluster partners mapped activities, agreed on a common shelter response strategy and ensured quality and coordinated shelter response. The Canadian Red Cross engaged a Shelter Cluster Coordinator to support CVM/IFRC in the shelter Cluster leadership role for three months at the start of the operation.

- The additional impact of Tropical Cyclone Eloise required strengthened coordination of the response system. These include the development of an inter-agency shelter strategy, monitoring of the shelter response to avoid duplication and gaps, and technical support for quality shelter response.
- The [Shelter Cluster](#) was required to build up an overview of the shelter needs situation, compiling data from GREPOC, DTM, INGD and other partners, and on a day-to-day basis to direct Shelter Cluster partners to the areas with the most need, advising on standards and recommendations for NFIs and shelter interventions.

C. FUNDING

A detailed financial report is shown below. The Appeal was launched with an IFRC Secretariate funding requirement CHF 5.5 million. A total income of 1,323,300 (excluding the outstanding DREF loan) and 1,872,284 (including the outstanding DREF loans).

The total expenditure on closing is CHF1,832,751 which equates to 97.8% expenditure and balance of CHF 39,533 remaining.

Given the low funding coverage many of the original targets were not met which resulted in prioritisation of activities was based on needs on the ground and coordination with local Government and other relevant agencies.

bo.ifrc.org > Public Folders > Finance > Donor Reports > Appeals and Projects > Emergency Appeal - Standard Report

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Emergency Appeal

Interim FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	*	Operation	MDRMZ016
Budget Timeframe	2021-2023	Budget	APPROVED

Prepared on 10 May 2023

All figures are in Swiss Francs (CHF)

MDRMZ016 - Mozambique, Africa 2021-22 Floods and Cyclones

Operating Timeframe: 23 Jan 2021 to 31 Jan 2023; appeal launch date: 28 Jan 2021

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	729,000
AOF2 - Shelter	1,877,000
AOF3 - Livelihoods and basic needs	626,000
AOF4 - Health	527,000
AOF5 - Water, sanitation and hygiene	524,000
AOF6 - Protection, Gender & Inclusion	47,000
AOF7 - Migration	0
SFI1 - Strengthen National Societies	617,000
SFI2 - Effective international disaster management	35,000
SFI3 - Influence others as leading strategic partners	27,000
SFI4 - Ensure a strong IFRC	491,000
Total Funding Requirements	5,500,000
Donor Response* as per 10 May 2023	1,323,303
Appeal Coverage	24.06%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	29,863	30,103	-240
AOF2 - Shelter	1,411,909	1,326,618	85,291
AOF3 - Livelihoods and basic needs	45,406	1,988	43,418
AOF4 - Health	54,019	50,228	3,791
AOF5 - Water, sanitation and hygiene	15,064	9,227	5,837
AOF6 - Protection, Gender & Inclusion	1,127	258	869
AOF7 - Migration	0	18,213	-18,213
SFI1 - Strengthen National Societies	26,594	45,610	-19,016
SFI2 - Effective international disaster management	130,872	134,310	-3,438
SFI3 - Influence others as leading strategic partners	34,889	49,986	-15,096
SFI4 - Ensure a strong IFRC	179,557	168,211	11,346
Grand Total	1,929,301	1,834,751	94,549

III. Operating Movement & Closing Balance per 2100/9999

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	1,872,284
Expenditure	-1,834,751
Closing Balance	37,533
Deferred Income	0
Funds Available	37,533

IV. DREF Loan

* not included in Donor Response	Loan :	859,689	Reimbursed :	359,689	Outstanding :	500,000
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V. Contributions by Donor and Other Income

Opening Balance						0	
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
American Red Cross	550,555				550,555		
DREF Response Pillar				500,000	500,000		
European Commission - DG ECHO	216,306				216,306		
Japanese Red Cross Society	42,880				42,880		
Other	82		48,982		49,064		
Red Cross of Monaco	26,741				26,741		
Slovenia Government	31,010				31,010		
The Canadian Red Cross Society (from Canadian Gov	178,835				178,835		
The Netherlands Red Cross (from Netherlands Govern	276,894				276,894		
Total Contributions and Other Income	1,323,303	0	48,982	500,000	1,872,284	0	
Total Income and Deferred Income						1,872,284	0

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Reference documents



Click here for:

- [Link to IFRC Emergency landing page](#)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.