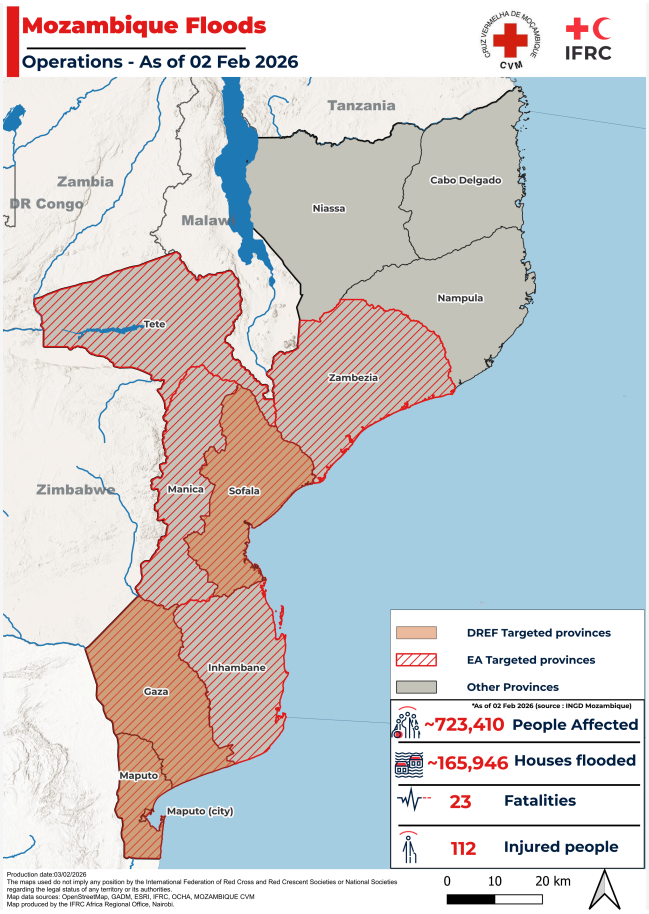
DREF Operational Update

Mozambique Flood 2026

NFI distribution In Guachene, Catembe, for 200 HHs affected by the floods

Appeal: **MDRMZ027**	Total DREF Allocation: **CHF 750,000**	Crisis Category: Orange	Hazard: **Flood**
Glide Number: -	People Affected: **723,410 people**	People Targeted: **45,000 people**	
Event Onset: **Sudden**	Operation Start Date: **06-02-2026**	New Operational End Date: **30-11-2026**	Total Operating Timeframe: **9 months**
Reporting Timeframe Start Date: **06-02-2026**		Reporting Timeframe End Date: **28-08-2026**	
Additional Allocation Requested: -		Targeted Regions: **Gaza, Maputo (city), Maputo, Sofala, Tete**	

Description of the Event



Map

Date of event

16-01-2026

What happened, where and when?

Mozambique experienced a large-scale flood emergency triggered by persistent and intense rainfall since late December 2025. The situation was compounded by exceptionally high upstream river inflows from South Africa and Zimbabwe and by controlled and emergency discharges from key dams, particularly Massingir Dam, which exceeded 100 per cent of its storage capacity in mid-January 2026.

As the potential impact of the rains and floods became more certain, national hydrological and meteorological authorities (INAM, DNGRH and ARA-Sul/Centro) issued successive high-risk alerts, prompting the Government of Mozambique, through INGD, to activate Anticipatory Actions and initiate evacuations in low-lying areas.

In line with this request, the Mozambique Red Cross (CVM) supported the Government with evacuations, distribution of relief items, and dissemination of early warning messages. This was done through the activation of the Floods Early Action Protocol (EAP) triggered on 27/12/2025 (MDRMZ022EAP2) and other mechanisms.

Despite these efforts, the scope and scale of the emergency exceeded local capacities, and on 16 January 2026, the Government of Mozambique activated a nationwide Red Alert in response to the deterioration of weather conditions and the heightened risk of severe flooding and related hazards across the country. This measure aimed to strengthen national preparedness, accelerate inter-institutional coordination and enable a more effective and timely humanitarian response to the ongoing emergency. The government of Mozambique also requested international assistance.

The humanitarian situation was severe and rapidly evolved, with impacts exceeding national coping capacities. Additional rains and floods continued for months after the initial impact, increasing the impact and limiting access to areas for response.

Scope and Scale

The impact of the floods spanned across multiple sectors simultaneously, including shelter, livelihoods, agriculture, water supply, sanitation, health services and transport infrastructure. Roads and bridges have been damaged or rendered impassable, limiting humanitarian access and increasing the urgency for rapid, coordinated assistance. The floods were unprecedented, with impacts reported across all 11 provinces of the country. The most affected provinces were Zambezia at the start, and the Gaza, Maputo, and Sofala provinces. The CVM activated its Flood Early Action Protocol (EAP) in Zambézia and its Cyclone EAP in Inhambane, mobilizing trained volunteers to disseminate early warnings, support at-risk households, and implement early protective measures ahead of forecasted impacts.

Rain continued throughout the start of the operation for three months. Mozambique also experienced TC Gezani in mid-february, further impacting the population with a heavier impact on Inhambane and Sofala provinces. During the first quarter of 2026, access to impacted communities remained challenging as water levels have not fully resided. The changing situation led to movement in and out of accommodation centres, with various centres closing and reopening across the countries.

Official data from Instituto Nacional de Gestão e Redução do Risco de Desastres (INGD) indicated that approximately 723,410 people (170,253 households) were affected nationwide. According to INGD-validated government data over 300 fatalities and 112 injured and 9 missing across the full rainy season. INGD warned that figures could increase as floodwaters persisted and access remained limited. Preliminary damage assessments estimated damages to be of US 220 million, with Gaza, Maputo, Inhambane and Sofala as the worst affected provinces.

Human impact:
723,410 (170,253 households) impacted across 1 1 provinces
Over 4,500 people rescued.
400,000 displaced overall, with around 85,000 people displaced in accommodation centres nationwide

Shelter and infrastructure:
165,946 houses flooded; 3,548 houses partially destroyed, and 817 houses completely destroyed
115 Overcrowded and under-resourced emergency accommodation centres, increasing protection and health risks.
Over 1,900 km of roads affected and 5 bridges destroyed.

Livelihoods and food security:
Over 440,000 hectares of cropland damaged, undermining food security and income for 314,780 farmers
408,115 livestock lost

Public health and protection risks
229 health centres impacted
86 deaths due to cholera

Vulnerable populations (elderly, people with disabilities, women and children) were increasingly at risk of both the rains and prolonged impacts as their experience and ability to evacuate safety was hampered. In accommodation centers, protection risks were high for these populations as well. All populations are also at high risk of being exposed to diseases, particularly cholera and malaria, given both the large amounts of stagnate water as well as the insufficient sanitation facilities in accommodation centers and host communities.

Summary of Changes

Are you changing the timeframe of the operation	**Yes**
Are you changing the operational strategy	**No**
Are you changing the target population of the operation	**No**

Are you changing the geographical location	**Yes**
Are you making changes to the budget	**No**
Are you requesting an additional allocation?	**No**

Please explain the summary of changes and justification:

This Operational Update No. 1 for MDRMZ027 Mozambique Floods aims to inform the Mozambique Red Cross (CVM) and IFRC stakeholders of the progress achieved through the IFRC-DREF allocation of CHF 750,000, provided to support CVM's response under the 2026 Mozambique Floods Emergency Appeal.

While presenting implementation progress and results achieved to date, this update also outlines the operational changes made to adapt the intervention to evolving operational realities, including prolonged flooding, delayed access to affected communities, and supply chain challenges. These adjustments are also aligned with the broader Federation-wide Emergency Appeal continuity by ensuring completion of outstanding activities, ensuring the optimal use of available resources to CVM reach.

1) Changes

- Timeframe extension: Due to ongoing flooding during the first 3 months of the operation (February, March, and April) people were moving to and from accommodation centers, which limited access and implementation of community based activities. As the start of community-based activities was shifted to a time when communities would be officially reallocated or returned from accommodation centers (when water levels finally decreased), the operation requires more time to complete community-based activities that have service contracts associated with them (such as latrines construction contracting). This activity is still ongoing and only expected to finalize by end of September. For immediate relief distributions, global supply chain issues have presented delays in receiving stock in the country for international procurements. The NS and IFRC advanced stock from other projects to cover immediate needs, given the supply chain delays as well as prioritized local procurements which also had delays and not all items were available locally. The items to be replenished have not yet arrived and expected in September, hence the need for additional time for clearance and transporting of stock. There are some unspent funds under operational support costs of the DREF, and these are very much still necessary to support ongoing activities under the linked Emergency Appeal that is still ongoing (e.g. field monitoring costs).

- Geographic location change: the DREF, complementing the Emergency Appeal (7 provinces), originally targeted the top 3 provinces most affected by the floods in terms of household/shelter and livelihood damage (Gaza, Maputo, and Sofala provinces). There is a proposal for adding Tete province within the DREF, for health activities only. Tete is included in the Emergency Appeal and had a complementary project (ECHO HIP) that supported some health activities in Tete at the start of the operation. However, the funds from this DREF under Health can be further leveraged to cover Tete as well as the ECHO HIP funds have been used up. The Cholera outbreak after the floods was strongest in Tete and Sofala provinces. With current budgetary execution under the DREF in the area of Health, it would be possible to cover ongoing Cholera prevention and response activities in Tete province.

IFRC Network Actions Related To The Current Event

Secretariat	IFRC is present in country and supported in the following: - Launch of the Emergency Appeal (EA), - Development of response plan, and DREF/EA application and launch, - Communications and resource mobilization (media interviews) to raise awareness of the disaster for resource mobilization. IFRC is active in the national cluster and OCHA meetings, and Government led meetings Launch of surge alerts - IFRC Co-Led Shelter Cluster Coordination (ongoing) - Regular information sharing, and coordination between CCD, ARO and GVA. - IM team has finalized the disaster brief and shared on the Go Platform.
Participating National Societies	German RC supported Early Action Protocol Activation for Floods and has activated response funds to contribute to the EA (est. 180,000 Euros). Belgian-FL RC has activated

	response funds to contribute to the EA (est. 100,000 Euros). Swedish RC has activated response funds to contribute to the EA (est. 10,000 Euros). Spanish RC has activated response funds to contribute to the EA (est. 30,000 Euros). Together with the EA launch and DREF application, the PNSs, CVM and IFRC are coordinating to allocate the funds to support the overall implementation of the EA. All PNSs are also looking to support Surge deployment requests and ERU requests as possible under the DREF and EA.

ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC), through its mandate, is present in Mozambique, particularly in the northern part of the country, which has been affected by ongoing armed conflict in Cabo Delgado.

Regular RCRC Movement coordination meetings are taking place as per the existing Movement Coordination Agreement, ensuring a coordinated Movement approach to support the CVM across the country. There is no overlap in the areas where the ICRC is active, and the flood-affected areas targeted by this appeal.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	Government is leading and coordinating all of the response. Early warning, evacuations, and initial assessments, are being done with INGD teams supporting local authorities on rescue and monitoring. Camp set up and coordination, initial response, are all coordinated by Government. Government CENOE national emergency response center set up in Gaza. Provincial emergency operations centers. Government launched Red Alert on Jan 16th and has been convening meetings with Ministries and global actors for support.
UN or other actors	WFP disbursed funds to INGD for logistics, including fuel, transport, and evacuation support. Humanitarian partners, including IOM, UNICEF, UNFPA, Save the Children, Plan International, World Vision, ADRA, CARE, Kulima, and international government assistance, have deployed staff and vehicles and supplies for monitoring, rapid assessments, and evacuation operations. Relief items pre-positioned or distributed by all stakeholders include 25,655 household food kits, 12,000 hygiene kits, 45,000 learner kits, 3,850 dignity kits, WASH and SRH supplies, temporary health and school tents, and rescue boats. OCHA has led preparedness and coordination, mapping partner assets and convening inter-sector working group meetings. Regular SitReps and flash updates shared by OCHA to ensure situational awareness. UNDAC has been activates, as well as the UN Logistics Cluster to support access and movement of humanitarian aid into affected areas. More items for relief are being transported through the support of ECHO. An airbridge has been created to facilitate flights into Gaza province.

Are there major coordination mechanism in place?

Daily OCHA intersectoral Working group flood update meetings (national) that IFRC attends
Daily EOC meetings provincial level that the National Society attends
Weekly cluster meetings (Shelter, WASH, FSL), NS and IFRC attend. Shelter led by IFRC.
HCT ad-hoc meetings in place , IFRC attends
Internal RCRC Movement Floods response meeting led by NS set up

Needs (Gaps) Identified

Shelter Housing And Settlements

Housing: 165,946 houses flooded; 3,548 houses partially destroyed, and 817 houses completely destroyed. This means close to 400,000 people have been displaced from their homes and are living in host communities and accommodation centers (85,000 in accommodation centers).

Prior to the floods, it was estimated that almost 30% of households are in need because shelters are inadequate or non-existent, present multiple structural issues, do not offer security of tenure, and/or do not allow residents to perform most domestic tasks. Additionally, rapid urbanization in provinces like Maputo, Sofala and Nampula have also driven housing costs and expanded informal settlement (70-80% in urban areas) with substandard housing, pushing low-income households into inadequate shelters. Given these pre-existing poor living conditions, it is likely that the recent floods pushed a substantial proportion of these shelter-vulnerable households into even more severe shelter, protection and displacement needs. Most houses in Mozambique are built with materials such as pique-a-pique (wood covered in mud and clay) or adobe bricks, which are often washed away by rain and wind.

Accommodation centres: around 85,000 people were in accommodation centers (115 accommodation centers) at the height of the emergency. 6 months in, all accommodation centers have closed. Multi sectoral rapid needs assessments for the accommodation centres are planned to happen in the coming week, but field reports from Government indicate there are already high needs for ensuring basic humanitarian standards as the centers are overcrowded. There is need for essential household and shelter items, Wash and hygiene items, sanitation facilities, food, and protection services.

Livelihoods And Basic Needs

A key priority is immediate food distributions in accommodation centers for displaced populations. Additionally, there are long term impacts on livelihoods, as over 440,000 hectares of agricultural land have been lost and over 400,000 livestock during these floods, affecting over 314,780 farmers.

The impact of the floods is deepening the existing food insecurity and livelihood crisis in a country where more than 70% of rural and poor households rely on agriculture as their main source of subsistence and income. The December-March period is critical for Mozambique as it is when most of the planting, weeding and start of harvesting take place. With the floods affecting tens of thousands of hectares across all eleven provinces, agricultural activities have been disrupted. For the period of October 2025-March 2026, IPC projections estimated that 3.5 million people would face food crisis level or worse (IPC3+), representing almost 20% of the total population. Although projections for the remainder of 2026 suggest a reduction in the number of food insecure people, the extensive damage in key crop-producing provinces, such as Gaza, Sofala and Zambezia, is likely to cause an unanticipated peak in food shortages affecting both farming and urban consumers who depend on their production.

Most Mozambicans cannot afford a nutritious diet, and food poverty has been increasing over the years mainly due to climate shocks. Latest figures indicate to around 40% of children under five face chronic undernutrition linked to food poverty. What makes this considerably worse is that most populations lack livelihood adaptation strategies (LAS). The most recent IPC study noted that on average 75% of evaluated districts do not adopt any LAS, with Sofala - one of the provinces hardest hit by recent floods – among those with the highest proportion of districts without such strategies (85%).

Entering the 3rd quarter of 2026, Mozambique is predicted to experience the worst El Nino season, forecasted to bring extreme drought. This will impact center and southern provinces of Mozambique potentially further hindering the livelihoods recovery of those who were affected by the floods.

Health

229 health centers have been affected by the floods, which will impact populations that need to seek care. Additional access to healthcare is limited due to roads being damaged or impassable. Therefore, it is expected that health needs will go unmet. People with preexisting health needs, pregnant women, and other vulnerable populations will need enhanced support. This is compounded by a pre-existent shortage of general medicines/medical supplies. There is a need for basic medication and medical supplies to reach the country, which

WHO is coordinating.

There has been surge in diseases such as cholera. Flood-affected areas are also likely to see an increase in diarrheal diseases, which remain one of the leading causes of death among children under five in Mozambique, with no clear evidence of a sustained decline. Support with Cholera prevention, early detection, and treatment may be needed if the outbreak expands. Other diseases like Malaria are also on the rise, so there is a need for health & hygiene promotion, distribution of mosquito nets, and water purifiers, and RCCE.

Tete and Sofala provinces have been experiencing the largest case load of Cholerea cases after the rains. These hotspots have required support with ORPs, support with items to CTCs, refferals and helath and hygiene promotion activities. The Ministry of Helath has requested set up of ORPs in both provinces. In Tete, boarder districts with Zibmabwe are also hotspots due to Cholera outbreak across the border with high risk of transmission due to shared bodies of water and river downflows. By July 2026, there are still active cases in 3 districts of Sofala, while numbers in Tete have decreased.

Water, Sanitation And Hygiene

The already limited access to clean water and sanitation in Mozambique will come under further strain as flood-induced stagnant water and destroyed systems are likely to increase the risk of waterborne diseases.

Currently, more than half of Mozambique's population has no access to clean water and over three-quarters lack adequate sanitation facilities, making WASH one of the most pressing humanitarian needs. Rural sanitation has changed very little, with provinces like Inhambane, Gaza and Cabo Delgado showing the highest reliance on unimproved sanitation. Inequalities between urban and rural populations are stark: around 68% of the urban population has access to decent sanitation, compared with only about 21% in rural areas. The access situation is likely to deteriorate further due to increasingly erratic natural hazards and the country's heavy dependence (around 80%) on external support to develop WASH systems. Hygiene practices, already limited nationally, have been further compromised by recent floods.

Accommodation centers have noted a large need for sufficient sanitation facilities as well as hygiene promotion to reduce the risk of disease.

Water shortages are also starting, as some water points have been damaged with the floods, and the main road which also supplies water to some areas through trucking is cut (no access). Water supplies in Maputo city experienced a reduction in clean water production 30%. The WSR ERU assessment conducted under the EA identified over 200 water sources that needed rehabilitation or repair in Gaza alone.

Protection, Gender And Inclusion

Children affected need protection, particularly in accommodation centers. Women, elderly, people with disabilities also are in need of protection services.

Furthermore, schools are used as accommodation centers which has delayed the start of the school year.
Heightened GBV risks: Overcrowded temporary accommodation centres (schools and public buildings) lack privacy, lighting, and safe WASH facilities, significantly increasing risks of gender-based violence, sexual exploitation and abuse, particularly for women and adolescent girls.

- Disruption of SRH and GBV services: Flood damage to health facilities and access constraints have interrupted sexual and reproductive health services and GBV referral pathways, affecting pregnant women, survivors of violence, and adolescent girls.

- Increased care burden and psychosocial distress: Women and older girls bear a disproportionate care burden in displacement settings, while repeated climate shocks have intensified psychological stress, particularly among female headed households and older persons.

- As Flooding has destroyed agricultural land and livestock in Gaza, the disruption of livelihood may push families towards negative coping strategies that heighten protection risks for women and girls.

Community Engagement And Accountability

There is currently a working inter-agency feedback mechanism called the Linha Verde that is well socialized but requires individuals to have a phone or credit to call the line. The line helped rescue some people who were stuck after the rains. The line is advertised in and outside of accomodation centers during any humantirian aid intervention by any stakeholder.

Operational Strategy

Overall objective of the operation

The DREF, aims to assist 45,000 people affected by the floods focusing on saving lives, protect dignity, and reduce the immediate suffering of flood-affected populations across three of the most affected provinces in Mozambique (Maputo, Gaza, Sofala, Tete).

Operation strategy rationale

The operational strategy for this DREF remains aligned with and contributes to the broader Emergency Appeal strategy, focusing on the immediate humanitarian needs of flood-affected populations in Gaza, Maputo and Sofala provinces, while supporting cholera response efforts in Sofala and Tete. Through this contribution, the DREF supports the Emergency Appeal's first phase of response, prioritizing life-saving assistance, protection, health, WASH, shelter, relief distributions, and early recovery actions.

EA Operational Strategy is designed through a phased approach. The IFRC response combines immediate life-saving assistance and relief (0-4 months) with a gradual transition towards recovery and resilience (4-12 months). The DREF supports the first phase by prioritizing evacuations, search and rescue, health, WASH, protection, and the provision of essential household items, while integrating recovery considerations from the outset.

Phase 1 - Immediate Life-Saving Assistance and Relief (covered under this DREF)
Progress under this phase has been substantial. The operation supported the rescue of 4,897 people, delivered first aid and psychosocial support to 1,779 people, reached 41,775 people with health and epidemic prevention messages, distributed NFIs to 3,400 households against an initial target of 1,400 households, reached 3,330 households with water treatment supplies, activated 180 volunteers, and established community feedback mechanisms that responded to 100 per cent of complaints received. Protection and dignity interventions were also implemented in accommodation centres through lighting, communal items, hygiene support and PGI integration across sectors.

Under this DREF, Phase 1 remains the priority, with a focus on completing outstanding activities under WASH, health, PGI and accountability interventions while ensuring that affected communities receive safe, dignified and coordinated assistance in line with Government priorities and the broader Emergency Appeal objectives. Activities pending or to be completed include
- Completion of PGI commitments such as child safeguarding risk analysis and remaining volunteers trainings;
- Completion of 270 household sanitation latrines in Maputo and Gaza provinces;
- Finalization of international relief stock replenishment and related logistics activities delayed;
- Ensuring scheduled monitoring visits, PDM are conducted but also the subsequent analysis of all the PDM, monitoring and feedback systems are done and considered within the recovery assessment which report will serve for the transition out of the DREF.
- Sustaining health promotion and cholera response activities considering the continuous threat of cholera and vulnerabilities. Ensuring efforts can close the gap toward the 45,000 target and continue support in Tete and Sofala.

Phase 2 - Transition to Recovery and Resilience (not covered by the DREF but DREF upcoming 3 months remains linked to the EA transition to phase 2)

As floodwaters receded with populations returned to their communities and initial stage of the emergency response mobilised and delivered using DREF funding in complementarity with other bilateral funds of the EA, the CVM priorities must progressively shift towards recovery-oriented interventions, particularly household sanitation, cholera prevention, community engagement and recovery planning.

Although the DREF does not directly fund Phase 2 recovery activities under the Emergency Appeal, its outputs and achievements provide a critical foundation for recovery and resilience. The large-scale distribution of NFIs, health and the reach of hygiene promotion, cholera prevention activities, community engagement mechanisms, and search-and-rescue support have helped stabilize affected households,

protect livelihoods, reduce the high threat of public health risks. Overall, strengthen community resilience and capacities to recover from the floods. In parralel, the impact of DREF realisations as well as the remaining activities to be implemented, while linked to the emergency response will have a medium-term impact, contributing to the early recovery outcomes. These interventions will improve access to safe sanitation, inform recovery programming under the Emergency Appeal, reduce future health risks, and support communities in transitioning from emergency assistance towards safer and more resilient recovery.

Targeting Strategy

Who will be targeted through this operation?

The DREF targets 45,000 people indirectly through all activities. It targets directly 1,400 households with provision of NFIs, corresponding to approximately 7,000 people, based on an average household size of five persons, which is consistent with national demographic patterns and IFRC planning assumptions in Mozambique.

The contribution of the DREF to reach 1,400 households reflects a realistic and operationally feasible target given the available DREF envelope, logistical constraints, and the need to ensure adequate quality and timeliness of assistance. It contributes to the larger targets of the EA of 5,000 HH (75,000 people directly based on approximately 12% of all affected population receiving NFIs). While overall humanitarian needs far exceed this number, the selected caseload allows the Mozambique Red Cross (CVM) to deliver meaningful, life-saving assistance to the most vulnerable households, while maintaining alignment with national response plans.

The operation reaches a broader population through Health and Hygiene Promotion (HHP), Community Engagement and Accountability (CEA), and epidemic risk reduction activities. Approximately 45,000 people in the target provinces, prioritising communities affected by flooding, displacement sites and host communities at high risk of waterborne and vector-borne diseases. This target is based on the fact that CVM has projected 180 volunteers for the three provinces with a target of 15 families per volunteer per month. In addition to these, there are those covered by mass campaigns (megaphones/community radio sessions).

The wider outreach reflects the public health nature of flooding emergencies, where behavioural change, awareness, and community-level prevention measures are critical to reducing morbidity and mortality. Activities include:

- Hygiene promotion and safe water practices
- Prevention of diarrhoeal diseases, including cholera
- Environmental sanitation and vector control messaging
- Community feedback, accountability and early referral mechanisms

By combining intensive household-level support for the most vulnerable with large-scale preventive health and hygiene promotion, the operation ensures a balanced response that addresses both immediate humanitarian needs and broader public health risks associated with flooding.

Explain the selection criteria for the targeted population

Beneficiary selection was done in coordination with Government and Cluster system, particularly when doing activities in accommodation centers.

Households were prioritized using vulnerability-based criteria, focusing on those most severely affected by flooding and least able to recover without external assistance, including:

- Female-headed households
- Households hosting elderly persons or persons with disabilities
- Families with pregnant or lactating women
- Households with children under five
- Households whose shelters and basic household assets were partially or totally destroyed
- Families displaced to temporary or overcrowded locations
- Child headed households

Geographic Targeting (DREF focuses on 4 of the 7 provinces included in the EA)
The DREF operation prioritises Maputo, Gaza, Sofala and Tete provinces, which are currently the most severely affected by flooding and the cholera outbreak, according to official Government situation reports and emergency dashboards. These provinces consistently report the highest levels of flooded households, displaced populations, damaged shelters, and disruption of civic services.

- Maputo Province experienced extensive flooding in peri-urban and low-lying districts, with a high concentration of vulnerable

households exposed to stagnant water, poor drainage, and increased public health risks.

- Gaza Province was affected by riverine and flash floods, particularly along major basins, resulting in loss of household assets, damage to shelters, and contamination of water sources.
- Sofala Province, historically flood-prone, has recorded significant impacts on both rural and urban communities, including displacement, shelter damage, and heightened risks of water-borne diseases.
- Tete Province, hotspot for Cholera outbreak along with Sofala province, as well as at heightened risk of Cholera due to cross-country transmission.

The selection of these four provinces reflects a needs-based and evidence-driven approach, aligned with Government priorities and coordination mechanisms led by the National Institute for Disaster Risk Management and Reduction (INGD) and MISAU (Ministry of Health). Concentrating the response in the most affected provinces ensures operational efficiency, avoids fragmentation of limited resources, and maximizes humanitarian impact.

Total Targeted Population

Women	23,000	Rural	-
Girls (under 18)	-	Urban	-
Men	22,000	People with disabilities (estimated)	-
Boys (under 18)	-		
Total targeted population	45,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	**Yes**
Does your National Society have prevention of sexual exploitation and abuse policy?	**Yes**
Does your National Society have child protection/child safeguarding policy?	**Yes**
Does your National Society have whistleblower protection policy?	**No**
Does your National Society have anti-sexual harassment policy?	**Yes**

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Continued flooding & cyclone season limiting response capacity and stocks for future shocks.	• Flexible planning, contingency stocks, coordination with INAM/DNGRH

	• Continued readiness. EAP Cyclone protocol ready for activation
Access constraints, roads damaged.	• Use of boats, pre-positioning, local volunteers • Use UN Logs cluster activation. Coordinate use of various transport methods (air/boat) with other agencies
Safety risks due to continued flooding, increases wide life encounters, and disease risks.	• Ensure all volunteers and staff have adequate PPE including life vests and boots. • Security assessment will be undertaken for field placement and travels. • Stay safe for volunteers and specific flooding guidance will be developed.

Please indicate any security and safety concerns for this operation:

Security/safety: due to floods, expect strong currents, contamination, increased wildlife encounters, and visibility to be compromised.
- Heightened risk of cholera (utilize proper hygiene measures).
- Heightened risk of malaria (have preventative supplies, long slaves, mosquito nets, repellent)
- Heightened risk of snake, crocodile, hippopotamus encounters/attacks (and other wildlife) - awareness and proper clothing
- Humanitarian actors deployed need to prioritize PEE (water safety including life jackets) as most transport available is on boats.

Has the child safeguarding risk analysis assessment been completed?	No

Planned Intervention

Shelter Housing And Settlements

Budget: CHF 364,444
Targeted Persons: 6,375
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# household recieving NFIs	1,400	3,400
% households that are satisfied with assistance provided	80	0
# accommodation centers with NS volunteers actively supporting	50	33

Progress Towards Outcome

The Mozambique Red Cross continues to provide humanitarian assistance to flood-affected populations in close coordination with the National Institute for Disaster Risk Management and Reduction (INGD) and local authorities. Support has been delivered across 33 temporary accommodation centers in Maputo and Gaza provinces, including registration of people and the installation of tents to improve shelter conditions.

Within accommodation centers, supported by the DREF, CVM distributed diverse relief items including 4,212 mosquito nets and 346 blankets, as well as hygiene items (see more under WASH). Accommodation centers closed and reopened during the first few months of the operation, due to ongoing rains. This is estimated to have reached 1,400 HHs, based on 3 Mosquito Net per household.

Once people returned to their homes, CVM, in alignment with Government and clusters, started the distribution of a NFI "full return kits". Prior to the distributions, assessments of the most vulnerable affected households were conducted, followed by community validation exercises and dissemination of key messages related to the distributed items. The messages were also displayed on banners and distribution tickets. DREF funds supported with selected items as need to complete NFI return kits in combination with in-kind donations for 2,000 HHs.

The full kit "NFI return kit", included (items supported by DREF are marked with a *):
Items Quantity/HH
Shelter toolkit 1
Tarpaulin 2
Mat* 3
Blanket* 3
Kitchen set 1
Solar lamp 1
Mosquito net 1
Foldable jerrycan 2
Bucket with lid* 1
Certeza* 3
Hygiene kit/WASH kit* 1

The HHs receiving the Shelter tool kit and tarpaulins as part of the NFI return kit were provided with Build Back Better principles. During each distribution, trained CVM volunteers conducted exit surveys, which indicated that beneficiaries considered the distributions to be well organized and expressed satisfaction with the support provided by CVM volunteers.

PDMs have been conducted, and the data is being analyzed.

Indicator has been revised from # households receiving NFIs, to # of households receiving the Full NFI KIt, as the 1,400HH target was based on the "full kit" provision and does not include additional distributions of diverse relief items in accomodation centers.

Health

Budget: CHF 50,037
Targeted Persons: 45,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# people receiving first aid & PSS services	2,000	1,779
# of people referred to health centers	800	166
# people reached with disease prevention and epidemic control messages	45,000	41,775

Progress Towards Outcome

The Mozambique Red Cross continues to scale up integrated health interventions, reaching affected populations through health and hygiene promotion, mental health and psychosocial support (MHPSS), and first aid services, while strengthening community-level capacities.

At the start of the emergency, a total of 1,779 indiviaudls have recieved first aid (101) and PSS (1678) services, particularly during aquatic rescue operations and within accommodation centers in Maputo and Gaza provinces. Volunteers also provided health and hygiene promotion within accommodation centers in Maputo and Gaza.

By the end of the reporting period, a total of 41,775 people have been reached through health and hygiene promotion and disease prevention messaging. Since the beginning of the operation, volunteers have been assigned to reach an average of 10 households per week, and each household has an average of five members. The volunteers conducted door-to-door visits and delivered health and hygiene promotion messaging. Volunteers also reached people with health and hygiene messages during distribution of relief items and wash item distributions. Additionally health and hygiene campaigns have been further disseminated across radio stations in Tete and Sofala, the hotspots of the Cholera outbreak. The reach of these radio messages is being assessed. Additonal IEC materials have been printed to continue with health and hygiene promotion campaigns in the coming months.

During the reporting period there were active cholera cases, predominantly in Tete and Sofala provinces. 166 community members showing signs of Acute Watery Diarrhoea (AWD) were reached with Oral Rehydration Therapy (locally made ORS) provided at community level by trained volunteers. Communities reached include Zimbae, Sacatum, and Dafi in Caia, Sofala province; and Chipembere, Changara Sede, Goba and Chioco in Tete Province. Cases from Zimbae, Sacatum and Dafi were referred to Caia Health facility while cases from Chipembere were referred to Chipembere health centre, and cases around Changara sede were referred to Changara health facility and cases from Goba and Chioco were referred to Chioco Health Centre. These 166 people showing signs of AWD were referred to nearest health facilities contributing to early detection of AWD cases within their communities. Current cases are still reported in Sofala province across three districts.

This DREF supported the set up of 1 ORP in Sofala province.

Training was conducted in Caia (34 volunteers) district of Sofala. The training focused on Epidemic control, Oral Rehydration Therapy, Community mobilization, Case Area Targeted Intervention (CATI) and community engagement. Volunteers have been deployed to conduct community awareness through household visits, community engagement meetings and open days with health and hygiene interventions, disease prevention and epidemic control messages.

Volunteers also join efforts with community health workers on Case Area Targeted Interventions (CATI) distributing chlorine and Certeza for water treatment in communities and engaging communities for community feedback on Cholera. Distribution of Cholera supplies at Caia Hospital in Sofala province. The supplies include Chlorine, buckets, masks, gloves and soap to support Cholera Treatment Centres from the supported catchment areas. Protective Equipment and disinfection supplies were also provided to the trained CVM volunteers to support them on their work including household visits, community awareness meetings and supporting households with CATI.

Complementry support in Tete Proince through an ECHO funded project provided health items(supplies and ORP) and training in Tete province for readiness. response itself, with volunteer activities and referrals in Tete were covered under this DREF.

Water, Sanitation And Hygiene

Budget: CHF 102,261
Targeted Persons: 45,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# emergency latrines built	320	122

# HH reached with water purifiers	1,400	3,330
Number of People reached with emergency Sanitation facilities	16,000	2,900

Progress Towards Outcome

Distributions of WASH NFIs
CVM supported 3 different rounds of WASH NFI distributions. The first was at the start of the emergency within accommodation centers in Maputo City and Maputo Province to 2,794HH (approximately reaching 13,970 people) with 2,794 buckets, 3,062 washing powders, 8,663 soaps, 4,426 sanitation pad pads, 1,846 jerrycans, and 10,184 toothbrushes and 1,504 toothpastes.

The second distribution of WASH NFIs was included within the relief distributions (see shelter section above) with the DREF contributing to reaching 2,000 HHs with Hygiene kit including dignity items and water purifiers.

The third distribution of WASH NFIs, was done in Sofala province where communities were in need but had not been in accommodation centers (1,330 HHs). The DREF supported with water purifiers, washing powder, soaps, plates and cups, and lightweight blankets (also part of PGI NFIs under DREF). Due to the additional distribution in the third round that included Certeza, the total number of households that received water treatment supplies cumulatively increased to 3,330 households (after adding the initial 2,000 households) reached in the second distribution.

Distributions were done by CVM in coordination with local authority. During the distribution the volunteers conducted the CEA sessions, highlighting that the items were provided free of charge, and explained the selection criteria based on the vulnerability, while explanation on how to use chlorine (Certeza). Furthermore, 56 volunteers received WASH-focused training, including WASH in emergencies and protection, gender, and inclusion (PGI) in WASH activities, to strengthen local capacity for hygiene promotion and emergency response. These actions contributed to improving access to water and sanitation infrastructure and ensured that affected communities received targeted emergency WASH support.

Emergency WASH Services:
In the area of sanitation, emergency interventions were the focus at the start of the operation with the construction of additional gender-segregated latrines in selected accommodation centres, alongside hygiene promotion and health awareness activities conducted during WASH NFI distributions. While accommodation centers were open, 42 latrines were constructed, providing access to improved sanitation services for approximately 2,100 people. Safe decommissioning also took place to maintain environmental health standards when accommodation centers closed. Following the preliminary WASH assessment conducted in four accommodation centers in Gaza Province, which were later consolidated into merged into one, the Mozambique Red Cross implemented WASH interventions in Anexa and Artes Officios accommodation center, and Mandjakaza Gaza Province, to improve water access, sanitation, and hygiene. Improvements included drainage of stagnant water near washing areas, enhancement of kitchen hygiene conditions, and installation of additional water points closer to key service areas. Cumulatively, 10 latrines were set up in Mandjakaze and 32 in Anexa and Artes Officios accommodation centers, reaching 2,100 people. Solar lamps were also installed to provide lighting for male and female latrine and washing blocks.

Sanitation:
As floodwaters progressively receded and affected populations began returning to their communities of origin. As a result, the WASH strategy evolved from predominantly communal emergency services in accommodation centres towards more household-level and family-shared sanitation approaches in flood-affected communities and potential resettlement sites. A pilot sanitation activity was completed in Chókwè District, Gaza Province, through the construction of 80 household pit latrines using participatory approaches involving community members and on-the-job trained CVM volunteers. The successful completion of the pilot has led to the launch of additional sanitation contract, for the construction of another 120 in Gaza province. These latrines are all accompanied by handwashing stations, and hygiene promotion sessions by CVM volunteers. This new contract is still being implemented. For these, CVM volunteers and staff work closely with Government entities, communities, and the contracted services to ensure good quality and transparent beneficiary selection.

Protection, Gender And Inclusion

Budget: CHF 28,398
Targeted Persons: 45,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# volunteers trained in PGI & PSEA	180	91
# people receiving safe referrals	-	0
# of accommodaton centers equipped to enhance protection and safety	10	4

Progress Towards Outcome

Mozambique Red Cross, with IFRC support integrated a Protection, Gender, and Inclusion (PGI) approach across the flood response to ensure humanitarian assistance is inclusive, safe, and accountable. Volunteers conducted rapid needs assessments, supported beneficiary registration and selection based on vulnerability, and distributed relief items in accommodation centers.

With support from IFRC, the National Society also conducted rapid WASH/PGI assessments in accommodation centres that remain operational, including four centres in Xai-Xai and one in Bobole, and provided recommendations for quick interventions to improve dignity and safety conditions. In Anexa Accommodation Centre in Xai-Xai, which hosted 99 households, targeted WASH and dignity interventions were implemented, including the installation of solar lighting for male and female latrines, clothing lines for drying clothes, and the provision of cups and plates for the community kitchen, contributing to improved safety, hygiene, and dignity. Additional distributions in support of dignity and hygiene were done in Sofala reaching 1,330 HHs with washing power, sanitary pads, soaps, and other dignity items supported by the DREF (see wash section above).

The National Society also supported the installation of 10 tents and the cleaning of tents between rainfall events to help maintain safe and dignified living conditions in the centres. Accommodation centers were often in flux, many closing and re-opening based on rainfall in the first few months of the operation, making it only possible to continue these activities while accommodation centers remained open.

Across the operation, PGI and CEA trainings have been imbedded. Before the first relief distributions, 51 volunteers (21 in Macia, and 30 in Chókwé) and 25 CVM volunteers (20 female and 5 male) from the Maputo City and Maputo Province branches have received refresher training on Red Cross principles, Code of Conduct, basic communication techniques, Community Engagement and Accountability (CEA), PGI, training on the protection of children, women, older persons, and persons with disabilities, as well as the Code of Conduct. Additionally, roles and responsibilities, and the knowledge required to conduct assessments and work effectively with communities was also covered.

Shifting to the recovery phase of the intervention, an additional two day refresher training sessions were held attended by 15 CVM volunteers and conducted by 2 CVM staff alongside Government entities from Social Security and Protection. PGI DAPS (Dignity, Access, Participation and Safety) principles were presented and discussed as key elements to be considered across all Red Cross interventions. At the end of the training sessions, participating volunteers signed the Code of Conduct.

IFRC staff and surge received PGI and safeguarding briefings. These measures contributed to ensuring that affected communities receive safe, accountable, and dignity-centred assistance.

Through IFRC regional support, NS is also reviewing their PSEA policies and referral systems.

Risk Reduction, Climate Adaptation And Recovery

Budget: CHF 67,735
Targeted Persons: 45,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# people rescued	6,300	4,897
# NS staff deployd as part of DRT	15	12

Progress Towards Outcome

At the start of the emergency, the Mozambique Red Cross supported the evacuation of individuals affected by the floods. The National Society assisted with aquatic search and rescue operations, using boats and ambulances to provide life-saving support and facilitate the relocation of people at risk to safer areas. These activities carried out in the districts of Boane, Manhiça, and Marracuene in Maputo Province, where 4,897 people have been rescued and relocated to safe areas to date. CVM also lent boats to INGD to support rescue efforts in Gaza, Inahambane, and Sofala.

At the start of the emergency the CVM deployed 12 trained disaster response teams to support evacuations in coordination with local disaster risk management committees (CLGRDs), facilitating the safe relocation of populations from flood-prone areas.

Recovery is being considered across all interventions. An assessment has been done, only pending the final PGI considerations from the consultant work underway (see PGI section). Findings to date include, for example, thinking about longer term risk reduction and resilient recovery has informed the decisions in the WASH sector on modality of implementation of latrines as well as the types of boreholes that the WSR ERU is considering to rehabilitate in ways that new flooding will not cause recurring impacts. Under PGI and CEA, feedback systems are being established not just for this operation, but that will stay with the NS for further use. Under shelter, principles of building back better are integrated in the distribution of shelter tool kits in order to minimize future impacts, as well as advocacy with Government on where accommodation centers can be set-up in the future in ways that do not disrupt housing. A written recovery assessment is being finalized.

Community Engagement And Accountability

Budget: CHF 20,370
Targeted Persons: 45,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of opportunity for community participation in managing and guiding the operation (e.g. # of community meetings, focus group discussions, town hall meetings, etc)	14	9
% of operational complaints and feedback received and responded to	80	100
Number of and type of methods established to share information with communities about what is happening in the operation, including selection criteria	3	5

Progress Towards Outcome

The Mozambique Red Cross, through its CEA approach, is ensuring that affected communities are well-informed, consulted, and actively engaged in shaping the response. CEA activities have been implemented in accommodation centers, where volunteers provided orientation sessions on available services, and distribution processes. Prior to each distribution, staff and volunteers conducted brief orientation sessions to explain the distribution process and beneficiary selection criteria. These sessions also informed beneficiaries that assistance was provided free of charge and highlighted the availability of feedback and complaints mechanisms. These sessions aimed to ensure that residents, including women, older persons, and persons with disabilities, understand their rights, can access support safely, and are able to provide feedback on the assistance received.

Within the relief response, CEA has been an essential tool to support successful NFI distributions through community meetings that helped explain the intervention and discuss and validate assessment results with community members.

A pilot CEA feedback mechanism has been established in Maputo City and Maputo Province through SMS and WhatsApp messages received via dedicated telephone lines, one for each location. The phone numbers were shared with communities during distributions through flyers. This initiative contributed to strengthening structured two-way communication mechanisms, encouraging communities to share non-sensitive feedback either directly with volunteers during activities or via SMS/WhatsApp to dedicated CVM phone lines. The mechanism was designed to be another way of providing community feedback linked to the RC response and a way to provide accountable responses in a timely manner. These local numbers were not intended to replace or duplicate the Green Line, but rather to complement existing communication channels between communities and CVM. Feedback received through the mechanism is recorded in a simple Kobo-based database. By the end of the reporting period, a total of 107 messages were shared by beneficiaries through the lines and all complaints were addressed. The messages were shared by beneficiaries during distribution of NFIs in Maputo Province in the communities of Felipe Samuel Magaia and Condzuene in Xinavane district and Maputo City.

During the implementation of WASH activities to strengthen WASH infrastructure activities in accommodation centers were planned in close coordination with the community to ensure they meet real needs and priorities. Community members and leaders were consulted regularly, and their feedback is used to adapt and improve services, making support more relevant, effective, and respectful of local perspectives. Some examples are the distance for water points from the food preparation that exceeded the maximum distance according to the SPHERE standard, also location of latrines to avoid that female beneficiary avoiding using the latrines at night. Improving waste management because of the odor and mosquito problem that was raised by the community. Communities were also inherently involved in the latrine construction through a participatory process to improve ownership.

During health activities, CEA approaches were also integrated through sessions with focus groups and with Red Cross volunteers from affected communities, enabling community perspectives and feedback to inform the response.

PDMs are also conducted, which collect feedback.

Methods used:
- Linha Verde
- CEA pilot phone numbers/Kobo
- PDM
- Focus groups
- Community participatory approaches (wash committees, latrine construction)

Secretariat Services

Budget: CHF 367,218
Targeted Persons: 7
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# surge profiles deployed	8	5

# monitoring visits	6	3

Progress Towards Outcome

The IFRC is facilitating a coordinated Federation-wide response in close collaboration with the Mozambique Red Cross (CVM), with the active engagement of the Maputo Country Cluster Delegation and the IFRC Africa Regional Office. Through this structure, the IFRC is providing strategic, technical, and operational support to the National Society across key areas including communications, resource mobilization, logistics, finance, PMER, security, and National Society Development (NSD), ensuring an effective and well-coordinated response to the floods.

To strengthen the implementation of the response in priority technical sectors, the IFRC has mobilized techincal support staff and surge capacities to provide targeted technical support to the Mozambique Red Cross. These deployments aim to enhance operational coordination, reinforce sectoral expertise, and support the National Society in the effective delivery of humanitarian assistance. All requested surge personnel, staff on loan (SoL), and technical support staff have been deployed in-country.

Technical support:
- Security Officer: deployed to support security assessments and support throughout operation
- Regional Operations Coordinator: supporting the overall coordination of the response.
- Strategic Engagement and Partnerships Officer: deployed to Maputo to strengthen external engagement and support resource mobilization efforts for the operation.
- Shelter Cluster Coordinator: actively engaging with UN partners and cluster members and providing regular updates on stock mapping and distribution plans to ensure that essential household items and related assistance are well coordinated and duplication is avoided. While originally meant to deploy as a Surge, the selected candidate is on a consultant contract and the operation has decided to maintain that deployment modality.
- Procurement officer: supporting procurement processes and fleet management. Originally meant to deploy as surge, this position was filled outside of the surge system.
- PMER officer: originally meant to deploy as surge, this position was filled outside of the surge system.

Surge/SoL (5/8, as 3 positions were filled outside of surge system as per information above):
- WASH Coordinator: supporting the National Society in the assessment of WASH needs and the planning of appropriate response interventions.
- Public Health in Emergencies Coordinator: supporting the coordination and implementation of health activities, including epidemic preparedness and community health promotion.
- Finance Officer: providing financial management support to ensure compliance, accurate reporting, and the efficient use of resources.
- Supply Chain Coordinator: supporting procurement, pipeline management, and logistics coordination to ensure the timely delivery of relief items.
- Field Coordinator: supporting operations management in Gaza province.

Under the EA additional profiles were deployed:
- WSR ERU TL, WSR FAD: to conduct initial assessment for water supply rehabilitation.
- Cash and Voucher Assistance Coordinator: supporting voucher distributions.
- Relief Coordinator: supporting relief distributions.

Security:
- Completed the initial in-country security assessment and developed a Mission Field report, Flood Safety and Security guidance. MSR Security welcome brief for Gaza and pre-deployment checklist to facilitate safe deployment to the affected areas.
- Security training was conducted for 37 volunteers in Gaza province.
- Continuous monitoring of hydrological and weather developments, evolving flood conditions and sharing early alerts to support decision-making.
- Access risk analysis along the Xai-Xai Chokwe – Guija axis including support real-time situation awareness and movement guidance.
- In response to a request for further training by NS, developed a short instructional video that will be rolled out to branches together with brochure providing guidance on flood safety for volunteers.

Logistics:
- Conducted market verification and sourcing analysis with IFRC Hubs and regional suppliers (Dubai, Las Palmas, Turkey and Kenya) to identify viable procurement and replenishment options for priority relief items.
- Facilitated customs clearance and tax exemption processes for incoming humanitarian cargo.
- Developed and operationalized supply pipeline report and procurement tracking tool to monitor incoming consignments, shipment status and procurement, progress across DREF, Emergency Appeal and bilateral contributions, supporting operational planning and

decision-making.

- Coordinated mobilization of four VRP vehicles through the IFRC Global Fleet Unit to reinforce transport capacity for field operations and relief distributions activities.
- Initiated discussions with the National Society on potential National Society Logistics Capacity Strengthening measures, including warehouse management improvements, to support the efficiency and sustainability of logistics operations during the response.
- Coordinated engagement with fuel suppliers, mobile money transfer services and logistics service providers to maintain uninterrupted logistics support for field operations.

Communications and Resource Mobilization:

- Ensured timely, accurate and Government-aligned messaging across IFRC platforms.
- Feature on the UN Press Briefing and IFRC Weekly News podcast, amplifying situational awareness and the Mozambique Red Cross response to a global audience.
- Key Messages were developed to guide media, social media and partner communications.
- Curated a centralized photo and video repository documenting flood impacts and Mozambique Red Cross actions, supporting global, regional and country-level visibility.
- Amplified Mozambique Red Cross actions through coordinated posts across IFRC Africa, IFRC global social media channels and senior leadership accounts, highlighting Government-led response efforts and community-level action.
- IFRC Facebook Post - IFRC Instagram Post - IFRC Africa X Post - IFRC SG X Post
- Conducted a field visit to Bobole, approximately 40 km from Maputo City, one of the areas heavily affected by the floods. Content was captured at the accommodation centre hosting around 800 displaced people, highlighting urgent needs and ongoing volunteer support. Materials from this field visit have been disseminated across IFRC channels.

IFRC Global X Page - Bobole Video - IFRC Global X Page EA CTA Post - IFRC SG EA Post - IFRC Africa X Page - HoD Video in Bobole - IFRC Africa X Page - Chiaquelane, Gaza Post

National Society Strengthening

Budget: CHF 174,120
Targeted Persons: 200
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
# volunteers activated	180	180
# monitoring vistits	6	4

Progress Towards Outcome

To support the ongoing operation, under this DREF the National Society has activated 180 volunteers across the four targeted provinces (out of 550 volutneers activated under the broader EA). These volunteers are contributing to WASH, health, relief distributions, and other emergency response activities.

Volunteers are at the core of the Mozambique Red Cross response, and their safety, capacity, and well-being remain a priority throughout the operation. Volunteers were equipped with PPE and visibility materials. They were also given safety and security training and PGI/CEA trainings/breifings. The NS already has volunteers insured.

The NS continued provincial level coordination with Government entities and with Cluster systems throughout the rainy season. From August 10-14th, CVM supported the Government led lessoned learned event for the cyclone and floods 2025-2026 season. These 5 days of lessons learned workshops are essential to review the anticipatory action and response and plan for the upcoming flood and cyclone season.

CVM was engaged in donor visits as well as Resource Mobilization efforts. Donor breakfast meeting Mozambique Red Cross and IFRC

Maputo CCD co-hosted a diplomatic breakfast on February 23rd 2025, to present the Mozambique floods emergency appeal, and CVM's response to the diplomatic missions. In attendance were representatives from the Embassy of Switzerland, European Union, ICRC, Embassy of Ireland, Australian Consulate, Canadian High Commission, and Embassy of Finland. Swedish RC, German RC, Spanish RC and Belgian RC Flanders were also present. Engagements from the meeting-initiated interest in further bilateral engagements with the diplomatic community in Maputo, to not only garner support for the emergency appeal, but also for long term partnerships. Contributions from some of the governments and partner national societies were also recognized. CVM efforts have been covered on the national news in Mozambique.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

180 volunters and 20 staff will be involved in this DREF. The full appeal will engage at a minimum 420 volutneers and 50 staff.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

Volutneers are from the affected or nighbouring communities and therefore best placed to support given the communities trust them.

Will surge personnel be deployed? Please provide the role profile needed.

- Field Coordinator, to be based in most affected provinces. Coordinate areas of intervention with NS and Gov
    o Finance Officer (essential for timely reporting and accountability)
    o PMER Officer (for ITT set up and timely reporting)
    o Procurement Officer (to support with IFRC direct procurements of NFIs and vendor contracts)
    o CVA officer (under appeal) to support strategy, market assessment, and beneficiary selection for EA interventions under livelihoods
    - WASH Coordinator
    - PhiE Coordinator
    - Shelter cluster Coordinator. Co-Lead Shelter cluster in Mozambique with IOM, for coordinated inter agency response.
- supply chain officer to support with NS logistics/movement of stock, arrival and movement of in-kind donation and procurements

Potential ERUs of WASH are being considered under the EA.

If there is procurement, will it be done by National Society or IFRC?

IFRC will do all of the procurment. Some will be local and some will be international. For distribution. Due to global supply chain delays in the first half of 2026, the operation advanced stock from other projects/CVM in line with the oeprational strategy of the DREF. This stock will be replenished.

How will this operation be monitored?

This mechanism is comprised of financial, narrative, and indicator tracking tools, which are completed against an agreed set of indicators, and of timelines to inform standard and donor reports. Benchmarking and lessons learned from previous Federation-wide operations

will be considered to ensure that all reporting tools are appropriate to the needs of stakeholders. This process will be led by the CVM with support from the IFRC.

Strong CEA, PGI, PSEA and safeguarding measures will be applied throughout the operation, with regular monitoring and learning.

The CVM will be responsible for the day-to-day monitoring of the operation, primarily at the branch level. Using contextualized tools and taking safety and security measures into consideration, the CVM/IFRC joint monitoring teams will visit operation sites on a regular basis to measure the progress of the implementation and provide support to achieve the proposed actions in the intervention areas.

Please briefly explain the National Societies communication strategy for this operation

CVM efforts have been covered on the national news in Mozambique, and NS, PNSs and IFRC will continue doing interviews to raise visibility,

IFRC speaks with Reuters on current situation: https://www.reuters.com/sustainability/climate-energy/mozambique-president-cancels-davos-trip-due-severe-floods-2026-01-19/

Ensured timely, accurate and Government-aligned messaging across IFRC platforms and international media channels.

Feature on IFRC Weekly News podcast, amplifying situational awareness and the Mozambique Red Cross response to a global audience

Participation at the UN Press Briefing: IFRC HoD directly briefing international media and humanitarian stakeholders on the evolving situation and response.

Amplified Mozambique Red Cross actions through coordinated posts across IFRC Africa, IFRC global social media channels and senior leadership accounts, highlighting Government-led response efforts and community-level action.
IFRC Facebook Post
IFRC Instagram Post
IFRC Africa X Post
IFRC SG X Post

Developed a Key Messages document to guide media, social and partner communications. Will be regularly updated.

Curated a centralised photo and video repository documenting flood impacts and Mozambique Red Cross actions, supporting global, regional and country-level visibility.

Regional Communications Senior Officer for IFRC is based in Maputo and will support with communications.

Contact Information

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

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Click here for the reference