



UNITED NATIONS

Mozambique Humanitarian Country Team

Situation REPORT N° 7 – MOZAMBIQUE FLOODS - 13 February 2008

HIGHLIGHTS

- Approximately 21,488 households (102,213 people) have moved to resettlement and transit centres, according to the Government's National Disaster Management Institute (INGC).
- The first spillway of the Kariba Dam was opened on 11 February discharging a total of 750m³/s, half of what was expected. Although this will contribute to more water into Cahora Bassa Dam, water authorities are confident that if there is not a major increase in the influx of water, the dam can maintain the current discharge at approximately 4,000m³/s.
- The number of deaths due to the floods has increased to a total of 12 people.
- Government is meeting with the Humanitarian Community in the country to review the contingency plan.

The information contained in this report has been gathered by the Office of Resident Coordinator on behalf of the Mozambican Humanitarian Country Team from the Clusters and other sources including the Government of Mozambique.

Situation Overview

Situation Overview

INGC reports that as of 11 February, approximately 21,488 households (102,213 people) have moved to resettlement centres (CR) as a result of the 2008 floods.

The hydrometric levels of the basins of the central region of Mozambique, Zambezi and Save still remain above flood alert level, registering oscillations with a tendency to stabilize; the basins of Púngue, Búzi and Licungo are registering oscillations with a tendency to increase its water level due to moderate rainfall in the interior areas of the Provinces of Zambezia and Manica.

In the northern region, the hydrometric levels of Messalo, Montepuez and Lugenda continue to register significant increase due to intense and persistent rainfall. This is causing localized flooding in Chai (District of Macomia), Miangalewa (District of Muidumbe), Nairoto (District of Montepuez) and Mandimba.

The Cahora Bassa Dam is discharging at 4,000 cubic meters per second, although, on 11 February, the Zambezi River Authorities opened one of Kariba Dams' spill-gates discharging 750 m³/s. Mozambique river and dam authorities are monitoring the rise of water levels along the Zambezi River as a precautionary measure as Zambezi River Authorities may discharge again another amount of water without notification. The Government is currently meeting with the Humanitarian Community to review the original contingency plan taking into account the eventuality that Kariba dam is compelled to open the other floodgates.

The number of deaths due to the floods has increased to a total of 12 people; in Marromeu on 09 February a man died when trying to cross Phambane River.

Mutarara District health authorities have notified a rapid increase in the number of people affected by acute watery diarrhoea. From 6 to 12 February, 255 people have been admitted in cholera treatment centers, out of those 8 have died. Health authorities are analyzing these occurrences to establish if this could be a cholera outbreak.

In most flood-affected areas road access continues to be a major constraint, hampering assistance. For instance, in Cabo Delgado Province, (Quissanga District) the road to Pemba/Metuge – Quissanga is cut off and 5 km from Montepuêz River, Mahate-Quissanga road is also cut off. According to CENOE approximately 300 ha of arable land have been destroyed and more than 2,500 persons have been affected. Due to the forecast of more rain in the northern part of the country, the CENOE is recommending the population to evacuate the areas at risk in Mandimba, Majune, Gonda, Chai and Mianguelwa administrative posts in Cabo Delgado province.

Humanitarian Response

On the basis of consultations with the Government and with the clusters, the Humanitarian Country Team has identified the following priorities for the emergency response to the floods.

- **Preventing disease outbreaks** and ensuring capacity to respond to health emergencies (Water, Sanitation, and Hygiene [WASH] and Health clusters);
- **Stabilising the food security and nutritional situation** (Food Security and Nutrition clusters);

- **Responding to the shelter, protection and education needs** of the most vulnerable bringing a sense of normalcy in their lives (Shelter, Protection and Education clusters);
- **Ensuring physical access** and the save humanitarian assistance delivery to the most vulnerable (Logistics and telecommunications cluster);
- Establish **foundations for longer-term recovery** (Early recovery).

Since the issuance of the last Situation Report, the following updates have been received:

Shelter Cluster

Cluster Lead: UN-HABITAT

Cluster members: IOM, UNDP, UNICEF, CVM, IFRC, CARITAS Moçambicana, KULIMA, GAA, CARE, WVI, OIKOS, CONCERN, Save the Children, OXFAM,

Shelter cluster during the past week distributed or repositioned the following shelter items:

- The Spanish Cooperation donated 500 tents to INGC which have reached GENOE Caia on 13 February;
- WVI distributed in Mutarara District 676 kitchen sets, 113 blankets and 530 plastic sheeting in 8 resettlement centres;
- CARE distributed 100 tents in Govuro District;
- CVM distributed 200 tents in Maganja da Costa District and is still in the process of mobilizing emergency shelter kits to cover 9,000 households.
- UNICEF, SC and OXFAM distributed different types of emergency shelter items.

It is estimated that up to date the emergency shelter response reached approximately 8,000 households. Currently available stocks in-country should cover the needs of more than 6,000 families. Procurement operations to fill the existing caseload gap (approx. 7,000 displaced households) are still on-going.

The main challenge faced at the moment concerns the logistics for distributing pre-positioned items, in particular those stored in CVM warehouse in Beira. Moreover, transport constraints are hampering the distribution of shelter materials and other NFIs in Caia.

With support from IFRC and CARE, an Information Manager has been recruited to assist the cluster lead in information sharing and logistics; this Officer will arrive in Caia on 13 February to support the UN-HABITAT team based in the field.

Nutrition Cluster

Cluster Lead: UNICEF

Cluster members: World Vision, World Relief, Save the Children Alliance, FHI, WFP, Samaritan's Purse, CARE, FAO, WHO, UNAIDS.

With support from the Nutrition Cluster, the District Health Authorities continue to conduct screening activities in the flood-affected areas of Mutarara, Caia, Mopeia and Govuro. A total of approximately 4,500 children under-five have been screened, of which approximately 500 children were found to be moderately malnourished, and subsequently received food supplements. A total of 49 children were reported as severely malnourished and were referred to district hospitals for therapeutic feeding.

The delivery of integrated health interventions including Vitamin A supplements, immunization and de-worming continues in the flood-affected areas. To date, approximately 3,000 children were de-wormed and received vitamin A supplementation. Inevitably, the acute watery diarrhea outbreak in Mutarara district has slowed down screening activities.

Regarding acute watery diarrhea outbreak, a negative impact on the overall nutrition situation of the general population can be expected if the situation worsens. While the cause of the outbreak is being investigated, district health authorities and cluster partners (UNICEF, Oxfam, and Mozambican Red Cross) have responded with provision of additional medical supplies and the setting-up of treatment facilities.

UNICEF, in partnership with the district authorities and other partners, are also scaling-up behavior change communication/social mobilization activities to accelerate the promotion of improved hygiene and sanitation.

Protection Cluster

Cluster Leads: Save the Children and UNICEF

Cluster members: Action Aid, Africare, Caritas, Concern, Mozambique Red Cross, Handicap, HelpAge International, International Relief and Development, Oxfam, Plan International, Samaritan's Purse, Terre des Hommes, UNAIDS, UNFPA, UNESCO, WFP, World Vision

Protection Cluster partners conducted training of local authorities on protection issues (including the specific needs of women, children, the elderly, people with disabilities) as well as the orientation of key personnel in resettlement camps in the establishment of Child Friendly Spaces. Training activities around protection issues is ongoing, with a focus on building capacities of humanitarian workers and community activists in the resettlement areas and transit centres. As additional police are assigned to affected areas, they will be incorporated into these training efforts.

Distribution of basic materials to the most vulnerable families and implementation of psycho-social support activities are now ongoing, although poor accessibility to critical sites continues to be a key challenge.

Close collaboration has been maintained between the protection cluster and the INCG as well as key line Ministries (Ministry of Women and Social Action and Ministry of Interior). Financial and planning support

has been provided to the Ministry of Women and Social Action (MMAS) and the Ministry of Interior (MINT) to carry out protection and monitoring activities. A field assessment was conducted by the MINT, with support from the Protection Cluster, to determine needs/gaps of police and arrange for additional deployment of police staff to affected areas.

Criteria for the delivery of a basic package of support was developed in cooperation with NGOs, government and UN agencies. Priority will be given to highly vulnerable households identified in resettlement areas, with a focus on child-headed households, households headed by older people, people who are chronically ill, people with disabilities as well as households headed by women and youths. Delivery of key additional supplies (basic kits, recreation materials, and clothing) has begun and will continue in the weeks to come.

Health Cluster

Cluster Lead: WHO

Cluster members: WHO, UNICEF, UNFPA, UNAIDS, Flanders Cooperation, Cruz Vermelha de Moçambique, Save the Children-US, Medicos do Mundo Portugal, World vision, IOM, IMC.

A Rapid Health Assessment carried out from 13-19 January 2008 highlighted a weak health coordination and epidemic disease surveillance, a lack of medicine to operate the health posts in some districts, a need for training and incentives for activists (case management and community based surveillance) as well as District Surveillance Officers. In addition the assessment highlights the need to continue and strengthen routine EPI (immunization) in resettlement centers and to provide clean delivery kits to pregnant women.

Data collection forms for epidemiological surveillance have been developed and distributed by MoH and WHO (Focal points in Caia) in Caia, Mutarara, Mopeia and Morumbala.

Joint UNICEF-WHO mission has been fielded in Chemba to visit resettlement areas after reopening of the road this week. Epidemiological situation is still under control, no outbreak has been reported so far. The main diseases are malaria and diarrhoea.

Mutarara District is reporting suspected cholera cases since 6 February 2008. As of 10 February a total of 245 cases and 5 deaths were reported. 87 cases were registered in Vila Nova de Fronteira, where the outbreak was confirmed since 27 December 2007. Other affected areas are Nhamayobwe (District Capital), Bawe, and Chare. Cases from resettlement camps are respectively 135 (Bawe), 38 (Ngungunhana) and 17 (Chare). So far the cases are not confirmed by laboratory, clinical evaluation show that those cases are compatible with cholera cases.

In Tete Province, WHO through MOH is deploying some communication equipment to strengthen the surveillance system: 10 bases radio VH and 10 radios

VHF. 12 districts will get communication equipment namely Angonia, Cahora Bassa, Changara, Chifunde, Macanga, Magoe, Maravia, Mutara, Zumbo, Tsangano, Chuita, and Moatze. An amount of US\$ 10,000 was allocated to Centro de Manutencao for the deployment, installation and training of districts IT personnel for the maintenance.

Cholera treatment kits (protective equipment & IV items) have been supplied by UNICEF to Tete, Zambezi, Manica, Gaza and Sofala provinces.

CVM is supporting health response with 32 health posts (8 in Zambazia; 3 in Tete; 4 in Manica; 17 in Sofala). 600 volunteers are involved in health care, sanitation and health promotion activities. The CVM has also distributed 108 basic first aid kits for the health posts.

Water, Sanitation and Hygiene Cluster

Cluster Lead: UNICEF

Cluster members: DNA Emergency Commission, DNA/DES, Oxfam International, SPIR, Caritas Mozambique, IRD, Mozambique Red Cross, ADRA, ADJM, World Vision (WV) and Christian Aid

The WASH cluster continues to conduct needs assessments as well as monitor WASH interventions, which are currently being carried out in flood-affected areas. With the growing number of people in the resettlement centres, the main focus has been on sanitation and hygiene components.

In light of the increased numbers of diarrhea cases in Mutarara district, the WASH and Health Clusters at field level are working closely to ensure that the strategy for acceleration of construction of latrines and hygiene promotion in all resettlement and transit centres is being developed and implemented immediately.

Emergency WASH supplies have been delivered to Mutarara, Doa, Mopeia, Marromeu, Chemba, Caia and Tambara for distribution in resettlement centres. In Mutarara, implemented activities have led to an increased capacity for water treatment, storage and distribution in Mutarara town and in Bawe and Mpane resettlement centres.

Technical assistance is being provided for effective management and operation of all water treatment plants installed in the resettlement and transit centres. In addition, the WASH cluster has so far provided access to safe sanitation to over 4,000 people through the construction of new latrines.

Education Cluster

Cluster Leads: Save the Children and UNICEF

Cluster members: Concern, Samaritan's Purse, Terre des Hommes, UNESCO, WFP, World Vision, Africare, and Oxfam.

A total of 66 school tents have been sent to distribution hubs for onward delivery to the districts and/or distributed to schools. In addition, out of a total of 78,349 learners kits distributed, half have already been delivered to schools in flood-affected areas. Additional 810 teachers' kits and 195 school kits have been distributed to ensure that quality of education is maintained. All Cluster partners supported by UNICEF have been collecting the supplies and ensuring timely delivery to designated areas.

The Education Cluster is currently exploring the possibility of assessing the gaps in current response and to ascertain the school infra-structure needs from the perspective of rehabilitation/reconstruction. The needs are expected to be assessed in consultation with the Ministry of Education and Culture (MEC) and the local education authorities. Plans are also afoot to see how schools can be used as a platform to deliver behaviour change communication activities related specifically to health, hygiene and HIV/AIDS.

A rapid assessment has been done in the affected areas of Maganja da Costa. The district education authorities have been mobilized to ensure school registration of a large number of displaced children who have not been integrated into the school as yet. Registration is currently taking place and learners' kits will be distributed to these children shortly.

Food Security Cluster

Cluster Leads: WFP and FAO

Cluster members: : World Relief, Africare, CEDES, Concern, Cafod, Fewsnat, Food for the Hungry, GAA, Kulima, LWF, Setsan, Samaritans Purse, World Vision, JAM, UNICEF, IRD, Trocaire, ADRM (Magoé Rural Development Association), Conselho Cristão de Moçambique, Bades, Save the Children, OIKOS.

Partners of the food security cluster are providing food and agricultural support to flood affected people living along the Zambezi, Púnguè, Buzi and Save Rivers in the central provinces. WFP is also responding to a request from INGC and provincial authorities for food assistance for people affected by the floods in Maganja da Costa District in Zambezia Province. Between 02-06 February, WFP and its cooperating partners distributed 225 mt of food to some 32,000 flood-affected beneficiaries in Caia and Mutarara districts (Sofala Province).

The initial VAC assessment indicates that 258,000 people will require immediate food assistance through March 2008, while at least 226,500 people are expected to require continued food assistance beyond this initial period. The level of needs beyond April will be determined through a full Government-led VAC assessment to be conducted in late March 2008, with results available mid-April. Additional operational assessments of flood affected areas are taking place. On 11 February INGC, the District Directorate of Agriculture, World Vision and WFP travelled to Inhangoma, one of the worst affected areas in Tete to review the number of people in need, immediate

requirements and adjust response plans. Similar assessments will take place this week to Mopeia and in other areas of Mutarara.

Road access continues to be problematic in most flood-affected localities hindering food distributions. Affected districts in Tete province include Chitete, Doa, Inhangoma, Mutarara, Chirre and Zumbo. Districts in Sofala include, Chemba and Marromeu.

FAO and the NGO partners in the agricultural sector, in coordination with the Ministry of Agriculture, are planning the sectoral response. When waters recede and the planting season begins, it will be crucial to ensure that affected populations will have the seeds and required inputs for the second agricultural season. Coordination discussions have been held to align the activities with the Ministry of Agriculture 2008 Flood Response Plan priorities and to avoid duplication.

Coordination

On February 11, the Southern African Office for the Coordination of Humanitarian Affairs (OCHA-ROSA) officially launched the Southern African Preparedness Response Plan for Floods 2008 seeking nearly US\$ 89 million to assist the governments of Malawi, Mozambique, Zambia and Zimbabwe to respond to floods that have destroyed homes, devastated crops and left some 449,000 people in immediate need of humanitarian assistance. The funds sought will be also used to prepare for possible worsening of the situation that could affect another 805,000 people as meteorologists predict continued rains in the region.

Mozambique is one of the most affected countries and the Humanitarian Community (HC) here requires US\$ 35 million to address urgent humanitarian and some recovery needs for the next six months of approximately 258,000 people affected by the floods and to increase preparedness for additional 429,000 people at risk.

The Preparedness Response Plan was launched in Johannesburg, South Africa and was attended by representatives of the affected countries, the HC, and development partners. Mozambique was represented by a Government's INGC Official, Ms. Beatriz Costa and the country's UN Resident Coordinator, Mr. Ndolamb Ngokwey.

Considering the CERF response and other contributions already received, the unmet requirements as of 9th February stand at US\$ 27 million. Taking the evolving floods situation into account, the Mozambique response plan and related requirements will be updated regularly.

The HC is supporting the government led relief which provides vital food, water and sanitation supplies, shelter, family kits, medicines and education materials. The funds will be used to support these efforts.

Mapping of the Partners Intervention in the Flood Affected Areas – Who/Does/What/Where

Flood Affected Areas Logistic and Telecommunications WFP, Support to Coordination UN OCHA, HIV/AIDS Coordination UNAIDS

Province	District	Food Security	Nutrition	Education	Health	Protection	Shelter	WASH
Zambesia	Nicoadala		DDS		CVM		CVM	
	Mopeia	WFP, CCM, Save the Children, CVM	DDS, SC Alliance, UNICEF	Save the Children, SDEJT	Save the Children, CVM, UNICEF	Save the children, DDMAS	Save the Children, CVM, CARITAS	CVM, UNICEF, DPOPH
	Morrumbala	WFP, OIKOS, CAFOD, CARITAS	DDS, SC Alliance	Save the Children, SDEJT, CAFOD, CARITAS	Save the Children, IMC, CVM	Save the Children, DDMAS	Oikos, GVC, CARITAS	IRD, CAFOD, CARITAS
	Chinde	WFP, GAA	DDS, SC Alliance	Concern, SDEJT		Concern	GAA, Concern	IRD
Sofala	Caia	WFP, CEDES, CAFOD, CARITAS	DDS, World Relief, UNICEF	UNICEF, SDEJT, CAFOD, CARITAS	WHO UNICEF, CVM	UNFPA, UNICEF, DPMAS, Save the Children	UNICEF, CARITAS, CARE, CVM	CVM, CEDES, UNICEF, DPOPH, CAFOD, CARITAS
	Marromeu	WFP, CCM	DDS, Food for the Hungry	UNICEF, SDEJT, OXFAM	CVM	UNICEF, DPMAS	UNICEF, CVM	OXFAM-Intermon
	Buzi	WFP, CCM, CVM	DDS	UNICEF, SDEJT,	CVM	UNICEF, DPMAS	CVM, ADJM, Kulima	ADJM
	Chemba	WFP, CCM	DDS, Food for the Hungry	UNICEF, SDEJT	CVM	UNICEF, DPMAS	CVM, UNICEF	Samaritan's Purse
	Dondo	WFP	DDS	UNICEF, SDEJT	CVM	UNICEF, DPMAS	CVM, Kulima	UNICEF, DPOPH, CVM
	Nhamatanda	WFP, CVM	DDS	UNICEF, SDEJT	CVM	UNICEF, DPMAS	CVM	UNICEF, DPOPH, CVM
	Machanga	WFP, Bades, Trocaire, CVM	DDS	UNICEF, SDEJT	CVM	UNICEF, DPMAS	CVM	OXFAM UNICEF
Tete	Mutarara	WFP, World Vision, CAFOD, CARITAS, OIKOS, CVM	DDS, World Vision, UNICEF	UNICEF, World Vision, SDEJT	IMC, World Vision, CVM, UNICEF	HelpAge, UNICEF, World Vision	World Vision, CAFOD, CARITAS	WVI, OXFAM-International, UNICEF, CAFOD, CARITAS
Manica	Tambarara	WFP, World Relief, CAFOD, CARITAS	DDS, World Relief	Concern, SDEJT, Save the Children	CVM	Concern, Africare, Save the Children	CAFOD, CARITAS, Concern, CVM	OXFAM, CARITAS, CAFOD, CARITAS
	Sussundenga		DDS		CVM	Save the Children	CVM	
Inhamitanga	Govuro	Samaritan's Purse, WFP, CCM, CCM	DDS, Samaritan's Purse	SDEJT, Samaritan's Purse	Save the Children, CVM	Samaritan's Purse	CARE, CVM, Kulima	ADRA, OXFAM-Intermon, Samaritan's Purse

For more information, please contact:

- **Ndolamb Ngokwey**, UN Resident Coordinator, Tel: +258 21 485158/59, ndolamb.ngokwey@undp.org
- **Giovanni Bosco**, OCHA Emergency Coordination Officer / RCO, Tel: +258 842 300 4668, bosco@un.org