

HIGHLIGHTS (10 Sep 2020)

- With the first COVID-19 case reported on 22 March, Mozambique has 4,557 confirmed cases in all the 11 provinces of the country and 27 deaths, as of 9 September.
- Humanitarian situation in Cabo Delgado has significantly deteriorated in the last eight months due to insecurity & violence. As a result, over 250,000 people have been displaced.
- Cholera and acute watery diarrhoea outbreaks are exacerbating the crisis in Cabo Delgado where 25 health facilities are closed and 596 health workers fled due to insecurity.
- President Nyusi has declared a Situation of Public Calamity, with a red alert, the maximum level of warning decreed in the event of an imminent large-scale threat.
- Humanitarian response is currently ongoing through the Flash Appeal for COVID-19 and the Cabo Delgado Rapid Response Plan which are at 19 and 58 per cent respectively funded.



A woman washes her hands at shelter distribution for displaced families in Metuge district in Cabo Delgado. To prevent a possible spread of COVID-19, the distribution is carried out in a small group size, keeping social distancing and including handwashing facilities. Photo: IOM / Wolfe Murray

KEY FIGURES

7.9M

people in need (COVID-19 Flash Appeal)

712K

people in need in Cabo Delgado

2.96M

people targeted (COVID-19 Flash Appeal)

354K

people targeted in Cabo Delgado

FUNDING

\$68.1M

Required (COVID-19 Flash Appeal)

\$35.4M

Required (Cabo Delgado Plan)

\$13.2M

Received (COVID-19 Flash Appeal)

\$20.7M

Received (Cabo Delgado Plan)

CONTACTS

Sergio Dinoi

Head of Humanitarian Advisory Team, Mozambique
dinoi@un.org

Saviano Abreu

OCHA Public Information Officer
deabreuisidoro@un.org

BACKGROUND (10 Sep 2020)

COVID-19 outbreak compounding existing needs

The first case of COVID-19 was declared in Mozambique on 22 March 2020. As of 9 September, the country had 4,557 confirmed cases and 27 deaths. The outbreak has now reached all the 11 provinces of the country, with Maputo province and Maputo town, Cabo Delgado and Nampula being the hardest-hit. Mozambique's President, Filipe Nyusi, declared a first State of Emergency from 1 April to 31 July, announcing a number of measures to contain the spread of COVID-19. On 5 August, the Government declared a second State of Emergency from 8 August to 6 September. The second state of emergency also enabled the continued enforcement of restrictive measures to prevent and control the pandemic including mandatory wearing of face masks in public spaces, social distancing measures, and limits on social gatherings and recreational activities. As of 7 September, President Nyusi declared a situation of public calamity for an indefinite period of time, in the framework of the new disaster management law. The declaration was accompanied by a red alert, the maximum level of warning decreed in the event of an imminent large-scale threat. In this period, all the preventive measures against COVID-19 declared during the state of emergency will remain in force while the Government is now planning to reopen a number of services and economic sectors that were closed down during the state of emergency.

COVID-19 arrived in Mozambique at a time when humanitarian needs were already rising due to consecutive climatic shocks in multiple parts of the country and growing violence and insecurity in Cabo Delgado. A year and a half on from Cyclone Idai and Kenneth, over 100,000 displaced people are still living in 76 temporary sites across six provinces in the central and northern regions of the country. People living in confinement, camps or camp like settings, IDPs in resettlement sites or within host communities, with limited access to services, are currently at heightened risk as their right to information, access to healthcare, hygiene, protection services and livelihoods are constrained.

Moreover, COVID-19 is currently escalating an already alarming food security situation and exhausting families' coping capacities. Households are likely to exhaust what little savings they had and resort to negative coping mechanisms, including increasing child marriage and transactional sex. Following the country-wide closure of schools on 23 March, 235,000 children are no longer accessing critical school feeding programmes and malnutrition is expected to worsen in the period ahead.

Prior to COVID-19, multiple disease outbreaks—including cholera and malaria—were already stretching Mozambique's weak health systems and 94 health centres were damaged during the cyclones. In Cabo Delgado, over 1,500 cumulative cases of cholera and 25 cumulative deaths have been reported since the beginning of the outbreak in January 2020 until the end of July. Critical services—such as sexual and reproductive health care, immunization activities and continuity of care for HIV, tuberculosis, malaria and cholera—are expected to be disrupted as resources shift to the COVID-19 response, potentially increasing maternal and infant deaths. Access to clean water and appropriate sanitation is a major challenge in the country, where 80 per cent of urban dwellers live in informal settlements.

COVID-19 and its secondary consequences are also increasing protection concerns, particularly for women and children. At the same time, across the country, as stressors rise, the risk of intimate partner and Gender-Based Violence (GBV) is increasing. Those with limited mobility, particularly the elderly and disabled, already at increased risk from COVID-19 and may face further barriers to access life-saving services due to movement restrictions.

In response to the arising humanitarian needs, on 4 June 2020, the Humanitarian Country Team, in collaboration with the National Institute of Disaster Management (INGC), launched a [Flash Appeal for COVID-19](#) aimed at providing urgent life-saving and life-supporting assistance to 2.96 million people until December 2020. The appeal supports the Government-led response to COVID-19, addressing both the immediate public health crisis and the secondary impacts of the pandemic on vulnerable Mozambicans. Out of US\$68 million appeal, \$16 million are destined for the health sector, and \$52 million for non-health sectors, especially food security & livelihoods and water, sanitation and hygiene. The COVID-19 Flash Appeal reflects an in-depth elaboration of the requirements for Mozambique that are outlined in the Global Humanitarian Response Plan for COVID-19.

BACKGROUND (10 Sep 2020)

Violence and displacements in Cabo Delgado

The humanitarian situation in Cabo Delgado province of Mozambique significantly deteriorated over the last eight months, due to consecutive climatic shocks, insecurity and violence, leading to wide displacements of people, disruption of livelihoods and lack of access to basic services. Over the past months, attacks have increased in scale and scope, with Mocimboa da Praia, Macomia and Quissanga districts hardest-hit. Displacement has risen rapidly as violence has escalated, with more than 250,000 people now estimated to be internally displaced in the province, according to the latest reports. Partners and local authorities are currently conducting assessments across the northern region (mainly Cabo Delgado, Nampula and Niassa districts), to identify new sites for relocation/resettlement of IDPs. Food insecurity has also increased due to violence and disruption of livelihoods. The overlap of insecurity and climatic shocks with pre-existing vulnerabilities in Cabo Delgado—including poverty, marginalization and harmful social and gender norms—significantly heightened protection risks. Due to the escalation in violence, humanitarian access in Cabo Delgado widely reduced in 2020, and humanitarian organizations working in the province are currently facing significant challenges to reaching people in need. Recent attacks on district capitals in Mocimboa da Praia, Quissanga, Muidumbe and Macomia districts have forced many humanitarian actors to temporarily withdraw from vital hub locations into Pemba and Maputo, reducing their ability to assess and respond to rising needs. At the same time, road transport has proven challenging throughout the province as roads and infrastructure are in poor condition and remain susceptible to weather conditions. It is estimated that 350,000 people are critically isolated due to physical access constraints in Macomia, Meluco and Quissanga districts, while 550,000 people are moderately isolated in Mocimboa da Praia, Mueda, Muidumbe, Nangade and Palma. On 4 June 2020, the Humanitarian Country Team in collaboration with the National Institute of Disaster Management (INGC) launched a [Rapid Response for Cabo Delgado](#) aimed at scale-up urgent life-saving, life-supporting assistance and protection to 354,000 people in the period May-December 2020. The total required funding for the plan is US\$ 35.5 million. A total of \$7 million has already been mobilized through the Central Emergency Response Fund (CERF), allowing humanitarian partners to urgently kick-start operations in view of the rapidly deteriorating situation in the province.

CLUSTER STATUS (10 Sep 2020)



Camp Coordination and Camp Management

250K

IDPs in Cabo Delgado

95K

IDPs in Sofala, Manica, Tete & Zambezia

Needs

- Several water sources in Dombe are not functioning or have been broken because of the rains or excess use. This has caused water access issues in several resettlement sites. Water pumps are also broken in Magaro, Muwawa, Mussucosa and Manhamma II. In Chibue, there is no access to safe water sources for which persons travel 5 kilometres to the river and face the threat of crocodile attacks.
- Access to services Macocoe is limited because of fallen trees in the road which have not been cleared.
- Eighteen latrines in Mussocosa need repair as there were identified as partially damaged. In Dombe, several sites are facing shelter problems and requesting materials to build more sustainable solutions. These include 25 de Setembro, Minas Gerais, Chibue and Muwawa.

- In Kura, Ndeja and Metuchira the heavy rains affected the crops and fields for which drainage construction or repairs are needed .

→ Response

- In Dombe, IOM CCCM, the Director of Health and IOM health team established health committees composed of site leaders, site secretaries, CCCM activists, protection activities, community members, heads of the administrative post of Dombe, Chief Medical Officer of the Dombe Health Post and District Director of Health. Committees are in charge of disseminating information to other community members and identify persons who are chronically ill for referral.
- At 25 de Setembro site in Sofala Province, Save the Children is supporting a poultry and rabbit raising livelihoods project. Similar support is being provided at Mashiquiri Alto where FDC is building an animal and build enclosure and in Mandruzi where IOM CCCM is implementing a poultry raising project.
- In Manhamba II, a brick production initiative took place, however support is needed to transport the bricks into the resettlement site.
- In Metuchira, the agriculture committee produced more than three tons of sesame seeds and is coordinating to distribute them as part of a new agriculture project.
- In Bandua, Bandua 2, Chingamidje, Bejaga, Inhanjou, Estaquina and Maxemege families are cultivating several crops in nearby low zones. These initiatives are being supported by the 25 agriculture promoters that were trained by various stakeholders. In Bandua, 200 distribution cards for seeds were distributed, seeds were distributed in Mutua to 618 households, and in additional seeds in Savane.
- A saving group was established in Muwawa, including 25 persons who already saved 56,000 mats.
- We World-GVC began the training of 100 activists in Dombe to raise awareness in resettlement sites about various topics. Similarly, 202 activists were trained in Manica and Sofala raise awareness on the prevention of COVID-19 and to distribute hygiene materials to comply with the national hygiene protocols. Cruz Vermelha de Mozambique is also implementing awareness raising activities on hygiene in 22 communities in Dombe while 16 additional activists were trained by Save the Children and are implementing hygiene promotion activities in Sussudenga and Mossurize. The latter distributed hygiene kits in Mechisso, Matarara, Javera and Chiruca. Similar hygiene promotion activities have been implemented by JAM in Mashiquiri Alto.
- A total of 337 hygiene kits were distributed in 22 communities in Dombe while Jerricans will be distributed in the next month benefitting 20,000 people. 200 masks were distributed in Bandua while dignity kits were distributed in Grudja and Mashiquiri Alto.
- A total of 96 new water holes or pumps and 8 fountains were built in Dombe, Gondola, Sussudenga and Mossurize and Buzi. Additionally, 502 water wells and a water hole were built in Mashiquiri Alto.
- Latrine rehabilitation has taken place in resettlement sited in Dombe, as well as in Metuchira and Ndeja. These were affected by the rains.
- Water management committees were established in Bandua, Bandua 2, Chingamidji, Inhanjou, Maxemege, Estaquina and Mandruzi in order to properly supply and manage water sources. A small fee is charged to families in exchange for the service provided by the committee which is formed by community members.
- Soul Frater is building an orphanage in Mashiquiri Alto. In Manica and Sofala 124 roads were demarcated and 92 cleared, while 2,862 plots and 75 blocks were demarcated.

↔ Gaps

- Livelihood opportunities in Dombe are still limited as access to agriculture land is limited. Several best practices have taken place but are limited in their reach.
- Latrines in Dombe are scarce and have been affected by the heavy rains or usage. Rehabilitation has started by there are still many to be constructed.
- Persons living at Mina Gerais are facing food shortages as the last distribution took place in January and other sources are scarce
- The isolation centre to respond to COVID-19 in Dombe cannot operate safely since it does not have the following materials: buckets, trash cans with pedals, buckets to transport clothes, disinfection pumps, chlorine, alcohol, mortuary bags and garbage bags.
- Hand washing stations were built in Mashiquiri Alto 1, however, 50 per cent are not functions due to lack of water and soap. Water wells are also being used by the community despite their lack of reliability. Similarly, in Mashiquiri alto, 25 hand washing points do not have soap and are closed.
- Agriculture farms and areas in various sites at are communities of origin for which persons need to travel far for work, including 450 and 141 families in Machonjova and Nhabzi, respectively.
- In Chingamidge, 246 households have seen their crops affected by hippopotamus in the lowlands. Agriculture areas are mostly affected since they are near the river.

CLUSTER STATUS (10 Sep 2020)



Education

235K

children not receiving school feeding

107

schools destroyed in Cabo Delgado



Needs

- As schools are planning reopening waiting for the official confirmation of a date, reinforcement of hygiene materials and products within scope of COVID-19 are needed in Sofala and Cabo Delgado provinces.
- Acquisition of more posters, informative and educational pamphlets about new Coronavirus in schools and other support for school supplies for students in Sofala province.
- Government to prepare the places where the IDP's will be moved to, just to prepare the schools reopening, as many of them are allocated at schools in Metuge. In Manica, there is need to mobilize partners for the construction and rehabilitation of 200 resilient conventional classrooms. Construction of 100 TARP Tent Classrooms in a first phase in the districts of Sussundenga, Macate, Mossurize and Gondola;
- There is need for sheets, beams, nails and screws to cover classrooms built by communities in Manica province .

→ Response

- The Ministry of Education and Human Development (MINEDH) issued a circular on the preparations for the reopening with detailed guidelines to establish obligatory basic health, WASH and child protection conditions.

- In Sofala, the Provincial Directorate of Education received a hygiene kit from Plan International consisting of: 6 buckets of 50 litres each with tap, 12 buckets of 20 litres with tap, 15 bottles of “certeza” (water treatment product) and a soap box.
- Several activities regarding remote learning were conducted across Sofala province: Elaboration of support texts and exercise sheets, with support from partners and ADE fund, including syllabus taught until 23 March 2020; Recording and broadcasting of classes via Community Radio; Sensitization of Parents / Guardians in the survey of supporting texts and exercise sheets in Schools, ensuring safety measures and meetings involving school managers, the Council of Schools and Community Leaders within the scope of the disclosure of Circular No. 05 / GM / MINEDH / 001.1 /2020.
- In Manica, supervision of the fulfillment of teaching programs in the field of emergency was carried out in all districts through reports received from SDEJTs. The teaching of classes via radio channels was monitored by all students with Community radio stations.
- In coordination with Save The Children, 345 reading facilitators were trained in the communities in addition to the 120 mobile teachers to monitor the teaching and learning process of students in the districts of Manica, Machaze, Macossa and Tambara.
- Awareness raising of communities in the prevention of COVID-19 is underway through school councils in all districts. 80 masks were produced and distributed to teachers and staff at ESG Sagrada Coração das Matongas in the district of Gondola.
- In Beira, Buzi and Cheringoma districts, private sector and NGO engaged in reconstruction and rehabilitation of schools and other education facilities affected by Tropical Cyclone Idai: More than 40 classrooms were reconstructed or rehabilitated mostly in primary school, where in addition, five bathrooms or latrines and four administrative blocks were reconstructed, three elevated tank of tap water and a playing field.
- In Beira, 350 school desks were allocated, another 50 in Cheringoma where partners also supported in 100 zinc sheets.
- In Cabo Delgado, the Provincial Director of education visited IDP sites in Metuge. All clusters will jointly assess the local where IDPs will be reallocated after school reopening including data collection of children IDP in Metuge
- School material (plastic sheets, student kits, school kits-school in a box and chalk boards) donated by UNICEF have been sent for distribution in Mueda, Muidumbe, and Nangade. Plans are made to send to Macomia, M. Praia, Palma, Ibo, Meluco and Quissanga as well (probably by boat) .

↔ Gaps

CLUSTER STATUS (10 Sep 2020)



Food Security and Livelihoods

354K

people in need in Cabo Delgado

Needs

- Since 22 March, the outbreak of COVID-19, additional 2.5 million now totaling 4 million people are estimated to be food insecure across the country. This number is expected to increase further as the COVID-19 situation evolves while control measures including restrictions to basic services and market prevail.
- According to the recent Famine Early Warning Systems Network (FEWS NET), Crisis level of food insecurity (IPC Phase 3) persists in Inhambane and Gaza provinces, northern Maputo and southern Manica areas, where poor rural households are facing food gaps as a result of the third consecutive year of drought and resulting into poor production and higher food prices .
- In central Mozambique, Stressed level of food insecurity (IPC Phase 2) continue in provinces affected by cyclones and floods especially in Sofala, Manica and Tete provinces.
- In Cabo Delgado, over 354,000 people including IDPs are estimated to be severely food insecure (IPC Phase 3) and in need of urgent humanitarian food assistance. A rapid multi-sectoral assessment took place in mid-July, in light of the government's urgent decision to relocate internally displaced population (1,900 families) currently in Metuge District to the new accommodation site in Ngalane. The assessment found gaps related to access to basic services, such as: access to water, electricity, health, education and markets .

Response

- Food and Security Cluster (FSC) partners reached 196,000 food-insecure people with food assistance in June 2020.
- For livelihood assistance, 127,649 people were provided livelihood assistance between April to June 2020 and 45,000 people planned to July to December 2020 (FAO- 25,000, SCI-15,000 and IrisGlobal-5,000).

Gaps

- Food security needs in the southern parts of the country affected by drought (Gaza and Inhambane provinces) are not part of current response plans (COVID-19 Flash Appeal and Cabo Delgado Rapid Response Plan). In the above areas in particularly southern semiarid areas (Gaza, Maputo and Inhambane provinces) and the southern portions of Manica and Sofala provinces, poor rural households are facing food gaps driven by the third consecutive year of drought (IPC Phase 3).
- Limited funding to respond to diverse needs of different shocks affecting the country concurrently.

CLUSTER STATUS (10 Sep 2020)



Health

1,530

cholera cases in Cabo Delgado

4,557

COVID-19 cases (as of 9 Sep)

Needs

- Reconstruction of COVID-19 treatment centres throughout the country for better flow and patients' triage. Partners are requested to support the Ministry of Health (MISAU).
- Inter-cluster assessment in Metuge district identified shortage of mosquito nets. Only 6,000 available nets in stock for now which is not enough; more than 15,000 nets required for IDPs and communities not only in Metuge but also in other districts. Some people in the overcrowded households within the host community are forced to sleep outside the house facing risk of malaria.
- There is lot of loss to follow-up on patients on HIV, TB and non-communicable diseases programs as well as vaccination candidates who are among the IDPs due to disruption of the health system and lack of documentation making it difficult for continuity of care where they are being accommodated. Mapping of these patients is needed across Cabo Delgado province.
- Health indicators in Cabo Delgado are on a downward trend including immunization which started even before COVID-19 pandemic. Provincial health directorate (DPS) and the health cluster partners are holding discussions on strategies to improve the indicators.
- More teams of Mobile health Brigades (MHBs) and more health workers are required since most of the DPS staff are engaged in COVID19 response. MHBs which have been non-functional have been revived to offer integrated health package to the IDPs and host communities. However, they are only functioning in districts without security problems
- In Cabo Delgado, over 1,530 cumulative cases of cholera and 23 cumulative deaths were reported since outbreak in January 2020 up to August . As cholera cases are increasing, in Pemba, Ibo, Mocimboa da Praia, Quissanga, provincial authorities (DPS) and partners are discussing possibility of conducting oral cholera vaccine which was to be conducted in February - March but postponed due to insecurity.
- Quissanga, Palma and Macomia districts are still reporting acute watery diarrhoea (AWD) cases. All health facilities in Quissanga are closed due the insecurity and 596 health workers fled for safety
- In Mocimboa de Praia, Quissanga, Muidumbe and Ibo, over 109,000 IDPs and 190,000 host communities are without provision and access to primary health services after 25 health facilities were closed in these districts due to insecurity.
- Measles cases have been reported in six districts: Namuno, Montepuez, Ancuabe, Metuge, Mecufi and Pemba.
- According to an assessment conducted by Plan International in June, IDPs responded that essential medical supplies in the health facilities were inadequate which is a norm during emergencies. Medical supplies which includes vaccines and essential drugs for routine health services at the health facilities serving host communities have been depleted
- In Nampula, health cluster/group is not yet operational to serve 6,500 IDPs in the province. A GBV and SRH risk assessment and definition of the immediate interventions to meet the IDPs will be carried out by the Protection and SRH working group partners.
- Safe spaces are required for approximately 3,500 IDPs children in the host communities according to clusters partners in Nampula.
- Approximately 18 pregnant women, including five teenagers, are in urgent need pre-natal health services, according to the officer in charge of the Namialo health centre. The 5 pregnant teenagers are being followed-up on, in the local youth and adolescent health service (SAAJ).
- In Sofala, 120 health centres need IEC materials on COVID-19 prevention and triage protocols to be distributed among health personnel working in the isolation centres and triage units. Support is being given to SDSMAS in Beira, Dondo, Nhamatanda and Buzi districts

- Need to increase frequency of Mobile Health Brigades in Dondo and Nhamatanda Resettlement Sites to 12 per week in each District, and to 24 per week for Buzi Resettlement Sites.

→ Response

- In Cabo Delgado, a boat-ambulance will be handed over to Serviços Provinciais de Acção Social to support in the provision of health services including obstetric emergency and other specialized surgeries, in the districts affected by the cyclone Kenneth in Ibo, Quissanga and Macomia districts.
- An Epidemiological Sero survey on COVID-19 mission was held by the Instituto Nacional de Saúde in Pemba city.
- Mobile Brigades for provision of integrated health services (including SRH, PAV-immunization, Nutrition, Blood donation, Family Planning, Ante-Natal Care, Nutrition) to IDPs and host communities, was held by DPS with UNFPA support, in 4 districts of Balama, Chiúre, Montepuez and Namuno. In total 72 communities were covered.
- Serviços Provinciais de Acção Social (SPAS) distributed COVID-19 protection equipment and hygiene materials to Health units in 17 districts of the province
- In Balama, Montepuez, Ancuabe and Chiure, 199 change agents for Sexual and Reproductive Health & COVID-19 have been trained.
- Health cluster partners and DPS Sofala are coordinating support to the Mobile Health Brigades providing integrated services in the Resettlement Sites in Dondo, Nhamatanda and Buzi districts.
- DPS Sofala received six tents to serve as isolation units for COVID-19, especially for Maternal & Child Health. Two tents were installed at the Provincial Isolation centre located at Centro de Saúde 24 de Julho in Bairro Macuti, in Beira.
- An additional five Maternal & Child Health Nurses (Enfermeiras de SMI) will be deployed to Sofala for six months.

↔ Gaps

- In Sofala shortage of Maternal & Child Health Nurses in several rural Health units, and for complete staffing of Mobile Health Brigades as most of the health workers are engaged in COVID-19 response.
- SDSMAs (District Health & Social Welfare Authorities) lacks transport to ensure adequate supervision and follow up on the functioning of Health Centres and mobile brigades across Sofala province.
- Establishment of permanent health infra-structures in resettlement areas (three in Nhamatanda, three in Dondo, six in Buzi) for ensure continuity of quality and adequate services provision in Cabo Delgado Shortage of essential drugs and emergency medical kits to replenish the depleted supply in the overwhelmed health facilities serving the IDPS and host communities.
- More than 15,000 mosquito nets required to be distributed to the 300,000 IDPs and host communities in Cabo Delgado districts.
- Proper response strategy to AWD and cholera outbreak going on particularly in Quissanga, Muidumbe, Ibo and Mocimboa da Praia where there are no functional health facilities.
- More mobile health brigades required in Mueda, Najale, Macomia & Meluco where 13 health facilities are not functional.
- In Cabo Delgado, disease surveillance system is weak given that no weekly reporting is done from the 42 closed-down facilities in eight districts.
- Most of the districts in Sofala districts lack health partners as activities which were attached to the Humanitarian Response Plan which ended on 31 May 2020 have declined.

CLUSTER STATUS (10 Sep 2020)



Nutrition

67,500

children to require malnutrition treatment



Needs

- Near 5,000 children are affected with acute malnutrition among the people displaced and hosting communities in Cabo Delgado and surrounding areas.

→ Response

- IPC analysis on districts in Cabo Delgado and Tete finalized but still pending government to publish final report .
- Nutrition contingency stock fully refurbished with the exception of ReSoMal (rehydration for SAM children), Micro-nutrient Powders (supplementation for children under age 2).
- Nutrition response plan validated and approved by partners and government.

↔ Gaps

- CERF nutrition implementation has significant delays on implementation due to adaptations to the changing scenarios of the humanitarian situation in Cabo Delgado.
- Continuity of nutrition services at community level cannot be assured due to the lack of personal protective equipment for Community Health Workers (CHW's) including Elementary Polyvalent Agents (APEs) and volunteers .
- Continuity of nutrition services through health facilities and outreach activities (integrated mobile brigades) decreased significantly on April due to COVID 19 but had shown signs of recovery in the following months.

CLUSTER STATUS (10 Sep 2020)



Protection

469K

ppl. need protection serv. in Cabo Delgado

25k

IDPs need to be relocated in Metuge



Needs

- More than 250,000 persons are displaced by violence in Cabo Delgado with spill-over effect to Nampula and Niassa provinces. Protection to displaced people and host communities is needed to avoid recruitment of children into armed groups, kidnapping of women and girls and abuse of power by security personnel.
- There is a need of integrated emergency support (including WASH, Shelter, NFI, Protection and Health) and access to adequate services and infrastructure in new sites identified by the government in Metuge to relocate approximately 25,000 IDPs currently accommodated in schools.
- According to INGC, Nampula Province is currently hosting 9,180 individuals, most of them accommodated in transit centre in Namialo. Shelter, Food and NFI items support are the main priority needs identified through rapid assessments carried out by clusters partners in this district. IDPs also need support on Wash items and services.
- There are more than 95,000 IDPs in Central Mozambique to date and continued advocacy needed to ensure sustainable durable solutions for them. Main needs include, but not limited to lack of durable shelter, limited access to income generating activities. Centrality of protection must be ensured throughout the entire emergency response cycle, including the recovery phase of the response.
- Protection needs due to COVID-19 across the country are varied and the Protection Cluster is carrying out an analysis to better understand the impact on vulnerable populations.
- The negative impact, including secondary impacts of COVID-19, on vulnerable groups, including in urban and peri-urban areas among poor households are significant and the impact on income-generating activities and access of persons with specific needs to services are limited.
- There were reported cases of approximately two young girls that were sexually assaulted by security forces in Ibo Island, and 20 women and girls kidnapped and exposed to GBV while detained by armed factions in Mocimboa da Praia and Quissanga districts, that need to be rescued and provided with psycho-social and legal support, according to the District and Provincial attorney and the GBV response Integrated Mechanism.
- In order to provide the adequate integrated support to women and girls GBV survivors, the Secção de Atendimento a Família e Menores Víctimas de Violência identified the need of five tents and equipment to provide this service for the survivors in Metuge, Pemba, Chiúre and Mecufi.
- Forty social workers in eight districts (Ibo, Macomia, Quissanga, Pemba, Metuge, Montepuez, Chiúre, Mecufi) need support with telecommunication (cellphones) to ensure the continuity of GBV response services and regular reporting of cases to the other actors of the integrated GBV response mechanism (DPGCAS, Police, Health and IPAJ).

➔ Response

- Protection Cluster partners have targeted 9,180 IDPs in Nampula, 26,485 in Montepuez, about 25,000 in Metuge and 20,000 in Ibo, and two rapid needs assessments on IDP populations from Montepuez and Namialo in Nampula have taken place already.
- Focus group discussions on IDP intentions and host population perceptions took place in Metuge area in coordination with CE/AAP WG (Community Engagement and Accountability to Affected Populations Working Group).
- A Nampula Protection Working Group was activated in June 2020 due to arrival of IDPs in the Province. Several rapid protection needs assessments conducted in Namialo District and the Nampula PWG has taken part in NFI distribution for the IDPs in the Province
- Vulnerability criteria and prioritization guideline developed as well as the Protection Cluster Strategy for Mozambique updated until December 2020.
- Advocacy Note on centrality of protection in recovery efforts during Idai Response Recovery Phase developed together with Department of Gender, Children and Social Affairs in Sofala Province.

- Principled movement of people to be ensured to the greatest extent possible during relocation of persons displaced by violence in Cabo. Community consultations with displaced people and host communities in Metuge District completed in July 2020 continued advocacy on humanitarian access in Cabo Delgado and a more coordinated response to respond to serious protection cases such as abuse of power by security personnel. Such advocacy is carried out on all levels (national and sub-national).
- Cluster partners have provided masks for 1,000 IDPs and vulnerable host community members for COVID-19 prevention that were produced by women and girls IDPs attending vocational and life-skills sessions as part of psycho social support, in three Women Friendly Spaces located in Pemba, Metuge and Montepuez .

↔ Gaps

- Centrality of protection in recovery efforts in central Mozambique must be ensured and a protection risk assessment conducted as part of recovery activities. Vulnerable individuals prioritized for assistance in the creation of sustainable durable solutions in resettlement neighborhoods.
- Lack of humanitarian access to crisis-affected populations in northern Districts of Cabo Delgado hamper the effective needs-based delivery of humanitarian assistance to all crisis-affected populations.
- Deterioration of humanitarian situation in Northern Mozambique and serious human rights violations, including abuse of power by security personnel on the rise and response structures must be strengthened to meet the growing needs.
- A number of humanitarian staff unable to enter the country to strengthen the response, especially in Cabo Delgado, as visas and entry permits not being issued due to COVID-19 State of Emergency.
- In Cabo Delgado, Gender-based Violence (GBV) AoR partners have gaps in terms of technical knowledge and capacity to provide services (psycho-social support, GBV cases management, provision of integrated services, among others).
- 1458 emergency response toll-free hotline information on referral pathway, still requires wide dissemination among affected populations in Cabo Delgado.
- In Nampula, the majority of the IDPs are dispersed and accommodated in family homes, rented houses and host families, making it difficult to cluster partners and the government to map and obtain the real number of IDPs.
- There are no reception or transit centres in the communities hosting the IDPs in Nampula province, which makes the provision of a structured humanitarian assistance challenging.
- There is a gap in terms of community workers in Nampula districts to carry out information and awareness campaign on good hygiene and sanitation practices, sexual and reproductive health services and to identify and report GBV cases among the IDPs ad host communities.
- In Sofala, attention needs to be given to the establishment of permanent infra-structures for the continuity of integrated services for GBV survivors in the resettlement areas

CLUSTER STATUS (10 Sep 2020)



Shelter & Non-Food Items

IDPs need shelter support in Cabo Delgado

Needs

- With violent attacks continuing in Cabo Delgado, the number of displaced keeps increasing. Most people first seek shelter with host families, who themselves most often do not have the best shelter conditions and hosting displaced leads to overcrowding, unhealthy conditions and increased vulnerability.
- As of end of June, 250,000 people were displaced, including 84,900 people (16,980 HH) who were considered in urgent need of emergency shelter & NFI assistance in Cabo Delgado.
- Rough estimates indicate that 56,000 households across Sofala and Manica region still need shelter support to achieve minimum shelter standards for adequate shelter.
- Both in resettlement sites as well as in affected communities some of the most vulnerable have been left behind and are unable to recover adequate living condition.
- Due to difficult access some communities have not been reached by any assistance and others have been affected twice, by Idai in March 2019 and again by floods in the rainy season of 2019/2020 in districts of Sofala and Manica .

Response

- In Cabo Delgado, Nampula and Niassa, 53,115 people have been reached with distributions of essential NFI and 3,435 people (687 households) received emergency shelter kits. The shelter kits include bamboo and poles as well as nails, rope and plastic sheeting to construct an 18 square metres shelter.
- Additional 5,500 shelter kits are being procured to assist some 27,500 people (5,500 households) in Cabo Delgado.

Gaps

- Taking into account the shelter kits under procurement that will be available for distribution soon, there are still be some 54,000 people (10,794 households) for whom shelter and NFI support is not yet secured.
- The Shelter Cluster has discontinued its presence in the central region. Recovery and reconstruction activities are coordinated through the Mozambique government's GREPOC.
- Distributions of shelter kits and NFI continue to be heavily impacted by the insecurity, accessibility constraints as well as COVID-19 measures. All distributions are conducted respecting social distancing measures. In consequence, distribution takes three to five more time than previously to reach the same amount of people.

CLUSTER STATUS (10 Sep 2020)



Water, Sanitation and Hygiene (WASH)

50%

of people access improved water supply

Needs

- The WASH Cluster conducted an assessment in Montepuez with Servicos Distritais de Planeamento e Infraestruturas (SDPI) and local leaders. The government has indicated IDPs in host communities in *postos administrativos* with an estimated 20,000 families. IDP area of origin is indicated as the northern districts of Cabo Delgado. This is resulting in increased demands on existing WASH infrastructure with additional and/or rehabilitation of water points and more latrines required in host communities. The Montepuez centralized network requires extension to critical slums (*bairros*).
- The WASH Cluster conducted an assessment to proposed IDP accommodation sites in Metuge District with SDPI and FIPAG. There is need to connect the IDP sites to centralized networks as opposed to borehole drilling to define the implement requirements.
- Soft soil types and availability of local materials for latrine construction are positive for latrine construction.

➔ Response

- WASH is working with partners to reallocate planned borehole drilling to areas with increased demand for water due to influx of IDPs, including 30 planned in Pemba City, in coordination with SPI and SDPIs.
- In Pemba city, nine standpipes were rehabilitated and Mahate hospital connected to centralized network.
- Distributions for hygiene items for IDP households ongoing in coordination with the Shelter and Protection Clusters, with 850 families reached across Cabo Delgado districts.
- Sixty emergency latrines and 57 bathing units were installed for the temporary accommodation centres in Metuge.
- Upgrading of WASH infrastructure including laundry facilities, increased water storage, segregated toilets, waste management equipment and facilities ongoing in six isolation treatment centres (three in Nampula, two in Cabo Delgado and one in Maputo City).
- WASH Cluster is participating in reorganization of markets and installing handwashing stations in these high risk areas and developed guidance document for market reorganization process.
- Infection prevention and control WASH items delivered to health facilities and isolation treatment centres in Cabo Delgado, Nampula, Zambezia, and Tete. Supplies are being dispatched now to Inhambane.

↔ Gaps

- Low presence of humanitarian partners and lack of access in many districts of Cabo Delgado remains challenge for response.
- Long-term case management strategy remains a gap where WASH requires significant time and investments to meet facility requirements for treatment of COVID-19 patients.
- Multiple duplicative coordination structures are challenging to meet coordination needs.
- About 45 per cent of health facilities in the country do not have access to water. WASH in health facilities across the country is a large gap.
- Humanitarian partners are needed in Mocimboa da Praia and Ibo to respond cholera outbreak.

COORDINATION (10 Sep 2020)

General Coordination



OCHA

MOZAMBIQUE

Situation Report

Last updated: 10 Sep 2020

The overall humanitarian response in Mozambique is led and coordinated by the national authorities through the National Institute of Disaster Management (INGC) and related emergency coordination mechanisms. This is supported by the Humanitarian Country Team (HCT), which is composed of UN agencies, International and National NGOs, Red Cross and donor representatives. The HCT is supported at the operational level by an Inter-Cluster Coordination Group (ICCG). Specifically, the COVID-19 public health response is led by the Ministerio da Saude (MISAU), supported by WHO and partners, through a Health Partners Group. A national COVID-19 Preparedness and Response Plan was developed around 10 pillars: Coordination, Surveillance, Laboratory, Case management, IPC and WASH, Advocacy communication and community involvement, medicines and supplies, Operational support and logistics). A Technical Advisory Team (TAT) composed of experts from WHO, UNICEF, Centers for Disease Control and Prevention (CDC), World Bank, USAID, UNFPA was established with the overall objective to coordinate, add quality and harmonize outputs from the various TWGs. All of these teams are active and continue to function while a similar structure is being implemented through the DPS and Governors offices at provincial level. Prevention of sexual exploitation and abuse (PSEA) will be a central tenet of the response. The PSEA Network will serve as the primary body for coordination and oversight of activities related to protection from sexual exploitation and abuse by international and national personnel of UN, NGO entities and associated personnel involved in the response. The PSEA Network will provide technical support to the clusters, agencies and partners to ensure capacity building and community awareness on PSEA, access to safe reporting mechanisms and referral of SEA survivors to assistance services.

OCHA coordinates the global emergency response to save lives and protect people in humanitarian crises. We advocate for effective and principled humanitarian action by all, for all.

<https://www.unocha.org/southern-and-eastern-africa-rosea/mozambique>

<https://www.humanitarianresponse.info/en/operations/mozambique>

[About](#) [Terms of Use](#) [Privacy policy](#) [Copyright notice](#)

