



International Organization for Migration (IOM)
The UN Migration Agency

IOM APPEAL MOZAMBIQUE CYCLONE IDAI RESPONSE

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THE PORT CITY OF BEIRA HAS BEEN THE MOST AFFECTED BY THE CYCLONE IDAI IN MOZAMBIQUE



1,850,000

ESTIMATED NUMBER OF AFFECTED PEOPLE



600,000

PEOPLE TARGETED

SITUATION OVERVIEW

Cyclone Idai, a category-4 cyclone made landfall near Beira City, Sofala Province in central Mozambique on 14th March 2019, bringing with it extreme winds of up to 224km/h, torrential rains and flash floods. The situation compounded an already fragile population, with 141,000 people affected and 66 deaths recorded as a result of storms and flooding caused by the same tropical depression in the central region of Mozambique. As of 25th March 2019, the Government reported that the death toll from the storm stands at 446 and that over 109,000 people have taken shelter throughout 130 collective displacement sites. The latest figures from the Mozambican National Disasters Management Institute (INGC) coordination hub in Beira reported that a total of 56,000 houses have been destroyed or damaged by the storm.

Estimating that 1,850,00 people have been affected by the cyclone and its aftermath, the Government of Mozambique formally requested international assistance for the humanitarian response – food, shelter, education, health and non-food items, as well as logistical support, including air assets, boats and communications.

In the days ahead, continued flooding with additional rains could exacerbate an already difficult situation. There are regular reports now of acute watery diarrhea and high risk of cholera. Health and education facilities have suffered significant damage, with more than 2,800 classrooms and at least 39 Health centres confirmed impacted by the cyclone and floods. Primary, secondary and tertiary roads have been severely damaged, and the Government is working on reopening main conduits, but it will likely take weeks to reach all affected people in isolated areas. In addition, more than 500,000 hectares of crops have been damaged, which will impact food security in the months ahead, particularly as the losses coincide with the annual harvest season. Local community infrastructures, electricity, communications (radio and cell phone) and other major public services will need in depth assessment and support to be fully reestablished to support ongoing relief operations, as well as the longer-term recovery process.

IOM APPEAL (USD)

(March - September 2019)



Shelter/Non-Food Items

12 M



Camp Coordination
and Camp Management
(CCCM)

3 M



Displacement Tracking

3.8 M



Health

3.6 M



Protection

2 M



Water, Sanitation and Hygiene

6 M



Early Recovery

6 M

TOTAL

36.4 M





SHELTER AND NON-FOOD ITEMS (NFI)

The figures received by the IOM Shelter team in Beira as of 25 March 2019 report that over 36,000 homes have been destroyed and 19,000 damaged. These numbers are expected to continue to rise as reports are still being received by INGC in the operations center. IOM's emergency response will initially focus on providing emergency shelter and non-food items (NFIs) to 200,000 affected people (40,000 households), displaced and non-displaced whose crucial houses have been destroyed, damaged or flooded. The response will prioritize vulnerable groups, including women and men, boys and girls living in displacement sites to support rapid return and recovery. To support these activities, IOM has already initiated the establishment of a Common Pipeline to facilitate the distribution of NFIs to Shelter Cluster partners to ensure a coordinated and efficient response. In tandem, IOM will identify populations that require longer-term shelter solutions for the most vulnerable whose houses have been completely destroyed. The INGC has specifically requested IOM to support return packages – shelter, NFI and toolkits – to enable return as quickly as possible and limit the time spent in collective sites.

As Co-Lead of the Shelter & NFI Cluster alongside the Red Cross Mozambique (CVM), IOM will continue to provide coordination, strategic leadership, as well as technical support, information management and assessment support to the Cluster. Building on the work of UNHABITAT and MITADER, as well as the work of other cluster partners, IOM will train and supervise hands-on training on building back safer construction and community-based hazard awareness, preparedness and Disaster Risk Reduction (DRR), throughout the response.

Following the initial damage assessments, a more in-depth technical assessment, supported by the IOM Displacement Tracking Matrix (DTM) will be carried out on the damaged houses that will contribute towards the owner-driven shelter recovery strategy for the cluster. To support the work of INGC, who has the overall lead in the crisis response, IOM will also explore provision of technical support, targeting transitional and more robust shelter recovery, as well as legal mechanisms related to housing, land and property rights to facilitate return and relocation where necessary.

Within 3 months, IOM will move to transitional shelter recovery programming at a more robust level for a targeted segment of the population based on assessments and vulnerability criteria. IOM is taking into consideration the different settlements typologies as well as multitudes of possible recovery approaches including cash grants, direct construction with partners, and mixed methods to support robust shelter recovery in the medium term. Gender specific needs are also being assessed to ensure that shelter approaches and technical support responds to the differential impact of the crisis on different gender groups, and ensures the full participation of women and other vulnerable groups in the response as well as in the longer-term recovery process.

Funding required

\$12,000,000

Target no. of individuals

200,000



CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

IOM recognizes that camps are the last resort, and that for Mozambique, the transit centers and displacements sites currently hosting the cyclone affected populations in various locations are expected to be very temporary in nature. Currently there are over 100 transit centers, hosting close to 109,000 people, located between Beira and Dondo. Many sites are located in schools and will be forced to close, but the return or relocation of the population will require monitoring and support to ensure that secondary displacement issues are addressed and that populations are able to make informed decisions and have access to equitable services, return and relocation options.

IOM leads the CCCM cluster under INGC guidance, building on the CCCM capacity building provided at national level in Mozambique including a national, contextualized CCCM training package, which have largely contributed to the government's approach to responses of such large-scale crisis. The CCCM Cluster will continue to build upon this relationship, specifically with INGC, in a systematic and sustainable manner to ensure Government ownership and management of collective sites. As discussions with the government of Mozambique are on-going around camp and collective sites authorizations and closures, the cluster will provide technical support to the relevant authorities and departments to support their decision-making process, to advocate for sustainable and durable recovery and return, as well as avoidance of secondary displacement wherever possible.

Funding required

\$3,000,000

Target no. of individuals

100,000

IOM will lead the coordination for CCCM cluster, working closely with IOM's Displacement Tracking Matrix (DTM) team to monitor displacement, needs, gaps, living conditions and services in displacement and return locations. DTM and CCCM will transition to supporting return and recovery while monitoring service coordination as needed in these sites. Collective site and return support, monitoring and advocacy is vital to the design of life-saving interventions as much as it is necessary to ensure quality, adequate and appropriate levels of assistance and protection provided to the affected population.

As CCCM Cluster lead, IOM will support coordination roles in Maputo, Beira and any other on-site coordination points in alignment with INGC operations. At the site level, IOM will work with local authorities and local partners to establish mobile and dedicated teams that will focus on:

- ◆ Establish complaint and feedback mechanisms (AAP), engage/mobilize the community in an inclusive manner, thereby empowering all groups in the community in collaborating with various actors in seeking solutions to their circumstances from the start aimed at improving life with dignity for them whilst in displacement and towards pursuit of durable solutions;
- ◆ Supporting sub-national authorities (district administrators and DRM committees) to establish a platform to coordinate humanitarian response at site or area-level;
- ◆ Engaging suitable actors to provide technical and other vital support to the Government in the management of the transit centers and camps;
- ◆ Supporting returns (provide transport, tailored returned packages incorporating cash and in-kind assistance, etc.);
- ◆ For priority locations, where return is not yet possible, provide site improvement, infrastructure and/or upgrades to transit centers and camps;
- ◆ Carry out CCCM capacity building activities for local authorities and local actors and leaders, specifically district administrators and disaster management committees;
- ◆ Decommission and close transit sites including waste management and clean-up activities.



DISPLACEMENT TRACKING MATRIX

Information on affected, and in particular displaced populations, is complex and difficult to obtain in Mozambique, particularly as many communities in rural areas are completely cut off access, and communications and electricity have not yet been restored. In order to ensure a more robust and targeted response for the humanitarian community, IOM will implement its Displacement Tracking Matrix (DTM) program to provide key information and critical insights into the situation on internally displaced and affected persons in Mozambique. The DTM comprises a set of information management tools which are used to collect primary data and disseminate regular and accurate information to humanitarian partners. It has been used successfully in Mozambique, with contextualized forms and tools for disaster and crisis responses since 2013, in coordination with the INGC.

Specifically, DTM will provide humanitarian stakeholders with a mapping of displacement sites, demographics of the most affected, mobility tracking as populations move to and from sites towards return and relocation, as well as detailed inter-sectorial information on all assessed sites to support strategic decision making around resource allocation. The DTM products will include maps, dashboards, narrative reports and raw data which will be shared with humanitarian partners on a regular basis. In a second phase, DTM will include specific surveys of targeted vulnerable populations, with protection specific questions, and a focus on intentions for return or relocation, as well as specific needs for recovery to support decision making by the wider humanitarian community.

Similar data is currently being collected for Malawi and Zimbabwe, ensuring a regional perspective is integrated in the data analysis, including assessment of cross border needs and linkages in the movements of persons affected by the crisis.

Funding required

\$3,800,000

Target no. of individuals

900,000



HEALTH

The IOM response in the health sector will target 100,000 people in need of health support. During the emergency phase, health referrals, transfer and assisted hospital discharge for cyclone-affected populations is essential. The aim of the assisted emergency health referrals is to reduce morbidity and mortality among cyclone-affected population by increasing access to medical care for the most vulnerable, including the critically injured, children, elderly, women (pregnant and lactating), people with disabilities, HIV and Tuberculosis (TB) patients and other vulnerable persons. Currently, the Government is conducting search and rescue and moving casualties to major hospital locations. Assisting the discharge of recovered patients, many of whom have lost their homes, is also a critical intervention to decongest essential services so that those in need can be prioritized. This immediate life-saving activity could support up to 1,800 people in the most affected provinces: Tete, Manica and Sofala.

Funding required

\$3,561,000

Target no. of individuals

100,000

Given the significant damage to health care facilities in the cyclone affected areas, there is also a critical need to ensure referral mechanisms within the humanitarian response are in place for up to 100,000 cyclone affected men, women, boys and girls with acute and chronic health needs. Mainstreaming prevention, care and treatment of HIV, Sexually Transmitted Infections and TB for people living in accommodation centers, transit sites and sites of return will be essential in ensuring continuity of patient care. Furthermore, the destruction caused by the cyclone goes beyond just health infrastructure, to include loss of medicines and medical supplies as well as displacement of health care workers. In addition to persons living with HIV, patients undergoing treatment and care for tuberculosis who have been displaced, some fleeing their home without their medications, will require support. IOM, in coordination with the National TB Programme, will contribute to the reduction of TB-related mortality and morbidity through the identification and follow up of known TB patients on treatment in cyclone-affected areas, support the re-establishment of treatment, as well as conduct assessments of TB infrastructure needs and support referral of suspect cases to facilities. IOM plans to target and refer for treatment 200 TB patients who are lost to follow up and 600 at-risk persons.

IOM will also support provincial local health authorities in the repair and rehabilitation of damaged and destroyed health facilities (currently 55 health facilities in 3 provinces are reportedly damaged or destroyed, with figures expected to rise). Rapid repair and rehabilitation of damaged health facilities will be accompanied by installment of basic equipment as per national standards, support to human resource capacity building and mobilization of local communities to promote re-access.

Furthermore, IOM will support displaced families with children with the provision of family and child-friendly mental health and psychosocial support in coordination with the IOM Protection team.



PROTECTION

With more than 1,850,000 persons affected by cyclone IDAI, protection related risks are very high for the displaced population. IOM's response aims to protect and assist vulnerable populations, including victims and potential victims of trafficking in persons, survivors of gender-based violence (GBV), unaccompanied and separated children as well as other persons at risk of violence, abuse and exploitation.

With this aim, IOM's Protection programme will support the activation of the referral mechanism for vulnerable populations in emergencies. This referral mechanism defines the roles and responsibilities of different governmental and non-governmental protection actors as well as the entry points and the types of protection services provided to affected person. IOM has worked with the Women and Children's Unit of the National Police and prosecutorial services in the past, including construction of dedicated, cyclone-resistant offices, and trainings on emergency application of referral mechanisms in past responses. The protection services include access to safe spaces, health services, legal services, family reunification services (including return and transportation assistance). Furthermore and in line with the IOM's Migrants in Countries in Crisis (MICIC) guidelines, IOM will support consular assistance if Third-Country nationals in need of support are identified.

In addition, building on a current psychosocial support (PSS) programmes in Manica Province, IOM has a strong capacity to support cyclone-affected displaced communities throughout Mozambique.

Funding required

\$2,000,000

Target no. of individuals

100,000



IOM will strengthen its partnership with the International Child Development Programme (ICDP), a national NGO, to support the deployment of psychosocial support professionals. IOM will provide technical support and will provide trainings to local organizations, governmental partners and other humanitarian partners on provision of Psychological First Aid (PFA); and family and child-friendly psychosocial support services to support positive coping mechanisms for cyclone affected communities. IOM aims to provide PSS services to 60,000 men, women, boys and girls living in displacement, temporary and host settings. These activities will be closely coordinated with IOM Health teams, as well as CCCM operations teams to ensure that PSS and camp management services are aligned and supporting service delivery on site.

In order to support the mandates of the relevant actors under the referral mechanism, including the Attorney General's Office (PGR), the Ministry of Gender, Children and Social Action, the National Police (PRM) and others, a rapid protection needs assessment will be carried out along with a mapping of available protection services including those that may have been destroyed or impacted by the hazard. Based on the assessment, and supported by DTM to identify service gaps, IOM will work on strengthening services that have been found to be weak and re-establishing those that have been disrupted, in partnership with specialized actors, including GBV and Child Protection (CP).

At the initial stage of the response, IOM mobile protection outreach teams (multidisciplinary) will conduct awareness raising activities and referral of cases. Subsequently, they will work with existing community structures, including women groups, whose role will be to spread key messages on trafficking in persons, GBV, CP and other forms of violence, and to facilitate safe access where requested of potential cases to available services. The sharing of key messages will be complemented by a more comprehensive Counter-Trafficking information campaign to reach a larger audience in the affected areas and inform them to carefully verify any offers of employment or education elsewhere, in order not to become a victim of trafficking.

IOM will further implement prevention activities for at-risk groups to reduce the vulnerability to trafficking in persons. This will be achieved through the provision of livelihood support for the most vulnerable groups. Livelihood activities are recognized as vital to reduce the exposure of the crisis-affected population to trafficking in persons.

Protection will be mainstreamed into the roll-out of WASH, Shelter, Health and CCCM operations, with a specific focus on disabilities inclusion and prevention of family separation. Additionally, IOM will provide guidance and capacity-building through the Protection Cluster for non-protection actors on the concepts and mechanisms of trafficking in persons, abuse and exploitation, GBV, as well as raise awareness on the populations at risk and the steps to refer a potential victim to relevant services.



WASH, SANITATION AND HYGIENE (WASH)

With over 1,850,000 people affected in the country, WASH interventions are a top priority especially in the aftermath of Cyclone Idai, when floodwaters recede, and affected areas are left severely damaged. Water infrastructure needs urgent rehabilitation to prevent the outbreak of water borne related diseases due to contamination of water sources and ensure disinfection. During floods, sanitation facilities are also seriously affected: septic tanks become filled up, posing risks as well for contamination. Sanitation facilities require urgent measures of care and maintenance, in particular for what concern the latrine pits desludging and their rehabilitation for further use. Environmental sanitation, in the meaning of solid waste collection and cleaning of flooded areas, requires additional efforts, in the interest of limiting the aggravation of the emergency, particularly around health and industrial facilities.

IOM will target 200,000 people to ensure that safe and sufficient potable water is available for the flood-affected populations. To achieve this purpose, IOM activities will take into account the rehabilitation of water infrastructures, consisting in the dewatering and disinfection of wells and boreholes, in addition to the repair of electromechanical equipment for the water supply, when needed. IOM will set up a new emergency water treatment with its relative distribution points in areas where it is not feasible the rehabilitation of the damaged infrastructure within a limited period of time. This includes also areas where the water demand is larger than expected due to temporary displacements. If necessary, IOM will arrange additional supply of safe water by mean of water trucks, water treatment products and containers, according to the need of the affected area. In addition, IOM's activities concerning the supply of safe water will include rehabilitation of non-functioning water points and boreholes.

Funding required

\$6,000,000

Target no. of individuals

200,000

IOM efforts comprise the provision of life-saving services for water, sanitation and hygiene as a whole. Consequently, the distribution of essential hygiene kits and Menstrual Hygiene Management (MHM) kits is also recognized as a top priority of the WASH intervention, with special emphasis on flood affected displaced populations and communities at risk of water-related disease outbreaks. MHM will be prioritized, with context-appropriate items included in the hygiene kits, supplemented with proper Information, Education and Communication (IEC) material. IOM will further prepare for humanitarian shocks by pre-positioning WASH materials to promptly assist in the early response phase of an emergency.

IOM will significantly scale up its support by increasing access to safe water, sanitation and hygiene through a strong, inclusive team in the field, which will be able to assess and monitor the situation, thus enabling any possible modification in the approach and, by means of these activities, aim to address the urgent need for safe drinking water, sanitation and hygiene of the flood-affected populations in Mozambique.



EARLY RECOVERY

Affected communities will require long-term support to facilitate recovery and sustainable solutions to their displacement. Lessons learned from past crises show that the post-disaster recovery process is also an opportune moment to invest in fundamental aspects of DRR to 'build back safer'. IOM has been working in Mozambique on disaster recovery and disaster risk reduction since 2008 floods, with highly relevant past experience in 2013 and 2014 supporting durable solutions for over 150,000 people that were displaced in Gaza floods of 2013. IOM's transition and recovery approach to solutions for the affected includes a focus on three priority areas – community engagement, livelihoods and infrastructure rehabilitation or installation. Incorporating DRR aspects across these areas will be essential in preventing new and reducing existing disaster risk, which will contribute to strengthening resilience and creating pre-requisite conditions for resumption of sustainable development processes. In support of early recovery, IOM will target 400,000 affected persons, focusing principally on the displaced populations who likely have the most difficulties in return and recovery given that their communities will be the worst damaged by cyclones and floods.

Community engagement is core to enabling affected people to be directly involved in their recovery process and support local decision making and advocacy. Community radio stations play an important role in supporting access to unbiased and accurate information based on which affected populations can make voluntary and informed choices with respect to safe return or relocation elsewhere. Supporting the reestablishment of community radio will also provide an important platform for dissemination of key risk reduction messages, including on secondary risks commonly associated with floods, such as landslides, mudslides and epidemics. IOM has worked in the past in Inhambane, Tete, Sofala and Zambezia on supporting radio infrastructure and programming. An assessment will be conducted on Government and non-government radio stations to assess infrastructure damage, needs and support rehabilitation to support radios to be functional. In tandem, IOM will support radio station programming training and basic packages of information and interviews to influence radio stations to ensure dedicated time for reporting and discussion (call in shows) on the recovery process. Simultaneously, IOM will work with community disaster management committees to support additional local discussion and targeting of key recovery initiatives that will be aligned to livelihoods and infrastructure recovery support.

Livelihoods and infrastructure will be heavily affected and already the INGC has reported on at least 500,000 ha of affected land, but this does not include the many local businesses, agri-producers and market infrastructure that has been damaged or destroyed in urban, peri urban, and rural communities. IOM will implement a small grants mechanism linked to community engagement activities to support community-based recovery processes, infrastructure rehabilitation and livelihoods assistance. Programming will be community-driven with local disaster risk management committees engaged to support targeting of initiatives, and IOM will provide a mix of cash grants, tools and resources, cash for work, and training to support communities to implement local small scale projects that kick start recovery of livelihoods, markets, and recovery. These will likely include, but are not limited to, seed fairs, agri-tools, livestock, market and tertiary road rehabilitation, communal infrastructure rehabilitation, as well as small-scale structural and non-structural community-based risk mitigation projects.

The support will further include monitoring and close coordination with the INGC and CCCM cluster around returns and relocations. Where necessary IOM will coordinate with Governmental partners and state enterprises around electricity and water supply systems to enable more robust infrastructure and public services.

Funding required

\$6,000,000

Target no. of individuals

200,000

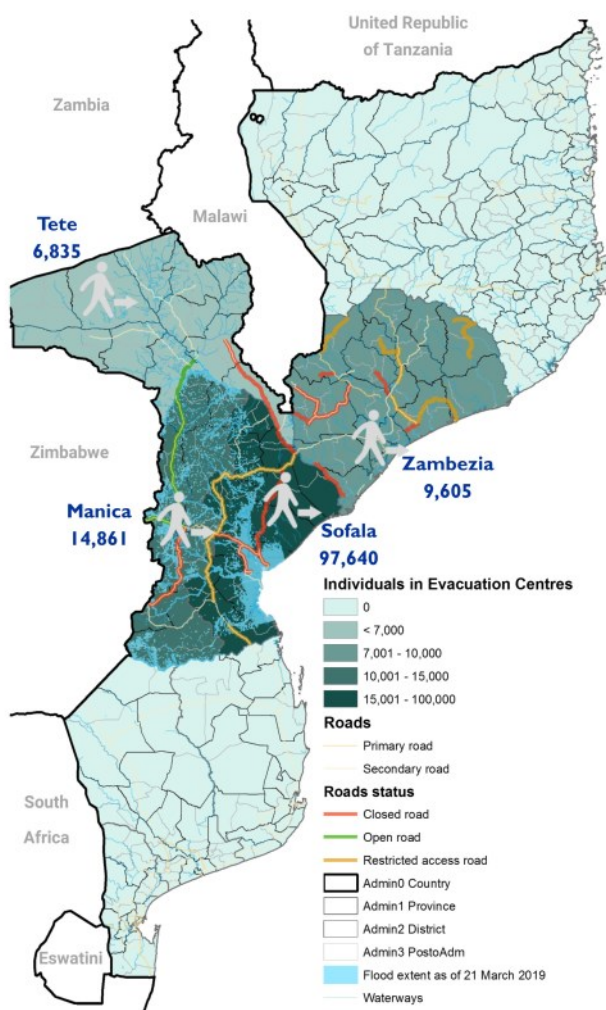


IOM IN MOZAMBIQUE

In country, IOM is well-resourced, with IOM's main office based in Maputo, with three sub-offices in Cabo Delgado, Gaza, and Tete. Following the passage of Cyclone Idai, IOM opened a new sub-office in Sofala to support the emergency response. IOM has been in the country since 2005, implementing emergency and post-crisis activities throughout the country. Access to the Cyclone affected areas is still under assessment but IOM is working closely with the Government and humanitarian partners to identify and overcome access constraints.

IOM is co-leading the Shelter-NFI cluster together with the Red Cross (CVM) and the CCCM cluster along with Government counterparts. IOM has a long-standing partnership and working relationships with COSACA, CHEMA, and the CVM for emergency response activities and will focus its efforts on supporting NGO activities along with scaling up its own response.

Beyond its presence in country, IOM has a strong presence in the southern African region, with a regional office with emergency and post-crisis functions in Pretoria, South Africa. IOM is deploying an additional 30 staff from its global roster, including experts on Shelter, Camp Management, Health, Protection, WASH and Early Recovery to provide urgent life-saving needs of the affected population.



SUPPORT TO INGC CAMP DECONGESTION ACTIONS USING SWISS MULTI PURPOSE TENTS FOR THE MOST VULNERABLE AT IFAPA CAMP IN BEIRA © IOM



COMMON PIPELINE PLASTIC SHEETING FOR SHELTER DISTRIBUTION RECEIVED FROM UK GOVERNMENT IN BEIRA © IOM 2019

NUMBER OF INDIVIDUALS IN EVACUATION CENTERS PER PROVINCE AS OF 25 MARCH 2019

*Source: Government of Mozambique / National Disasters Management Institute (INGC)

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