

OPERATION UPDATE

Mozambique, Africa| Tropical Cyclone Eloise

Appeal №: n° MDRMZ016	Operations Update n° 1 Date of issue: 23 August 2021	Timeframe covered by this update: 23 January 2021 to 23 July 2021
	Operation start date: 28 January 2021	Operation timeframe: 12 months and end date: 31 January 2022
Glide №: TC-2021-000008-MOZ	IFRC Funding requirements: 5.1 million Swiss francs Federation-wide response funding requirements: to be confirmed	DREF amount initially allocated: CHF 359,689

Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), Belgian Red Cross, German Red Cross, Spanish Red Cross and PIROI (French Red Cross

Other partner organizations actively involved in the operation: National Disaster Management Institute (INGD), National Institute of Meteorology (INAM), WFP, FAO, UNICEF, WHO, UNFPA, IOM, CARE International, Save the Children, Oxfam and Government authorities in all concerned sectors.

<Click here for the interim financial report and here for contact>

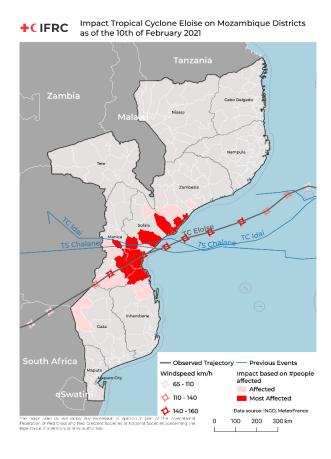
A. THE DISASTER AND THE RED CROSS RED CRES-CENT RESPONSE TO DATE



Figure 1: CVM and IFRC deliver emergency shelter kits to communities affected by Cyclone Eloise

22 January 2021: IFRC Information Bulletin #1 is published 23 January 2021: Tropical Cyclone Eloise made landfall 23 January 2021: IFRC launched a DREF amounting to CHF 359,689 25 January 2021: IFRC Information Bulletin #2 is published 28 January 2021: Emergency Appeal launched to the amount CHF5.1 Million 28 February 2021: Emergency Response phase of appeal completed August 2021: Preparing for the revision

of the Emergency Appeal



Situation overview

Description of the disaster

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

Affected 86,412 families, 441,686 people	
Deaths / injured	11 / 15
Houses destroyed	20,798
Houses damaged	35,566
Classrooms destroyed	231
Classrooms damaged	514
Health units damaged	68
Flooded Areas (ha)	219,124

Búzi, Nhamantanda and Beira were some of the districts most affected.

At least 11 people died due to Cyclone Eloise and many were injured. The cyclone caused severe flooding in the same areas that were just recovering from Cyclone Idai in 2019. Sofala, Manica, Zambezia and Inhambane are the provinces most directly affected by cyclones. They also have the highest vulnerabilities as a result of slow and interrupted recovery processes due to recurrent disasters.

Sofala Province was the most affected and **Búzi District** was the epicentre of the Cyclone and was heavily affected by post-cyclone flooding, especially for communities along the Pungwe and Búzi Rivers. There were significant damages to homes, water and sanitation infrastructure across the district.

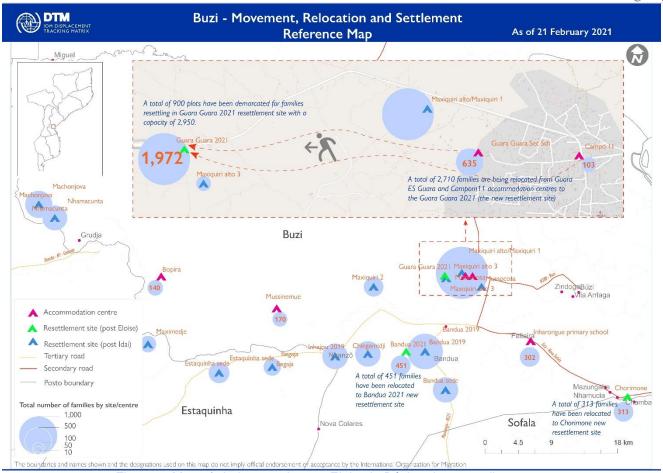


Figure 2: Map of shelter needs post-Eloise in Búzi and surrounding areas

According to the Shelter Cluster, Cyclone Eloise necessitated the creation of 5 new resettlement sites across Sofala and Estaquinha and the extension of 8 existing resettlement sites, with plots for 6,736 new families, for the newly displaced. This was a 35% increase from Cyclone Idai, as people continue to recover 2 years after the category 4 storm.

On the day before Cyclone Eloise struck the central region of Mozambique, the volunteers spread early warning messages through megaphones and sound systems on cars. Immediately after the cyclone struck volunteers were activated in the accommodation centres and neighbourhoods affected. These volunteers were trained and equipped after cyclone Idai on Community Based-Health and First Aid. The volunteers have done sensibilization on disease prevention on waterborne diseases, malaria and COVID-19. The volunteers provide psychosocial support to the victims of cyclone Eloise. Moreover, they conducted hygiene promotion activities and household water treatment. As the volunteers were already trained and equipped it was possible to provide an adequate and fast response.

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

By April 2021 CVM and IFRC distributed shelter kits to the majority of families in Búzi, Sussendega and Nhamatanda. Whenever kits were distributed, CVM volunteers gave trainings on how to assemble them and instruction in Build Back Safer techniques. The most vulnerable persons received assistance to assemble their kits and improve their shelters. CVM and IFRC helped communities plan to be more resilient in the future, through coordination with community leaders, local government, and the disaster management sector. Plans are being set to help communities prepare before the 2021/22 cyclone season, expected to start in November. There are plans to establish disaster management committees in vulnerable communities to allow them to make specific contingency plans for common disasters such as floods and cyclones.

Recurring impact of cyclones in some very vulnerable communities

Búzi District, across the bay from Beira along the Búzi river, was one of the areas most impacted by Cyclone Eloise, but also Idai in 2019 and 2020 due to flooding. As noted in the previous section, Búzi District has suffered the highest number of Internally Displaced Persons (IDPs) due to the floods and cyclones. Similarly, Nhamatanda District, also located in Sofala and upstream on the same river, faced massive flooding during the cyclones, leading to IDPs. The recurring impact of weather events after Cyclone Idai has compounded the vulnerabilities for many communities. As such, the same areas are in need of assistance year after year as there are repeated cyclone events destroying shelters and sources of livelihood. The reality is that these rural communities do not have the resilience strategies or mechanisms to allow them to be better prepared for future events.

Exposure to repeated environmental shocks and stressors especially in the central province of Sofala negatively affects the health outcomes of the affected communities, access to resources such as food and water, livelihoods and economic opportunities.

Recurring emergencies not only have a knock-on effect on shelter and livelihoods but also on the community's mental health. They may impede efforts to end harmful social practices such as child marriage and gender-based violence. According to a study by the Eduardo Mondlane University (Universidade Eduardo Mondlane- UEM), the main public university in the country, Sofala province in 2020 presented the highest numbers of GBV cases¹. According to COVID-19 Impact Assessment in the central provinces of Mozambique (Manica, Sofala, Tete and Zambezia) conducted by the government agency of National Institute for Disaster Management (INGD) in coordination with IOM, in March 2021, respondents reported that the pandemic had also psychosocial effects including more stress (32%), distrust of others (24%), and depression (20%).

During the recovery phase of this emergency appeal, the goal of IFRC and CVM has was to work with communities to build their resilience. This adjustment involves building back in more sustainable ways with a shift away from temporary shelters, and prioritizing the diversification of sources of income and livelihoods. The more resilient the community, the less the risk and impact of displacement experienced.

The 2020/2021 holiday season in December and January brought the second wave of COVID-19 to Mozambique. This was most likely due to the introduction of the Beta (South African) variant of the virus in November. Combined with a lack of following mitigation measures such as social distancing due to the holidays. As a result, the President of the Republic, Filipe Nyusi, announced stricter mitigation measures on 13 January 2021 with reduced business hours and the closure of many public areas. He introduced a mandatory curfew in high-risk areas on 4 February 2021, which was extended to all major cities the following month. Cyclone Eloise hit Mozambique during the second wave of COVID-19. In June 2021, Mozambique faced a fast-surging third wave of the COVID-19 pandemic, with cases spreading more rapidly after confirmation of the Delta (Indian) variant in Tete Province. The number of cases and persons hospitalized increased significantly, and there is a risk of overwhelming the country's health system. The positivity rate has rose from an average of 2.5% to approximately 15% in June 2021

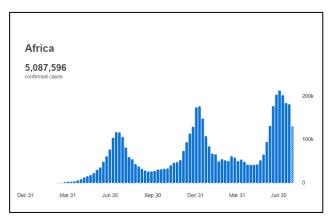


Figure 3: Source WHO, confirmed cases of Coronavirus in Africa. Same as rest of Africa, Mozambique is currently on the third wave of COVID-19

and 35% in July. The tightened measures imposed by the government included restricting the mandatory curfew for all provincial and district capitals from 9 p.m. to 4 a.m., suspending classes in primary, secondary and higher education, drastically reducing business hours, and prohibiting many businesses, which has further exacerbated the vulnerability and poverty of both rural and urban population.

COVID-19 and its impact on Economic Security

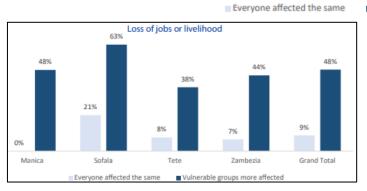
According to the above mentioned <u>COVID-19 Impact Assessment</u> in the central provinces of Mozambique (Manica, Sofala, Tete and Zambezia) conducted by the government agency of National Institute for Disaster Management (INGD) in coordination with IOM, in March 2021, **vulnerable groups** are more affected by the impact of COVID-19, by losing more jobs or livelihoods in comparison to other community members.

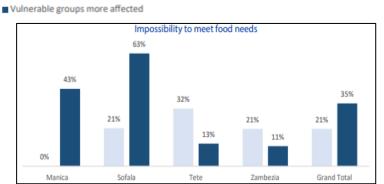
Sofala province has the highest percentage of vulnerable groups affected by COVID-19, not only by the loss of livelihoods but also the impossibility to meet food needs, at 63%. Results of the assessment depicted high levels of food

¹ Center for the Coordination of Gender Affairs-UEM

insecurity especially in Sofala province where families are reported to have borrowed food from friends and family for up to 7 days a week, and adults reduced their own consumption to prioritize feeding their children.

23% of the respondents reported that they have experienced price increases in their locality, while 17% reported that their locality has experienced both price increases and product shortages during the pandemic. Food (reported by 71% of the interviewees) and hygiene items (62%) were examples mentioned for increased price or stock shortage.





Figures 4 and 5: Provincial graphs of the impact of COVID-19 on Mozambican livelihoods and food security

Summary of Red Cross Red Crescent response to date

Overview of Host National Society

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

CVM started to provide assistance to people evacuated to accommodation centres, even before the disaster, supplying mosquito nets, chlorine, and facilitating cholera,



Figure 6: Flood Search and Rescue in Búzi

malaria and COVID-19 prevention activities. Immediately after Cyclone Eloise made landfall, Mozambique Red Cross (CVM) volunteers were engaged in search and rescue activities in affected areas.

CVM performed the following activities for the emergency response²:

- Deployment of two teams from headquarters level to Inhambane, Manica and Sofala Provinces in preparation for landfall. The team in Sofala was deployed for a long term mission, to be the CVM counterpart for all the projects implemented with the IFRC support.
- Dissemination of Early Warning messages and support in evacuation the days before landfall through sound systems on cars and volunteers in Búzi and Beira.
- Search and rescue of 150 families (882 persons, 78 men, 458 women, 346 children) through volunteers by boat in Búzi. People were rescued from rooftops and treetops. First aid was provided to the families.
- CVM supported 24,301 persons to cross the river in Nhamatanda district by deploying the emergency search
 and rescue boats, in cooperation with UNAPROC, the national unit for civil protection, and INGC, the national
 institute for disaster management.
- CVM supported the government by mobilising 96 volunteers in the transit centres and put on standby a further 150 volunteers in the Sofala Province.
- Distribution of 500 mosquito nets in accommodation centres (Nhamatanda District) and 1,128 bottles of certeza/chlorine distributed to 4,224 community members accompanied by presentation of household water treatment (Districts of Búzi, Dondo, Beira, Nhamatanda). Approximately 61,467 litres of water were treated.

² Beira referes to urban áreas. The rest of the areas are rural.

- CVM volunteers carried out sensitization on acute watery diarrhoea, malaria and COVID-19 in 8 accommodation centres and 7 neighbourhoods through 96 volunteers. 135 presentations were held, reaching 19,249 people. An additional 305 Focus Group Discussions were held in the accommodation centers which reached 19,225 people.
- Psychosocial Support (PSS) to staff, volunteers and community members. 1,040 sessions were held and 5,005 people were reached.
- A total of 9 handwashing stations were set up in accommodation centers reaching 17,414 people.
- Cleaning sessions were done in Nhamatanda and Caia accommodation centers to disinfect the public areas as part of COVID-19 prevention. There were 19 cleaning sessions done reaching 4,987 people.
- CVM participated in different coordination meetings such as at CENOE (Centro Nacional Operativo de Emergência = Emergency Ops National Center), led by INGD and HCT at all levels.
- CVM actively participated in different Sector Clusters and led the Shelter Cluster with the IFRC and movement partner support to ensure better coordination and harmony of response activities.
- In Zambézia and Manica, 180 CVM volunteers were involved in the rapid assessments integrated into the multisector led by INGD. Three teams were sent for multi-sectoral assessments in the districts of Nhamatanda, Búzi and Machanga in the province of Sofala.
- 28 volunteers were trained in Emergency Shelter construction so they can instruct or directly support families that receive shelter kits to build safe and adequate shelter. They were also trained on data collection of distribution participants using KOBO for future assessment and registration activities.

Overview of Red Cross Red Crescent Movement in country

On 24 January 2021, the IFRC released a CHF 359,689 disaster relief emergency fund (DREF) to provide immediate assistance to 5,000 people. This humanitarian support consisted of provision of shelter kits and NFIs (tarpaulins, blankets, sleeping mats), WASH (including installation of water treatment units, emergency latrines and hygiene kits) as well as Health materials (mosquito nets and cloth masks,) disease prevention awareness sessions and psychological First Aid (PFA). The DREF funds increased the assessment and operational bandwidth of the National Society. Informed by the increasing humanitarians needs on the ground from the rapid assessments, an Emergency Appeal amounting to CHF 5.1 million was launched to support 100,000 in the province of Sofal

Community based Programming on DRR (updating of 4W and sharing from partners)

IFRC

GRC

Belgian Flanders RC

French RC

Spanish RC

Italian RC

million was launched to support 100,000 in the province of Sofala with the possibility of including more provinces pending detailed assessment findings.

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

To date, the IFRC membership contributed to the response as follows:

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



Figure 7: Confirming distribution lists with local leaders as part of the Community Engagement and Accountability Process

CVM, with the support of the IFRC distributed 1,188 kits to respond to the emergency. An INTERGRATED multisectoral approach was adopted to support the communities as follows:

- 1) Kit distribution:
 - 120 families in Nhamatanda District, locality of Nhanssato:
 - All families received training for setting up emergency shelters with on-site monitoring

Table 1: Items distributed per household

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

Note: There were 1,000 masks available for distribution in Nhansato and all 465 community members received a mask. The remainders were sent to the John Segredo Center. Also the remaining 4 kits (116 out of 120 distributed in Nhamatanda) were given to the local government to distribute.

- 2) Distribution in Búzi District, localities of Bandua and Inharongue:
 - 4,990 mosquito nets: 746 in Chiquezana, 1,260 in Macurungo, 948 in Massane, 234 in Comp Búzi,
 670 in Mandir 1 and 2, 434 in Martinote, 304 in Muchanessa, 394 in Inhabirira
 - o 3,000 masks: 1,493 in Chiquezana, 1,260 in Macurungo, and 247 in Comp Búzi
- 3) Distribution in Machanga
 - 1,050 Buckets (2/HH), 525 20L Jerrycans (1/HH) and 2,100 Bars of Soap (4/HH)

Overview of non-RCRC actors in country

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

CVM is an integral part of Mozambique's Disaster Management structure as an auxiliary to the government, particularly on disaster response. CVM has an official seat in the CENOE and has established good working relationships at different levels with INGD, and the National Civil



Figure 10: IFRC and CVM meet with local government authorities in Búzi

Protection Unit (UNAPROC). CVM and IFRC have actively participated at government-led coordination meetings on provincial and district levels. The Humanitarian Country Team (HCT), coordinated by the UN, supported at the operational level by an Inter-Cluster Coordination Group (ICCG) have been active in Mozambique since Cyclone Idai. CVM /IFRC led the Shelter Cluster for disasters induced by natural hazards, UNICEF the WASH Cluster, WHO, the Health Cluster, WFP, the Food Security Cluster, and Save the Children, the Protection Cluster. Note that the Shelter Cluster was active and operational since the response to Cyclone Idai.

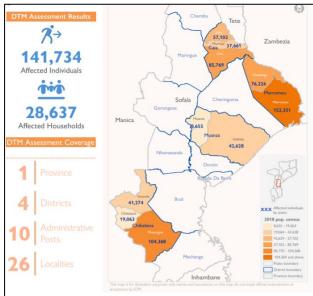
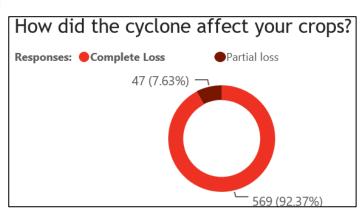


Figure 11: Displacement Tracking Matrix from IOM and INGD, data collected 4-6 March, published 6 April 2021

B. THE OPERATIONAL STRATEGY

Needs assessment and targeting

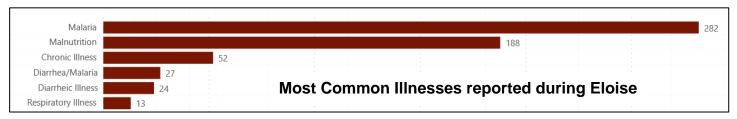
After the cyclone, an integrated needs assessment was carried out by CVM and IFRC in the communities of Inharongue and Bandua in March 2021, approximately 2 months after Cyclone Eloise and before the distributions were made to these communities as part of the CVM/IFRC response to assess the situation and confirm which needs were a priority for the community. A total of 616 households were interviewed in Inharongue for this assessment. Household interviews were completed door-to-door, taking the necessary COVID-19 mitigation measures. Data was inputted into the Kobo system for later analysis.



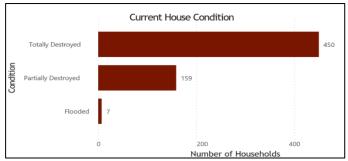
A summary of key results in shared in this section:

In terms of **livelihoods**, of the total 616 HH, 571 families (92.7%), stated that Agriculture was their main source of livelihoods in normal times before the cyclone. This decreased to 82.3% (507 HH) after the cyclone.

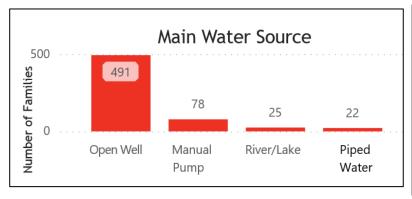
In terms of **health**, 245 respondents, 39.7% of the total, said that they had symptoms of Malaria after Cyclone Eloise. 60.5% of families owned mosquito nets. 386 respondents stated that they slept under a mosquito net the night before.

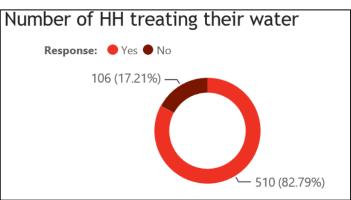


In terms of **shelter**, The vast majority, 73.1%, of households had their homes totally destroyed by the cyclone. At the time of the survey, only 33 households stated that they had received shelter assistance.



In terms of **water and sanitation**, while the majority of households, 83.7%, access their water from unprotected sources, it was positive to see that most were treating their water at the time of the survey. It should be noted that the most commonly used water treatment, chlorine solution called "Certeza", is estimated to provide one household with clean water for a month. It would be interesting to track the water treatment over time.





Operation Risk Assessment

The Operation Risk Assessment is informed by the present and potential scenarios related to conflict, political instability, country's infrastructure, risk of natural disasters, people's safety and security and institutional risks (reputational and financial), how they can impact the operation and the mitigation measures defined to reduce risk.

- Conflict: Mozambique is experiencing localized conflict in Cabo Delgado Province through armed groups targeting government structure and officials with violent actions, with an impact on the civilian population including the destruction of hospitals, schools and villages. Foreign forces have entered Mozambique to assist the military in reclaiming control of the area. To mitigate this risk, operations have been phased out of those areas and security information and protocols are in place.
- <u>Political stability</u>: Mozambique continues to have political and social tensions between political parties.
 Standard security procedures and updates, along with a clear commitment to impartiality help to mitigate this risk. Standard fleet procedure ensures the tracking of staff as they travel and that communication is available in the case of an incident.
- <u>Country's infrastructure</u>: Mozambique's public infrastructure is generally weak, especially in peri-urban and rural areas where population can be cut off from accessing basic services for several weeks. This situation deteriorates during the rainy season (from November to April) with road conditions worsening due to floods or landslides. Additionally, power outages happen regularly and water and sanitation systems are frequently disrupted. This situation poses a great challenge to humanitarian deliveries and overall access to areas of operation. In response, the IFRC adapts plans according to the context and ensures a commitment to standard fleet procedures. Back-up systems are applied to essential infrastructure for the operation and office. In the case that delays in the implementation of activities are delayed due to an issue in access or transport, the donor(s) are notified of possible delays and contingency plans are developed.
- <u>Natural disasters</u>: The country is prone to cyclones during the rainy season and droughts during the dry season. The recurrence of disasters is increasing as well as the number of affected populations. Other extreme weather events may likely occur in the coming months (cyclone season predicted December to April) which may require the operation to shift its operational modality to cover urgent needs. There are standard security protocols for alerts to personnel and partners in the case of a severe natural disaster. The Disaster Management teams of IFRC and CVM perform thorough contingency planning and preparedness activities within the organizations, as well as raising awareness in at-risk communities through the creation of disaster risk reduction committees.
- <u>People's safety and security</u>: The above-mentioned risks have the potential to impact first and foremost people's safety and security. Beyond these risks, people's wellbeing can be undermined due to exposure to several protection risks, particularly in certain groups such as the elderly, women and girls, people with specific needs and children. All IFRC and CVM staff receive training about our principles, prevention of gender-based violence, prevention of child abuse, prevention of sexual exploitation and abuse, and the procedures for whistleblowing and reporting incidents.
- <u>COVID-19 Pandemic</u>: This operation and its operational strategy consider the risks related to the current COVID-19 pandemic and is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic as well as assisting the Ministry of Health in vaccination efforts. All staff and volunteers are provided with Personal Protective Equipment for the prevention of COVID-19 and had the opportunity to receive a COVID-19 vaccine. Mitigation measures are updated according to the current context, with the necessary systems in place to work from home and adapt the implementation in the cases of a local outbreak of the disease.

Summary of major revisions made to emergency plan of action:

The major revisions to the EPoA are planned as follows:

- ☑ Reduction of the Funding Requirements amount from CHF 5.1 Million to CHF 1.1 Million
- Activities pending until the end of emergency appeal are related to the sectors of Shelter and Food Security Livelihoods (FSL)
- ☑ Activities under all other sectors have been completed (including Health, WASH and distribution of NFIs) according to the revised funding plan
- ☐ The target population will be revised from 100,000 people to 115,000 people
- ☑ The timeframe will remain unchanged

Overall Operational objective:

The main objective of the Operation in the first quarter (emergency phase) after the landfall of Cyclone Eloise was to provide emergency relief assistance and early recovery assistance to the most vulnerable populations affected by Cyclone Eloise and build their resilience across sectors. During the emergency phase, from January to February 2021, the operation adopted an integrated approach with coordination between the IFRC, CVM and PNSs operating

in the country, namely Spanish, French, German Red Cross, joining efforts in support of the affected communities across the districts of Nhamatanda, Búzi and Machanga, in the province of Sofala.

Mozambique, by its geographic location, is prone to being impacted adversely by cyclones and floods, Additional to this, by being one of the poorest countries in the world, it is anticipated to be disproportionately impacted by the increasing effects of climate change. For this reason, the CVM IFRC cooperation looks to support more resilience-based interventions in shelter and recovery, where these are appropriate.

After the emergency phase of Cyclone Eloise, building up on the experience of the cyclone Idai/Kenneth operation, the IFRC and CVM are planning of supporting households to build more resilient housing and revive economic activities.

Participant Selection

Persons to be supported were identified through joint assessments by the CVM and local disaster management committees based on set selection criteria as described below:

- Orphans and vulnerable children
- Female-headed households and pregnant women
- Elderly people
- People with Disabilities
- Chronically ill people
- Children-headed households
- Pregnant women and lactating mothers

Those affected show a high degree of vulnerability, having lost their basic resources and assets including houses and livelihoods. As such, the selection of the intervention districts in the targeted provinces was based on the level of vulnerability and the CVM's existing capacity, considering the following criteria:

- Areas with more needs and number of affected people with difficult access.
- The socio-economic impact caused by the disasters.
- Number of affected and resettled people.
- Casualties and loss of livelihoods.
- CVM capacity in the area.
- Intervention by other partners.

Shelter Activities

The shelter activities will involve:

Construction of permanent shelters for the most vulnerable families in the cyclone risk areas. The recurring disasters in the region have left communities unable to repair or rebuild their shelters. There are vulnerable people in need of more long-term solutions, as they have faced repeated losses. By their design, temporary shelters are not expected to last more than two years. The conditions of these temporary shelters have worsened and been further impacted by the 2020/21 rainy seasons. Specifically, the Shelter Cluster reported that approximately 8,755 households living in the Idai Resettlement Sites since 2019 experienced additional shocks from floods due to tropical storm Chalane (end of December 2020) and Tropical Cyclone Eloise (January 2021), causing further damages to their shelters. The Shelter Cluster reports that there is still a gap of 5,519 Idai-affected families in need of emergency shelter kits and essential NFIs as of March 2021. The majority of these households are in Búzi district, in the province of Sofala. This includes the additional internally displaced persons (IDPs) from Cyclone Eloise. There was a positive response for constructing permanent housing as opposed to transitional housing.



Figure 12: TRANSITIONAL SHELTER type 3—Floor: Stabilized soil, Walls: Bamboo external / earth internal, Roof: 0.4mm thick IBR sheets.

Transitional Shelter (type 3): Emphasis on using natural materials, but limited durability

- Roof: Fire-resistant and logistically simple, compared to thatch
- Walls: Reduced logistics for construction and increased rain protection, compared to adobe or earth
- Floor: improved resistance to flooding compared to regular soil





Figures 13-14: Permanent Shelters with foundations, a vertical structure and roof, walls with soil/cement or cement blocks

Permanent shelter:

- Roof: fire-resistant and logistically simple
- Walls: increased durability and rain protection when compared to natural materials (bamboo, soil)
- Floor: same as that of transitional shelter, or cement flooring

In response, a total of 50 permanent shelters are planned to be built in Guara Guara, Búzi District, which is the most vulnerable area and the most strongly impacted by flooding and natural disaster. Local artisans will be hired for the construction and trained in Build Back Safer techniques to improve their resistance to future weather events. The training will also increase their desirability in local markets and promote safer construction techniques for the entire community.

- Support with distribution of materials or other support to construct transitional housing, where permanent housing is not possible. The majority of families across the cyclone-affected communities live in housing that they have built themselves using locally available materials, but these are not durable or resistant to the winds and floods that accompany cyclones. It is unrealistic to propose that they solely use more resistant building materials. Instead, more incremental and systemic support is needed. The construction of permanent housing is more resource and time consuming than other shelter interventions. In order to reach vulnerable households that are not covered by the permanent housing construction, the IFRC will provide shelter assistance for transitional housing with technical guidance and provision of materials such as roofing or cement, as the other materials are locally available.
- Training of communities in Build Back Safer techniques to make shelters more resistant. According to the Post-Event Review Capability (PERC) study, one of the clearest entry points for increasing the resistance of housing is through the dissemination of more resistant building techniques. As such, technical trainings on owner-driven build back safer techniques are given to specialized artisans. This equips the local masons to assist the local population in rebuilding efforts after the cyclone. CVM staff and volunteers participated in training on the

Participatory Approach for Safe Shelter Awareness (PASSA) during the Idai Operation to prepare them to implement this approach in selected communities. Additional community training was given at the household level for Build Back Safer techniques. The local masons and carpenters that work in the permanent shelter construction will be trained in Build Back Safer techniques to ensure that the knowledge is not lost and can be replicated throughout the community and neighbouring communities.

Food Security and Livelihoods

The main activities that we would like to implement are:

- Vocational trainings for young adults from vulnerable households. The displacement caused by the cyclone interrupted the educational plans of young people. Investing in their education in technical skills allows them to have the option of starting a small business and having a source of income for themselves and their family. A total of 5 young adults from rural areas will be selected to attend mobile vocational training courses and after a two-to-three-month course they receive a nationally recognized certification. The classes focus on practical skills and the courses offered will be about construction.
- Technical support to vulnerable farmers and fisherfolks: For agriculture, IFRC/CVM coordinate with the government agricultural extensionists to provide assistance and training for farmers. CVM volunteers receive Training of Trainer sessions about topics such as conservation agriculture and organic pesticide production to teach to farmers in the field. This can be done by organizing farmers into farmer field schools and/or associations to encourage them to learn and work together.

Disaster preparedness and adaptation

- The IFRC strengthens the resilience of the livelihoods of vulnerable communities so that they are better prepared and able to cope with future shocks. Based on an assessment of livelihood capacities and vulnerabilities, the IFRC adapts its response at the household level to:
 - Strengthen existing livelihoods through the distribution of drought-resistant seeds, promotion of sustainable irrigation practices, construction of resilient infrastructure
 - Support the diversification of sources of income through vocational training, small business management

Community solidarity systems are also strengthened, such as through Village Savings and Loans Associations. The IFRC in coordination with the CVM, carries out awareness-raising campaigns on best food and nutritional practices to ensure that food is prepared according to the specific needs of household members especially children and pregnant women.

Sustainability

To promote the efficient and effective use of IFRC resources in-country, the IFRC supports CVM in the coordination of programmes and expertise.

• To support and enhanced the NS capacity in key programme areas and its sustainable institutional development as a fundamental actor in the society.

The objectives above will be achieved by the programmes outlined in the detailed operational section, and by adhering to key principles and cross-cutting methodologies adopted by the EA such as:

- Emphasis on the principle of Humanity and Impartiality
- Community Engagement and Accountability: Ensuring community participate in all interventions
- Localization: CVM branches to be involved in the decision-making and be the entry points to programming
- Multisector approach to assessment and planning: CEA, PGI and DRR mainstreamed.
- The Federation-wide and broader Movement approach puts CVM in the driving seat, with the support of the IFRC
 - Refer to emergency Plan of Action and Emergency Appeal for more details.

Shelter Cluster update

The Shelter Cluster lead by CVM and the IFRC are coordination partners in support of the government response. Here is the latest Shelter Cluster Response Overview from 20 April 2021, focusing on the needs post-Eloise.

- Cyclone Eloise necessitated the creation of 5 new resettlement sites and the extension of 8 existing resettlement sites, with plots for 6,736 new families, for the newly displaced in Búzi, Manica, Nhamatanda and Dondo
 - The 4,551 newly resettled families from Eloise are adding to the caseload for resilient/permanent housing, adding to an already existent gap from Idai, as the short time period between storms compounds the need. Resettled families could not return to their prior locations and were shifted out from the accommodation centers that sheltered people immediately after the event.

- There is challenge in reaching affected persons/ families that were previously displaced by Cyclone Idai, as there is a lack of funding to replace previously distributed materials (such as tarps), and organizations are shifting to other priorities, such as the conflict in Cabo Delgado
- In the future, there is a need for increased coordination between different shelter partners in their response to ensure that all NFIs distributed are equal in kit composition
- 98% of the recently displaced persons from the cyclone were reached with shelter kits

DETAILED OPERATIONAL PLAN

STRATEGIC AREAS OF FOCUS



Shelter and Essential Household items

People Reached: 3,916 Households/19,580 People

Male: 7,832 Female: 11,748

Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being through emergency shelter and settlements and early recovery solutions

Indicators	Target	Actual	
# of households assisted that receive emergency shelter assistance and awareness	3,000	3,916	
on safe shelter and good construction practice			
Output 1.1: Short tarm shalter and settlement assistance is provided to affected households			

Output 1.1: Short term shelter and settlement assistance is provided to affected households

Indicators	Target	Actual
# households provided with emergency shelter kits which meet the agreed standards for the specific operational context	3,000	2,716
# of households reached with other Shelter NFIs	3,000	1,280
% of households that report being satisfied with the distribution process and the items received	85%	Yet to be measured

Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to CVM staff, volunteers and affected households

Indicators	Target	Actual
# of households that participated in at least one awareness session on build back safer (in emergencies):	3,000	3,916
# of the target population provided with awareness orientation campaign who can build a safe shelter and identify good construction practices	2,500	580
# of CVM volunteers trained in emergency shelter implementation	50	28
% of trained volunteers who have the minimum knowledge needed to implement shelter activities	85%	Yet to be measured

Outcome 2: The target population has durable and sustainable shelter and settlements solutions through owner-driven approach

Indicators	Target	Actual
# of households who have durable shelter that meet national and/or Cluster	500	0
standards for recovery for the specific operational context:		

Output 2.1: The target population has durable shelter solutions

Indicators	Target	Actual

		0
# of households who have received durable shelter and housing assistance that	500	0
meet agreed standards for the specific operational context (e.g., repair or		
reconstruction through cash/voucher/in kind):		
% of households that report being satisfied with the durable shelter assistance	85%	Yet to be
		measured

Output 2.2: Technical training and awareness raising sessions to target communities on build back safer shelter reconstruction/construction

Indicators	Target	Actual
# of CVM volunteers trained in build back safer and all under one roof approaches)	50	28
# artisans trained in build back safer techniques: (carpenters and masons)	80	Yet to be measured
% of trained artisans who have the minimum knowledge needed to implement shelter activities	100%	Yet to be measured

Progress towards Outcome

Activities Carried Out:

- CVM with the support of IFRC carried out the emergency shelter training for both volunteers and affected families. A total of 28 volunteers were trained in Emergency Shelter construction and data collection of recipients using KOBO.
- Shelter Kits, tarpaulins, sleeping mats, blankets and kitchen sets were distributed to 116 households in Nhamatanda, Sofala.
- CVM trained volunteers to facilitate the construction of 116 emergency shelters. The volunteers supported the very vulnerable persons in the construction of their shelters and oriented those who had already built on how to improve their shelters
- With the support of the crisis modifier, CVM distributed 1,000 shelter kits each in Zambezia and in Manica Provinces.
- Following notification by INGD that an accommodation center in Beira would be deactivated, CVM/IFRC supported the distribution of emergency shelter and NFI items to 80 families being relocated to a resettlement site in Mutua District. This distribution was also coordinated with IOM who provided some of the items for distribution. All Cyclone Eloise accommodation centres were closed by the end of April 2021, with participants moved to their home communities or resettlement



Figure 15: CVM volunteer gives advice to a community member about how to improve her shelter

- PIROI French Red Cross Centre for Disaster Management stocks were distributed in Búzi, Sofala: 520 shelter tool kits, 1,040 tarps, 2,000 buckets, 1,000 jerrycans, 4,000 bars of soap, 3,000 mosquito nets. Volunteers were also trained in emergency shelter construction.
- CVM distributed locally procured tarps in December 2020 to 1,200 families living across the existing resettlement sites of Guara Guara in preparation for the rainy season and they were used to reinforce Cyclone Idai tents and emergency shelters, minimizing the weather's impact for these families.

Planned Activities:

- CVM and IFRC propose to build 50 permanent shelters for the most vulnerable families in Guara Guara, Búzi
 District. As opposed to the transitional shelters made of adobe and thatch, the permanent structures have
 increased durability and are made from concrete blocks. The local masons and carpenters that work in the
 permanent shelter construction will be trained in Build Back Safer techniques and spreading their use
 throughout the community and neighbouring communities.
- Distribution of construction materials or other support to construct transitional housing, where permanent housing is not possible. The IFRC will provide shelter assistance for transitional housing, such as roofing

- materials and cement which are bought as opposed to gathered, including assistance through recommendations on how to improve their shelters. IEC materials will be developed and distributed in the communities to accompany the guidance provided by CVM volunteers on how to improve shelters in accordance with BBS techniques.
- 30 people will be trained in Build Back Safer techniques to make shelters more resistant. Technical trainings on owner-driven build back safer techniques will be given to specialized artisans. This equips the local masons to assist the local population in rebuilding efforts after the cyclone. Additional community training can be given at the household level for Build Back Safer techniques. Selection of the BBS trainee artisans will follow standard procedures to include CEA and PGI aspects so that it is inclusive. The community training at the household level is offered to everyone within the community, so that together they may increase their resilience. This has been successful in other areas such as Chinamacondo in Sofala Province, where community-wide BBS training has led to the increase in durable shelters beyond the capacity of CVM and IFRC on their own as people take the initiative to improve their shelters



Livelihoods and basic needs

People Reached: 2,625

Male: 1,050 Female: 1,575

Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Indicators	Target	Actual
# of people supported by livelihoods interventions:	10,000	525

Output 1.1: Household livelihoods security is enhanced through food production and income generating activities restoration

Indicators	Target	Actual
% of target households that restore their food and income sources to pre- disaster level	75%	Yet to be measured
# of farmers supported with assets and training	1,500	0
# of fisherfolk supported with assets and training:	500	0

Progress towards Outcome

Activities Carried Out:

• Spanish Red Cross supported CVM for 525 households in Machanga with vouchers for Food Security and Livelihoods worth 2,500 Meticais per household (31 CHF).

Planned activities:

- CVM and IFRC propose to assist five young people living in Búzi with mobile training. This provides professional and intellectual growth to allow them to start entrepreneurial initiatives and create jobs while taking into account the dynamics of the economy, which still lacks trained labour to increase production and productivity. The training would focus on resilient shelter building.
- Provide technical support for farmers and fisherfolk. For agriculture, IFRC/CVM would coordinate with the
 government agricultural extensionists to provide assistance and training for farmers. CVM volunteers receive
 Training of Trainer sessions about topics such as conservation agriculture and organic pesticide production
 to teach to farmers in the field. This can be done by organizing farmers into farmer field schools and/or
 associations to encourage them to learn and work together.



Health

People Reached: 101,715

Male: 40,686 Female: 61,029

Outcome 1: Contribute to the improvement of health of the population affected through prevention of diseases and health promotion

Indicators	Target	Actual
# of people reached through health prevention and promotion services	100,000	75,458
(target 100,000)		

Output 1.1: Outbreaks are detected effectively by trained volunteers of the CVM and an adequate response is provided in cooperation with the MoH

Indicators	Target	Actual
# of ORP Kits prepositioned:	5	Yet to be measured
# of ORP established	target depends on outbreaks	0
# of ORP operational	target depends on outbreaks	0
# of volunteers engaged in CBS	380	291
# of people reached through CBS	20,000	48,989

Output 1.2: Community-based disease prevention and health promotion are provided by CVM volunteers trained in CBHFA

Indicators	Target	Actual
# of CVM volunteers and staff trained on health	380 Volunteer and	60
	12 Staff	volunteers
# of Community Health Mobilization points set-up and operational	5	8
# of Community Health Mobilization points operational	5	8
# of people reached through CBHFA approach	100,000	101,715
# of mosquito nets distributed;	3,000	0
# of chlorine distributed;	15,000	499
% of HHs that report being satisfied with health assistance	85%	To be measured

Output 1.3: Capacity of the Mozambican Red Cross is increased by training CVM Health staff and volunteers on Community Based Health and First Aid

Indicators	Target	Actual
# of CVM health staff trained;	12	Yet to be
		measured
# of First Aid kits procured for volunteers;	180	0
# of community leaders trained;	100	Yet to be
		measured
# of outbreak contingency plans developed;	20	Yet to be
		measured

Health Output 1.4: Communities are supported by Mozambique Red Cross (CVM) to effectively respond to psychosocial needs

Indicators	Target	Actual
# of beneficiaries reached through PSS activities	60,000	5,005
Progress towards Outcome		

Activities Carried Out:

- Distribution of 10,000 face masks and 3,000 mosquito nets
 - Distributed 8,000 face masks in accommodation centres to 1,120 families in Búzi, Sofala.
 - Distributed 1,000 face masks in resettlement sites and accommodation centres in Nhamatanda, Sofala
 - Distributed 2,500 mosquito nets to 2,495 families an accommodation centres in Búzi, Sofala
 - 500 Mosquito nets and 1,000 face masks were distributed to 116 households in Nhamatanda, Sofala and to the John Segredo center.
- · Emergency assistance and first aid
 - Psychosocial support to staff, volunteers and program participants: 1,040 sessions were held in which 5,005 people were reached.
 - Search and rescue of 150 families (882 persons, 78 men, 458 women, 346 children) through volunteers by boat in Búzi. People were rescued from rooftops and treetops. First aid was provided to the families. CVM supported 24,301 persons to cross the river in Nhamatanda district.
- Community-based Disease Prevention in Accommodation Centers, Resettlement sites, and Communities
 - CVM volunteers carried out sensitization on acute watery diarrhoea, malaria and COVID-19 in 8 accommodation centres and 7 neighbourhoods through 96 volunteers. A total of 135 presentations were held, reaching 19,249 people. An additional 305 Focus Group Discussions were held in the accommodation centers which reached 19,225 people.



Figures 16 and 17: CVM volunteers assisting with handwashing and temperature reading in public areas to reduce COVID-19 risks

- 9 handwashing stations were set up in the accommodation centers to help prevent COVID-19. 17,414 people were reached through this initiative.
- COVID-19 activities were extended to resettlement sites. The sites have agglomerations of people, and many IDPs share tents with a large number of people (6 to 12). In Búzi, Beira, and Nhamatanda the volunteers trained on Community-based Health and First Aid and COVID-19 led presentations on COVID-19 preventive measures. The volunteers informed people to maintain a two meters distance in the centres.
- The accommodation centers were cleaned and sanitized by CVM volunteers in Nhamatanda and Caia to prevent the spread of disease. There were 5 cleaning sessions in Nhamatanda to benefit 1,783 people and 14 sessions in Caia for 3,204 people.
- A total of 1,128 bottles of certeza/chlorine were distributed to 4,224 people accompanied by presentation of household water treatment (Districts of Búzi, Dondo, Beira, Nhamatanda). Each household received two bottles of water treatment solution. Through this initiative, an estimated 61,467 liters of water were treated.



Water, sanitation and hygiene

People Reached: 580

Male: 232 Female: 348

Outcome1: Immediate and sustainable reduction in risk of waterborne and water related diseases in	1
targeted communities	

targeted communities		
Indicators	Target	Actual
# of target population that has access to sufficient safe water	12,500	580

WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

Indicators	Target	Actual
# of households using adequate sanitation	23,500	580

WASH Output 1.2: Access to safe water through community managed water sources is provided to target population with the support of Mozambique Red Cross (CVM)

Indicators	Target	Actual
# of water committees operational ;	25	Yet to be
		measured
# of boreholes rehabilitated ;	20	0
# of boreholes drilled ;	5	0
% of households that report being satisfied with water source assistance	85%	Yet to be
		measured

Output 1.3: Improved access to adequate sanitation is provided to and managed by the target population with the support of Mozambique Red Cross (CVM)

Indicators	Target	Actual
# of toilets built through CLTS ;	300	116
# of households with permanent toilets constructed;	500	0
% of households that report being satisfied with sanitation assistance	85%	Yet to be

Output 1.4: Hygiene promotion activities are provided by Mozambique Red Cross (CVM) to target population

Indicators	Target	Actual
#of people reached by hygiene promotion activities (including communities and schools);	100,000	580
# of volunteers involved in hygiene promotion;	380	28
# of households receiving hygiene kits ;	500	116
% of households that report being satisfied with hygiene kits	85%	Yet to be measured
Progress towards Outcome		

Activities Carried Out:

- Distribution in Nhamatanda to 116 households:
 - o Emergency WASH items, including Jerrycans (20 Litres), buckets (14 Litres) and bars of soap



Figure 18: Social distancing measures were enforced at distribution point for COVID-19 mitigation

• Distribution of Rapid Latrine Kits. CVM trained volunteers supervised the construction of the 116 Rapid Latrines, providing technical assistance and hygiene promotion awareness to households.



Protection, Gender and Inclusion

Outcome 1: Communities have identified the needs of the most vulnerable and particularly		
disadvantaged & marginalized groups due to inequality, discrimination, of	or exclusion	
Indicators:	Targets	Actuals

# of people in need receiving PGI support services	100,000	0
# of CVM volunteers trained and mobilized	120	389
# of CVM staff trained and mobilized	n/a	Yet to be
		measured

Output 1.1: CVM programmes ensure safe and equitable access to basic services, considering different needs based on

Indicators:	Targets	Actuals
# of people reached with awareness raising on gender equity on diversity	100,000	Yet to be
and inclusion		measured
#of people reached with dignity kits distribution	500	Yet to be
		measured
% of people identified in need are referred to specialized services	100%	Yet to be
		measured

Output 1.2: Emergency & Recovery response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children, promoting safer communities

Indicators:	Target	Actuals
# of people access SGBV & Child Protection behavioural change awareness	100,000	Yet to be
sessions		measured
# of CVM volunteers and staff trained on PSEA and Child Protection	20 Volunteers	389
	and 12 staff	volunteers

Output 1.3: Mozambique Red Cross (CVM) educational and advocacy programmes raise awareness on humanitarian challenges, cultivate humanitarian values and develop relevant interpersonal skills

Indicators:	Targets	Actuals
# of people are reached through IEC campaigns & Trainings	15,000	Yet to be measured
# of CVM stakeholders sensitized and involved in CNVP related issues	2	Yet to be measured
Progress towards Outcome		



Disaster Risk Reduction

People Reached: N/A

Male: Female:

Outcome 1: Communities in high	gh-risk areas are i	prepared for and	l able to respond to disaster

Indicators:	Targets	Actuals
# of people reached directly through DRR and CCA projects	34,500	0

Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.

Indicators:	Targets	Actuals
# of CVM community volunteers trained in disaster response, preparedness	120	0
# of community committees trained ;	6	0

Outcome 2: Communities in disaster affected areas adopt climate risk informed and environmentally responsible values and practices

Indicators:	Target	Actuals
% of recovery programmes that incorporate DRR & CCA approach; (target)	70%	Yet to be
		measured

DRR Output 2.1: Contributions to climate change mitigation are made by implementing green solutions

Indicators:	Targets	Actuals
# community engaged in environmental protection projects ;	3	0

Output 2.2: Community awareness raising programmes on climate change risks and environmentally responsible practices are conducted in target communities

Indicators:	Targets	Actuals
# of RC/RC initiatives coordinated and fostered; (target)	2	0
Progress towards Outcome		

ENABLING ACTIONS

Strengthening National Societies

Outcome S1.1: Mozambique Red Cross (CVM) has the necessary legal, ethical, and financial foundations, systems and structures, competences, and capacities to plan and perform

Indicators:	Target	Actual
% of CVM staff acknowledging improvements in its management systems	90%	Yet to be measured

Outrook 64.4 A. Maranakina a Dad Guara (CV/M) hara 66-ati		Page	
Output S1.1.4: Mozambique Red Cross (CVM)has effective and motivated volunteers who are protected.			
Indicators:	Target	Actual	
# of volunteers who are adequately insured	380	Yet to be	
		measured	
Output S1.1.6: National Society has the necessary corporate infrastructu	ire and syster	ns in place	
Indicators	Target	Actual	
# of branches that have been assisted with repairs/upgrades and office	4	Yet to be	
equipment		measured	
CVM has embarked upon a forward-looking HR strategy and related plan of	Yes	Partially	
action		Achieved	
Digital transformation in full use by CVM	Yes	Partially	
		Achieved	
Output S1.1.7: N S capacity to support community-based disaster risk re	duction, respo	onse &	
preparedness is strengthened			
Indicators:	Target	Actual	
CVM DRM Strategy updated	1	Yet to be	
		measured	
# Logistics and Fleet guidelines finalised	2	Yet to be	
		measured	
Output S2.1.3: NS compliance with Principles and Rules for Humanitaria	n Assistance i	s improved	
Indicators	Target	Actual	
# staff who have received community engagement and accountability	380	Yet to be	
trainings		measured	
#volunteers who have received community engagement and accountability	380	209	
trainings			
# % of target population who agree their priority needs are being met	85%	Yet to be	
8	65%	measured	
% of target population who agree their feedback is taken into account and	85%	Yet to be	
acted upon by CVM/IFRC.		measured	
# of community feedback comments collected and responded to	100	Yet to be	
		measured	
Progress towards Outcome			

Activities Carried Out

- Training of 389 CVM volunteers to carry out the response
 - 150 volunteers were trained in the technical areas of the operation shelter, health, WASH, PGI, CEA as well as data collections methodologies, tools and reporting. This was to assist in the long-term response. An additional 31 CVM volunteers (14 men and 17 women whose ages range from 18 58 years) were trained in multi-sectoral issues.
 - In Zambézia and Manica CVM, 180 volunteers were involved in the rapid assessments integrated the multisector led by INGD. Three teams were sent for multi-sectoral assessments in the districts of Nhamatanda, Búzi and Machanga in the province of Sofala.
 - Rapid training for 28 volunteers on multi-sectoral issues and CEA basic points, such as collecting and responding to feedback, 2-way communication channels and how to deal with community rumours. Help desks were set up at distribution locations to support communities with information, manage complaints, etc. They were also trained in Emergency Shelter construction and data collection of distribution participants using KOBO
- PSS support was provided to staff and volunteers, in addition to the program participants.

Strengthening Coordination and Accountability

Output S2.1.6: Coordination role of the IFRC with the International Humanitarian system is enhanced

Indicators	Target	Actual
% of shelter agencies supported by the shelter cluster	100%	100%

Outcome S2.2: The complementarity and strengths of the Movement are enhanced

Indicators	Target	Actual
% of RC/RC actors reporting increased movement coordination	100%	100%

Output S2.2.1: In the context of large-scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination.

Indicators	Target	Actual
Movement 4Ws developed and updated	1	1
Progress towards Outcome	100%	100%

Activities Carried Out:

- CVM and IFRC were a part of teams for rapid and detailed assessments and emergency response mobilization.
- IFRC deployed the Communications Officer from Malawi RC to help with the profiling of the operation.
- The Post Disaster Response surge was deployed to support the National Society with domestic fundraising.
- Operations Manager from the Southern Africa delegation was deployed for one month to support the setup of the operation and development of the EPOA.
- IFRC Africa Regional Office deployed the Logistics Officer to support the procurement and logistics of the operation.
- IFRC Africa Regional Office deployed the Regional Roving Operations Manager and Logistics Delegate to support the startup of the operation
- The 4Ws for the Disaster Management sector were updated among movement partners in country Two planning meetings including CVM and IFRC took place in February 2021 for the detailed planning of the opera-

Influencing others as strategic partners

tion as well as agreeing on EPOA development process, scope and targets

Outcome S3.1The IFRC secretariate, with NS uses their unique position to influence decisions at local, national & international levels that affects the most vulnerable

# of advocacy and lobbying initiatives carried out	2	1		
Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on Humanitarian Issues				
Indicators	Target	Actual		
	9			

Target

Actual

mulcators	larget	Actual
# of external communications activities undertaken	3	Yet to be
		measured
# of social media platforms active	2	Yet to be
		measured

Outcome S3.2: The programmatic reach of the Mozambique Red Cross and the IFRC is expanded

Indicators	Target	Actual
% of reports submitted on time	80%	Yet to be
		measured

Output S3.2.1: Strengthening planning, monitoring, evaluation and reporting

Indicators	Target	Actual

Indicators

		Page 24
# of evaluations conducted	2	Yet to be
		measured
Output S3.2.2: Resource generation and related accountability	models are developed a	nd improved
Indicators	Target	Actual
% of DAG members reporting a positive experience	100%	Yet to be
		measured
Output S3.2.3 CVM is supported in resource and partnership de	evelopment (from both d	omestic markets
and foreign sources).		
Indicators	Target	Actual
# of resource mobilization plan approved	1	Yet to be
		measured
# of Approved business plans	2	Yet to be
		measured
Output S4.1.3: Financial resources are safeguarded; quality fin	ancial and administrativ	e support is
provided contributing to efficient operations and ensuring eff	ective use of assets; time	ly quality
financial reporting to stakeholders		
Indicators	Target	Actual
# of audits conducted	1	Yet to be
		measured
Output S4.1.4: Staff security is prioritised in all IFRC activities		
Indicators	Target	Actual
% security Plans updated in all operational areas (target 100%	100%	Yet to be
· · · · · · · · · · · · · · · · · · ·		measured
Progress towards Outcome		

Activities Carried Out

- The first partnership meeting was held at the beginning of the operation with the aim of briefing them on the immediate needs on the ground and strategy of the National Society response with the support of its partners. IFRC deployed the southern Africa Cluster Partnership and Development Senior Officer to support fundraising efforts at the country level.
- The NS together with IFRC advocated for support of affected families with all relevant stakeholders. CVM
 participated in different coordination meetings such as at CENOE (Centro Nacional Operativo de
 Emergência/Emergency Operations National Center), led by INGD and Humanitarian Country Team at all
 levels.
- CVM actively participates in different Clusters.

Shelter Cluster

CVM/IFRC cooperated with shelter Cluster partners to map activities, agree on a common shelter response strategy and ensure quality and coordinated shelter response. The Canadian Red Cross engaged a Shelter Cluster Coordinator to support CVM/IFRC in the shelter Cluster leadership role for three months at the start of the operation. The additional impact of Tropical Cyclone Eloise required strengthened coordination of the response system. These include the development of an inter-agency shelter strategy, monitoring of the shelter response to avoid duplication and gaps, and technical support for quality shelter response. The Shelter Cluster was required to build up an overview of the shelter needs situation, compiling data from GREPOC, DTM, INGD and other partners, and on a day-to-day basis to direct Shelter Cluster partners to the areas with the most need, advising on standards and recommendations for NFIs and shelter interventions.

C. Financial Report

The Emergency Appeal has been shared with donors but remains lowly funded. As of 1 August, the Eloise operation is funded at CHF 918,274 (18%) to date and has a funding gap of CHF 4,181,726 (82%).

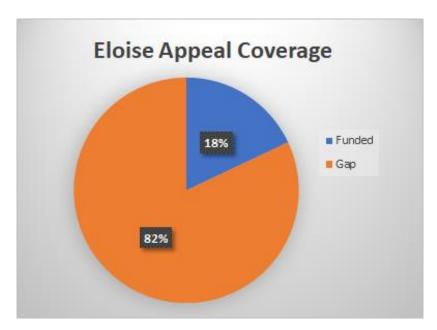




Figure 19: Mapping of IFRC/CVM response to Cyclone Eloise by district

Contact information

For further information, specifically related to this operation please contact: In the Mozambique Red Cross (CVM)

- Secretary General Maria Cristina Uamusse, Tel: +258 82 440 8280; email: cristina.uamusse@redcross.org.mz
- Disaster Manager Boavida Chambal, Tel: +258 84 884 71 35; email: boavida.chambal@redcross.org.mz
- Programme Director Ilídio Nhatuve, Tel: +258 82 440 8280; email: Ilidio.Nhatuve@redcross.org.mz

In the IFRC

- **IFRC Country Delegation** Gorkhmaz Huseynov, Head of Country Delegation,; Phone: +258 87 681 0013; email: gorkhmaz.huseynov@ifrc.org
- IFRC Regional Office for Africa Adesh Tripathee, Head of DCPRR, Nairobi, Kenya; phone +254731067489; email: adesh.tripathee@ifrc.org

For IFRC Resource Mobilization and Pledges support:

 IFRC Regional Office for Africa Louise Daintrey-Hall, Head of Partnerships and Resource Development Regional Office for Africa, Email: louise.daintrey@ifrc.org phone: +254 110 843978

For In-Kind donations and Mobilization table support:

 Logistics Coordinator Rishi Ramrakha, Head of Africa Regional Logistics Unit, email: rishi.ramrakha@ifrc.org; phone: +254 733 888 022

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

• IFRC Regional Office for Africa Philip Kahuho, PMER Manager, Philip.kahuho@ifrc.org, Phone: +254 732 203081

Reference documents

Click here for: Previous Appeals and updates

How we work

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

Emergency Appeal INTERIM FINANCIAL REPORT

 Selected Parameters

 Reporting Timeframe
 2021/1-2021/7
 Operation
 MDRMZ016

 Budget Timeframe
 2021-2022
 Budget
 APPROVED

Prepared on 21 Aug 2021

All figures are in Swiss Francs (CHF)

MDRMZ016 - Mozambique - Tropical Storm Eloise

Operating Timeframe: 23 Jan 2021 to 31 Jan 2022; appeal launch date: 28 Jan 2021

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	256,000
AOF2 - Shelter	1,736,000
AOF3 - Livelihoods and basic needs	879,000
AOF4 - Health	229,000
AOF5 - Water, sanitation and hygiene	634,000
AOF6 - Protection, Gender & Inclusion	71,000
AOF7 - Migration	0
SFI1 - Strenghten National Societies	959,000
SFI2 - Effective international disaster management	0
SFI3 - Influence others as leading strategic partners	13,000
SFI4 - Ensure a strong IFRC	323,000
Total Funding Requirements	5,100,000
Donor Response* as per 21 Aug 2021	918,053
Appeal Coverage	18.00%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance	
AOF1 - Disaster risk reduction	0	3,860	-3,860	
AOF2 - Shelter	418,080	296,341	121,739	
AOF3 - Livelihoods and basic needs	0	0	0	
AOF4 - Health	35,278	11,018	24,261	
AOF5 - Water, sanitation and hygiene	57,635	4,107	53,528	
AOF6 - Protection, Gender & Inclusion	0	258	-258	
AOF7 - Migration	0	0	0	
SFI1 - Strenghten National Societies	10,055	6,611	3,444	
SFI2 - Effective international disaster management	102,793	35,909	66,884	
SFI3 - Influence others as leading strategic partners	4,840	5,328	-488	
SFI4 - Ensure a strong IFRC	4,712	167	4,546	
Grand Total	633,394	363,599	269,795	

III. Operating Movement & Closing Balance per 2021/07

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	917,513
Expenditure	-363,599
Closing Balance	553,914
Deferred Income	0
Funds Available	553,914

IV. DREF Loan

* not included in Donor Response	Loan :	359,689	Reimbursed :	359,689	Outstanding :	0



Emergency Appeal INTERIM FINANCIAL REPORT

Selected Parameters							
Reporting Timeframe	2021/1-2021/7	Operation	MDRMZ016				
Budget Timeframe	2021-2022	Budget	APPROVED				

Prepared on 21 Aug 2021

All figures are in Swiss Francs (CHF)

MDRMZ016 - Mozambique - Tropical Storm Eloise

Operating Timeframe: 23 Jan 2021 to 31 Jan 2022; appeal launch date: 28 Jan 2021

V. Contributions by	Donor and	Other Income
---------------------	-----------	--------------

Opening Balance 0

Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income
American Red Cross	365,724				365,724	
European Commission - DG ECHO	215,563				215,563	
Japanese Red Cross Society	42,880				42,880	
Red Cross of Monaco	16,452				16,452	
The Netherlands Red Cross (from Netherlands Govern	276,894				276,894	
Total Contributions and Other Income	917,513	0	0	0	917,513	
Total Income and Deferred Income					917,513	

