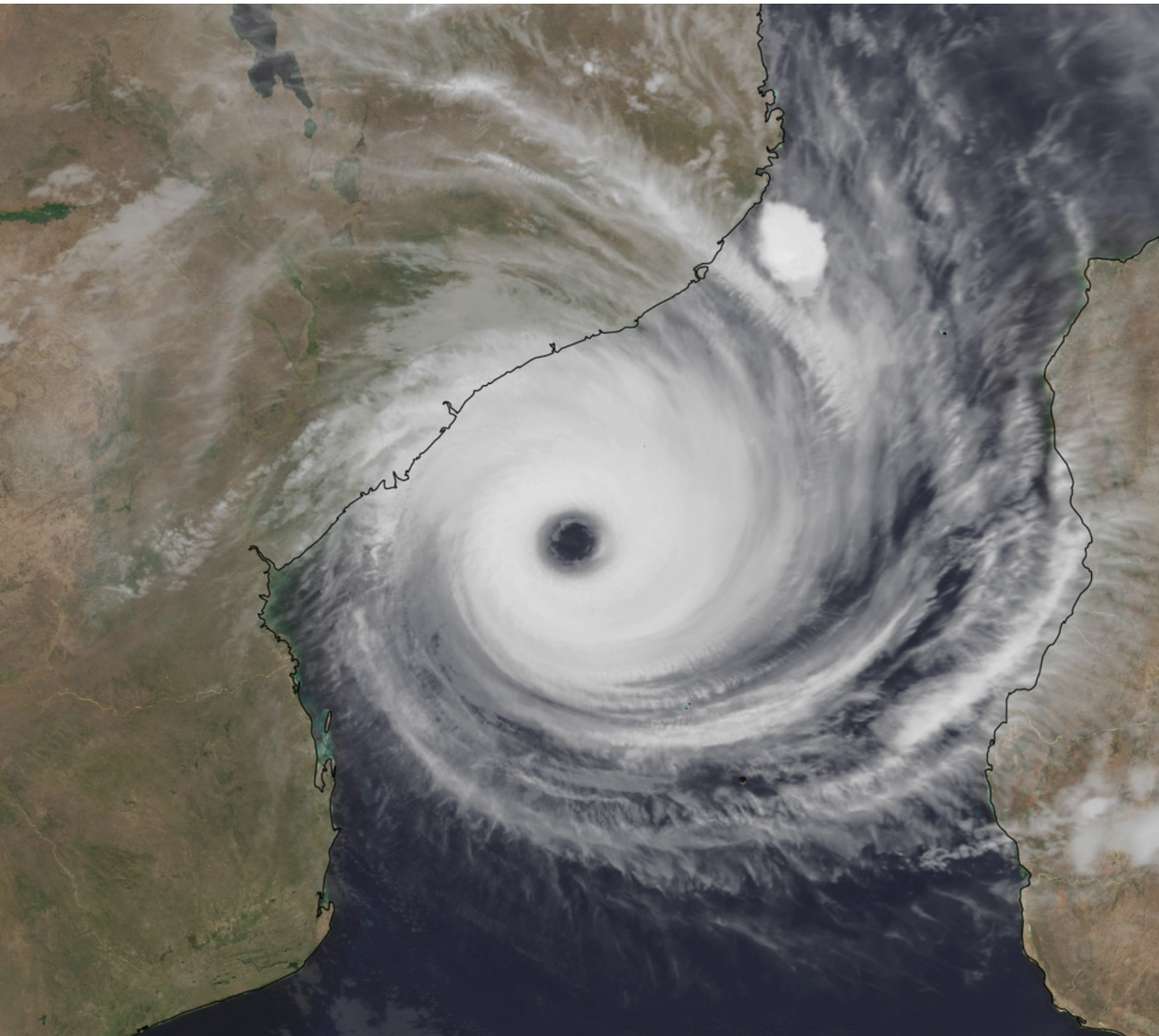


CASE STUDY  
November 2020

# CYCLONE

# IDAI

Integration of multisectoral C4D interventions  
into the humanitarian response in Malawi,  
Mozambique and Zimbabwe



## **Acknowledgement**

This case study has been developed with the input from C4D colleagues from United Nations Children's Fund (UNICEF) Country Offices in Malawi, Mozambique and Zimbabwe, and UNICEF Eastern and Southern Africa Regional Office (ESARO) Communication for Development (C4D) Section.

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**Cover photo:** [it.wikipedia.org File:Idai 2019-03-13 2016Z.png](https://it.wikipedia.org/File:Idai_2019-03-13_2016Z.png)

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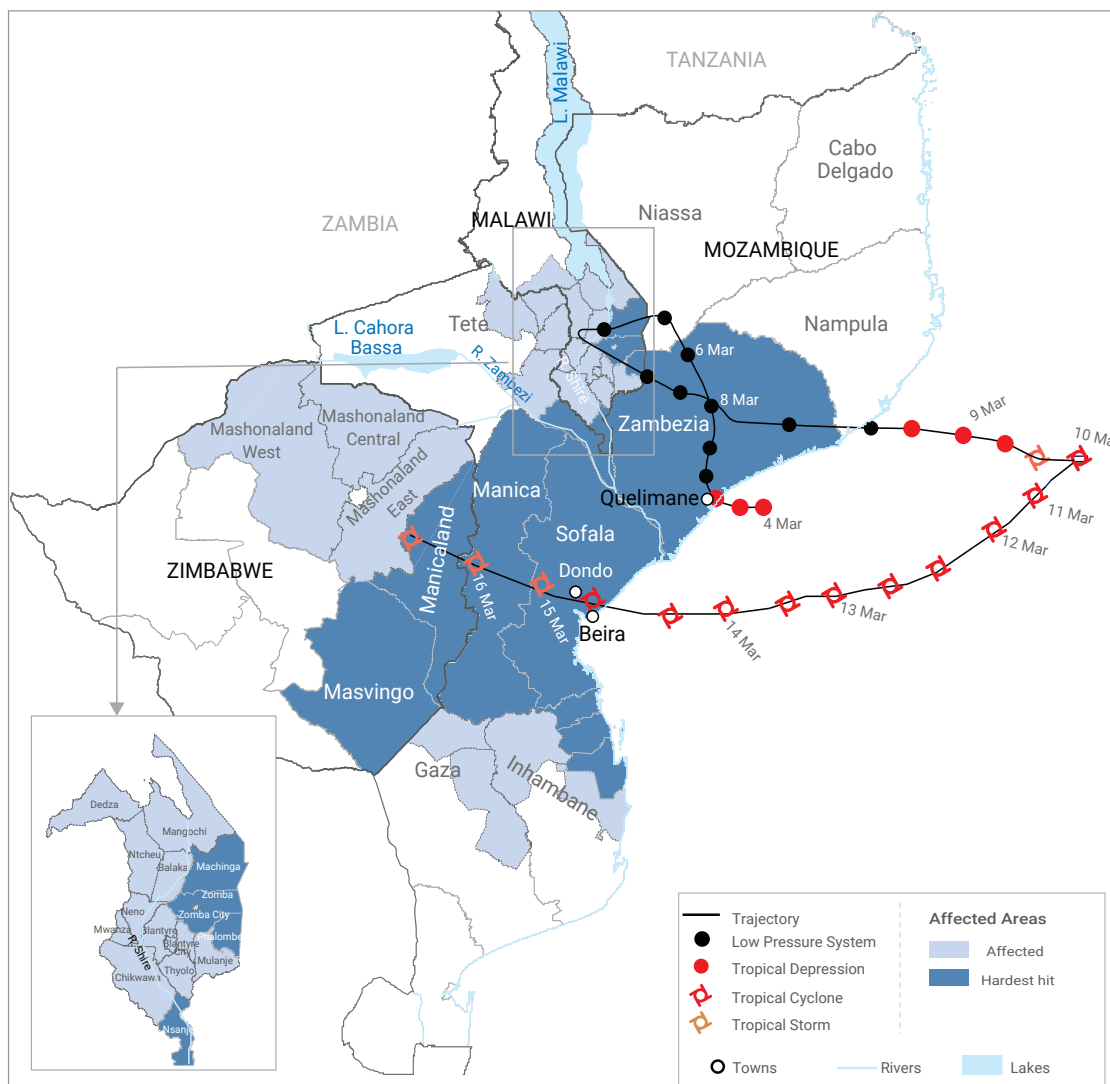
# Acronyms

AAP	accountability to affected people
AWET	Apostolic Women Empowerment Trust
C4D	Communication for Development
C4DiE	Communication for Development in Emergencies
CEWG	Community Engagement Working Group
DoDMA	Department of Disaster Management Affairs
DSMC	District Social Mobilization Committee
FORCOM	National Forum of Community Radios in Mozambique
GBV	gender-based violence
HH	household
ICS	Institute of Social Communication
IDPs	internally displaced persons
IFRC	International Federation of Red Cross and Red Crescent Societies
INGC	Mozambique National Institute for Disaster Management
IYCF	infant and young child feeding
KAP	knowledge, attitudes and practices
MoH	Ministry of Health
MSF	Médecins Sans Frontières
NGO	non-governmental organization
NSMC	National Social Mobilization Committee
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OCV	oral cholera vaccine
PIRCOM	Inter-religious Program against Malaria
PCA	programme cooperation agreement
PSEA	protection from sexual exploitation and abuse
RCCE	risk communication and community engagement
SBCC	social and behaviour change communication
UN	United Nations
UNICEF	United Nations Children's Fund
VHW	village health workers
WASH	water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization
YONECO	Youth Net and Counselling

# 1. Introduction

In March 2019, Cyclone Idai brought death and destruction to **Malawi, Mozambique** and **Zimbabwe** as a result of heavy rains and extensive flooding (Figure 1). The respective governments together with UNICEF and other partners, responded swiftly to the disaster. Rescue and relief operations were implemented immediately, saving many lives, and resources were rapidly mobilized to provide food and non-food items to people in the affected areas.

**Figure 1: Tropical Cyclone Idai - Cyclone and food affected areas**



Source: OCHA Southern Africa Cyclone Idai Snapshot, 9 April 2019

As part of the initial response, UNICEF conducted a rapid knowledge, attitudes and practices (KAP) survey on the information and communication needs of the most affected people in all three countries. The findings informed the lifesaving multisectoral C4D interventions which played a key supporting role in all three countries (Table 1).

The experiences of the three countries in successfully mainstreaming C4D across the Cyclone Idai response offer valuable learning for future humanitarian emergencies. These C4D interventions sit within UNICEF's broader multisectoral interventions across the humanitarian-recovery-development nexus.

**Table 1: Rapid C4D assessment survey example recommendations across the three countries**

Sector	C4D needs assessment recommendations
<b>Accountability to affected people (AAP)</b>	<ul style="list-style-type: none"> <li>• Improve accountability towards affected people giving them the chance to speak out about their problems and give feedback on the services required and received.</li> <li>• The needs assessment itself formed part of this process.</li> <li>• Increase community engagement in response actions including children and youth.</li> </ul>
<b>Child protection</b>	<ul style="list-style-type: none"> <li>• Inter-agency efforts to prevent and respond to sexual and gender-based violence in communities affected by the cyclone.</li> <li>• Raise awareness about and promote reporting for protection from sexual exploitation and abuse (PSEA) by humanitarian personnel.</li> <li>• Increase community awareness about the location of services which also included family reunification.</li> </ul>
<b>Education</b>	<ul style="list-style-type: none"> <li>• Use of schools as outreach sites during integrated immunization catch up campaigns.</li> <li>• Sensitization of teachers on various aspects of community engagement, PSEA, and accountability to affected people (AAP).</li> </ul>
<b>Health</b>	<ul style="list-style-type: none"> <li>• Prioritization of health and hygiene issues including improved community knowledge on key lifesaving practices.</li> <li>• Awareness campaigns including on counselling among the victims of Cyclone Idai.</li> <li>• Adherence to antiretroviral therapy for people living with HIV and other chronic illness medication, both at health facilities and within the community.</li> <li>• Messaging to support malaria prevention and oral cholera vaccines (OCVs), with priority being given to the most disaster affected areas.</li> </ul>
<b>Nutrition</b>	<ul style="list-style-type: none"> <li>• Promotion on the importance of breastfeeding.</li> </ul>
<b>Water, sanitation and hygiene (WASH)</b>	<ul style="list-style-type: none"> <li>• Promotion of safe WASH practices.</li> </ul>
<b>Community resilience</b>	<ul style="list-style-type: none"> <li>• Increase religious and community leader's engagement in response actions.</li> <li>• Reassurance among community members including that they will be notified in future about pending disasters such as floods, to mitigate the extent of losses, especially of loved ones.</li> <li>• Educate people to consider relocating to much safer places from flood prone areas.</li> </ul>
<b>Cross-sectoral interventions</b>	<ul style="list-style-type: none"> <li>• Promotion of integrated life-saving interventions.</li> <li>• Multi-channel communication activities to target the hard-to-reach and at-risk communities including the use of mass media and community outreach at food distribution sites, water points, religious gatherings and marketplaces for maximum reach.</li> <li>• Integrated community-based campaigns focusing on cholera prevention and control, community case management, HIV and AIDS, addressing educational needs of children, exclusive breastfeeding, infant and young child feeding (IYCF) and active screening for malnourished children during emergencies.</li> <li>• Messages on provision of service access to persons with disabilities, child protection and prevention of gender-based violence (GBV) integrated into the campaign messages.</li> </ul>



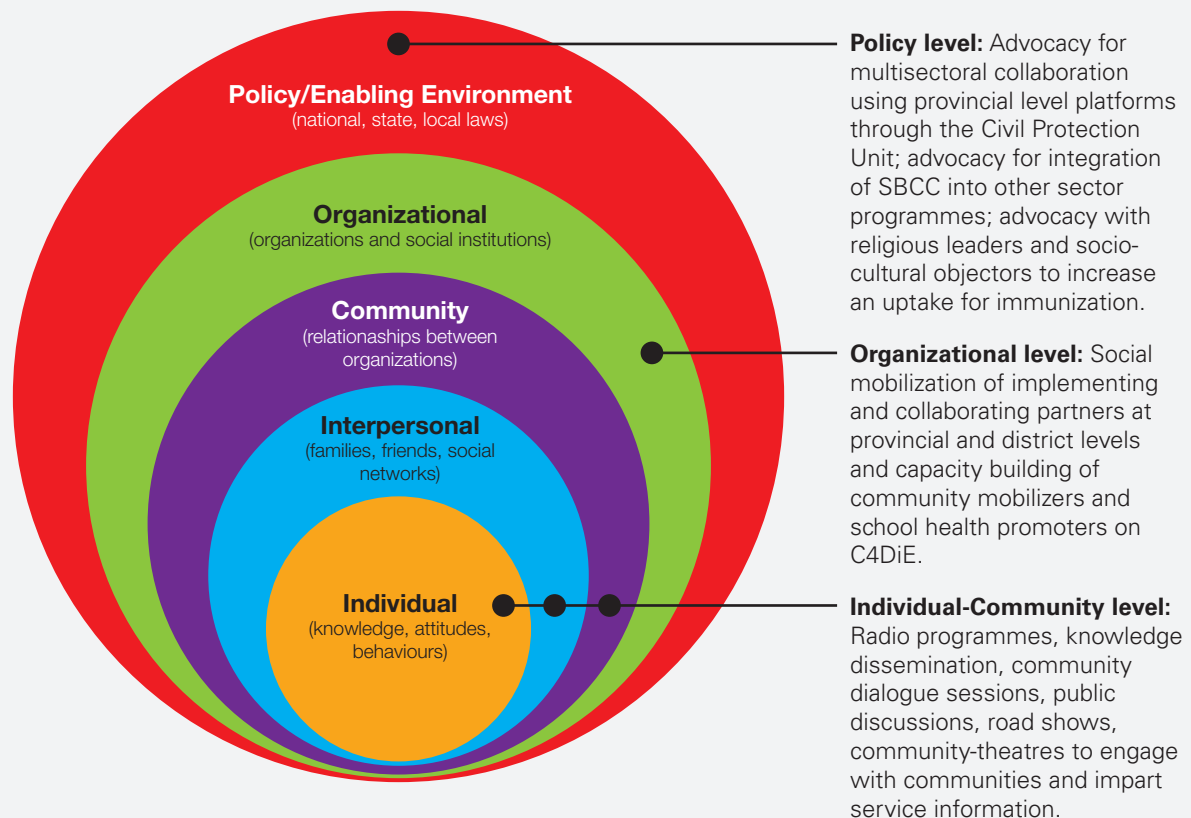
## Zimbabwe country spotlight: Social diagnostics assessment adopts socio-ecological model

UNICEF Zimbabwe's C4D section supported the Ministry of Health and Child Care with a multisectoral social diagnostics assessment to determine the social, behavioural and demand side barriers for an integrated emergency response and provide evidence for the development of a risk communication and community engagement (RCCE) plan.

The RCCE plan was designed to scale-up the C4D response to Cyclone Idai; promote uptake of life-saving services and interventions for people affected in Chimanimani and Chipinge districts; and build resilience by addressing the mid- and long-term response to the deteriorated health, nutrition and water, sanitation and hygiene (WASH) situation.

The socio-ecological model was adopted for C4D programming and targeted at different audiences, emphasizing the different levels of sustained change (Figure 2). Activities were implemented at provincial and district level.

**Figure 2: UNICEF Zimbabwe C4D activities for the Cyclone Idai response using the socio-ecological model**



Source: Case study author<sup>1</sup>.

Notes: C4DiE – communication for development in emergencies; SBCC - social and behaviour change communication.

1 Adapted from UNICEF ESARO, A Social and Behaviour Change Agenda for Inclusion and Equity in Education (undated) [www.unicef.org/esaro/Program\\_Brief\\_-\\_Inclusion.pdf](http://www.unicef.org/esaro/Program_Brief_-_Inclusion.pdf). Original source of the model is the Centers for Disease Control and Prevention, The Social Ecological Model: A Framework for Prevention, [www.cdc.gov/violenceprevention/publichealthissue/social-ecologicalmodel.html](http://www.cdc.gov/violenceprevention/publichealthissue/social-ecologicalmodel.html)

## 2. Background

The Tropical Cyclone Idai weather system affected nearly 3 million people, killing over 1,000 people, around half of them children. It proved to be one of the deadliest storms on record in the southern hemisphere. Hundreds of thousands of people found themselves in desperate situations, fighting for their lives, sitting on rooftops, in trees and other elevated areas. Displaced families who were lucky enough to reach help, were forced to shelter in transit centers, having lost everything<sup>2</sup>.

At the time, the United Nations (UN) declared the situation in Mozambique a Level 3 emergency, putting it among a handful of top global response priorities, on a par with Yemen, Syria and South Sudan. This followed the Government of Mozambique's first ever declaration of a national emergency<sup>3</sup>. Just a few weeks after Cyclone Idai, the country was hit by Tropical Cyclone Kenneth – the strongest cyclone to ever hit the African continent – and the first time in recorded history that two strong tropical cyclones hit Mozambique in the same season<sup>4</sup>.

### Box 1: National Impact of Tropical Cyclone Idai

#### National Impact of Tropical Cyclone Idai

In all three countries, there was extensive damage to crops, livestock and infrastructure including roads, bridges, water installations, power and communications, as well as to homes, schools, health facilities and community structures.

**Malawi:** About 868,900 people were impacted, with 59 deaths and 672 injuries recorded. Nearly 87,000 people were displaced but have since returned to their homes or resettled in new areas. Heavy rains caused by the cyclone led to severe flooding in the southern region of Malawi, which is prone to regular emergencies caused by floods, cholera outbreaks and lean seasons.

**Mozambique:** Mozambique was hit the hardest. 1.85 million people were in need of humanitarian assistance, with more than 600 deaths and 161,000 people sheltered in displacement sites. It is estimated that at least 2.6 million people were affected by the two cyclones (Idai followed by Kenneth in the north)<sup>5</sup>. Communities were initially displaced to 161 transit centres; approximately half of the yearly agricultural production was destroyed; and more than 50 health facilities and 3,500 school classrooms were damaged<sup>6</sup>.

**Zimbabwe:** According to the Government of Zimbabwe, Cyclone Idai caused disruption of livelihoods and the entire way of life of the affected communities. More than 270,000 people were affected, 129,600 of them children<sup>7</sup>, with 299 deaths reported and more than 186 people injured. The cyclone came during a particularly challenging time for the country which is still experiencing drought as well as grappling with economic challenges that have exacerbated humanitarian needs across the country. Prior to the cyclone, the food security situation in affected provinces was already dire.

2 UNICEF USA, In Cyclone Idai's Wake, UNICEF Is Mobilizing in Mozambique and Malawi, March 17, 2019 [www.unicefusa.org/stories/cyclone-idais-wake-unicef-mobilizing-mozambique-and-malawi/35671](http://www.unicefusa.org/stories/cyclone-idais-wake-unicef-mobilizing-mozambique-and-malawi/35671) accessed 2 October 2020

3 WFP, WFP classifies Mozambique as highest-level emergency, 22 March 2019 [www.wfp.org/news/wfp-classifies-mozambique-highest-level-emergency](http://www.wfp.org/news/wfp-classifies-mozambique-highest-level-emergency) accessed 2 October 2020













4 OCHA, Cyclones Idai and Kenneth [www.unocha.org/southern-and-eastern-africa-rosea/cyclones-idai-and-kenneth](http://www.unocha.org/southern-and-eastern-africa-rosea/cyclones-idai-and-kenneth) accessed 9 September 2020

5 Sum of 2 million in Integrated Food Security Phase Classification (IPC) phase 3 and phase 4 levels of food insecurity, 500,000 people living in damaged or partially damaged houses, 60,000 people in resettlement sites and more than 59,000 displaced by insecurity in Cabo Delgado, National Institute for Disaster Management (INGC) and Humanitarian Community.

6 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019 [www.unicef.org/evaldatabase/files/18\\_FEB RTE\\_Cyclone\\_Idai\\_FINAL\\_Volume\\_I\\_Main\\_Report.pdf](http://www.unicef.org/evaldatabase/files/18_FEB RTE_Cyclone_Idai_FINAL_Volume_I_Main_Report.pdf)

7 UNICEF, Mozambique: Children living in storm-affected areas face worsening food insecurity and nutrition crisis six months after Cyclone Idai, 14 September 2019



MALAWI	MOZAMBIQUE	ZIMBABWE
 <b>868,900</b> people affected	 <b>1.85m</b> people affected	 <b>270,000</b> people affected
 <b>86,980</b> displaced	 <b>129,000</b> displaced	 <b>4,500</b> displaced
 <b>59</b> deaths	 <b>447</b> deaths	 <b>172</b> deaths
 <b>672</b> injuries	 <b>1,522</b> injuries	 <b>186</b> injuries

**Source:** United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Southern Africa Cyclone Idai Snapshot, 9 April 2019

## The cyclone's negative impact on children

Conditions such as stagnant waters, lack of hygiene and overcrowding in temporary shelters easily led to outbreaks of diarrhoea, malaria and cholera to which children are especially vulnerable<sup>8</sup>. However, much-needed health facilities were incapacitated or compromised by the cyclone.

Prior to Cyclone Idai, the last major outbreak of cholera in Mozambique was in 2015<sup>9</sup>. However, on 27 March 2019, the Government of Mozambique confirmed the first case of cholera in the aftermath of Cyclone Idai. A total of 6,768 cholera cases and eight deaths were recorded in the four districts of Sofala province, with 70 per cent of cases (4,745) in Beira city.



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**Mozambique:** Helcio Filipe Antonio holds a boy named Anderson Tackdi at the Samora Michel High School in Beira. The Samora Michelle High School was used as a living space for people from Buzi, Mozambique who were displaced by the floods caused by Cyclone Idai.

<sup>8</sup> UNICEF, Cyclone Idai: More Than 1.5 Million Children Urgently Need Assistance Across Mozambique, Malawi And Zimbabwe – UNICEF, 27 March 2019 [www.unicef.org.uk/press-releases/cyclone-idai-more-than-1-5-million-children-urgently-need-assistance-across-mozambique-malawi-and-zimbabwe-unicef/](http://www.unicef.org.uk/press-releases/cyclone-idai-more-than-1-5-million-children-urgently-need-assistance-across-mozambique-malawi-and-zimbabwe-unicef/) accessed 5 October 2020

<sup>9</sup> Cambaza, E., Mongo, E., Anapakala, E., Nhambire, R., Singo, J., & Machava, E. (2019). Outbreak of Cholera Due to Cyclone Kenneth in Northern Mozambique, 2019. International journal of environmental research and public health, 16(16), 2925. [www.ncbi.nlm.nih.gov/pmc/articles/PMC6720437/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC6720437/) accessed 2 October 2020

# 3. Multisectoral C4D Response

## Overview

In all three countries, UNICEF strengthened its collaboration with existing partners and established new partnerships to support the delivery of C4D initiatives. An independent real-time evaluation of UNICEF's response found that C4D was relatively well-coordinated, largely because of its cross-cutting nature and constant interaction with different sectors and clusters (Table 2), and that some gender mainstreaming was evident in the C4D programming<sup>10</sup>, for example **Zimbabwe's** empowerment of women in the community through faith leaders, and mainstreaming of gender into theatre outreach. C4D-supported partners targeted children with disabilities-related key messages, for example in **Mozambique** and **Zimbabwe**.<sup>11</sup>

**Table 2: Qualitative assessment of C4D performance by country against key objectives of UNICEF's response strategies**

Country	Performance	Supporting narrative
Malawi	5	<ul style="list-style-type: none"><li>• Good cross-cutting approach that reached communities in different forms.</li><li>• Delayed start-up and reached only a third of the targeted population.</li></ul>
Mozambique	6	<ul style="list-style-type: none"><li>• Surpassed targets in terms of affected populations reached.</li><li>• Partners gave positive feedback about C4D but felt it was not sufficiently prioritized by UNICEF.</li><li>• Contributed to successful management of cholera.</li></ul>
Zimbabwe	8	<ul style="list-style-type: none"><li>• Good coverage and consistent multisectoral support.</li><li>• No outcome monitoring, although there was generally positive verbal feedback from users of C4D services.</li></ul>

**Source:** UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019

**Note:** Performance Rankings: (8-10: high standard of performance); (6-7: good performance); (4-5: mixed performance); (2-3: some shortfalls); (0-1: significant gaps).

## Multimedia communication channels extend the message

The use of multiple media channels including mass media (radio, television and newspapers) and mid-media (posters, brochures and billboards) were key to reaching a wide audience in all three countries.

In **Zimbabwe**, UNICEF supported nine roadshows hosted by local drama groups to provide therapeutic theatre for promoting early health-seeking behaviour, immunization, schooling, early childhood development and child protection in the aftermath of the cyclone.

In another intervention approach, partner Vuka Afrika harnessed community members themselves as the key catalysts for change in their communities. Community members with the potential to influence the community were drawn from each of the nine districts targeted under the project. The recruitment process was an open audition with the shortlisting process supported by the National Arts Council, the Ministry of Youth, Sport, Arts and Recreation, and communities themselves. The selected group of 40 influencers (15 female and 25 male) demonstrated their skills at participatory communication activities.

<sup>10</sup> UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019

<sup>11</sup> Ibid

Key communication tools and messages were co-created with the community influencers and were informed by the KAP survey on the communication situation within the affected areas, namely Chimanimani and Chipinge. The aim of the drama presentations in the social mobilization processes that followed were two-fold:

- To provide information about positive health-seeking behaviours, and
- To stimulate group conversation within the communities about pertinent issues to the communities themselves.

Scripts were developed for specific audiences representing children, adolescents and adults (including gender-sensitive approaches for women), for drama presentations by the community influencers themselves for their own communities. The roadshows used puppet theatre, music, presentations and dance to mobilize communities in Chipinge and Chimanimani to immunize their children against vaccine-preventable diseases using mobile services in areas where health facilities were made inaccessible by Cyclone Idai.

Following each drama performance, the community influencers engaged the communities in intense conversation. Social mobilization sessions were carried out mainly in primary and secondary schools, local churches, and social and business centres.

A training of trainers on social and behaviour change communication (SBCC) for 17 Vuka Afrika artists acting as community mobilizers (7 female and 10 male) was conducted to address how to enhance accountability to affected people (AAP), and mainstream gender and disability into their theatre for development programmes.<sup>12</sup>



© UNICEF Zimbabwe/2019/Shepherd Tozvireva

**Zimbabwe:** Community influencer “edutaining” children at a UNICEF Expanded Programme on Immunization (EPI) Catch Up Campaign Roadshow at Nhedziwa Shopping Centre.

<sup>12</sup> Zimbabwe Humanitarian Situation Report, Cyclone Idai Situation Report #7: 31 May 2019 <https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Zimbabwe%20Cyclone%20Idai%20Humanitarian%20Situation%20Report%20%237.pdf>



In **Mozambique**, partnerships with Radio Mozambique, the National Forum of Community Radios in Mozambique (FORCOM), and the Institute of Social Communication (ICS) mobile cinema units were critical in quickly engaging community outreach mechanisms and in mobilizing communities to adhere to the oral cholera vaccine (OCV) campaign (see Section 4 below), as well as promoting life-saving and protective behaviours including in resettlement areas. The strategy was enhanced through the use of participatory programming such as interactive radio programmes and debates, to reach affected communities in accommodation centres, high-risk neighbourhoods and resettlement areas. A multi-pronged C4D strategy for the initial response focused on leveraging existing partnerships with media, community and religious networks and use of U-Report (known as SMS BIZ in Mozambique) (see below) to engage adolescents and young people.

In **Malawi**, UNICEF engaged returned internally displaced persons (IDPs) with appropriate integrated messages around child protection, education, health, nutrition and WASH through various channels.

Through the National Social Mobilization Committee, UNICEF supported national community engagement coordination meetings to consult with stakeholders on relevant messages and activities to support early recovery, following decommissioning of the majority of the IDP camps. Similar coordination meetings were held in six priority districts.

UNICEF partners, Centre for Development Communications, the Story Workshop Educational Trust, United Purpose, and Youth Net and Counselling (YONECO), mobilized 36 radio listening action groups in the six priority districts to implement community actions for recovery and resilience and empower members' voices to enhance accountability among duty bearers. Theatre for development sessions were conducted among returning IDPs, as well as dialogues with community leaders to facilitate the enforcement of life-saving behaviours. This was complemented by broadcasts from five community radios (Chanco, Dzimwe, Ghaka, Nyathepa, YONECO FM) reaching over 100,000 people every day in nine flood-affected districts. In addition, partners conducted counselling to children and youth using camp counsellors and teachers.

Voices from the community were also amplified on national media platforms that included print and electronic media. This increased visibility of issues faced by survivors and garnered more support from politicians and the public<sup>13</sup>.



© UNICEF Malawi / Fred Yiwombe

**Malawi:** A community journalist captures dialogue for amplification on community radio. Nsanje District 2019.

<sup>13</sup> For example: Nyasa Times, Land ownership hindrance for relocation of Nsanje, Chikwawa people from floods-prone areas, 15 June 2019 [www.nyasatimes.com/land-ownership-hindrance-for-relocation-of-nsanje-chikwawa-people-from-floods-prone-areas/](http://www.nyasatimes.com/land-ownership-hindrance-for-relocation-of-nsanje-chikwawa-people-from-floods-prone-areas/) accessed 11 November 2020

## SMS-based community engagement

In all three countries, UNICEF used U-Report – UNICEF’s SMS-based citizen engagement platform – to conduct community assessments via polls and to convey life-saving key messages.

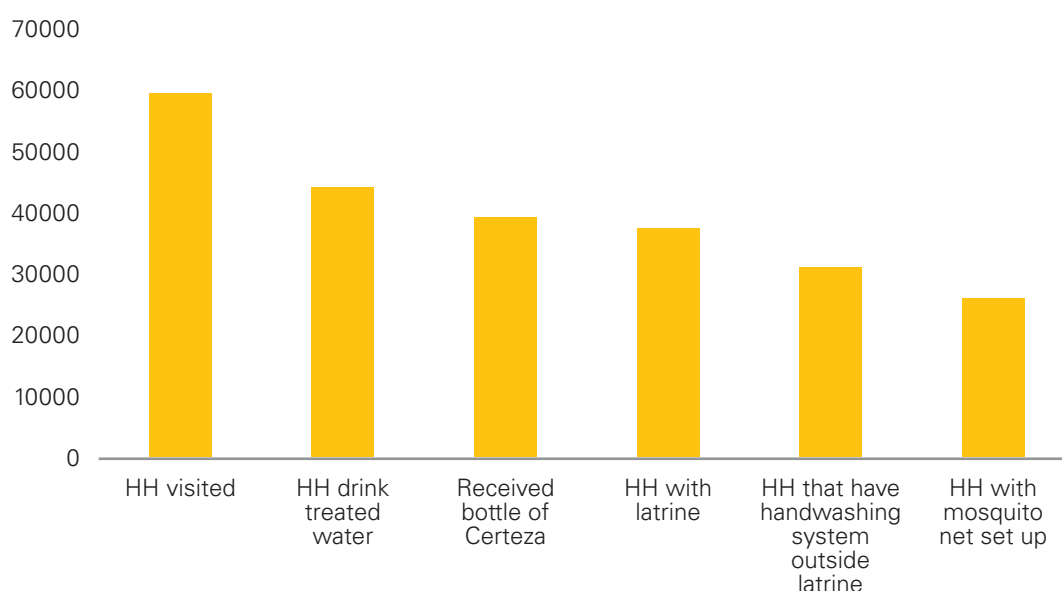
U-Report is powered by RapidPro – UNICEF’s free, open source software that allows users to easily build and scale mobile-based applications to enable real-time data collection and mass-communication with target end-users, including community members and frontline workers<sup>14</sup>. U-Report thereby allows for rapid adjustments in a response, based on evidence and community feedback following emergencies, as well as ensuring harmonized messages.

The tool allowed the country offices to address the challenge of insufficient evidence needed for effective programming, by collecting data in hard to reach areas. In **Mozambique** for example, U-Report was used by social mobilizers to reach affected people in the four districts in Sofala, one of the provinces hit by the cyclone. U-report was also used for one-on-one counselling to engage adolescents during the response, whereby young people had access to a counsellor via SMS, to ask questions or obtain information.

Taking advantage of the UNICEF lead on humanitarian coordination in the field, the use of U-Report and RapidPro as data collection tools was further amplified through national and international partners within Mozambique’s Community Engagement Working Group (CEWG) which was also using the platform. The C4D section collaborated with CEWG in using U-Report to provide routine behavioural monitoring of community members, malaria prevention and rumour tracking.

Specific indicators related to the consumption of treated water, handwashing practices, the use of latrines, spraying houses against malaria mosquitos, and exclusive breastfeeding were collected, as well as identified rumours and/or misinformation regarding these topics (Figure 3). The tracking of rumours by location allowed the reframing of C4D interventions within the context of the CEWG, in order to promote healthy behaviours.

**Figure 3: Sample U-Report questionnaire for households (HHs) through social mobilizers in Mozambique**



Source: UNICEF Mozambique

Note: Certeza is a household water treatment product.

14 UNICEF RapidPro [www.unicef.org/innovation/rapidpro](http://www.unicef.org/innovation/rapidpro) accessed 5 October 2020

In **Malawi**, U-Report was activated to collect real-time data aimed at assessing the needs of the affected populations and also to disseminate educational messages. The needs assessment data were shared with Malawi Department of Disaster Management Affairs (DoDMA), through the UN Resident Coordinator's Office, which was coordinating all the response activities by UN agencies. Through direct engagement with communities through U-Report in the emergency response, UNICEF, other UN agencies and the Government were able to measure the magnitude of the impact of the rains and the floods and to obtain crucial information on what needed to be prioritized in the emergency response.<sup>15</sup>

In **Zimbabwe**, a rapid assessment was conducted in the two affected districts, Chimanimani and Chipinge, showing that text messaging was the second most preferred means of communication, after traditional media<sup>16</sup>.

UNICEF worked with government line ministries and the Civil Protection Unit to disseminate critical life-saving information through U-Report on health, nutrition, WASH, child protection, HIV and education to address immediate needs of affected people. U-Report was used to<sup>17</sup>:

- Assess affected people's challenges in accessing health service delivery;
- Identify geographical areas and populations that were not reached by the response;
- Issue calls to action by broadcasting important activities such as cholera and measles vaccinations;
- Provide an alternative education and awareness-raising tool for populations in inaccessible areas, where the road network was wiped out by the floods.

In total, over 31,000 people were reached in affected areas and more than 14,000 new U-Reporters joined in the worst-affected province, Manicaland. Engagement with affected communities through U-Report contributed to an increase in turnouts for vaccination campaigns.<sup>18</sup>

### **Mozambique country spotlight: Community Engagement Working Group key to the C4D and health response**

In Mozambique, C4D teams worked closely with the Department of Health Promotion from the Ministry of Health (MoH); the Institute of Social Communication (ICS); radio and television; and religious, youth and community leaders and groups. The partnership aimed to establish and strengthen SBCC and related coordination mechanisms to ensure that all partner activities are coordinated and harmonized at national and subnational level.

In March 2019 at the outset of the response, two communication working groups were established. Due to the scale of the emergency response, it was helpful to have two working groups that could focus on specific priorities related to the affected population and people in need:

- A working group with the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and the World Food Programme (WFP) focused on community engagement as part of OCHA's coordination role;
- A C4D sub-working group under the Health Cluster worked closely with health and WASH teams and was critical to the cholera outbreak response (Section 4 below).

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15 UNICEF, AAP Case Study, Use of U-Report to strengthen humanitarian responses. Malawi: getting to the hard-to-reach during Flood Emergency, October 2020

16 UNICEF, AAP Case Study, Use of U-Report to strengthen humanitarian responses. Zimbabwe: citizen engagement in Cyclone Idai response, October 2020

17 Ibid

18 Ibid



By May 2019, the two working groups were merged into one CEWG which at that time was led by UNICEF and MoH with active participation of international partners such as International Federation of Red Cross and Red Crescent Societies (IFRC), Médecins Sans Frontières (MSF), the World Health Organization (WHO), and several other international and national non-governmental organizations (NGOs).

Benefits and outcomes of the consolidated CEWG included:

- All partners involved in community outreach activities used the same monitoring tool using UNICEF's RapidPro platform, with associated training of social mobilizers.
- The CEWG was key in supporting several health-related interventions even after the cholera emergency response had been contained, focused on promoting behaviours related to hygiene, breastfeeding, complementary feeding, immunization and violence prevention.
- CEWG was instrumental in the close coordination of and promotion of protection from sexual exploitation and abuse (PSEA) by humanitarian personnel using common communication platforms that all partners were leveraging to engage with communities. CEWG specifically promoted the use of the Linha Verde (green line) hotline which was established by WFP following Cyclone Idai as a complaints and feedback mechanism for communities.

## Engaging religious leaders

In **Mozambique**, UNICEF played a key role in gaining support from the Islamic Council of Mozambique for the OCV campaign during the ongoing Ramadan period and strengthening its support for the second round of vaccination in Cabo Delgado Province. The reactivation of regular national partnerships in the affected provinces with the Inter-religious Program against Malaria (PIRCOM) – a Mozambican NGO – led to the training of 100 religious leaders and 100 youth leaders on health-seeking behaviours, child protection, PSEA, and community engagement.

The trained leaders reached around 4,800 people in July 2019 alone using door-to-door approaches and religious gatherings, in four affected districts<sup>19</sup>. By the end of August, more than 129,000 families had been reached through the partnership between PIRCOM and community mobilizers from IFRC. UNICEF supported social mobilization for the OCV campaign through more than 200 religious, traditional and community leaders, in collaboration with local government.

In **Zimbabwe**, an effective response was challenged by the fear and anxiety of members of the Apostolic religion due to their spiritual beliefs around the cause of Cyclone Idai, combined with vaccine hesitancy and refusal and a lack of trust in service providers.

UNICEF implementing partner, the Apostolic Women Empowerment Trust (AWET) conducted widespread mobilization of the community and raised awareness on key priorities for WASH promotion, education, child protection, HIV and AIDS, health, nutrition, and child rights. AWET involved Apostolic leaders to empower mostly women, as they look after the sick and children, and address issues of socialization and trust. Mobilization was done widely and monitoring of the project took place in the real-time evaluation with UNICEF.

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19 Mozambique Humanitarian Situation Report, Cyclones Idai and Kenneth Situation Report #13: August 2019, 30 August 2019 <https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Mozambique%20Humanitarian%20Situation%20Report%20No.%2013%2028Cyclones%20Idai%20%26%20Kenneth%29%20-%20For%20August%202019.pdf>



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**Zimbabwe:** Hope Dunira of AWET explaining information, education and communication (IEC) materials on water, sanitation, health and hygiene with Apostolic women in Chipinge, 06 June 2019.

## Accountability to affected people

AAP is an active commitment by humanitarian actors and organizations to use power responsibly by taking account of, giving account to, and being held to account by the people they seek to assist. In this context, RCCE in humanitarian action is a two-way dialogue between crisis-affected communities, humanitarian organizations and, where possible, within and between communities. It seeks to enable affected people to meet their needs, address their vulnerabilities and build on their pre-existing capacities.

In **Mozambique**, significant efforts were made in the areas of AAP, RCCE and SBCC. Within 48 hours, UNICEF was in direct communication with communities in the affected areas, with staff joining the national multisectoral assessment and response team. SMS BIZ reporters – who are mostly 15-24 year old – from Sofala and Manica provinces were polled (1,773 responses, 73 per cent response rate) to understand the immediate needs of the affected population, including of children and caregivers. These findings were communicated to cluster leads to help support the response.

The CEWG in Mozambique understood the potential and the need for two-way communication channels which facilitates more systematic feedback, complaints and actions by and from affected people. To this end, Radio Mozambique, in partnership with UNICEF, adapted two of their weekly programmes in three languages into an interactive feedback platform in which communities are encouraged to call in with questions, which were then addressed by experts. Radio journalists also started to collect feedback and complaints from community members in the most affected areas.

CEWG and partners also improved feedback mechanisms – such as reporting forms for social mobilizers, RapidPro questions, and multimedia roadshow sessions – to include qualitative as well as quantitative data.

The dedicated toll-free hotline number Linha Verde was established as part of the emergency response to serve as a feedback and complaints mechanism for affected people, where they can voice their concerns regarding services and products available to them. UNICEF also supported a joint platform created to speed up the resolution of cases, ensuring that communities were kept informed of follow-up actions taking place based on their feedback. To further strengthen AAP, UNICEF also supported the development and adaptation of AAP tools for use by UNICEF and its partners. This combined approach allowed for effective inter-agency coordination and accountability.

## Inter-agency efforts to prevent and respond to sexual abuse

A specific focus in each country was engaging in inter-agency efforts to prevent and respond to sexual exploitation and abuse in communities affected by the cyclone. UNICEF supported these efforts by training facilitators, establishing child protection committees, and through drama and communications with affected communities. This increased awareness around PSEA and sexual and gender-based violence, and extended into the recovery phase. In **Mozambique** and **Malawi**, it was anticipated that this C4D response would help transform behaviours in the longer term.<sup>20</sup>

PSEA was integrated through mandatory trainings for all humanitarian workers including UN agencies, international and national NGOs, as well as local associations working in the field. In **Mozambique**, UNICEF as CEWG leader, undertook a quick assessment and mapping of existing community engagement activities, feedback mechanisms and social mobilizers in all resettlement sites, which was shared with humanitarian partners, and served as a guide to strengthen and improve community-based interventions (Box 2).

### Box 2: Mapping of AAP and PSEA in Mozambique

#### PSEA and AAP assessment and mapping in Mozambique

- Conducted quick assessments in each of 12 resettlement sites on existing community engagement activities, including observations around the Linha Verde hotline and/or other complaints mechanisms being used;
- Focus group discussions in two locations on AAP and PSEA;
- Focus group discussions on AAP and Linha Verde in particular, in the context of voucher distribution under the UNICEF-WFP joint voucher project;
- A report, *Community and Organizational Perceptions on Feedback: Cyclone Idai Response, Mozambique* was developed with UNICEF technical support and was translated and printed by UNICEF. The report is available here: [www.humanitarianresponse.info/en/operations/mozambique/document/community-and-organizational-perceptions-feedback-cyclone-idai](http://www.humanitarianresponse.info/en/operations/mozambique/document/community-and-organizational-perceptions-feedback-cyclone-idai).

#### Malawi country spotlight: Community engagement sub-group coordinates the cyclone Idai response.

In Malawi, lessons learned on advanced preparedness from previous floods paid off in the Cyclone Idai response.

20 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019





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**Malawi:** A working session of DoDMA, NSMC and UNICEF discussing the roll-out the Malawi national community engagement sub-group, 22 March 2019

A National Social Mobilization Committee (NSMC) was established in 2011 and revitalized in 2016 to act in an advisory role to ministries, departments and agencies on issues pertaining to social mobilization in the country. The committee is composed of six key Government ministries – Civic Education and Unity; Education, Science and Technology; Gender, Community Development and Social Welfare; Health; Information and Communications Technologies; and Local Government – and the Department of Disaster Management Affairs (DoDMA).

DoDMA in collaboration with UNICEF and NSMC agreed to form a community engagement sub-group at the national and district levels using the NSMC and District Social Mobilization Committees (DSMCs) as a vehicle. The role of this sub-group was to coordinate multisectoral communication and community engagement activities for the Cyclone Idai response.

The NSMC – through the community engagement sub-group – undertook to:

- Conduct district and national community engagement coordination meetings;
- Attend national and district cluster meetings to identify communication issues;
- Orient DSMCs in community engagement approaches and data collection;
- Monitor information and data collection on flood survivors in camps and communities;
- Support monitoring and supervision of DSMCs.

### **Impact of the community engagement sub-group**

In addition to drawing on networks of Government and its partners, the community engagement sub-group successfully leveraged pre-existing community level systems to help with community engagement.

Florence Harawa, Zomba District Council's DoDMA Officer and a member of the sub-group comments: *"Coordination worked well from the district level down the line to area and village levels."*

She added, *“At the onset of the response, we used channels in grass roots structures that allowed us to effect two-way communication; bottom-up and top-down. We employed more communication channels including community radio stations, such as YONECO FM, and Traditional Authorities (TAs) like TA Mwambo – which are very vibrant, active and able to communicate regularly with people at the localized level.”*

The coordination proved effective during the Cyclone Idai emergency response and allowed Government teams to respond to a range of needs.

Effective community level civil committees which were formed/revamped during the emergency, are still functional since Cyclone Idai and continue to follow up on programmes focused on GBV, agriculture and health.

TA Mwambo continues to support emergency preparedness and resilience. Florence comments: *“Its input has been a valuable addition to our contingency plans and response and recovery mechanisms.”*

DoDMA continues to provide the community with equipment such as wind and river gauges with associated training on how to operate, read and interpret the devices and information, and peer-support WhatsApp groups across the district.



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**Malawi:** Ms Florence Harawa, DoDMA Officer, Zomba District Council (left).



## 4. Impact: Reaching those in need after Cyclone Idai

C4D was used to successfully mobilize communities, reach those in need with essential life-saving messages (Box 3) and to support a robust cholera response.

### Box 3: Impact of C4D interventions in the Cyclone Idai response

#### Impact of C4D interventions by country

##### Malawi

- By May 2019, **150,000 people were reached repeatedly with key messages** through different approaches including radio, drama, health talks, roadshows, and community dialogues.
- A rapid C4D assessment in July 2019 conducted among partners and caretakers, adolescents and opinion leaders living in selected camps (n=309) showed that **98 per cent of people living in camps surveyed were reached with at least one C4D intervention** that included posters, leaflets, drama, music, counselling, health talks and radio, and the majority could recall key messages, including 85 per cent who could recall messages on handwashing.<sup>21</sup>
- **Results of monitoring for C4D activities** indicated that among all individuals that had access to soap in the camps, 98 per cent used it in critical moments, 84 per cent of breastfeeding mothers successfully maintained breastfeeding, 52 per cent knew how to report on abuse and exploitation, and 83 per cent of individuals who had bed nets slept under them. The results of the survey helped to design a plan for longer-term resilience building efforts with these disaster-prone communities.<sup>22</sup>

##### Mozambique

- During the period March–August 2019 **1,128,844 people were reached** with key lifesaving and behaviour change messages on health, nutrition and safe and appropriate sanitation and hygiene practices through C4D interventions representing 114 per cent of the target.<sup>23</sup>
- Additionally, **during the peak of the response until June 2020**, about 1,200 social mobilizers reached 150,000 to 170,000 people per week, and multi-media mobile units engaged around 15,000 people per week, mostly in hard to reach districts and communities.
- In Sofala, under the **UNICEF-WFP joint voucher project**, 60 staff and community mobilizers were trained on effective interpersonal communication, positive hygiene and nutrition practices, feedback mechanisms and PSEA key messages. Specific IEC materials, as well as behaviour-related household surveys were developed and pre-tested in the targeted communities. During the project's implementation, more than 22,000 people were reached through interpersonal communication and door to door visits.
- Results from **the household surveys revealed** that the mobilizers were the main influencers regarding item choices at the shops and at home, as well as the main source of information on AAP and key hygiene and nutrition practices. The surveys yielded generally positive attitudes, practices and beliefs about key topic areas and some familiarity with key topic areas.<sup>24</sup>

21 Malawi Humanitarian Situation Report, Reporting Period: January to December 2019 <https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Malawi%20Humanitarian%20Situation%20Report%20-%20End-Year%202019.pdf>

22 Ibid

23 Mozambique Humanitarian Situation Report, Cyclones Idai and Kenneth Situation Report #13: August 2019, 30 August 2019

24 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019



## Zimbabwe

- By the end of May 2019, **237,333 people were provided with critical WASH, HIV, nutrition, education, and child protection information** through C4D interventions, representing 110 per cent of the target.<sup>25</sup>
- **Communities appreciated messages** on the benefits of immunization, micronutrients, breastfeeding and complementary feeding.<sup>26</sup>
- For intensive hygiene promotion, **25 environmental health technicians mobilized communities** in high-risk wards of Chimanimani District motivating communities to adopt positive food and personal hygiene practices.<sup>27</sup>
- In total, 796 village health workers (VHWs) and 110 health workers (environmental health technicians, nutrition ward coordinators, and field orderlies), and community and religious leaders were **sensitized on health promotion approaches such as community engagement**.

## Zimbabwe country spotlight: Capacity building of Village Health Workers

UNICEF Zimbabwe's C4D Section supported capacity building of VHWs throughout the emergency response.

VHWs mobilize communities to:

- Increase the uptake of immunization services and adopt health seeking behaviours;
- Promote the importance of growth monitoring and home-based care for diarrhoea;
- Promote optimal maternal nutrition and IYCF;
- Increase awareness of the prevention of abuse of children;
- Increase awareness of cervical cancers in communities.

VHWs are motivated by service and contribution to their communities and have been cited in UNICEF KAP surveys as the most trusted sources of information in their communities. VHWs engage with people at household level to impart knowledge and skills for positive health seeking behaviour, and are most frequently consulted for advice. VHWs therefore proved to be a vital part of the Cyclone Idai C4D response in Zimbabwe.

25 Zimbabwe Humanitarian Situation Report, Cyclone Idai Situation Report #7: 31 May 2019 <https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Zimbabwe%20Cyclone%20Idai%20Humanitarian%20Situation%20Report%20%237.pdf>

26 Ibid

27 Ibid

## Cholera prevention success

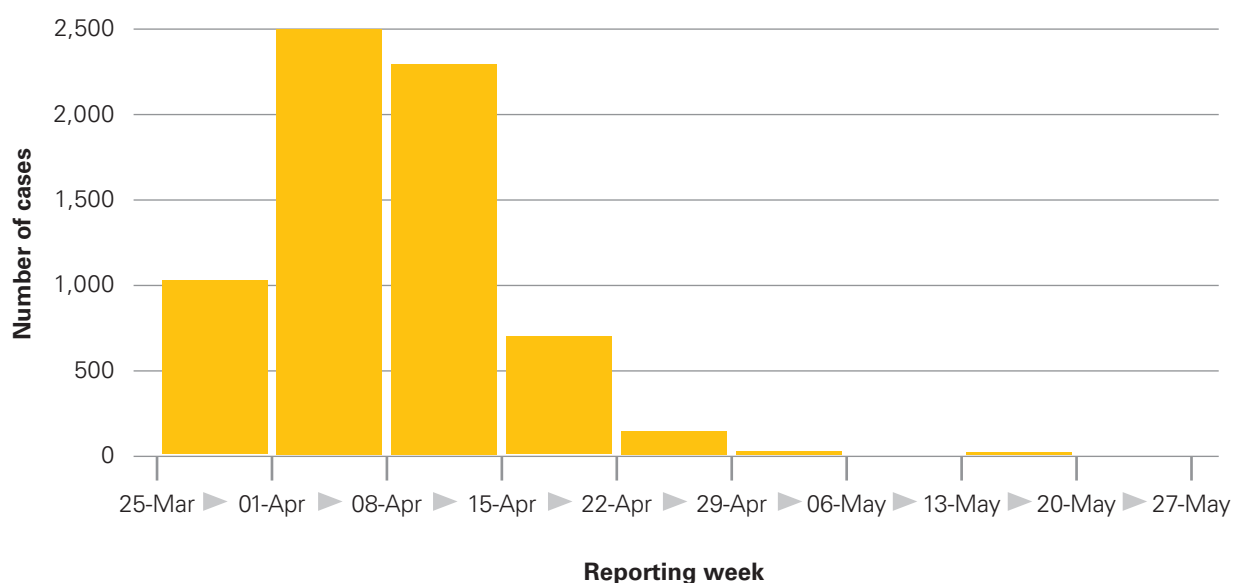
A key success story for UNICEF during the cyclone response was the containment of cholera, which is endemic in all three countries and could itself have resulted in another emergency. Priority was given to cholera management, and feedback from affected communities in all three countries confirmed a clear alignment with priority humanitarian needs at the beginning of the response (i.e., during the first 4–5 weeks)<sup>28</sup>.

UNICEF C4D, health and WASH sections in each country were active from the start of the emergency and worked in partnership with WHO and NGO partners to support MoH preventive measures through the dissemination of hygiene messages, water treatment and chemical distribution. The real-time evaluation highlighted the cholera response in each country as a notable good practice example of different UNICEF sections working together.<sup>29</sup>

For example, in **Mozambique**, the WASH response included identification of cholera hotspots based on epidemiological data in coordination with MoH partners, leading to daily targeting of WASH interventions such as house-to-house visits for message dissemination and home delivery of chlorine for water treatment. C4D was instrumental in supporting the OCV campaign to reduce the risk of refusals.

Youth were a key target in the intervention through activating an existing network of U-Reporters to facilitate the collection and provision of information to this specific group and ensure two-way communication. Young people provided key information related to the OCV campaign and relayed additional information on cholera prevention.

**Figure 4: Suspect cholera cases by week of reporting, Sofala Province, Mozambique (March – June 2019) (n=6,768)**



\*Mozambique Ministry of Health, et al., Weekly Epidemiological Bulletin, Publication No. 5, May 27 - June 2, 2019

**Source:** UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019 [www.unicef.org/evaldatabase/files/18\\_FEB RTE\\_Cyclone\\_Idai\\_FINAL\\_Volume\\_I\\_Main\\_Report.pdf](http://www.unicef.org/evaldatabase/files/18_FEB RTE_Cyclone_Idai_FINAL_Volume_I_Main_Report.pdf)

28 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019

29 Ibid

# 5. Learning

## Lesson 1: Enhance preparedness for an effective response

In **Mozambique**, UNICEF's preparedness in C4D assisted with an effective response. Two key activities were undertaken. Firstly, adapting pre-existing partnerships and programme cooperation agreements (PCAs) with several local organizations. This supported community engagement during the response, particularly in ensuring rapid training and social mobilization. Secondly pre-positioning IEC materials to allow faster distribution in the field for partner use, and to ensure harmonization for social mobilizers in the field through using the same guides.

In addition, C4D supported preparedness for future disasters through awareness-raising campaigns informing communities about selecting settlement areas, building resistant structures and health risks during disasters. The real-time evaluation recommended further improving UNICEF's preparedness, notably by incorporating AAP and cash-based assistance into joint preparedness planning with partners through engagement with the Community Engagement and Cash Working groups.<sup>30</sup>

UNICEF Mozambique is proposing the creation of a RapidPro/U-Report talent pool that could be activated to support human resources needed to analyse data.

## Lesson 2: Data management supports the C4D response

The use of RapidPro and U-Report, combined with other platforms and interventions, made an important contribution in supporting social mobilization and reinforcing community engagement in all three countries.

In **Malawi**, U-Report was key to ensuring that communities in humanitarian crisis situations were well linked with the response teams, through allowing UNICEF and partners to receive feedback from and disseminate life-saving information to affected communities<sup>31</sup>.

In **Mozambique**, feedback from affected people was difficult to gather due to limited access to phones and low connectivity. To address this major constraint, social mobilizers were deployed through the CEWG to administer surveys and collected data through face-to-face interviews with the population. The information collected was then given to a supervisor managing 20–30 social mobilizers and who, on a daily basis, uploaded and compiled the data onto U-Report<sup>32</sup>. This manual data collection by social mobilizers, adapted to feed the data delivered through U-Report, proved to be a successful approach – ensuring a systematic, planned and evidence-based strategic process to adapt the response and promote positive behaviours and social change amongst affected populations. The coordination of C4D interventions through U-Report based on monitoring, measurements and results overcame the limited access to technology. It provided lessons on how to overcome the challenges faced in the field in developing contexts, which are exacerbated by emergencies.

In **Mozambique**, the evidence base and the simple and rapid monitoring system provided an opportunity to harmonize data across projects and all the provinces in an emergency. This requires additional human resources support to organize all the data collected in a simple and comprehensive weekly visualization for all the partners involved. C4D monitoring tools need to be designed, adapted and pre-tested for community-based activities through different platforms and approaches to be used in emergency responses.

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30 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019

31 UNICEF, AAP Case Study, Use of U-Report to strengthen humanitarian responses. Malawi: getting to the hard-to-reach during Flood Emergency, October 2020

32 UNICEF, AAP Case Study, Use of U-Report to strengthen humanitarian responses. Mozambique: Supporting social mobilizers to reach affected communities with life-saving information, October 2020

UNICEF **Zimbabwe** observed that preparedness and needs assessment are the key pillars in emergencies. UNICEF can mainstream U-Report in the preparedness phase and ensure that resources are planned and pre-positioned for roll-out in affected communities. U-Report can also serve as a vital early warning mechanism, alerting U-Reporters on the ongoing situation and prompting communities to make informed decisions during an impending emergency<sup>33</sup>.

In **Malawi** DoDMA faced a number of challenges including redundant data collection and gaps in the rapid assessment tools. They are therefore preparing to use electronic versions of the tools where the community can directly enter data.

### Lesson 3: Need for improvements to community complaints and feedback protocols

In **Malawi** and **Mozambique**, use of inter-agency complaints feedback mechanisms as part of the Cyclone Idai response was consistent with good practice<sup>34</sup>.

However, there is need for investment in the timely operation of complaints mechanisms with enhanced protocols. In **Malawi** for example, the DoDMA continued to receive late cases, which created challenges for the smooth follow up of work processes. There are also governance/leadership shortcomings, and protection issues reported on YONECO FM community radio hotlines, without the protocols to deal with these. In addition, communities do not sufficiently report protection issues in a timely manner, leading to operational challenges for the child protection programme.

### Lesson 4: Intervention sustainability needed for the recovery phase

Government authorities in both **Malawi** and **Zimbabwe** indicated that more challenges have been noticed in recovery than in response, as many partners which were present for the response leave immediately when the recovery phase starts. This points to the need for more long-lasting interventions. Further, partners provide critical goods to the community but do not take into account the need to maintain the assets that were damaged by the cyclone or disaster event.

In **Zimbabwe**, working with local community members as catalysts in carrying out the actual intervention activities has proven to be very effective not only for easy engagement but also for a more sustainable outcome.

### Lesson 5: The importance of engaging religious leaders, youth and other key influencers

In **Mozambique**, the partnership with PIRCOM revealed that engaging communities through religious leaders and properly trained youth volunteers is the most effective way to ensure adoption of lifesaving practices and uptake of services is successfully promoted.

The data collection through U-Report which allowed the Mozambique CEWG to track rumours by location, allowed follow-up interventions involving community leaders and key influencers. This is a good practice to be adopted in other provinces during emergencies.

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33 UNICEF, AAP Case Study, Use of U-Report to strengthen humanitarian responses. Zimbabwe: citizen engagement in Cyclone Idai response, October 2020

34 UNICEF, Independent Real-Time Evaluation of UNICEF's response to Cyclone Idai in Mozambique, Malawi and Zimbabwe, Volume I – Main Report, December 2019

UNICEF Mozambique recommended that a training plan for youth platforms be established focusing on emergency response, to include SBCC in emergency preparedness and training young people to use technology safely and responsibly, as part of the building back better initiative.

In **Zimbabwe**, the partnership with AWET was instrumental in engaging vaccine-hesitant groups during the two rounds of the OCV campaign.

## Lesson 6: The significance of coordination

In **Mozambique**, UNICEF's lead of the CEWG proved pivotal to the response. It allowed UNICEF to strengthen its lead role on C4D including communication, social mobilization and community engagement, which helped ensure harmonized and consistent activities throughout the different affected areas.

UNICEF **Malawi** found that district and community level coordination is more effective when led by decentralized structures. This was evidenced through leadership provided by District Councils at district level and Area Development Committees at community level. Coordination plans play an important role in sustaining collaborative structures. For example, DSMCs sustained activities through elaborate plans on joint monitoring and empowerment of communities.

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