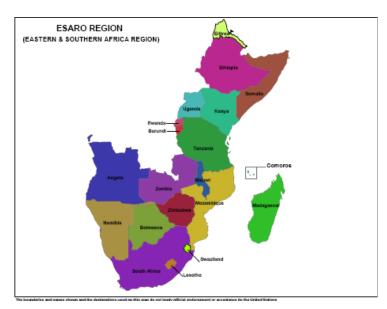
UNICEF HUMANITARIAN ACTION

EAST AND SOUTHERN AFRICA DONOR UPDATE

30 MARCH 2007

HUMANITARIAN ASSISTANCE TO CHILDREN AND WOMEN AFFECTED BY FLOODS, CYCLONES AND DISEASE OUTBREAKS

- Large populations have been affected by floods in Zambia and Mozambique, while up to 100,000 people still struggle to cope in the aftermath of cyclone Favio. UNICEF is responding to the needs of displaced children and women in the sectors water, health and education.
- UNICEF in Madagascar is coordinating with WFP, Government and other
 partners to assist over half a million people in need following a series of
 cyclones and flooding that have battered the island since December. An
 estimated 100,000 of the affected people have been displaced.
- The worst acute watery diarrhoea or cholera outbreak in several years continues to pose major challenges in a number of countries in Eastern and Southern Africa countries including Ethiopia, Somalia, Comoros, and Angola.





1. EMERGENCY OVERVIEW AND ISSUES FOR CHILDREN

In the last few months, the "El Nino" phenomenon, blamed for severe flooding that affected much of the Horn in late 2006, has extended its impact across Southern Africa. Resultant flooding has coincided with the cyclone season (December-April) in which, thus far, Madagascar and Mozambique have been seriously affected while riverine communities in Zambia have experienced localized displacement. Significant damage to infrastructure has been assessed, especially in Mozambique including schools, health facilities, roads and food stores. Both the cyclone and rainy seasons are projected to extend into April meaning that the possibility of further hardship remains for children and families in South-Eastern Africa.

An almost unprecedented number of countries in the region are now also reporting acute watery diarrhoea (AWD) or cholera cases, several of which have been in sustained crisis for many months. UNICEF offices in South-Eastern Africa are now responding to meet the acute humanitarian needs that both exacerbate chronic vulnerabilities and complicate efforts towards the broader progress on the Millennium Development Goals (MDGs).

2. UNICEF ACTION

RESPONSE TO FLOODS AND CYCLONES

In response to the havoc wrecked by floods and cyclones, UNICEF has already reprogrammed regular funding in Mozambique, Zambia and Madagascar to start the emergency response. Offices in Mozambique and Madagascar have been able to utilize pre-positioned emergency stocks as part of the initial response. UNICEF's emergency response is undertaken in strong partnership with the UN Country Team, local authorities and other partners, and UNICEF is assuming its cluster lead responsibilities in water, sanitation and hygiene awareness and nutrition. This section provides an overview of UNICEF's response by country.

ZAMBIA

Zambia has been one of the countries most affected by drought in Southern Africa and flooding is an uncommon occurrence. However, the combination of late-arriving seasonal rainfall and early drought in October and November of 2006 combined with a period of intense rainfall in December 2006 and January and February of 2007 has wreaked an unusual level of destruction in several parts of Zambia. Water levels have risen dramatically with some parts of the country receiving a season's worth of rain in just a matter of weeks. The result has been disastrous with some 295,000 people directly affected with particularly heavy impacts in the Western, and North Western provinces. Homes have been damaged or washed away. Significant infrastructure has been damaged, not only roads and bridges, but also latrines and water sources, schools, and health posts. Perhaps even more alarming, food crops – many of which were planted late because of the late on-set of the rains – have been submerged. This may cause a significant food shortage later in the year.

UNICEF is already meeting immediate emergency needs for affected populations. UNICEF has begun to transport hygiene kits (including chlorine and jerry cans for provision of clean water to affected families) and educational kits (for students unable to access their schools because of the water) to families in the hardest-hit Western and North Western part of the country. Emergency medications and mosquito nets are in process of delivery. Key focus of this initial phase will be life-saving actions to prevent diarrhoeal diseases from contamination of water sources, malaria and other diseases. At the same time, action will be taken to ensure that children have the support and equipment to continue schooling, an activity that restores normalcy and hope to their lives. As flood waters recede, the risk of water-borne disease increases. At the same time, the already

constrained food security situation will worsen, as food stocks are depleted following crop damage followed by the floods.

In order to respond to the situation, UNICEF is requesting assistance of US\$ 2,957,726 for Phase I of the emergency, geared towards meeting the immediate emergency needs of the affected population.

MOZAMBIQUE

Heavy rains in Zambia throughout January filled the Cahora Bassa Dam reservoir in Tete Province at an alarming rate prompting a scaled but dramatic increase in the dam's discharge rate and leading to flooding in the lower Zambezi river basin not seen since the catastrophic floods of 2001. At the end of February, approximately 163,045 people had been displaced due to the floods. An estimated 107,534 people were in accommodation centres and 55,511 in resettlement centres that were established after the 2001 floods. While conditions have significantly improved over the last 3 weeks, the main priority concerns in all affected areas are sanitation and the need for hygiene/health education in order to prevent any outbreaks of cholera.

In addition to the floods resulting from heavy rain, Mozambique was also affected by cyclone Favio. Two provinces were hit—Inhambane and Sofala. An estimated 100,000 people were directly affected by the cyclone in four different districts of Inhambane province. Significant numbers of houses were damaged but as people are choosing to stay close to their homes, only a relatively small number of people are currently in the accommodation centres in the area. Serious infrastructural damage was caused by the cyclone in most of the affected districts. The priority needs for Inhambane province continue to be as follows: (1) support for affected families, including materials to cover houses, non-food items and food; (2) support for the reconstruction of damaged health facilities; and (3) support to ensure minimum disruption to schooling. In total, approximately 18 health facilities and over 400 classrooms were damaged across the affected areas in Inhambane province.

UNICEF has deployed emergency teams to three locations for flood response (Caia, Mopeia and Mutarara) and in Vilanculo for the cyclone response. To date no major disease outbreaks have been reported, sanitation and safe water access are in place in the accommodation centres (flood response) while most needy families have received essential non-food items. WFP is working closely with UNICEF, providing strong support to the Logistics Cluster, in particular air/helicopter operations (now phasing out) that remain vital for the flood response. UNICEF is continuing to support the local health authorities in assessing the situation in relation to health in the centres. The distribution of insecticide treated nets (ITNs) remains a priority. To date, over 25,000 ITNs have been distributed by UNICEF and partners in flood affected areas. In the cyclone affected districts UNICEF continues to provide logistic support to the local health authorities to ensure the timely delivery of supplies, and is monitoring the installation of temporary water facilities in health centres. Medical supplies are being airlifted with a WFP helicopter. UNICEF is also supporting the local health authorities and other partners in ongoing activities under the supplementary feeding programme, which has now been established in the districts of Caia, Marromeu, Chemba, Mopeia, Morrumbala and Mutarara. A site is also being established in Tambara district.

In all flood affected provinces, UNICEF works with the local education authorities and NGO partners to ensure the appropriate installation and use of tents to be used as temporary learning facilities. Over 50 school kits have been provided to temporary schools to ensure that basic materials are available for learners. In cyclone affected areas, UNICEF is working with the local education authorities to finalise the distribution plan for education supplies expected to arrive in the coming days, including tents to serve as temporary learning facilities. Protection activities, including mine risk assessments and training are also in place. Assessments to identify orphaned and vulnerable children have now been conducted in all

provinces by the Ministry of Women and Social Action with support from partners. Training on the protection of women and children for police deployed in centres is ongoing and logistic support has been provided to the police to ensure that each centre has 24-hour policing. The timely provision of seeds and tools is another key requirement to enable the worst affected to regain some measure of self sufficiency although they will require extended food aid through the next harvest.

While the cyclone impacted areas will require considerable longer-term rehabilitation support given the extent of damage to infrastructure (inter alia the need to rehabilitate more than 400 classrooms and 18 health facilities), the immediate relief response in the flood and cyclone affected areas are phasing into an early recovery based strategy. In the flood affected areas, the transition from emergency to recovery will entail continued support to those displaced populations that choose to remain in accommodation centres for a longer period, support to displaced people that choose to move to resettlement centres or integrate into host communities and support for those that chose to return to their areas of origin. There is need to ensure that the necessary essential services are provided to existing, integrated, resettled and returning populations, regardless of their locations. UNICEF will encourage and facilitate a participatory decision-making process between Government and affected populations on viable post accommodation centre options.

UNICEF still needs US\$ 2,756,245 against the Flash Appeal to be able to meet the needs of children and women affected by the floods and cyclones.

MADAGASCAR

Over the last few months, Madagascar has been hit by the worst series of cyclones in many years bringing severe flooding and displacement and further eroding already precarious levels of food security and directly affecting almost 500,000 people. Many areas are underwater and overland transport in many northern districts has been severely disrupted. The possibility of further cyclones extends into next month.

Between 24 December 2006 and 26 February 2007, tropical storms Bondo, Clovis, Gamede and Favio, struck 13 regions out of 22 regions of the country, namely Diana, Sava, Sofia, Boeny, Antsinanana, Analanjirofo, Vatovavy Fitovinany, Atsimo Andrefana, Menabe, Aloatra Mangoro, Amonron'I Mania, Vakinankaratra, Analamanga (centre, east, west and southeast). More than 293,000 people have been affected to varying degrees; and approximately 33,000 people were displaced—including an estimated 18,000 in Antanarivo. The south-eastern regions have been the worst-hit, with farmers losing up from 70-90% of their rice harvest.

On 15 March, another tropical cyclone, Indlala, struck the island on the north-eastern coast at speeds of up to 220km per hour killing a reported 80 people but probably many more. Seven regions and 18 districts were worst affected, especially Diana, Sava, Sofia and, Analanjirofo. Initial estimates are that over 200,000 people have been directly affected including over 100,000 displaced. According to the Government estimates, about 80% of the country's vanilla production, Madagascar's top foreign exchange earner, has been lost. On top of the damage from previous storms this year, the country's road infrastructure has been seriously affected by this most recent cyclone. Continuing assessments highlight serious damage to food stocks and rice fields in many areas. Schools and water points have been damaged or destroyed and many health facilities have run out of drugs. UNICEF has been one of the first agencies to respond in the Northwest and is undertaking operational response in close cooperation with Government and WFP. Though some supplies have been delivered (soap, water purification, blankets, etc.), the focus has been on undertaking rapid assessments by helicopter as larger quantities of supplies are being procured. The government is making efforts to repair infrastructure but the damage to roads and bridges will continue to constrain the response.

Amidst the effects of the cyclones, unusually heavy rains have contributed to heavy flooding in many of the densely populated and cultivated areas throughout the country, including the capital city, the northwest and the west. The East coast has been particularly devastated with the regions of Analanjirofo, Antsinanana, Atsimo Antisanana and Vatovavy Fitovinany, heavily flooded and under water for the past 8 weeks.

With the high loss of rice crops, food insecurity is increasing dramatically and the nutritional status of vulnerable groups, already a major concern in southern regions due to recent drought, will likely deteriorate in the coming weeks. Damage to health infrastructure has negatively affected access to health services while there is increased risk of water-borne diseases including cholera. In the present situation the most urgent needs are food, water, proper sanitation, basic domestic kits and health care in addition to the continuity of education.

Since 2005 UNICEF has supported the National Bureau of Risk and Catastrophe Management (BNGRC) in strengthening its capacity in multi sector assessment. Starting in February, rapid assessment teams including representatives of UNICEF and UN agencies, NGOs and donors were deployed to affected areas to identify the needs of the most vulnerable populations.

So far UNICEF has provided blankets, plastic sheeting and drug kits. To improve the supply, quality and access to water to flood–affected people, UNICEF has distributed water and hygiene related non-food items (household water purification products, water containers and soap). At the same time, UNICEF, in conjunction with WFP, is setting up temporary operational bases in the most affected zones –Ambanja (Diana region) and Antsohihy (Sofia region) while maintaining mobile outreach for other areas. Three water purification units have been positioned in Sava and Antsinanana regions and staff from Care International and Medair trained to operate the units for serving 3,000 families at a time. Up to now, total supply orders for the emergencies amount to 1.1 millions USD, currently supported by regular resources.

UNICEF has so far extended support to 14 affected schools in Antananarivo, where over 2,500 children have benefited from school supplies and recreational materials. Anticyclone structures, tents and school kits have been ordered to respond to 150 affected classrooms.

In three regions of the south, UNICEF has provided support to the Ministry of Health and the National Office for Nutrition to respond to the nutrition emergency since December. Close to 40,000 children under five and 4,200 women have been screened for malnutrition, and 6,000 children and 920 women are currently under treatment. Moreover UNICEF has also provided therapeutic food (plumpy nut) to moderately malnourished children due to logistic constraints for the arrival of WFP's UNIMIX. These interventions will continue until the end of May.

UNICEF's total funding requirements in the Madagascar Flash Appeal launched on March 16 amount to US\$ 1,845,500.against which some \$655,000 has been received along with an Emergency Program Fund loan of \$450,000 from UNICEF headquarters. However, it is expected that up to US\$ 2,500,000 additional funds will be needed to respond to the severe impact of cyclone Indlala. Altogether UNICEF's revised estimated funding requirement is \$3,690,500.

RESPONSE TO ACUTE WATERY DIARRHOEA/CHOLERA

In response to AWD/cholera outbreaks in several countries in the region, UNICEF has put in place emergency activities to support local health authorities and respond to the needs of children and women. In addition to countries facing recent/ongoing cholera outbreaks highlighted below, Burundi, Kenya, Rwanda, Tanzania and Zimbabwe have all reported cases in the last three months. The following section provides an overview of the situation among those countries still facing serious problems.

COMOROS

The impact of cyclone activity and un-seasonal rains has contributed to an increase in cholera cases in late February. On the 27 February 2007, the World Health Organization and the National Emergency Centre officially confirmed an outbreak of cholera in Moroni, capital of Comoros, with initially seven reported cases and one death. As of the 3rd of March the number of cases had increased to 23 (21 cases in Grande Comore and 2 in Anjouan) and some other cases remain unconfirmed. The outbreak started from the most populated quarter in Moroni. However, in the last few weeks there are indications that the disease outbreak is coming under control. So far, half of the victims are children below the age of fifteen. In this context, UNICEF has undertaken training sessions targeting school directors, teachers and technicians involved in hygiene and sanitation (to support the disinfection of affected areas). UNICEF will also assist with water treatment and IEC materials on adequate hygiene and sanitation practices. A WES technical officer from the regional office has been providing direct support. UNICEF Comoros requires \$200,000 to maintain emergency relief stocks for cholera response, including ongoing diarrhoeal disease control efforts.

ANGOLA

Angola is experiencing a severe outbreak of cholera and in January this situation was compounded by floods affecting Luanda and other provinces. The rising water level of the Zambezi River has caused floods in eastern Angola, on the border with Zambia. The rains continue nationwide with Kuando Kubango district most recently affected in which 565 houses were destroyed (172 in risk of collapse) and a total of 3,106 persons were directly affected. As of 13 March 2007, 76,959 cumulative cases of cholera and 3,006 deaths have been registered (a fatality rate of 3%) since the outbreak began in February 2006. Since the rains began again on the 6th of October 2006, there have been 21,747 cases reported and 759 deaths, with the incidence increasing following the flooding in January 2007. Of the total number of cases there are an approximate 35% of cases in children less than 5 years of age. The biggest rise in reported case numbers since October 2006 are in Luanda – 3,911 cases and 68 deaths; Benguela – 2,966 cases and 78 deaths; and Cabinda – 1,774 cases and 38 deaths.

UNICEF has responded to the outbreak, in partnership with Government, WHO, MSF, and IFRC from the outset. Between December 2006 and March 2007, UNICEF actions have assisted some 885,000 people through house-to-house visits, to promote cholera prevention and the importance of early treatment. Radio broadcasts are targeting 4.8 million people with essential prevention and hygiene awareness messages, while 238,000 people are being directly assisted through distribution of essential water treatment/storage supplies and hygiene materials. UNICEF has provided support for the establishment of treatment centres and enough equipment to treat 29,200 people. Significant financial and human resources have been allocated since February 2006. As part of an inter-agency humanitarian response plan for Angola, UNICEF has received \$2.25m in CERF grants for cholera (rapid response) and urban WES (under-funded emergencies); for now there are no urgent funding requirements.

ETHIOPIA

While the overall numbers of AWD cases are reportedly on the decline nationally (approximately 60,000 confirmed cases and 700 deaths), the disease is continuing to spread into new areas. The disease is of major concern in Afar, Somali, and pockets of SNNP and Oromiya regions. An MOH-UNICEF-WHO-NGO advisory team recently visited the Afar Region to support containment efforts to assist over 2,300 cases (with 79 deaths) reported in the first week of February. It is reported that adjustments have been made within the AWD National Coordination Committee (NCC) to strengthen its work by consolidating some of the various subcommittees. In addition to continuing large scale supply inputs to ensure effective case treatment capacities, UNICEF is seeking to strengthen prevention efforts including the deployment of additional staff for water, sanitation and hygiene awareness as well as disease control. All activities are undertaken in close coordination with national and regional authorities. In mid-late 2006 UNICEF received CERF grants for the AWD response totalling over \$1.3m.

SOMALIA

Against the backdrop of widespread civil unrest and insecurity in Southern Somalia a major AWD outbreak has been taking place in five regions in the South. As of 10 March 2007, 5,602 cases of AWD cases including 251 related deaths (CFR% 4.48) were reported from Central and South Somalia. This is the first major outbreak in Somalia in several years. UNICEF is undertaking a large-scale response with partners, working under a long-established interagency cholera response task force mechanism. Over 430,000 people are being targeted in seven regions of Southern Somalia. UNICEF has procured and delivered 77 cholera kits and 200 boxes of Ringers' Lactate, water treatment (415,000 Aquatab packets, 3.4Mts chlorine) and water storage supplies, soap (300,000 pieces) and public information materials. UNICEF is also supporting the construction of latrines and rehabilitation of shallow wells along with social mobilization to increase awareness of water born disease and how to prevent contamination using community health workers, volunteers and radio and print media and various other social organizations. These activities are being planned and coordinated in partnership with WHO, MOH, local and international NGOs and local communities. Mechanisms for coordination are in place at national and local levels as well as among agencies headquartered in Nairobi. UNICEF Somalia has a continuing funding shortfall of \$17,826,719 (61%) against its overall 2007 CAP requirement of \$29,461,641. At this point, the AWD response is not hindered by immediate funding shortfalls.

Role of UNICEF Regional Office:

The Regional Emergency Support Unit (RESU) located within the UNICEF Eastern and Southern Africa Office in Nairobi is coordinating UNICEF's multi-country response to these crises in the form of providing short term technical surge support, enhancing reporting and information dissemination, liaison with key regional partners including OCHA, WHO, WFP and NGOs. In this capacity, UNICEF estimates it urgently needs \$120,000 for its regional emergency unit to meet these deliverables over the next three months. This is in addition to existing needs of the Regional Office and specifically geared to support response to this crisis.

3. FUNDING REQUIREMENTS AND RECEIPTS

Country	Total Funding Requirements (US\$)	Funds Received (US\$)	Unmet requirements (US\$)
Madagascar	4,345,500	655,000	3,690,500
Mozambique	7,128,968	4,770,073	2,358,895
Zambia	2,957,726	200,000	2,757,726
Comoros	200,000	0	200,000
ESARO	120,000	0	120,000
Total*	14,752,194	5,625,073	9,127,121

^{*} The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

Further details of the emergency programmes in East and Southern Africa can be obtained from:

Robert McCarthy UNICEF Regional Office Nairobi

Tel: + 254 20 7622176 Fax: + 254 20 7622746 rmccarthy@unicef.org Esther Vigneau UNICEF EMOPS Geneva

Tel: + 41 22 909 5612 Fax: + 41 22 909 5902 evigneau@unicef.org Gary Stahl UNICEF PFO New York

Tel: + 1 212 326 7009 Fax: + 1 212 326 7165 gstahl@unicef.org