

# UNICEF HUMANITARIAN ACTION MOZAMBIQUE IN 2009



Core Country Data	
Population under 18 (thousands)	10,909
U5 mortality rate (2007)	168
Infant mortality rate (2007)	115
Maternal mortality ratio (2000–2007, reported)	410
Primary school enrolment ratio, 2000–2007, net (male/female)	79/73
% U1 fully immunized (DPT3)	72
% population using improved drinking-water sources (rural/urban)	26/71
Estimated no. of people (all ages) living with HIV, 2007 (thousands)	1500
% U5 suffering moderate and severe underweight/stunting	24/41

Source: *The State of the World's Children 2009*

Due to its geographical location, Mozambique is prone to a wide range of natural disasters, regularly causing significant damage and exacerbating poverty and vulnerability in the country. In line with the *Core Commitments for Children in Emergencies*, emergency preparedness and response is mainstreamed in all programmes of the Country Office, including support to national capacities to respond to sudden onset emergencies and to the longer-term vulnerabilities caused by food insecurity, HIV/AIDS and weakened coping mechanisms.

Summary of UNICEF Emergency Needs for 2009*	
Sector	US\$
Health and Nutrition	1,800,000
Water, Sanitation and Hygiene	1,500,000
Education	2,770,000
Child Protection	600,000
Programme Communication	150,000
Emergency Coordination and Operations	780,000
<b>Total**</b>	<b>7,600,000</b>

\* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other underfunded emergencies.

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

## 1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

In recent years, Mozambique has made encouraging strides in reducing its crippling poverty levels and is making gradual progress towards achieving the Millennium Development Goals (MDGs). However, poverty is still widespread and the economy remains highly dependent on foreign aid. Among the greatest challenges facing the country are food insecurity, the HIV/AIDS crisis and high infant and child mortality rates.

Production estimates from the Ministry of Agriculture indicate that the 2007–2008 production of cereals, pulses and cassava were all higher than the previous year and above the five-year average. Yet, the most recent report of the Vulnerability Assessment Committee (VAC) indicates that in the eight provinces hit by natural disasters in 2008 affected households have inadequate access to food and some are already employing extreme coping mechanisms. According to the VAC's report, 302,664 people are acutely food insecure, with another 242,615 at risk.

In Mozambique, out of an estimated 855,000 infants born every year, about 98,325 will die before reaching age one and an additional 45,315 will die before reaching age five. Malnutrition is the main underlying cause contributing to the high level of child mortality in Mozambique. Malaria and acute respiratory infections are the two leading causes of child deaths, whilst diarrhoea resulting from waterborne diseases is still a major child killer, with a prevalence of 14 per cent among children under age five. Poor access to clean water affects women and girls directly as they are responsible for collecting most of the domestic water at the household level – leaving less time for school attendance and childcare. Vulnerable populations face the constant threat of cholera outbreaks due to poor availability of clean water and sanitation facilities. Education activities are often threatened by natural disasters, most notably seasonal floods and drought. National and subnational education authorities are missing the resources and the capacity to quickly resume educational activities after an emergency in order to return some normality to the lives of children affected.

In 2005, the number of children orphaned by HIV/AIDS was estimated at 510,000. Orphaned children are becoming more and more vulnerable as extended families are unable to meet their basic needs, particularly in areas where the worst humanitarian conditions prevail.

Localized flooding is common in Mozambique during the southern Africa rainy season from November to March. For the second year in a row, Mozambique was hit by major flooding in the centre of the country and by an extensive cyclone on the northern coastal areas. As in 2007, the 2008 floods were the result of persistent heavy rains in neighbouring countries – Malawi, Zambia and Zimbabwe – combined with high levels of rainfall in Mozambique early in the rainy season. In 2008, the impact has been greatest in the Zambezi River basin, but flooding also struck the Búzi, Púngue, Save and Licungo basins due to intense rains in Mozambique's central region and in Zimbabwe, affecting an estimated 102,486 people. Over 201,695 people suffered the effects of Cyclone Jokwe, which damaged 800 classrooms and partially or completely destroyed 33 health centres. Electricity and water supplies were disrupted in areas where those services are provided, but all were restored within a week.

## 2. KEY ACTIONS AND ACHIEVEMENTS IN 2008

UNICEF Mozambique deployed three multisectoral teams to the flood-affected areas to carry out preliminary rapid assessments of needs with local officials and cluster partners. Following the multisectoral assessment conducted by the Government, UN agencies and NGO partners in the flood-impacted areas, immediate priorities were identified, including food, health, water and sanitation, hygiene promotion, education, basic health education and agricultural seeds and tools.

UNICEF assumed the leadership of the nutrition and water, sanitation and hygiene (WASH) clusters; co-led the education and child protection clusters with Save the Children Alliance; and actively participated in the health, logistics, telecommunications and shelter clusters during the emergency response. Technical coordination and logistical support were provided to the National Emergency Operations Centre (CENOE) of the National Institute for the Management of Disasters (INGC), to line ministry counterparts in Maputo and to the Caia operational hub, as well as to the operational bases established by UNICEF in the districts of Mopeia (Zambezia Province) and Mutarara (Tete Province).

UNICEF supported the efforts of the Government to respond to the flood and cyclone emergencies through the humanitarian clusters. Key results of the emergency response are set out hereafter: Access to education was restored for over 90,000 flood-affected children (96 per cent) through the installation of 66 school tents and the provision of basic learning materials, including 84,234 learners' kits and 168 school kits. In addition, 220 teachers were trained and 732 teachers' kits distributed. In response to Cyclone Jokwe, 70 tents were supplied to be used as temporary classrooms as well as 68,205 learners' kits and 888 teachers' kits, reaching all 114,627 affected schoolchildren.

Nutritional surveillance and treatment of malnourished children were carried out in all centres. A total of 25,109 children were screened (over 60 per cent of all estimated children under age five). The screening identified 2,008 moderately acutely malnourished children who received supplementary feeding and 130 severely acutely malnourished children who were referred to the nearest health facility. Of the children screened, 13,136 were dewormed and 14,998 received vitamin A supplementation (100 per cent of target group). Forty-four hospital tents were procured and distributed to accommodate close to 880 people per day. UNICEF procured 44,814 long-lasting insecticidal nets (LLINs) out of the 89,814 distributed (100 per cent coverage). UNICEF provided technical and financial support for the control and management of the cholera outbreak that occurred in three districts of Zambezi Valley. The appropriate response resulted in a relatively low case fatality rate of 1.6. There were no cases of cholera during the 2007 emergency.

Out of 110,486 people staying at transit and resettlement centres, 65,700 flood-affected people (59 per cent) were provided with safe drinking water and 63,355 with communal (temporary) and household latrines. Some 57,000 people received hygiene kits (soap, jerrycans, buckets and household water purification products) and participated in hygiene promotion sessions. Training on hygiene promotion was provided to 291 community activists.

UNICEF reached approximately 37,500 people, including 22,500 children, through the distribution of 7,500 basic emergency kits to vulnerable families (75 per cent coverage), whilst the remaining 2,534 families received kits from other actors. Training on the Code of Conduct on Protection from Sexual Exploitation and Abuse in Humanitarian Crises was provided to police (107 police officers), military, INGC staff and humanitarian workers in flood-affected areas (150 in total), in collaboration with the Joint UN Programme on HIV/AIDS (UNAIDS) and the UN Population Fund (UNFPA).

### 3. PLANNED HUMANITARIAN ACTION FOR 2009

#### Coordination and Partnership

UNICEF supports the efforts of the Government of Mozambique to respond to emergencies as a member of the Mozambique Inter-Agency Standing Committee (IASC) Humanitarian Country Team and through the implementation of the cluster approach framework. UNICEF leads the nutrition and WASH clusters and is co-convenor with Save the Children Alliance in the areas of education and protection.

#### Linkages of HAR with the Regular Programme

The Country Programme addresses chronic vulnerability and humanitarian conditions as an integral part of the programme strategy. The responsibility for emergency planning, implementation, monitoring and review is mainstreamed across the respective programme sectors with a focus on early warning, preparedness and early action as an integral part of the Country Programme. *The Humanitarian Action Report (HAR)* emergency appeal will enable the sections to fulfil their emergency response responsibilities.

Based on the experiences and lessons learnt from the emergency response to the flood and cyclone emergencies in 2008, and building on the preparedness efforts carried out through the Country Programme, UNICEF Mozambique will continue to address in-country capacity-building of the Government and civil society for disaster risk reduction and emergency preparedness in 2009. These efforts will be undertaken through the regular initiatives of the 2008 Country Programme, with the objective of mitigating the chronic vulnerability and humanitarian conditions resulting from natural disasters in Mozambique – including the slower onset drought conditions that plague the southern part of the country.

#### Health and Nutrition (US\$ 1,800,000)

For 2009, the overall goal is to minimize the impact of the ongoing crisis on the health and nutritional status of children under age five and to ensure that pregnant women in affected areas are identified and provided with micronutrient supplementation. Around 110,000 people affected by floods or cyclones will benefit from the following activities:

- Train 100 provincial staff and 500 village-level personnel in immunization services and cold-chain maintenance;
- Continue supporting the 10 selective feeding centres previously established and run by partners for all 2,000 acutely malnourished in the flood- and drought-affected regions;
- Train 50 health staff in treating severe acute malnutrition;

- Support the implementation of three nutritional surveys, rapid assessments and evaluations;
- Support nutritional screening for around 22,000 children under age five in flood- and drought-affected regions;
- Procure and administer vitamin A and deworming tablets to all children under age five screened for malnutrition;
- Provide operational support to Government and NGO partners for cholera control activities, including prevention and correct case management;
- Procure and distribute 44,000 long-lasting insecticidal nets (LLINs) for 22,000 households (some 110,000 people).

### **Water, Sanitation and Hygiene (US\$ 1,500,000)**

For 2009, the overall goal is to minimize the impact of poor sanitation, unsafe drinking water and inadequate hygiene practices on the health status of affected populations, especially children under age five, schoolchildren and women. Some 110,000 affected persons will benefit from the following key activities, which will be undertaken in close collaboration with other programmes, mainly programme communication, health and nutrition, and basic education:

- Construct/rehabilitate wells and adequate sanitary facilities in 10 schools, benefiting about 3,500 schoolchildren;
- Construct/rehabilitate 90 wells/boreholes and install handpumps to provide safe drinking water to around 45,000 people (approximately 30 per cent of the people in need);
- Strengthen community capacities to maintain their water points through additional training of community water management committees, including the involvement of school management committees;
- Support the self-construction of household latrines for about 13,200 families;
- Promote hygiene education and hygiene awareness programmes in targeted schools and communities in order to maximize the impact of water and sanitation interventions;
- Strengthen government capacities at subnational levels, for effective planning, management and supervision of WASH interventions.

### **Education (US\$ 2,770,000)**

For 2009, the overall goal is to minimize the disruption of schooling in the natural disaster-prone area and to strengthen the capacity of all stakeholders to respond to emergencies. A total of 150,000 children and 2,000 teachers will benefit from the following key activities:

- Procure and distribute basic scholastic materials, including notebooks, pencils and erasers, for 150,000 primary schoolchildren (100 per cent coverage) in flood- and drought-affected regions;
- Procure and distribute didactic materials for 2,000 teachers;
- Procure and distribute recreational kits and school supplies for 200 schools;
- Procure, mount and maintain 100 school tents;
- Engage in capacity-building of education functionaries and teachers on emergency preparedness and response;
- Train 1,000 primary schoolteachers, with particular emphasis on life skills relating to emergency situations;
- Support the rehabilitation/reconstruction of 400 classrooms damaged by natural disasters to accommodate some 20,000 primary schoolchildren (including technical assistance and assessment).

### **Child Protection (US\$ 600,000)**

For 2009, the overall goal is to ensure that 110,000 disaster-affected people are protected against violence or other forms of abuse, which are often seen to increase during disasters, through the following key activities:

- Provide 5,000 emergency household kits to vulnerable families in identified accommodation centres, reaching approximately 25,000 people, including children;
- Develop guidelines for police deployment in emergency; train at least 100 police officers to prevent sexual exploitation and abuse, and deploy them to identified accommodation centres in a timely manner;
- Develop guidelines for child-friendly spaces; in case of emergency, establish at least 30 child-friendly spaces reaching over 6,500 children; and train staff members working at child-friendly spaces to provide psychosocial care;

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- Train at least 100 government and humanitarian workers (from the police, the National Institute for Disaster Management (INGC), UN agencies and NGOs working in flood-affected areas) on the Code of Conduct of the Inter-Agency Standing Committee (IASC) Task Force on Protection from Sexual Exploitation and Abuse in Humanitarian Crises.

### ***Programme Communication (US\$ 150,000)***

For 2009, the overall goal is to actively involve communities in communication interventions aiming to promote good hygiene practices and raise awareness about the prevention of malaria, HIV and cholera. This will be achieved through the following key activities:

- Support community-based social mobilization and outreach activities (e.g., mobile units, community radio, community theatre) in at least 70 per cent of emergency-affected districts;
- Distribute 150,000 information, education and communication (IEC) materials for the prevention of cholera, malaria, and HIV/AIDS in emergency contexts, reaching over 150,000 people;
- Train 150 social mobilization activists on health issues related to the promotion of good hygiene practices and to the prevention of malaria, cholera/diarrhoea and HIV.

### ***Emergency Coordination and Operations (US\$ 780,000)***

- Support the National Institute for Disaster Management (INGC) with technical assistance to prepare for, monitor and evaluate disaster response initiatives;
- Provide operational support for emergency assessments, and the transportation and distribution of humanitarian supplies during natural disasters.

Coordination is an integral part of emergency preparedness and response factored into all the sector-specific initiatives and priorities highlighted above.