Highlights

- Mozambique has been hit by two cyclones since March – Idai (14 March) and Kenneth (25 April). UNICEF is now carrying out an emergency response on two fronts; to meet the immediate needs of around 247,000 people (half of them children) affected by Cyclone Kenneth, and continued support to families affected by Cyclone Idai in temporary accommodation centres or as they try to return home.
- UNICEF continues to support the provision of temporary, safe, drinking water to 960,000 people. However, a permanent solution is needed for families returning home or relocating to safer locations.
- The Emergency Response Health Week (SSRE) started on 06 May with UNICEF support, targeting more than 800,000 children under-five with measles/polio vaccine, vitamin A, deworming and nutrition screening.
- UNICEF is providing temporary solutions to re-establish access to education to more than 36,000 affected children, while planning for permanent and resilient solutions.

UNICEF’s Response with Partners for Cyclone Idai response

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Cluster target</th>
<th>Cluster Result</th>
<th>Target achieved</th>
<th>UNICEF target</th>
<th>UNICEF Result</th>
<th>Target achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people provided with access to safe water (7.5-15L per person per day)</td>
<td>1,435,000</td>
<td>1,288,600</td>
<td>90%</td>
<td>965,000</td>
<td>1,288,600</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children under-fifteen years vaccinated</td>
<td>500,000</td>
<td>330,888</td>
<td>66%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children under 5 years screened for acute malnutrition</td>
<td>328,000</td>
<td>16,085</td>
<td>5%</td>
<td>328,000</td>
<td>16,085</td>
<td>5%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6-15 years old in humanitarian situations accessing education</td>
<td>500,000</td>
<td>55,600</td>
<td>11%</td>
<td>380,000</td>
<td>36,350</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children receiving psychosocial support through Safe Spaces</td>
<td>147,000</td>
<td>10,950</td>
<td>8%</td>
<td>20,000</td>
<td>6,850</td>
<td>34%</td>
</tr>
<tr>
<td><strong>Communications for Development</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with key lifesaving and behavior change messages on health, nutrition and safe and appropriate sanitation and hygiene practices.</td>
<td>700,000</td>
<td>808,600</td>
<td>115%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Situation Overview & Humanitarian Needs

Cyclone Idai
The number of accommodations centres in Sofala Province has decreased from 27 to 18 with a total of 4,914 families (21,992 people) still displaced. A total of 1,265 families moved to new resettlement areas, some of them with poor access to basic services. With the support of the humanitarian community, the Government is defining its strategy and plans for population movements to new resettlement areas. These areas still lack basic social services hampering the resettlement process. Conditions for several communities of return are also concerning, especially in hard to reach areas, which are still being assessed by the Government and the humanitarian partners.

While the number of cholera cases greatly reduced, small numbers of cases are reported daily in Sofala province. Surveillance, WASH activities and communication with communities continue as preventative measures. Malaria cases are on the rise, over 25,000 cases were recorded in Beira, Dondo, Nhamatanda and Buzi districts since the beginning of the crisis. An indoor residual insecticide spraying (IRS) campaign is ongoing and more than of 200,000 bed-nets have been distributed by the Health Directorate with support from UNICEF and partners.

Cyclone Kenneth
Access remains a significant challenge in the areas affected by Cyclone Kenneth, hampering needs assessments and delivery of humanitarian assistance. Security constraints in the area make the delivery of humanitarian aid even more challenging (see Security section below for more details).

As of 05 May, National Institute for the Management of Disasters (INGC in Portuguese) recorded about 247,000 affected people (217,000 in Cabo Delgado and 30,000 in Nampula province), of which approximately 123,500 are children, and a death toll of 41. The most affected districts in Cabo Delgado are Macomia, Mueda, Quissanga, Chiure and Muidumbe, and in Nampula are Mamba and Erati. Field teams are still assessing the situation to understand the full magnitude of this crisis.

Over 3,000 people are sheltering in 10 temporary accommodation centres both in Cabo Delgado and Nampula provinces. The provincial governments are keen to close these centres as soon as possible and support the displaced families to return to their villages or relocate to safer areas.

The first cholera cases after Cyclone Kenneth were recorded on the 2 May. As of the 5 May, the Ministry of Health (MoH) reported 64 cases in Pemba (57) and Mecufi (7) in Cabo Delgado province. The health authorities already have one cholera treatment centre (CTC) and established a cholera task force in Cabo Delgado’s provincial capital Pemba. The number of malaria cases is increasing, becoming a major concern. A vaccination campaign is planned, targeting over 250,000 people with two doses of oral cholera vaccines (OCV) in Pemba and Mecufi districts, Cabo Delgado province. This OCV campaign is in addition to the campaign carried out in Sofala following the Cyclone Idai, which reached over 800,000 people.

Children’s needs are becoming clearer:

- More than 38,000 houses had been recorded as destroyed - 15,000 totally destroyed and 23,000 partially destroyed.
- Over 477 classrooms and 19 health facilities are damaged or destroyed preventing thousands of children from accessing education and primary health services.
- Children are highly vulnerable to water-borne diseases, including cholera, and vector-borne diseases, while malaria is a significant concern.
- Crop losses have left more than 370,000 people food insecure.

Humanitarian leadership and coordination

At the national level, the INGC continues to provide overall leadership and coordination for the emergency responses related to both Cyclone Idai and Kenneth. In Maputo, UNICEF leads the national Nutrition, WASH and Education clusters and the Child Protection sub-cluster. UNICEF also actively participates in the Health and Protection clusters. The Inter-Cluster Coordination Group (ICCG) supports the Humanitarian Country Team (HCT) overall leadership. UNICEF is using its close relationship with central and local government to strengthen the Government of Mozambique’s leadership of the cluster coordination system.
Cyclone Idai
In Sofala province, the Provincial Government leads multi-sectoral coordination meetings. UNICEF leads the WASH, Nutrition and Education clusters and the Protection Sub-cluster (co-chaired with UNHCR). The ICCG is led by OCHA. UNICEF also participates actively in the Return, Relocation and Resettlement Working Group, and in the Disabilities Working Group lead by the NGO Light for the World. In Manica, sectoral and inter-sectoral coordination mechanisms and information management systems have been established but are weaker compared to Sofala.

Cyclone Kenneth
The Governor of Cabo Delgado leads the coordination of the Cyclone Kenneth response, supported by the INGC from central and provincial levels. UNICEF leads the WASH cluster and Protection sub-cluster. Other clusters activated for Cabo are Health, Shelter, Logistic, Food security and Information and Technology. The ICCG is led by OCHA. The government has also established an operational base in Macomia, where local authorities and agencies coordinate actions in the district.

Humanitarian Strategy
UNICEF’s strategies and approaches in the response to the humanitarian needs caused by Cyclone Kenneth and Cyclone Idai are similar. UNICEF provides coordination, technical assistance, financial and in-kind resources to Government agencies, as primary providers of services and duty bearers, and non-governmental organizations in the following priority areas:

a. Cholera prevention and treatment, with a multisectoral response in Health, WASH and Communication;
b. Restoration of provisional basic services and reduction of vulnerability of children in
   o Transit/accommodation centres
   o Return, relocation and resettlement sites (RRR)\(^1\)
   o Hard-to-reach areas;
c. Reconstruction of permanent, resilient services and systems (build back better).

UNICEF is working to:
- Strengthen the Government’s coordination and response capacity, including information management systems;
- Address the specific needs of children with disabilities and other vulnerable groups;
- Ensure an environment free of Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH);
- Enhance accountability to the affected population.

UNICEF and its partners are continuously striving to meet the needs of the affected children as they move from accommodation centres to temporary relocation centres to areas of return and resettlement. In Sofala, the Return, Relocation and Resettlement Working Group, comprised of the UN and partners, is advocating for voluntary, dignified, safe and sustainable returns, relocation and resettlements, and has designed a joint plan and standards with the Government to establish minimum services in the areas of resettlement before moving in the affected families.

In Cabo Delgado, given the security constraints, agencies are prioritizing partnerships with local NGOs and INGOs already present in the area.

Regarding Humanitarian Cash Based Assistance, WFP and UNICEF are planning a joint voucher approach using a vulnerability-based targeting mechanism to address household food and NFI (primarily hygiene) needs, in areas with functional markets. The proposed approach would be a transitional humanitarian intervention. UNICEF and WFP aim to establish concrete linkages for coordination and capacity support, where viable, with government-run social protection mechanisms. The intervention is initially planned to span for three months and cover 20,000 households, with the aim to reach 120,000 households with social protection programs starting in September 2019, contingent on the availability of funding.

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\(^1\) ‘Return’ for people who voluntarily return to their home to rebuild; ‘Relocation’ for people who are being relocated from their current location to a temporary location before proceeding home or resettling; and ‘Resettlement’ for people who will not return to their highly vulnerable locations and will be assigned plots in safer areas.
UNICEF MOZAMBIQUE SITUATION REPORT – 08 May 2019
Summary Analysis of Programme Response

WASH

Cyclone Idai
leads the coordination of WASH partners within the cholera taskforce, allowing for rapid WASH interventions in cholera hotspots; contributing to the reduction of cholera cases. In addition to the WASH Cluster at national level and in the three provinces most affected by Cyclone Idai, WASH sub-coordination groups are operational in the most critical districts. UNICEF

In partnership with the National Water Directorate (DNAAS), UNICEF is using its contingency response mechanisms (i.e. long-term agreements with local suppliers) to make available water purification (CERTEZA) and other critical WASH materials for WASH sector partners, allowing them to speed up their own response. To reduce the risk of cholera transmission in Sofala province, UNICEF and the Centers for Diseases Control and Prevention (CDC) continue the water quality monitoring in the Dondo-Beira water supply network in coordination with health and water authorities. In addition, UNICEF and CDC support rapid response mechanisms to quickly target cholera hotspots and all areas where cases are reported.

UNICEF is providing temporary WASH services to affected communities and remaining accommodation centres, including through ensuring water treatment for centralized systems (e.g. Beira-Dondo system). At the same time, UNICEF is working with local authorities and implementing partners to assess and plan the repair and extension of pre-existing water systems. For the districts of Dondo, Nhamatanda and Chibabava (Sofala province) 115 water points have been identified.

Assessments in hard-to-reach areas are ongoing, including in South Buzi and Muanza districts in Sofala province, and in Mossurize, Macate and Sussundega districts in Manica province. WASH partners have already started supporting families in these areas, for example, through the distribution of water filters where no safe water sources are available. For resettlement areas, provincial WASH clusters are assigning responsibilities to partners for immediate provision of temporary water and sanitation services. At the same time, partners are committing for the provision of permanent and resilient WASH infrastructure within the next few months. In Sofala alone, 19 sites for over 46,000 people are to be served in the next few weeks.

Cyclone Kenneth
In response to Cyclone Kenneth, UNICEF is supporting water system operators with fuel to ensure that the water supply services run continuously. Despite access constraints, assessments and delivery of critical WASH services are ongoing, including setting up emergency water supply points and sanitation facilities in accommodation centres and Cholera Treatment Centres (CTC), water trucking, distribution of CERTEZA and hygiene kits², with an initial distribution of 517 families in accommodation centres in Pemba city. Following the appearance of cholera cases, based on the successful experience in Beira, a cholera taskforce was established, and partners were assigned responsibilities for immediate WASH response in specific areas of Pemba city. The immediate WASH response in cholera hot spots includes hygiene promotion, CERTEZA distribution and water quality monitoring.

Health

Cyclone Idai
While cases of cholera persist in affected districts of Sofala, the combined efforts of the UNICEF supported vaccination campaign, WASH and communication efforts has led to a reduction in daily cases to under 10 over the last seven days. In addition to WASH and communication efforts, UNICEF organized the purchase and importation of the OCV (with GAVI financial support) and coordinated microplanning efforts of the campaign. Normally three weeks with zero cases is required to declare an end to an outbreak, so a major milestone awaits the international community.

On 6 May, the provinces of Sofala, Manica and Inhambane launched the Health Week (SSRE) in Buzi, the district arguably hardest hit by the cyclone, supported by the presence of UNICEF national Good Will Ambassador, Neyma. The Week aims to reach more than 800,000 children with vaccination, vitamin A, deworming, anaemia preventions as well as additional Maternal and Neonatal Child Health (MNCH) services. Long lasting insecticidal nets (LLINs) will be made available to communities missed during previous distributions. UNICEF has spearheaded the Health Week campaign by the design, planning and finance of the SSRE, purchasing all needed supplies, coordinated microplanning, rapid rehabilitation of cold

² Standard WASH cluster Hygiene kit (field tested and agreed in 2017) includes key items for water storage (2 buckets) family hygiene (soap, toothpaste / tooth brushes) and menstrual hygiene management (multipurpose cloth, sanitary pads and underwear)
UNICEF continues to provide financial and material support to primary health care (PHC) service in accommodation centres and communities most affected by the cyclone and flood. In Beira, health authorities are urgently mapping emerging gaps in PHC services. For people living with HIV under anti-retroviral (ARV) treatment is ongoing. For example, in Dombe (Manica), one of the hardest hit communities has more than 800 active patients, with a retention rate of 56 per cent after 12 months of treatment. Across Sofala, data on retention rates is anticipated in the coming days and will be reported in the next report.

Cyclone Kenneth
Following the experiences and lessons learned from Cyclone Idai, an OCV campaign is being prepared, targeting 250,000 people (two rounds) living in Pemba and Mecufi districts, where cholera cases have been confirmed. UNICEF provided initial tents and medical kits to help local authorities establish the first CTC together with WHO and MSF. Following an initial assessment with partners in Macomia district, UNICEF is working with DPS to define an operational plan for outreach. Teams have been developed to ensure mobile provision of primary health care services in the most affected communities. A shortage of LLINs has be identified that will be address in the coming weeks.

Nutrition
Cyclone Idai
UNICEF provided financial and technical support to the Technical Secretariat for Food Security and Nutrition (SETSAN), in training and preparations for the upcoming ‘SMART’ nutrition surveys in 17 districts directly affected by Cyclone Idai and flooding. This was done to provide an objective assessment of the level of acute malnutrition and nutritional insecurity. Data collection will commence on 8 May and will provide an in-depth assessment of malnutrition, food insecurity, disease, and other related factors. In addition, during the Health Week all 800,000 children under-five will be screened for acute malnutrition. Both of these activities are expected to provide much needed information on the levels of acute malnutrition in Idai affected areas. UNICEF has continued to support the national and provincial health authorities in national and sub-national coordination and information management for the collective response.

Cyclone Kenneth
UNICEF provided technical support to the provincial health authorities on Cabo Delgado to prepare for nutrition outreach to accommodation centres starting in Pemba City on 8 May. Screening for acute malnutrition of children under-five and pregnant women, enrolment in treatment for those cases identified, and provision of vitamin A and deworming and promotion of optimum Infant and Young Child Feeding Practices is part of the nutritional services delivered. UNICEF is also supporting the establishment of coordination and information management systems.

Education
Cyclone IDAI
In Sofala, Education Cluster partners reached 55,597 children (6-15 yrs) and 1,940 children (3-5yrs) through provision of Temporary Learning Centres (TLC), Child Friendly Spaces (CFS) and Education in Emergency (EiE) materials. Of these children, 36,366 were reached directly by UNICEF. UNICEF also trained 35 education staff from Beira, Dondo and Nhamatanda in psychosocial support to teachers and children. In total, 16 partners in the Cluster have committed to support rehabilitation of schools in Beira, Dondo, Buzi and Nhamatanda. While in Manica Province, UNICEF supported the local authorities with tarpaulins to temporarily fix school roofs allowing 3,326 school children to resume classes.

The Education Cluster in Sofala is identifying partners for the rehabilitation of schools. Sixteen partners have already been identified for the heavily affected districts of Beira, Dondo, Buzi and Nhamatanda. The Cluster has also improved its reporting mechanisms.

Cyclone Kenneth Response
In Cabo Delgado Province, UNICEF is assessing needs, establishing the Education Cluster and supporting local authorities in developing an education response plan.
Child Protection

Cyclone Idai
Under UNICEF leadership, child protection partners are providing 10,956 children (5,791 boys and 5,165 girls) with psychosocial support through Child friendly Spaces in Sofala (Buzi, Beira and Dondo) and Manica (Gondola sede, Inchope, Amatongas and Cafumbe), Cabo Delgado (Pemba). Children benefited from recreational and psychosocial activities in 32 spaces. Partners have trained 342 community members (181 women; 161 men) in psychosocial approaches, who then provided individual psychosocial care to 447 girls and boys.

Child protection partners have reached 580 community members (222 adults; 220 boys; 138 girls) with messages on child rights, violence, abuse and neglect. A total of 963 children (506 boys; 457 girls) were reintegrated in school and 61 children (41 boys; 20 girls) referred to specialized medical and psychological services. Child protection partners have also reached 5,055 community members (2,982 men; 2,073 women) with messages on prevention of separation and existing mechanisms for family tracing and reunification, enhancing safe transfer to relocation and resettlement centers.

Eighty-two unaccompanied children were identified and placed in interim care, and 419 separated children were documented living in kinship care. In partnership with Save the Children (SCI) and DPGCAS monitoring visits will occur to assess children’s welfare and the needs of the families. UNICEF supported the Government in establishing a task force to improve family tracing and reunification. In cases where families cannot be traced, the foster care arrangements will be formalized.

UNICEF continued to monitor the wellbeing of families in resettlement areas to ensure safety and protection of children. A one-stop-tent and two CFS were established for psychosocial support, reporting and responding to violence, neglect and abuse. UNICEF revised the Prevention of Sexual Exploitation and Abuse (PSEA) Country-Level Framework and, in collaboration with WFP, provided capacity-building on PSEA for the “Linha Verde” hot line at national level to ensure children in vulnerable circumstances have access to help.

Cyclone Kenneth
In Cabo Delgado, UNICEF is leading the PSEA network in coordination with OCHA. The network will soon start building capacity and raising awareness of aid workers and beneficiaries. UNICEF also supported the set-up of a CFS in two of the accommodation centres in Pemba. UNICEF established a coordination mechanism for mental health and psycho-social support with provincial mental health department and hospital to provide long-term support to children in need of this service.

Communication for Development (C4D)

Cyclone Idai
As part of the preparation for the National Health Week in Sofala, more than 1,000 social mobilizers were deployed in Beira to promote WASH and malaria preventive behaviours reaching approximately 32,000 families during the week. UNICEF supported the Institute of Social Communication (ICS) to engage approximately 10,600 people from 25 April to 1 May in transit centres and communities in the districts of Beira, Buzi, Muanza and Nhamatanda. This was done through public announcements involving community leaders and community cinema engagement sessions, with key messages on hygiene, cholera prevention and use of bed nets, and information on social services for the resettlement process. UNICEF continued to support four community radios in Sofala Province in the daily dissemination of spots and programmes in three languages on house spraying campaign, malaria and cholera. Radio Mozambique (RM) is airing two programmes per week and 37 radio spots per day in Portuguese and local languages on cholera prevention and the promotion health-seeking behaviours. As part of the community engagement plan, 50 religious leaders and 50 volunteers of youth groups of PIRCOM (inter-faith organization) were trained in Beira and Dondo. U-Report platform was used to launch humanitarian/AAP questions to users in four key districts of Sofala. RapidPro platform was finalized and supervisors of social mobilizers can now use it to send weekly data on uptake of cholera and malaria practices and related community feedback.

In Manica ICS and RM radios broadcasted spots and debates, IEC materials were distributed to target districts and advocacy meetings with religious and community leaders organized in six districts (Chimoio, Gondola, Macate, Mossourize, Sussundenga and Vanduzi) to make communities aware of the health week and promote uptake of services related to health and nutrition. Communities were also reached by local health committee members with megaphones to mobilize mothers, fathers and other caregivers as part of the Health Week.
Cyclone Kenneth
In Pemba, Cabo Delgado province, UNICEF supported the local authorities in mapping local NGOs working on community engagement and to organize a training of trainers for 400 activists and volunteers including social mobilization and inter-personal communication, particularly focusing on cholera prevention. The ISC promoted cholera prevention and WASH practices and behaviours through Multimedia Mobile Units in Pemba and Macomia, and through spots and debates aired on Radio Mozambique.

Supply and Logistics

Cyclone Idai
Most of supplies linked to the first-wave response have been delivered. The finalization of the second supply wave is under way, including through local and regional options where possible. The main logistics hub in Beira is fully operational. Two warehouse locations are managed in Beira with total storage capacity of more than 1000 m² to meet the storage needs based on the supply plan. Agreements have been established with local logistics partners in Beira to support in-country logistics and transport needs. A secondary logistics base has been established and is operational in Chimoio (Manica Province). Warehousing is provided via the Logistics Cluster in Chimoio, with a total capacity of 1000 m². Emergency supplies are subject to an expedited custom clearance process allowing a smoothly clearance process.

Cyclone Kenneth
The first-wave of response supplies was delivered to Pemba. A total of 500,000 doses of OCV was ordered through UNICEF Supply Division and are currently scheduled to arrive in Pemba on 12 May. Warehousing, logistics and customs clearance activities are being managed through private sector partners and through established LTAs.
In all locations, most delivery points are now accessible by road, with the Logistics Cluster providing support when road access is not possible.

Security

Cyclone Kenneth
The overall risk level is moderate, with some of the Cabo Delgado districts located north of Pemba considered as high, due to violent armed attacks perpetrated since October 2017. The incidents targeted villages, clinics and shops. Humanitarian assistance to these districts has been provided under armed escorts since 2017 (WFP; excluding Macomia). On 3 May 2019, an armed incident occurred 15 km south of Macomia in the village of Nacate. As a result, the security arrangements were reviewed and humanitarian activities to the Northern Districts of Cabo Delgado were temporarily put on hold. UNICEF’s overall response was not affected. Following a UNDSS assessment, activities have resumed on 6 May. All activities to the Northern Districts of Cabo Delgado require armed escorts coordinated by UNDSS. The mitigation measures will ensure continuity of humanitarian activities in Northern Cabo Delgado. Activities in the Southern Districts of Cabo Delgado and in Nampula continue as normal; no armed escorts required at this point of time.

Cyclone Idai
The overall risk level is low.

Funding

Based on the initial assessments and needs, UNICEF is requested US$102.6 million to meet the humanitarian needs of people affected by Cyclone Idai as well as to support the recovery phase of the response; UNICEF’s appeal covers March to December 2019. To initiate its response, the UNICEF Mozambique used US$1 million from its contingency reserve of regular resources and accessed US$ 8 million emergency loan from HQ (EPF). In terms of funds received, to date, UNICEF Mozambique has received almost $17.5 million from CERF (WASH, Health, Nutrition, Protection, Education), DFID, Sweden, Canada and several National Committees, including the German National Committee. The Office has $500,000 of unallocated thematic funds available to use for allocation in due course.
### UNICEF Mozambique Humanitarian Action for Children (HAC) Requirements for IDAI cyclone response

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements (US$)</th>
<th>Funds received current year (US$)</th>
<th>Funds available (US$)</th>
<th>Funding gap %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water, sanitation and hygiene</td>
<td>$30,000,000</td>
<td>6,218,728</td>
<td>23,781,272</td>
<td>79%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>$6,000,000</td>
<td>210,940</td>
<td>5,789,060</td>
<td>96%</td>
</tr>
<tr>
<td>Health</td>
<td>$11,000,000</td>
<td>3,328,857</td>
<td>7,671,143</td>
<td>70%</td>
</tr>
<tr>
<td>Child protection</td>
<td>$4,000,000</td>
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<td>2,028,156</td>
<td>51%</td>
</tr>
<tr>
<td>Education</td>
<td>$20,000,000</td>
<td>2,896,785</td>
<td>17,103,215</td>
<td>86%</td>
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<tr>
<td>Communications for Development</td>
<td>$1,600,000</td>
<td>946,975</td>
<td>653,025</td>
<td>41%</td>
</tr>
<tr>
<td>Logistics and Operations</td>
<td>15,000,000</td>
<td>1,851,583</td>
<td>13,148,417</td>
<td>88%</td>
</tr>
<tr>
<td>Resilience and Recovery</td>
<td>15,000,000</td>
<td>0</td>
<td>15,000,000</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$102,600,000</strong></td>
<td><strong>17,425,712</strong></td>
<td><strong>85,174,288</strong></td>
<td><strong>83%</strong></td>
</tr>
</tbody>
</table>

**Next SitRep:** 15 May 2019


**UNICEF Mozambique:** [http://www.facebook.com/unicef.mozambique](http://www.facebook.com/unicef.mozambique)

**UNICEF Mozambique:** [http://www.twitter.com/UNICEF_Moz](http://www.twitter.com/UNICEF_Moz)

**UNICEF Mozambique:** [http://www.youtube.com/UnicefMozambique](http://www.youtube.com/UnicefMozambique)

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  - Email: cjulaia@unicef.org

- **tbonde@unicef.org**
### ANNEX I: UNICEF targets for Cyclone Idai response

<table>
<thead>
<tr>
<th>Cluster/sector</th>
<th>Cluster Target</th>
<th>Cluster Results**</th>
<th>Change since last report▲▼</th>
<th>UNICEF Target</th>
<th>UNICEF Results</th>
<th>Change since last report▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People provided with access to safe water (7.5-15L per person per day)</td>
<td>1,435,000</td>
<td>1,288,600 ▲202,300</td>
<td>▲183,400</td>
<td>965,000</td>
<td>960,000 ▲5,000</td>
<td></td>
</tr>
<tr>
<td>People benefiting from sanitation, hygiene promotion activities, including point-of-use water treatment safe practices</td>
<td>435,000</td>
<td>722,000 ▲173,500</td>
<td>▲224,700</td>
<td>267,500</td>
<td>492,200 ▲224,700</td>
<td></td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6 months to 15 years vaccinated (OCV/Measles)</td>
<td>500,000</td>
<td>330,888 ▲169,112</td>
<td>No change</td>
<td>500,000</td>
<td>330,888 ▲169,112</td>
<td></td>
</tr>
<tr>
<td>Children under-five receiving a consultation</td>
<td>229,500</td>
<td>14,487 ▲214,013</td>
<td>▲3,241</td>
<td>229,500</td>
<td>14,247 ▲215,253</td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under five years of age screened for acute malnutrition</td>
<td>328,000</td>
<td>16,085 ▲290,915</td>
<td>▲680</td>
<td>328,000</td>
<td>16,085 ▲290,915</td>
<td></td>
</tr>
<tr>
<td>Pregnant and lactating women reached with IYCF services</td>
<td>100,000</td>
<td>66,688 ▲33,312</td>
<td>▲7,107</td>
<td>100,000</td>
<td>40,651 ▲59,349</td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6-15 years old in humanitarian situations accessing education</td>
<td>500,000</td>
<td>55,600 ▲264,400</td>
<td>▲10,600</td>
<td>380,000</td>
<td>36,350 ▲10,600</td>
<td></td>
</tr>
<tr>
<td>Children aged 3-5 years old in humanitarian situations accessing play-based learning</td>
<td>100,000</td>
<td>1,950 ▲98,050</td>
<td>▲950</td>
<td>76,000</td>
<td>1,950 ▲94,050</td>
<td></td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children receiving psychosocial support through Safe Spaces</td>
<td>147,000</td>
<td>10,950 NA</td>
<td>▲120</td>
<td>20,000</td>
<td>6,850 ▲13,150</td>
<td></td>
</tr>
<tr>
<td>Separated and unaccompanied children are identified and are in family-based care or an alternative care</td>
<td>100% target on UASC identified</td>
<td>82</td>
<td>NA</td>
<td>400</td>
<td>82 ▲318</td>
<td></td>
</tr>
<tr>
<td><strong>Communications for Development</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with key lifesaving and behavior change messages on health, nutrition and safe and appropriate sanitation and hygiene practices.</td>
<td>700,000</td>
<td>810,000 ▲10,000</td>
<td>▲10,000</td>
<td>700,000</td>
<td>810,000 ▲10,000</td>
<td></td>
</tr>
</tbody>
</table>

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3 The total number of people vaccinated with UNICEF support is 900,000. Children aged 1-14 yrs are estimated to be 41.2% of the population. This proportion was used to calculate the result achieved.

4 Include 430,000 people reached through one-time OVC campaign through social mobilization on hygiene and sanitation promotion in preparation for the cholera vaccination campaign on 3-4 April in Beira, Buzi, Nhamatanda and Dondo.

5 Reached through family social mobilizer and multimedia mobile unit with integrated package with key lifesaving and behavior change messages.