**Highlights**

- At least 140,784 people have been displaced from Cyclone Idai and the severe flooding. Most of the displaced are hosted in 161 transit centers set up in Sofala, Manica, Zambezia and Tete provinces.
- As of 31 March, 517 cholera cases and one death have been reported, including 246 cases on 31 March alone with 211 cases from one bairro. Eleven cholera treatment centres (CTC) have been set up (seven are already functional) to address cholera in Sofala. UNICEF supported the Health provincial directorate to install the CTC in Macurungo and Ponta Gea in Beira city, providing five tents, cholera beds and medicines to treat at least 6,000 people.
- UNICEF has procured and shipped 884,953 doses of Oral Cholera Vaccine (OCV) that will arrive in Beira on 01 April to support the OCV vaccination campaign expected to start on 3 April.
- With support of UNICEF and DFID, the water supply system in Beira resumed its operations on 22 March providing water to about 300,000 people. UNICEF has been supporting the FIPAG-water supply operator with fuel – 9,000 liters of fuel per day, and the provision of chemicals for water treatment. Water supply systems for Sussundenga and Nhamatanda small towns have also been re-established.

<table>
<thead>
<tr>
<th>Cluster</th>
<th>UNICEF</th>
<th>UNICEF</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH</strong></td>
<td>965,000</td>
<td>300,000</td>
</tr>
<tr>
<td>People provided with access to safe water (7.5-15L per person per day)</td>
<td>1,000,000</td>
<td>-</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td>500,000</td>
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<tr>
<td>Children aged 6 months to 15 years vaccinated</td>
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<tr>
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<tr>
<td>Children under 5 years screened for acute malnutrition</td>
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<tr>
<td>Children aged 6-15 years old in humanitarian situations accessing education</td>
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<tr>
<td><strong>Child Protection</strong></td>
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<td>-</td>
</tr>
<tr>
<td>Children receiving psychosocial support through Safe Spaces</td>
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<td>-</td>
</tr>
<tr>
<td><strong>Communications for Development</strong></td>
<td>700,000</td>
<td>1,300</td>
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<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>-</td>
<td>-</td>
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**SITUATION IN NUMBERS**

- **1.85 million** People in need by the cyclone/floods (HRP 2019)
- **1 million** Children in need by the cyclone /floods
- **500,000** Children targeted through humanitarian interventions by UNICEF
- **965,000** People targeted through humanitarian interventions by UNICEF
- **2,700** Diarrhea cases reported in Beira

**UNICEF Appeal 2019**

**US$ 102.6 million**
The Humanitarian Country Team in Mozambique on 26 March 2019 launched the flash appeal for the Cyclone Idai response requesting US$ 281.7 million for three-months to support 1.72 million people. The Food Security and Livelihoods, WASH, Health and Education sectors represent 76.9 per cent of the total funding requirements of the flash appeal. UNICEF is requesting US$ 28.6 million in WASH, Health, Education, Nutrition and Child Protection.

As of 29 March, 140,784 people, have been displaced due to the cyclone and flooding. The displaced are largely hosted in 161 transit centres in Sofala, Manica, Zambezia and Tete provinces. The largest number of transit centres are in Sofala where at least 109,702 people are hosted in 116 centres. On 27 March, the Government confirmed five cases of cholera at Munhava health centre in Beira City, according to the National Director of Medical Assistance. As of 31 March, 517 cholera cases and one death have been reported, including 246 cases on 31 March alone with 211 cases from one bairro.

According to National Institute for Disaster Management (INGC) at least 150,854 students are affected by the floods and cyclones due to the damage of 3,318 classrooms in Sofala, Manica, Zambezia and Tete provinces. At least 54 health facilities are affected in Sofala (25), Manica and Zambezia. INGC estimates, at least 843,723 people were affected by the cyclone and floods in the central region of the country and the death toll has risen to 501. About 84,224 houses were partially or totally destroyed. The agriculture authorities estimate that 684,171 ha of crop area (corresponding to 433,056 farmers) were affected in Sofala, Tete, Zambezia, Inhambane and Manica representing 84 per cent of the planted area in these provinces.

UNOSAT and REACH carried out a rapid assessment of damage in Beira city, Macuti neighbourhood with satellite images captured on 26 March 2019, and detected that 2,001 buildings out of 4,102 (49%), were considered potentially damaged.

The Logistics cluster reported that Beira city is accessible by road N6 which is open to all traffic including heavy trucks and the sea port is also fully operational. Electricity has been re-established partially, but many houses do not offer safe conditions yet. Truck access to Dombe, Sussundenga district Manica province is still limited. In Dombe, health centres are reportedly out of medical supplies and essential medicines and most are running without electricity. A private company has set-up a generator for the hospital in Sussungenga district, which is now fully operational

On 22 March 2019, the UNICEF Executive director, Ms Henrietta Fore visited Beira and flew over Buzi district and witnessed first-hand the extent of needs and impact caused by cyclone Idai and resulting floods.

On 22 March 2019, the IASC activated the SCALE-UP for Mozambique for a period of three months until 25 June 2019. Following the scale up activation, the UNICEF Executive Director Activated the Level 3 (L3) Corporate Emergency Activation Procedure (CEAP) for the Cyclone Idai response in Mozambique an initial period of three months.
Humanitarian leadership and coordination

The INGC continues to provide overall leadership and coordination of all humanitarian interventions in the country. The Emergency Operation Center for the coordination of the response in the central region is still in Beira. All the operations, response planning and coordination efforts are done from Beira to the affected areas. From 28-29 March 2019 the President visited Beira for the second time Beira to assess the situation and response provided so far.

In Maputo, the HCT is active, supporting ICCG. Clusters are operational with UNICEF leading the Nutrition, WASH and Education and actively participating in Health and Child Protection clusters. An inter-agency cholera task force brings together the health and WASH clusters and community engagement players.

UNICEF staff were deployed to the field to support cluster coordination and operationalise UNICEF response in the affected areas. UNICEF has cluster coordinators for WASH and nutrition in Beira and Maputo, an education cluster coordinator in Maputo, and is deploying education cluster coordinators to Beira shortly. UNICEF is using its close relation with central and local government to strengthen the link of the cluster system to the Government of Mozambique’s leadership, especially in Beira.

Humanitarian Strategy

UNICEF’s key priorities are to treat and prevent cholera with WHO, MSF and the Government and supporting interventions in WASH, Health, Nutrition, Education and Protection in the flood and cyclone affected areas namely Tete, Manica, Zambezia and Sofala. Interventions will be coordinated and complementary to Government and Humanitarian Country Team (HCT).

UNICEF has established its field presence in three hubs in the most affected Provinces - Manica, Sofala and Zambezia in Chimoio, Beira, and Quelimane respectively, to ensure operational efficiency and a timely response.

UNICEF has enhanced its capacity to provide operational support, undertake higher frequency monitoring and quality assurance for both governmental agencies and partners, especially for outreach interventions in hard-to-reach areas. UNICEF will work towards strengthening Protection from Sexual Exploitation and Abuse (PSEA) by establishing coordination structures to ensure crisis-affected populations have access to reporting mechanisms and assistance.

UNICEF will adopt a multisectoral response to meet the needs of affected populations in both rural and urban areas, while also targeting displaced households living in accommodation centers. Priority interventions include prevention and response to disease outbreaks, especially cholera and malaria, through the provision of access to safe water, sanitation and hygiene, support to health facilities and outreach services, and vaccination campaigns. UNICEF and partners will also access to nutrition and education services, while ensuring that affected children are protected, are provided with psychosocial support, and those separated and unaccompanied are reunited with their families or with caregivers.

Summary Analysis of Programme Response

WASH

Water supply
To prevent cholera and other water-borne disease outbreaks, UNICEF has scale up supply of clean water, sanitation and getting partners focussed on cholera prevention. UNICEF and DFID supported the national urban water supply agency (FIPAG) to resume operations of the Beira/Dondo water system one week after the cyclone hit supply system, on 22 March, especially due to both the amount of displaced people seeking shelter in the city and the city citizens themselves. UNICEF supported FIPAG with the installation of emergency generators airlifted by DFID. UNICEF continues to support FIPAG with fuel and provision of water treatment chemicals for operating of the centralized water supply system. As result, water supply in Beira has been re-established and at least 300,000 people have access to safe drinking water, although operating at 60 per cent capacity and through generators. UNICEF has been supporting the FIPAG with fuel – 9,000 litres of fuel per day ($10,000 day) and provision of chemicals for water treatment. Outside of the main system, UNICEF is also supporting FIPAG for water trucking operations for the accommodation centres in Beira and Dondo. Outside of Beira, UNICEF continues to prioritize quickly getting centralized water systems back online. To date, UNICEF has successfully supported the decentralized water supply systems of Sussundenga and Nhamatanda to resume operations.

In addition, UNICEF has worked closely with PSI to develop a plan to respond to the needs for household water treatment products. PSI markets a chlorine-based product called Certeza in Mozambique. Unfortunately, their factory, which was based in Beira, was damaged in the storm. UNICEF has supported PSI through advanced order commitments to establish additional commercial partnerships with two factories in Maputo. In addition, UNICEF is working with PSI to get the factory in Beira working at full capacity again. This week, it is expected that Certeza production will increase to 20,000
bottles per day. UNICEF is coordinating the distribution of this product through the cluster mechanism as it is in limited supply with a focus on cholera related actions.

In Zambezia and Nampula provinces, UNICEF is supporting the provincial WASH entity, DPOPHRH, for water trucking operations in accommodation centres and relocation areas, as well as the establishment of water distribution points, rehabilitation and construction of existing water sources. This work primarily is using existing government private sector contracts that have been amended based on existing public procurement law. Moreover, household water purification products (Certeza) are being distributed amongst affected communities.

Sanitation
UNICEF is providing support to partners on the ground for the establishment of emergency sanitation facilities in accommodation centres and relocation areas. Sanitation remains a specific technical challenge as the water table in many areas prevents the use of standard emergency latrine designs. A technical cluster meeting was called to specifically discuss this situation and models have been shared. UNICEF has distributed pre-positioned latrine slabs to partners responding to the crisis.

At national level, UNICEF WASH had four Contingency PCAs developed prior to the crisis: COSACA (an NGO consortium of Oxfam, CARE, and Save the Children), JAM, World Vision and the Red Cross. Two of these contingency PCAs have been activated, with COSACA and World Vision, targeting 90,000 people. The other two contingency PCAs are expecting to be finalized in the coming week as are additional agreements with provincial based NGO/CSOs.

Emergency WASH response supplies were prepositioned in various locations in Mozambique before the storm. The stock was designed to respond to the needs of 20,000 people. These materials have been distributed to CSO and Government partners. Given the scope of the emergency however, significant additional supply orders have been placed to be able to respond to the scope of the emergency. Materials include water supply products both at centralized (water treatment chemicals, water storage tanks, pumping equipment) and household level (water filters, water containers, cerveza), emergency sanitation facilities (latrine slabs and tarpaulin) and hygiene (soap, family hygiene and female dignity kits). Using its already existing LTAs, additional materials are being procured and are in the pipeline, including water purification product (CERTEZA) for which UNICEF is playing a facilitating role providing free access to WASH partners for their distribution.

In advance of the emergency, UNICEF had developed with cluster partners a Mozambique standard hygiene and dignity kit. The kit contents were based on an end-user survey and agreed upon within the cluster. These kits were part of the emergency WASH stock and have been sent to the impacted area. Additional quantities have been ordered using local supplier through existing LTAs.

Coordination
WASH clusters have been activated at national level and in the three most affected provinces, Sofala, Manica and Zambezia, together with the National Directorate of Water Supply and Sanitation (DNAAS) and the Provincial Directorates of Public Works, Housing and Water Resources (DPOPHRH). UNICEF is co-leading the WASH cluster coordination at all levels, through deployment of coordinators to all three provinces, in addition to technical staff. Through UNICEF support, the cluster has developed a WASH response strategy, WASH emergency response standards, WASH partner mapping matrix, a mapping of emergency water treatment plants, and a matrix of centralized water systems impacted by the cyclone. With the recent appearance of cholera in Sofala, additional support for cholera specific coordination and response has being mobilized through deployments of WASH cholera specialists (2) to Beira.

On behalf of the WASH cluster, UNICEF is supporting the consolidation of supply needs as well as the liaison between WASH partners on the ground and donor community to facilitate allocation of in-kind support to specific locations, including supporting Government for establishment of criteria for utilization of water treatment equipment and products for emergency response.

Health
During the reporting week, significant progress has been made in re-starting PHC services to affected populations including dedicated services to accommodation centres. With more than 517 reported cholera cases, the focus has shifted to cholera prevention and treatment. cases UNICEF has immediately released available supplies for establishing cholera treatment centres (CTCs), including logistic materials as well as drugs and related supplies. Led by Provincial Health Authorities, WHO, MSF and many other have joined forces to respond. The Government and UNICEF-led WASH cluster is urgently re-establishing municipal waters systems, providing water treatment chemicals, and strengthening WASH within the CTC. Further, as part of the response strategy, an oral cholera vaccination (OCV) campaign is being organized, targeting up to 900,000 children and adults in the most affected districts (Beira, Dondo, Buzi and Nhamatanda, to start 3April. To
support this campaign, UNICEF has procured and organised shipment of 884,953 doses of Oral Cholera Vaccine (OCV) that will arrive in Beira 1 April.

Given the urgency and complexity of the OCV campaign, a child health week will be undertaken subsequently to provide a package of services, including measles and polio vaccine, vitamin A supplementation, deworming and distribution of mosquito nets. UNICEF has also procured additional insecticide treated mosquito nets (ITNs) to replace those lost in the cyclone / flood and reduce the risk of vector borne diseases (malaria, dengue, chikungunya) as mosquito density increases in the standing waters.

In parallel to assessments of affected populations, Primary Health Services are running, both in the usable structures of previous health facilities and tents. Services are being directed to accommodation centres as a priority – representing approximately 50 per cent of current PHC consultations.

The National Health and Nutrition Plan, prepared jointly with the Ministry led health and nutrition clusters, was presented and approved by the Council of Ministers. Focusing on the immediate relief needs of 1.85m people over the next three months, the plan proposes an initial US$ 38 million dollars. Following closely the evolving needs assessment, including now at least 54 damaged health facilities, UNICEF continues to focus support (and fund raising) on the resumption of PHC, including routine and campaign vaccination efforts and critical supplies and equipment to function, provision of ITNs, and retention in HIV treatment. UNICEF is currently estimating to provide PHC supplies and financial support to cover an estimated 50 per cent of the people in need of PHC at a cost of just under US$5.3 million.

Cholera outbreak

Partners supported the installation of eleven CTCs of which seven are already functional, to address the cholera cases in Sofala province mainly in Beira city, Buzi, Dondo, Mafambisse, Mutua and Nhamatanda. UNICEF supported the provincial health directorate to install the Cholera Treatment Center (CTC) in Macurungo and Ponta Gea in Beira city providing five tents, cholera beds (50) and medicines to at least 6,000 people. A total of 884,953 cholera vaccine doses will arrive in Beira on 01 April and micro-planning for the vaccination campaign is underway.

According to OCHA (flash update 11), Health and WASH partners are ramping-up cholera and AWD response, in support of the Government. WASH Cluster partners have reported that three water purification units, supporting 15,000 people are available in Beira; one of which will be deployed to Nhamatanda as a mid-term solution. WASH support is crucial in both community centers and treatment centers. A Cholera Response Strategy has been drawn up across the district. The implementation of the strategy will require logistical capacity, including cold storage units.

UNICEF is prioritizing water treatment units to CTCs/Hospitals, currently systems are in Buzi town, Estaquinha, Nhagau Sede/Berira municipality, Macurungo health center, ORS and hygiene points, CERTEZA water treatment product distribution in key Beira neighborhoods: Munhava mainly Massamba, Chaimite mainly Praia Nova, Ponta Gea mainly Goto and Grande Hotel, Manga, Inhamizua.

Nutrition

Priority nutrition actions are to screen and identify children with severe acute malnutrition (SAM). Supplies for the screening and treatment of SAM have arrived in Beira (Sofala province) and in Chimoio (Manica province), including ready-to-use therapeutic food (RUTF), F75 and F100 therapeutic milks, kits for inpatient and outpatient nutrition rehabilitation, and MUAC tapes for screening acute malnutrition in children under-5 and pregnant and lactating women and are being distributed. More supplies are being procured to cover the treatment of an estimated two per cent of under-5 (expected SAM)- approximately 8,750 children in the coming nine months. BP5 fortified nutrition biscuits have arrived in Beira, for targeted distribution to the most nutritionally vulnerable pregnant and lactating women: those with moderate acute malnutrition or HIV. Guidelines for the distribution and use of the BP5 biscuits has been agreed with MiSAU and distributed for operations.

The Nutrition in Emergencies Specialist was deployed as Health and Nutrition Cluster lead in Chimoio/Manica on 16 March and a Nutrition in Emergencies Field Officer/Field Cluster Coordinator was deployed to Beira/Sofala on 30 March. An additional surge support of 3 experts (NiE Technical Specialist, a second NiE Field Officer/Field Cluster Coordinator, and a Health and Nutrition Information Manager) have been identified and will arrive in country the week of 1 April for immediate deployment. With the arrival of the Information Manager, more consistent data will soon be available on the distribution of nutrition commodities, and the number of children assessed and treated for acute malnutrition.

UNICEF is providing technical support to the Ministry of Health Nutrition Department to lead the Nutrition Cluster bi-weekly meetings at MiSAU, coordinating closely with WFP in the nutrition response, and representing the Nutrition Cluster at the regular inter-cluster coordination meetings at UNDP/OCHA. Given the arrival of breast-milk substitutes, a Joint Statement by UNICEF/WFP/WHO/Save the Children/World Vision on Infant Feeding in Emergencies was finalized
and broadly distributed to all partners in English and Portuguese. Following the initial, immediate life-saving phase of the response, UNICEF will work with MiSAU and partners in the five affected provinces to provide counseling and support to 100,000 pregnant and lactating women on appropriate infant and young child feeding, and to provide essential micronutrient interventions (vitamin A, deworming, and MNPs) to approximately 328,000 children under five years in the affected areas.

**Education**

The Education cluster resumed its activities on the day of the cyclone with high level commitment and the Minister of Education chairing the meeting. The Ministry of Education has brought together the Directorates of Planning, Infrastructure, Administration and Finances and School Health to provide a cross-cutting response to the emergency. The cluster is being co-led by UNICEF and Save the Children and has been meeting regularly. The volume of communication has increased as new partners join the cluster for a coordinated response. Cluster meetings are also taking place in the operational hubs of Beira, Chimoio and Zambezia, where UNICEF is also providing support to the coordination mechanism to promote a harmonized response.

The education response will focus on re-establishing access to educational services for school-aged children and play-based activities for 3-5-year-old children in the most affected areas of Manica, Sofala, Tete and Zambezia. The intervention will provide a differentiated package based on the reality on the ground as follows:

- **a.** School tents will be provided in school premises that are being used as accommodation centers to guarantee that educational activities can resume without further displacing the affected population temporarily residing in these schools.
- **b.** Tarpaulin tents will be provided in schools that have been reported as fully destroyed to guarantee that temporary learning spaces are set up immediately to resume educational activities while the reconstruction process takes place.
- **c.** Quick rehabilitation repairs will be done in classrooms that are reported as partially affected following structural assessment (in partnership with UN-HABITAT) guaranteeing a resilient package of roof retrofitting to make sure that classrooms are built back better. Gradual infrastructural changes will be incorporated linking interventions with recovery and recuperation.

In all three cases schools will benefit from teaching and learning materials including schools in a box, learner kits and ECD kits. The ECD kits will target pre-school population in the catchment areas where they will benefit from play-based activities that will bring to both school age and preschoolers a sense of normalcy and safe spaces while parents try to reconstruct their lives. Close collaboration with Child Protection will integrate schools with child friendly spaces (CFS) offering recreational activities for all ages. Teachers will be provided with training and orientation to use the kits as well as training to provide life-saving messages linked to WASH and referral pathways including psychosocial support to children.

UNICEF has activated its standby PCA with COSACA, a consortium including Oxfam, Save the Children and CARE for establishing temporary learning spaces, distribution of Education in Emergencies (EiE) material including ECD kits and provide teacher training on the use of the material. One Education Specialist has been deployed to Beira and is assessing the damage to classrooms and educational needs together with the Provincial Directorate for Education. Another one will be deployed to assume the cluster coordination role, while the surge staff arrives in-country. As of 29 March, seven CFS were set up with a capacity of 200 children each.

UNICEF, in partnership with the development basket fund donors within the Sector Wide Approach (SWAP) and the Ministry of Education, is exploring the possibility of providing an additional tranche of direct support to schools (ADE by its Portuguese acronym) using existing government mechanisms.

The latest data from the INGC indicates that at least 3,265 classrooms were affected by the cyclone. Some secondary schools in Sofala province re-opened on 25 March after the accommodation centres set up in these schools were transferred to alternative places. To avoid more suffering, UNICEF, together with government counterparts and humanitarian partners are working together to find feasible venues to accommodate victims for the required time.

UNICEF has airlifted education materials such as tarpaulin tents, School in a Box and Early Childhood Development kits from Copenhagen and is utilising local LTAs and partners on the ground for learner kits and moveable chalkboards.

**Child Protection**

**Family separation** has been flagged as a major concern in the current humanitarian situation and has been identified as one of the priorities under the humanitarian response plans of UNICEF and the Protection Cluster. While no comprehensive multi-sectoral assessments integrating protection and child protection have yet taken place, initial
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observations and data coming from the affected areas does not support this concern, which may however change with expansion of assessments both in terms of reach to more affected areas and specific focus on identification of vulnerable children. A Child Protection Rapid Assessment (CPRA) is being organised to assess the specific nature and the scale of concerns affecting children to better inform the urgent needs and immediate interventions required.

Current and planned response: UNICEF has submitted a CERF request for US$200,000 with a focus on Family Tracing and Reunification (FTR) and alternative care and protection support to Separated and Unaccompanied Children (UASC), orphaned and vulnerable children. Partnerships are being finalized with ICDP – to provide alternative care, psychosocial support and case management to UASC, orphaned and vulnerable children in close partnership with the Ministry of Gender, Children and Social Action (MGCAS) and linked to other essential actors including International Committee of the Red Cross (ICRC) and Mozambican National Red Cross (CVM), GBV, health (including mental health) and other services. Collaboration has also been established with the ICRC chapter in South Africa, Pretoria and CVM on Restoring Family Unity. National Red Cross volunteers are being trained to register UASC, orphaned and vulnerable children for further FTR. Five volunteers have been trained and are working in Beira, but additional volunteers are needed. It was agreed that CVM will directly discuss the needs, capacity and plans for assuring expansion of current FTR activities to all affected areas for ICRC to support. UNICEF in partnership with MGCAS and ICDP will support alternative care arrangements for children who need interim care and support (including PSS, referral services).

Save the Children has started response activities following the activation of the contingency PCA and is currently identifying locations and conducting trainings required for launching the early childhood education approach in emergencies (ECD EiE) and Child Friendly Spaces (CFSs). Joint meeting was held with ICDP and Save the Children to ensure a systematic approach to CFSs methodology, costing and geographical coverage of activities.

UNICEF is also working with MGCAS and the Police Department of Family and Children to finalize the response plan and immediate needs and activities in affected areas.

Communication for Development
In preparation for the cholera vaccination campaign starting on the 3 April, community engagement activities are being implemented in accommodation camps in Sofala province, with activists and volunteers mobilized by the Provincial Health Directorate (DPS) focusing on life saving and cholera prevention messages. Final draft of communication plan for the campaign was developed and shared with head of Public Health Department, for final validation. IEC materials are being re-printed for quick distribution to respond to the emergency.

A new Multimedia Mobile Unit (MMU) of the Institute of Social Communication started operating in Beira on 27 March, to initially cover high density suburbs of Munhava, Macurungo and Praia Nova, where no media are accessible. Four additional MMU units will be activated from 1 April to cover Beira city, Dondo, Buzi districts in Sofala province and affected districts in Manica province.

Radio spots on cholera, diarrhea and hygiene in local languages are being disseminated by Radio Mozambique. A comprehensive mapping of the functional and damaged community radios has been finalized and will be used to plan rehabilitation and support interventions.

Social mobilization and community engagement activities have also been included in existing PCAs with partners operating or able to operate on the ground, including COSACA platform, Red Cross and Inter-faith religious platforms. UNICEF is supporting DPS in mapping other partners working with volunteers at the community level and in accommodation camps in Sofala and Manica provinces.

Supply and Logistics
Additional UNICEF capacity has been installed in Beira and Chimoio to respond to logistic needs on the ground namely an emergency logistic coordinator, logistics officer, assistant and warehouse associate. UNICEF logistic capacity has improved in Beira with of the setting up of three new rub halls to store more supplies.

During the reporting period, UNICEF dispatched six cholera kits to Beira and Manica, as well as 60 tarpaulins, soaps and water containers. In addition, 260 kg of HTH (water treatment chemical) is on the way to Manica province.

Beira is now accessible by road through N6, allowing accessibility for UNICEF cargo transport LTA holders. Since 22 March, UNICEF supported FIPAG (provides water supply) with fuel to run the generator to supply water in Beira and Dondo. (Approximately 9,000 liters of fuel per day), and providing water trucking for accommodation centres in Beira, reopening of three public standpipes (Matodouro, Ndunda and Escola Josina Machel). UNICEF has also provided 53,216 units of Certeza for individual household water purification immediately after disaster.

UNICEF has sent 40MT of supplies by sea to Beira, which includes bulk water storage tanks, water pumps, water treatment chemicals, hygiene and dignity kits, nutrition and health supplies, education kits and tarpaulins. UNICEF has dispatched
air shipments from Supply Division to Beira with 52MT of supplies that include health kits and supplies, tents, education kits, and tarpaulin sheets and rolls that arrived over the last few days.

Funding

Based on the initial assessments and needs, UNICEF is requesting 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 appeal covers March to December 2019. The UN Flash Appeal for IDAI response with the funding requirement of US$281.7 million covers the first three months of the response supporting 1.72 million people, of which UNICEF’s portion is US$30 million.

As of 29 March 2019, the secured funding for UNICEF response are US$ 1 million contingency reserve from internal regular resources, US$ 5 million from EPF loan and US$3.6 million from CERF with focus on life-saving activities in WASH, Health, Nutrition, Protection and Education. UNICEF is engaged with a range of public and private sector partners and the funding has been so far committed from Australia, DFID, Sweden and several UNICEF National Committees.

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### ANNEX I: UNICEF targets for Cyclone Idai response

<table>
<thead>
<tr>
<th>Cluster/sector</th>
<th>Cluster Target</th>
<th>Cluster Results**</th>
<th>UNICEF Target</th>
<th>UNICEF** Results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH</strong></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>-</td>
<td>965,000</td>
<td>300,000</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>-</td>
<td>267,500</td>
<td>-</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6 months to 15 years vaccinated</td>
<td></td>
<td></td>
<td>500,000</td>
<td></td>
</tr>
<tr>
<td>Children under-five receiving a Consultation</td>
<td></td>
<td></td>
<td>229,500</td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 years screened for acute malnutrition</td>
<td>328,000</td>
<td>-</td>
<td>328,000</td>
<td></td>
</tr>
<tr>
<td>Pregnant and lactating women reached with IYCF services</td>
<td>100,000</td>
<td>-</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></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>-</td>
<td>380,000</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>-</td>
<td>76,000</td>
<td>-</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children receiving psychosocial support through Safe Spaces</td>
<td></td>
<td></td>
<td>20,000</td>
<td>-</td>
</tr>
<tr>
<td>Separated and unaccompanied children are identified and are in family-based care or an alternative care</td>
<td></td>
<td></td>
<td>1,000</td>
<td></td>
</tr>
<tr>
<td><strong>Communications for Development</strong></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></td>
<td></td>
<td>700,000</td>
<td>1,300</td>
</tr>
</tbody>
</table>

*Breakdown of child-protection sub-cluster targets will be shared in the next sitrep.

** Results are not yet available as information management systems are being set up.