The landfall of Tropical Cyclone Eloise in the night of 23 January 2021 and previously, the Tropical Storm Chalane on 30 December 2020, have deeply affected Sofala, in particular Buzi area, Manica, the southern part of Zambezia, Inhambane, and Gaza provinces. Out of these provinces, Sofala was the most impacted, reporting significant damages and people affected.

According to the National Institute for Disaster Risk Management and Reduction (INGD), 441,686 people have been affected and over 56,000 houses were severely damaged or destroyed. In total, 43,327 people have been displaced, while 34,566 people were evacuated. Although the resettlement sites established in the aftermath of Cyclone Idai in 2019 were not flooded and proved to be safe locations, Cyclone Eloise affected the shelter and Water, Sanitation and Hygiene (WASH) structures in many sites due to strong winds and rains. The IOM Displacement Tracking Matrix (DTM) multisector assessment, conducted with INGD following Tropical Cyclone Eloise, showed that Sofala province - in particular the districts of Buzi, Dondo, Nhamatanda and Chibabava - were most affected while Caia, also in Sofala province reported some damages in four of the resettlement sites assessed in the district. The Province of Manica, more specifically Sussudenga district, reported severe damages after the tropical cyclone, as well as the southern part of Zambezia Province. In total, the living conditions of 45% of the families living in resettlement sites were affected, as 8,755 shelters/houses were completely or partially destroyed due to the rain and strong winds. Many of these families, whose shelters are particularly exposed and vulnerable to damages as a result of environmental factors, had begun the (re-)strengthening of their shelters, which had been impacted by the wind and rains brought upon by the Tropical Storm Chalane, three weeks earlier. With the rainy season battling and more storms predicted, urgent attention is required to respond to the most critical needs. With limited resources available in country to respond at scale, the situation is dire.

The majority of internally displaced persons (IDPs) having sought refuge in the temporary accommodation centres activated after Chalane and Eloise, are women and children. Over half of the population has been displaced from Buzi district — an area often affected by floods and disasters, leading to chronic displacement and where the search for durable solutions remain a challenge and shelters is an overwhelming need. In the accommodation centres and displacement locations, the lack of food, shelter and access to WASH facilities, paired with the high level of congestion, renders conditions extremely difficult for those who have been hit by the passage of Eloise cyclone. (DTM_MSLA_in_accommodation_centers). With COVID-19 ramping up Mozambique, IOM and partners are working together with the government to find sustainable, principled and adapted responses to seek solution-orientated approaches to the situation.

FOR MORE INFORMATION:  IOM Chalane Flash Appeal; (12 Jan 2021); 2021 IOM Mozambique Global Crisis Response Plan IOM DTM MSLA Round #19 (5 Feb 2021); IOM DTM Accommodation Centres Site Profiles (5 Feb 2021) Intention Survey Accommodation Centres Beira (9 Feb 2021) Mozambique (iom.int) ; Mozambique | Displacement (iom.int)

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IOM leads the CCCM Cluster in Mozambique, providing coordination and technical guidance to partners for operational planning and supporting INGD in conducting rapid assessments. IOM is also supporting the Shelter Cluster, as co-lead with the International Federation of Red Cross and Red Crescent Societies (IFRC) and is promoting and advocating for sustainable solutions to address the extensive challenges faced by displaced populations and host communities in Mozambique.

Out of the total number of people affected, by 1 February, 34,271 displaced people were initially hosted in 36 temporary accommodation centres due to the conditions in their areas of origin, after both Chalane and Eloise storms. Conditions in accommodation centres showed congestion, as well as a lack of COVID-19 preventive measures. To ensure decongestion on sites and support safe, dignified return, the planning for the gradual deactivation of accommodation centers, paired with simultaneous technical assessments of return and relocation areas and in new sites identified for resettlement have started, with Beira city targeted as a first step. Through support from the CCCM Cluster and the local Humanitarian Country Team (HCT), in coordination with all Clusters, inter-agency efforts are made to support the government in principled returns and definition of solution-orientated options for affected populations, supported with intentions surveys, with the objective to inform the process. Further to the immediate humanitarian response required, critical considerations to ensure sustainable approaches are:

- **Resilience approach**: building on lessons learned from Idai Cyclone
- **Durable solutions**: phased, gradual and principled approaches to displacement management to include mid to long-term planning in the different options identified.
- **Disaster risk management**: preparedness and investments in anticipatory actions toward the management early on of disaster-risk induced displacement are critical to continue ensuring solutions orientated approached take place early on.

While all efforts are made to identify solutions, protection concerns are important on the ground. A rapid assessment conducted by IOM’s Protection/ Mental Health and Psychosocial Support (MHPSS) team carried out with the district Services for Health, Women and Social Action (SDSMAS) of Buzi, Dondo, Nhambatanda and Sussudenga Districts, found that over 2,300 already vulnerable households already recently hit by tropical storm Chalane were heavily affected by Eloise. Those vulnerable families, such as female and child headed households, elderly and chronically ill living alone or caring for minors, are now living in partially or totally destroyed shelters. In particular, almost half (1,073) of the affected vulnerable households are headed by women. The second most affected group are elderly living alone or caring for minors. This situation exposes families to considerable protection risks in terms of physical safety and security, child protection, among others.

Furthermore, assessments show that the health sector in the affected areas is overstretched. A lack of outreach capacities for primary health care services, equipment and medical supplies make adequate response and systematic referrals challenging. Of the resettlement sites assessed, 25 sites do not have access to a health services. Six health centres near sites were also damaged in Buzi, Chibabava, Dondo and Nhambatanda. The situation shows a clear gap in terms of availability of services, both in areas affected by the storms as well as in areas of returns and in temporary accommodation centres, where malaria and acute watery diarrhea (AWD) is being reported. There is an increased level of vulnerability amongst chronically ill patients due to loss of medication and/or personal documents due to loss of their housing and shelter.
IOM has been able to immediately respond through the following activities:

Camp Coordination / Camp Management (CCCM): Preparedness measures ahead of the passage of cyclone Eloise, including sensitization and mitigation works in priority locations. Coordination support to ensure information sharing on needs, gaps and support a return, resettlement and local integration for those displaced. This included leading inter-agency/inter-cluster intention surveys in accommodation sites to inform the planning, the mapping of solutions-oriented options and technical support to the Government of Mozambique. IOM has also been supporting the Government in the registration of displaced populations in accommodation centers in Beira, facilitated operational meetings, continued the deployment of CCCM mobile teams in priority sites as well as initiated the site planning and demarcation process for newly identified resettlement sites and/or site extensions.

Protection/Mental Health and Psychosocial Support (MHPSS): Continuous MHPSS support and mobile protection teams in 26 sites to support vulnerable populations, awareness, ensure protection monitoring in accommodation centers and protection by presence.

KEY PRIORITIES, GAPS AND NEEDS

Shelter/Non Food Items (NFI) assistance: Emergency and resilient shelter assistance paired with Non-Food Items - in both return areas, existing resettlement sites and newly established sites, paired with WASH measures. Interventions in resettlement sites aim to also support the construction of community safe spaces in case of a new emergency, given the vulnerabilities to natural hazards and frequency of storms. Prepositioning of Shelter/NFI items in vulnerable areas at high risk to ensure a rapid response in case of a new emergency.

Camp coordination/camp management: The construction of drainage in eight newly identified resettlement sites as well as site planning and development measures, including care and maintenance on site. IOM aims to support the rehabilitation of basic infrastructures in affected resettlement sites, and strengthening of the drainage systems, the decommissioning of 31 accommodation centers and ensure continuous CCCM site management and coordination services, including enhanced information sharing and communication with affected populations through robust site management support. CCCM actions should be paired with community-based disaster risk reduction measures to mitigate the risk of disaster induced displacement.

Displacement Tracking and Multi-sector Needs assessments in affected areas, displacement locations, return and resettlement locations as well as disaster risk mapping for continuous preparedness to multi-layered hazards in central Mozambique.

Protection and MHPSS: In support to district social services for protection and referrals, the deployment of integrated community-based protection and MHPSS teams for outreach, awareness, sensitization, enhanced referral and protection assistance. Due to the destruction of protection spaces, the rehabilitation and construction of safe spaces will be required. Access to focused and referral to specialized services is also a critical priority.

Health support: To ensure access to primary health care service through mobile teams, support local health authorities, strengthen health education and community-based surveillance for disease prevention and identification and return to treatment for affected populations.

IOM Capacity in Mozambique

The International Organization for Migration (IOM) has been operating in Mozambique since 1994 and has a well established structure and footprint through the country. The mission has over 400 staff and associated workforce operating from the main office in Maputo and two sub-offices in Beira and Pemba and three field offices in Mamba, Ibo and Nampula. In total, 89 staff are based in Beira sub-office with another 62 associated workforce to support and implement operations in Manica, Sofala, Zambézia and Tete provinces.

Since 2019, IOM’s operations in Mozambique have rapidly scaled up to respond to the acute humanitarian needs of populations affected by cyclones Idai and Kenneth, the insecurity in Cabo Delgado Province and the 2020 COVID-19 preparedness and response. IOM supported over 800,000 people since 2019 through humanitarian assistance.

Following Cyclone Idai, IOM set-up a robust multi-sectoral approach in central Mozambique complemented by the delivery of shelter and housing support, livelihood, mental health and psychosocial interventions, CCCM and protection. To respond to the needs following tropical cyclone Eloise, IOM is leveraging its existing presence on the ground. As a key partner of the HCT and interagency forums and the CCCM Cluster leads, IOM is committed to continue supporting the government of Mozambique and partners in ensuring principled response along the crisis response and recovery spectrum.