SITUATION OVERVIEW

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. Over 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 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, with over 8,755 shelters severely damaged and destroyed in 64 resettlement sites.

By 1 February, 34,271 displaced people remained hosted in 36 temporary accommodation centers due to the conditions in their areas of origin, after both Chalane and Eloise storms. Conditions in accommodation centers showed congestion, unsafe sanitary conditions 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. Albeit damages to housing, a large portion of the population returned and an initial eight new resettlement locations were identified for those whose return conditions are not suitable and who are living without shelters. In some of the remaining accommodation centers, such as in Buzi, close to 10 people share the same shelter, heightening protection concerns. In the new settlement identified, substantial work will be required to ensure adequate settlement of displaced populations, the establishment of sound CCCM structures and systems on the ground to re-establish vibrant communities. As of now, the absence of basic infrastructure on site represents an important concern and barrier to durable solutions. With the rainy season in full force and more storms predicted, urgent attention is required to ensure the provision of climate resilient shelters and the establishment of safe, durable and adapted settlements.

IOM APPEAL (USD)

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Camp Coordination and Camp Management (CCCM)</td>
<td>2.3 M</td>
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<tr>
<td>Shelter and Non-Food Items</td>
<td>5.9 M</td>
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<tr>
<td>Health</td>
<td>500 K</td>
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<tr>
<td>Protection</td>
<td>373 k</td>
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<tr>
<td>DTM Displacement Tracking</td>
<td>330 k</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>9.4 M</strong></td>
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Protection concerns in affected existing resettlement sites established in 2019, return areas and new relocation identified are significant, with the majority of the population being women and children and at heightened risk for protection violations. In resettlement sites established in 2019, over 2,000 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. Almost half (1,073) of the affected vulnerable households are headed by women. Many have lost their personal documentations. This situation exposes families and individuals to considerable protection risks in terms of physical safety and security, child protection, among others. For newly displaced populations resettling to new locations, the lack of protection services on the ground requires an expansion of protection services to mitigate protection risks and provide assistance on the ground. IOM’s community-based integrated Protection/MHPSS teams deliver and promote access to protection services through identification and referral of vulnerable cases, in close coordination with other protection actors and the government.

Furthermore, 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. 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 centers, where malaria and acute watery diarrhoea (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.

With less than two years since the passage of Cyclone Idai, Eloise Cyclone generated a large stressor for already vulnerable populations and substantial damage. While solutions-orientated approaches are being sought, humanitarian needs remain unaddressed with limited resources are limited on the ground. IOM is scaling up its operations in Central Mozambique to provide immediate humanitarian and protection assistance to affected populations and host communities.

IOM’s planned interventions to respond to the impact of Cyclone Eloise are included in the Mozambique, Crisis Response Plan 2021. The proposed plan aims to provide an immediate humanitarian response paving the way towards recovery and more durable solutions in central Mozambique, including increased action towards preparedness in view of continuous vulnerabilities to natural hazards.

IOM Capacities to respond

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 416 staff and associated workforce operating from the main office in Maputo and two sub-offices in Beira and Pemba and three field offices in Membba, Ibo and Nampula. In total, 89 staff are based in Beira sub-office with another 62 associated workforces to support and implement operations in Manica, Sofala, Zambezia 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 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, livelihoods, 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.
To respond to the needs of displaced populations, both in existing resettlement sites affected by Eloise and newly established sites, CCCM activities will focus on ensuring a robust response aiming to address humanitarian needs while building the way toward more durable solutions and ensuring preparedness measures are in place to mitigate new risks of displacements. In doing so, IOM will ensure a safe environment and information sharing with affected communities through supporting the government’s humanitarian response in sites and providing site care and maintenance, including site development and planning work. Meaningful participation of women and persons with disabilities in governance structures will be key to ensure that the CCCM interventions are appropriate and effective. Main activities include:

- **Site development**: Rehabilitate drainage and terrain elevation in 20 affected resettlement sites and eight newly established sites, informed by site planning work.
- **Care and maintenance**: Rehabilitate/establish basic infrastructure and community spaces in affected sites and newly established sites, demarcation and site preparation work.
- **Decommission** temporary accommodation centers - 31 centers targeted
- **Site management** through CCCM mobile teams and coordination support: Continuous monitoring of the situation in sites and areas of displacement, supporting site monitoring and providing logistical support. This includes the setting-up of information desks, awareness raising and extension of CCCM networks to newly established sites and work to ensure field coordination (Dombe; Sofala (Beira, Buzi, Dondo) as well as registration of populations.
- **Coordination**: Facilitate CCCM operational planning and solution mapping
- **Capacity-building** of Government officials and partners for improved CCCM measures, including preparedness to disaster induced displacement and rapid response, as well as displacement management planning in case of disaster, using an adapted CCCM capacity-building strategy.
- **Preparedness**: Ensure robust preparedness measures through mitigation work in sites, community-based disaster risk-reduction and sensitization, including contingency planning and simulation exercises.

In a second phase of the response IOM will extend its programming to livelihood approaches to restart vibrant communities in resettlement locations and work toward more durable solutions.

### SHELTER AND NON-FOOD ITEMS

Over 56,000 houses were severely damaged or destroyed due to the passage of Cyclone Eloise. Furthermore, over 8,700 shelters in post Idai resettlement sites were damaged. While the provision of emergency shelters has begun, resources are extremely limited in country and stocks are depleted. IOM aims to respond to the needs of the most vulnerable households affected in existing sites, areas of return and new locations established, through the following activities:

- **Non-Food Items (NFI)**: Assess immediate NFI needs and provide NFI assistance, including core relief packages to the most affected, including clothing items.
- **Shelter**: Distribute essential shelters, repair and construct climate-resilient shelters, in line with Shelter cluster standards and using Build-Back Better approaches. Target 9,000 households, including 1,000 households in return areas with home repair kits. Activities in resettlement sites are coupled with water, sanitation and hygiene (WASH) measures on site (i.e. water collection units). Preposition emergency shelter and NFI kits in key priority locations for rapid response during the remainder of the season, for a total of 3,000 households kits.
- **Community Safe space**: Construct community safe spaces in the newly established resettlement sites and the most at-risk locations. Given the peak of the season and upcoming rains, the immediate construction of safe spaces is required in areas at risk to ensure affected populations do not suffer from congestion and lack of safe haven in case of a new emergency.

The IOM shelter response is informed by shelter assessments and followed by post-distribution monitoring assessments and integrated build-back better approaches. As the national Shelter-Cluster co-lead with the International Federation of the Red Cross (IFRC), IOM interventions are coordinated and aligned with existing coordination structures. Considering that stocks are depleted from the response to both tropical Storm Chalane and Cyclone Eloise, IOM also aims to ensure the replenishment of emergency shelter/NFI relief items in key priority locations, as a preparedness measure. In a second phase of the response, IOM will move toward the construction of fully fledged resilient housing to support affected populations to support durable solutions.
MENTAL HEALTH AND PSYCHOLOGICAL SUPPORT (MHPSS)

The impact of cyclone Eloise and subsequent displacement of populations have in many ways disrupted already stretched referral mechanisms for protection and MHPSS services on the ground. The majority of those affected, in particular in existing resettlement sites and temporary displacement locations, are women and children, many of whom have already been affected by previous disasters. Wide-spread protection risks among the different groups require specific and sustained attention in particular in hard to reach areas. IOM will expand its current programming through the following critical components:

- **Protection monitoring and referrals:** Ensure that standards are met and vulnerable groups, such as women with children, elderly and persons with disabilities have equal and barrier-free access to all humanitarian assistance and services, including on the reinstatement of documentation, and that people in need of specialized assistance are identified and referred, including victims of GBV and TP.
- **Protection space:** Reconstruct/repair destroyed and damaged safe Protection desks.
- **Capacity strengthening:** Deploy emergency protection teams and provide support to community based protection structures, including protection focal points on sites, for information sharing in an accessible age and gender sensitive way and systematic strengthening of referral pathways.
- **Awareness and sensitization:** Disseminate Gender Based Violence (GBV) Prevention of Sexual Exploitation and Abuse (PSEA) and Linha Verde messaging and information on accessing safe and confidential referral pathways.
- **Protection assistance:** Provide individual protection assistance and referral to specialized services provided by the government and humanitarian partners for the most vulnerable cases.
- **Mental Health and Psychosocial services:** Provide psychological First Aid, focused community-based MHPSS and psychosocial mobile teams to ensure access to focused psychosocial support and referral to specialized support.

Access to health services is a large concern in Mozambique considering the impact of the storm and the rapid spread of COVID-19 in the country. Resources are required to bolster health capacities and provide support to the government, in particular in rural areas where primary health care services were highly affected by the cyclone. Priority response activities include:

- **Access to primary health care services and mobile outreach:** Support the local health authorities to monitor the situation in sites, deliver medical supplies and operate mobile outreach teams (mobile brigades) to ensure access to primary health care services in underserved resettlement sites, displacement locations and affected communities.
- **Identify and ensure continuation of treatment of patients with chronic conditions** (HIV/TB, non-communicable diseases), pregnant and lactating women and young children.
- **Rehabilitate and install temporary health posts,** including safe space for women and girls
- **Health education and community-based surveillance** for disease’s prevention, paired with distribution of essential COVID-19 prevention supplies (facemasks, handwashing stations, soap, etc.) and sensitization in crowded locations and health point scarse.

**DTM DISPLACEMENT TRACKING AND NEED ASSESSMENTS FOR INFORMED RESPONSE**

In Mozambique, the IOM Displacement Tracking Matrix (DTM) is a service providing timely and evidence-based information on needs of affected populations, through the completion of multi sector needs assessments in displacement sites, household level surveys, flow monitoring and thematic surveys. In coordination with relevant clusters and together with the INGO, DTM aims to ensure continuous monitoring and analysis of the situation and provide a framework to paving the way toward recovery and systematic preparedness to new disasters, by:

- **Ensuring the completion of in-depth multisector assessment** and monitoring of gaps in all newly activated sites in coordination with INGD to ensure an informed response.
- **Conducting thematic surveys and household level assessments** to ensure informed response planning and bridge the gap toward recovery, such as: Shelter/Housing recovery assessment (example); Durable Solutions (example) and Disaster Risk Management (example).
- **Ensuring multi-hazard mapping of risks** and evacuation roads, centers and capacities as a disaster-preparedness measures.
- **Ensuring rapid response capacities** in case of new emergencies to facilitate timely information sharing on needs and gaps.