

Information bulletin no. 2 Mozambique/Buzi: Floods

Date of disaster: 11 February 2020	Timeframe covered by this report: 11- 29 February 2020
Number of people affected: approx.34,500 (approx. 6,899HH)	Number of people assisted: Approx. 8,000
Host National Society: Mozambique Red Cross Society (Cruz Vermelha de Mozambique, CVM) was established in 1981, and officially recognised by the Government of Mozambique (GoM) in 1988. Recognised by the International Committee of the Red Cross (ICRC) in the same year, it became a member of the IFRC almost one year later, in October 1989. Its actions are fully implemented by approximately 169 staff, 7,161 volunteers and 70,000 members.	
Red Cross and Red Crescent Movement partners actively involved in the operation: IFRC	
Other partner organizations involved in the operation: Emergency Operational Commission (COE), Civil Protection Unit (UNAPROC), National Institute for Disaster Management (INGC), thematic government secretariats, Care, IOM, OXFAM, Plan International and World Vision.	
Photos are available here Videos are available here	

*This bulletin is being issued for information only and reflects the current situation and details available at this time. The purpose of this document is to summarize activities carried out between 11-29 February 2020 in response of severe flooding that has affected Buzi district.. The **Mozambique Red Cross Society (CVM)**, with the support of the **International Federation of Red Cross and Red Crescent Societies (IFRC)**, has determined that external assistance was not required, and was therefore not seeking funding or other assistance from donors for these specific activities. Officially, the CVM and the IFRC concluded their operational activities concerning this emergency phase on 29 February. This information bulletin will be the last one issued. The actions implemented in the reporting period have been incorporated into actions carried out in the wake of the ongoing Emergency Appeal Mozambique: Cyclone Idai and Kenneth (MDRMZ014).*

Description of the disaster

From 11 to 15 February 2020, Grudja, Estaquinha, Bandua, Guara-Guara, Vila de Buzi, Munimucua and other areas in the district of Buzi, Sofala province - Mozambique were severely affected by the rising level of the water basin, which led to floods. These floods in the region caused the isolation of communities in floodplains; community members took refuge in treetops, houses and ravines waiting for rescue. In the village of Buzi, between the night of the 14 and the morning of the 15 February, the water level rose **forcing the displacement of more than 7,400 people from Buzi alone**¹.



Image 1 - Aerial photo demonstrating the level of flooding in Buzi district, Sofala province. *Source: IFRC.*

¹ Based on Mozambique National Disaster Management Institute (INGC) data from 21 February 2020.

A total of 30 accommodation centres (schools, churches and other buildings) have been set up to support those displaced.

Needs analysis

The priority needs in the 12 existing temporary transitory accommodation centres in Buzi that have been assessed were: shelter protection structures for families exposed to sun and rain in open areas, supply of drinking water and basic sanitation, construction of sufficient latrines for the number of people in the camps, food and kitchen/shelter kits for families, and mosquito nets for malaria prevention due to the increased number of mosquitoes after the floods.

In Buzi village there were many locations with stagnant and polluted water. These factors lead to an increased risk of acute watery diarrhoea and the risk of cholera. The affected population is not sleeping in mosquito nets or is sleeping under damaged ones since many lost their nets during the flood or were not able to take them along during the evacuations. There is an increased risk of malaria. There was a need for special attention to psychosocial issues was noted for the population that suffered from the trauma of the disaster. Attention was also drawn to the high number of children present in transit camps, many of them of school age who are momentarily unable to maintain their study routines. There was also a need to provide support for children under five who are vulnerable to diseases. Finally, the prevalence of disabled people, elderly people and pregnant and/or breastfeeding women who require special attention have been observed in transitory accommodation centres. There was a need to include protective measures in all activities, as Mozambique is a country with significant rates of sexual violence and child abuse.

Regarding the needs for shelter, the main priority where the 'Ring' accommodation centres which have no physical structures to accommodate people. Until 21 February, the only access to Buzi village was through the Buzi river. While access is improving, it remains complicated and many communities can be reached only by boat. By the end of the period of time covered by this Information Bulletin, the Government decided to close down the different accommodation centres gradually.

Please refer to [Information Bulletin no.1](#) for a more detailed needs analysis.



Image 2 – Transportation of relief items by boat. *Source: IFRC.*

Red Cross and Red Crescent action

Mozambique Red Cross (CVM) took a leading role in the response helping communities since the onset of the floods. The CVM had been conducting search and rescue efforts alongside local authorities, providing emergency first aid and referrals, giving emergency relief to families, as well as sharing critical disease prevention messages and psychosocial support in accommodation centres.

CVM has approximately 220 Red Cross volunteers spread throughout the district of Buzi. In the village of Buzi specifically, there were 57 volunteers of whom 20 were previously trained in community-based health and first aid (CBHFA) that have promoted disease prevention campaigns in temporary transit centres as well as 60 volunteers who have been trained since the



Image 3 – Community session. Source: IFRC

first months after IDAI in Psychosocial and Protection to integrate teams to respond in emergencies and during normal activities with population. In addition, the CVM Buzi district branch has a remarkable synergy of cooperation with the local government being traditionally recognised as a leading partner in responding to emergencies in the region. The IFRC has a strong presence in the province since the Idai Cyclone affected the country in March 2019.

Following an inclusive and community engagement and accountability (CEA) approach, the National Society, with the support of the IFRC, has implemented the following activities until 29 February, when the operation was officially closed.



Shelter

People reached: Approx. 2,000 people (500 households)

Assessment

Assessment of damaged homes in the Buzi village. **132 houses have been assessed** in the Macurungo neighbourhood that will need repair.

Distributed items

- **Distribution of shelter and NFIs for 227 households** in Muchanessa and Guara-Guara including: 2 tarpaulins, 1 shelter tools kits, 1 kitchen set, 2 mosquito nets, 1 chlorine, 1 bucket, and 2 sleeping mats.
- **In coordination with the IOM, provision of large tarpaulins in accommodation centres Ring I and Ring II to protect approximately 700 people** from the weather.
- Additional distribution of **mosquito nets for 116 households** in the community of Munamicua.

Community engagement

- **Working groups with local authorities** and partners were established and functional with the participation of CVM to perform a mapping and technical analysis of shelter damage.



Livelihoods and basic needs

People reached: **217 HHs (approximately 1,400 people)**

Male head of household: 129; Female head of household: 88

Distributed food items

Food has been distributed to 217 families (approximately 1,400 people) in Muchenessa, with each household receiving 25 kilos of rice, 3 kilos of beans and 1.5 litres of cooking oil per family as part of the response. These food parcels were enough to for a family of 5 for 15 days. These families were identified and selected through household registration exercise by the CVM volunteers, using a pre-established criteria.



Health and PSS

People reached: **Approx. 8,000**

Search and rescue

Over **185 people were rescued** by the Red Cross volunteer teams, in close partnership with public authorities. Some of those rescued had spent more than 48 hours clinging on trees in heavily flooded areas.

Community health mobilization

Over 8,000 people reached with community health mobilization activities by 20 CVM volunteers trained in community-based health and first aid (CBHFA), which started in the first day following the floods. Such activities included:

- **2,456 households, (7,375) people, have been reached through household (HH) visits on prevention**, symptoms and treatment of malaria and acute watery diarrhoeaea (AWD). HH visits took place in the following accomodation centers: EPC 25 de Setembro, Tribuna, Igreja Católica, Muchenessa, EP2 do Buzi, EPC 3 de Fevereiro, Mesquita, Obra do INSS, Ring I, Ring II, Companhia do Buzi and Guarra Guarra. HH visits took place in the neighborhoods of Macurungo, Bairro 2000, Chequezana and Massane.
- **Community presentations and discussions** were held on prevention of malaria and AWD and in total, **2,172 people** participated, the majority was reached as well through HH visits.

Psychosocial Support

Since IDAI the PSS/PGI team has been working with volunteers in Buzi building capacity to respond in emergencies providing Psychological first aid to affected population as well as identifying protection issues. The teams are mixed and include both PSS and PGI capacities, and activities are implemented including these two components given that the risks related to protection in Mozambique.



Image 4 – Demonstration of mosquito net use. *Source: IFRC*

- A group of **20 volunteers worked providing psychosocial support** to the population evacuated to 4 accommodation centres: Ring 1, Muchanessa, Companhia de Buzi e centro transitorio 3 Fevereiro with Psychological first aid, awareness sessions about Child Protection as well as PSS to volunteers.
- **264 people reached with information about stress management, positive actions to cope with stress** and understand signs of stress in children and how to help to cope with it to them.
- **1,282 children reached with recreational activities** with the aim of identifying protection issues and to reduce the stress suffered after the crisis.
- **PFA (Psychological first aid) has been provided** by the CVM volunteers trained to the population affected although the numbers of attended people has not been reported by CVM.



Water, sanitation and hygiene

People reached: **1,182 HHs (approximately 5,910 people)**

Water treatment

In collaboration with CVM and community volunteers: **7,275 bottles of chorine distributed and 28,340 liters of water treated.**

Sanitation

The sanitation interventions were implemented in different localities, realizing latrines (including handwashing facilities with soap) and showers construction, providing technical assistance/coordination, material (wood and tarpaulin) and tools. In total, **25 CVM volunteers were involved in sanitation activities.**

Temporary accommodation centers	Families supported	Latrines created	Showers built
Buzi vila (Secretaria Distrital)	38	4	-
Muchenessa	217	9	6
Mandir 1-2	200	4	2
Companhia de Buzi	268	4	2
Munamicua	459	4	2
Total	1182	25	12

Red Cross has also provided support to the government in logistics and materials (with squatting plats and cutting sticks).

Hygiene promotion/ community engagement

14 clean-up campaigns were conducted by CVM volunteers in accommodation centers and neighbourhoods on a daily basis and in total **2,400 community members took part.**



Protection Gender and Inclusion

People reached: 717

A team of two PGI staff was deployed the first days of the emergency to assess the situation in terms of protection.

Training

Refresher training has been provided to 20 CVM volunteers related to child protection (in emergencies or/and the aftermath), SGBV and Prevention on Sexual Exploitation and Abuse and to guide the CVM volunteers in the response.

Activities:

- **264 people were reached with awareness sessions** with information about Child protection (and Child marriages), SGBV, and PSEA.
- **Protection focal points were established in the accommodation centers** to be in charge of referring cases and preventing SGBV and identifying vulnerable people or people at risk.
- **School materials were distributed to 387 children** in 3 centers providing them with materials to return to the school.
- **Identified and referred to specialized services 37 people** in transitional centers. 9 people with disabilities participated in awareness sessions.

External coordination:

Coordination and engagement took place with the Psychologists in the Hospital and Social Action in the identification and referrals by the CVM volunteers. Coordination and cooperation included all protection actors in the affected area, one of the results was a comprehensive poster with the referral pathway for SGBV cases with contacts for Hospitals, Social Action, Women center for GVB cases and the Police.



Logistics

Access by road to Buzi district was not possible almost for two weeks. Therefore, all supply chain and team movements had to be organized by boat from Beira to Buzi. Depending on the tide and currents, trips between Beira and Buzi could last 3h to 6h. A passenger boat and three cargo boats were operational. **Two boats** were also made available to perform rescue and relief activities. IFRC vehicles were on site in Buzi available to facilitate necessary transportation for the different humanitarian actors in Buzi village.

Contact information

For further information specifically related to this operation, please contact:

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How we work

All IFRC assistance seeks to adhere to the [Code of Conduct](#) for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the [Humanitarian Charter and Minimum Standards in Humanitarian Response \(Sphere\)](#) in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives.
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and **peace**.
