

# EMERGENCY APPEAL



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## TANZANIA: FLOODS

Emergency Appeal no. MDRTZ005

GLIDE no. FL-2006-000164-TZA5

01 May 2007

*The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.*

### In Brief

**THIS EMERGENCY APPEAL SEEKS CHF 969,519 (USD 797,302 OR EUR 598,469) IN CASH, KIND, OR SERVICES TO ASSIST 53,000 PEOPLE FOR 12 MONTHS.**

**The appeal is being launched based on findings of a Red Cross assessment that was conducted in four regions of Tanzania in March 2007.**

**A total of CHF 93,000 was allocated from the Federation's Disaster Relief Emergency Fund (DREF) for the recovery assessment and immediate response.**

**[Click here to link directly to the attached appeal budget](#) and [here to link to the attached map](#)**

This operation is aligned with the International Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

#### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

### The situation

Since October 2006, Tanzania has been impacted by extreme climatic conditions, similar to El Niño, with unusual floods that have caused population displacements and, recently, Rift Valley Fever (RVF)<sup>1</sup>. Rains started in October 2006, which spread across the country with a growing intensity. Several lakes and rivers over-spilled, inundating large territories in the south, north, central, western and eastern regions of Tanzania. Some areas were affected by floods more than once over four months and communities were displaced several times.

<sup>1</sup> Rift Valley Fever is a zoonosis (a disease which primarily affects animals, but occasionally causes disease in humans). The RVF virus is primarily spread amongst animals by the bite of infected mosquitoes; the mosquito may lay eggs around river banks and the eggs may survive for periods of up to several years in dry conditions. During periods of inundation of larval habitats by rainfall, the eggs will hatch, and the mosquito population will increase and spread the virus to the animals on which they feed. During epizootics, people may become infected with RVF either by being bitten by infected mosquitoes, or through contact with the blood, other body fluids or organs of infected animals. Such contact may occur during the care or slaughtering of infected animals, or possibly from the ingestion of raw milk (WHO: <http://www.who.int/mediacentre/factsheets/fs207/en/>)

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Heavy rains caused flooding across Tanzania, forcing thousands of people to abandon their homes in search of safer grounds.

Floods are not uncommon in Tanzania; a striking feature of this year's disaster was its intensity, duration and scale. Many sources claim that its magnitude was unprecedented and the effects are the worst in many years. A recent Red Cross assessment conducted in the four regions of Tanzania found 14,000 people in dire need of humanitarian assistance.

The persistent heavy rains that battered the country for months triggered devastating floods across large areas, drove many people out of their homes, destroyed their livelihoods and left many without any means to recover from the effects of the disaster.

The affected populations now live in appalling sanitary conditions, lack access to safe water and suffer from an intolerably hot climate that encourages the spread of communicable diseases. It is a 'silent disaster' and urgent action is required to help those struggling for survival to return to normal lives. They are the most vulnerable segments of the population whose conditions have been dismal over an extended period and have been aggravated by recent rains that continued unabated until the end of February 2007. These unusual

rains brought with them new problems, such as the Rift Valley Fever (RVF).

### Impact of the floods

While death rates have fortunately been minimal, the fast flowing waters destroyed people's homes, washed away their belongings, wrecked havoc on livelihoods, ruined crop fields, damaged roads and bridges and forced thousands to abandon their towns and villages in search of safer grounds. Some 5,000 households had their homes partially or wholly destroyed. Crude estimates show that the number of affected people has increased to over 30,000 and it is feared that many more will become vulnerable to the approaching long rainy season, which usually starts in March and continues to the end of May. Local meteorologists have warned that rainfall will be above normal.

**Table 1: Number of flood-affected people in the areas assessed by the Red Cross, and households assisted**

Region	Affected areas assessed by the Red Cross	Population affected by floods		Displaced population		No. of households assisted to date
		No. of people affected	No. of households affected	No. of households in camps	No. of households sheltered by relatives	
Dodoma (urban and rural)	<ul style="list-style-type: none"> <li>• Bahi</li> <li>• Chalinze</li> <li>• Mahomanyika</li> </ul>	3,904	800	34	209	250
Tabora - Igunga	<ul style="list-style-type: none"> <li>• Ganyawa</li> </ul>	5,798	1,200			350
Shinyanga (rural & Kishapu)	<ul style="list-style-type: none"> <li>• Ikonda</li> <li>• Mwamala,</li> </ul>	2,574	600	48	573	400
Mwanza - Magu	<ul style="list-style-type: none"> <li>• Nyakaboja</li> <li>• Kabita</li> <li>• Lugeye</li> </ul>	1,246	300	21	218	201
<b>Total</b>		<b>13,522</b>	<b>2,900</b>	<b>103</b>	<b>1,000</b>	<b>1,201</b>

### Rift Valley Fever (RVF)

RVF first occurred in Tanzania in 1977 and then in 1998. Since the first two confirmed human deaths due to the disease were reported in Arusha this year (on 31 January 2007), RVF has affected 90 villages from eight regions around the country. The affected regions are Tanga, Kilimanjaro, Morogoro, Arusha, Manyara, Iringa, Singida and Dodoma.

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According to the Ministry of Livestock Development and various media sources, 200,441 heads of cattle, 81,945 goats and 37,773 sheep have RVF symptoms. About 2,510 cows, 3,575 goats and 1,306 sheep have so far miscarried and 568 cows, 1,063 goats and 434 died from suspected RVF symptoms. In humans, up to 5 April 2007, 174 patients had been admitted with suspected RVF, 80 of these cases were confirmed to be RVF. To date, 49 people have succumbed to the disease, with 34 of the deaths occurring in Dodoma region.

### **Red Cross Red Crescent Action**

Volunteers from the Tanzania Red Cross Society (TRCS) have been working round the clock to alleviate suffering of their fellow citizens. They were part of the government-led search and rescue efforts. Emergency relief items such as blankets and water treatment chemicals from the National Society's contingency stocks have been distributed. The Red Cross has also started developing education materials and training of volunteers on Rift Valley Fever prevention. As the number of the affected people started to increase, it became apparent that local resources were not sufficient to respond to all needs. The TRCS's relief stocks were soon depleted and the National Society requested the Federation to facilitate international assistance.

### **Government and non-governmental organizations action**

Besides the Red Cross, few other government and non-governmental agencies have been engaged in response to the floods. The Tanzania Peoples Defence Force (TPDF) and Geological Survey of Tanzania contributed tents to provide emergency shelter for the displaced populations.

The government distributed food, bottled water and limited quantity of emergency relief items. Some of these were airlifted to reach communities that could not be accessed by road. Additional non-food items were provided by World Vision and Caritas. Local authorities distributed limited quantities of water treatment chemicals and have been assisting with disinfection of collapsed latrines. Farmers whose crops were destroyed by the floods were helped to replenish their seeds stocks by the government, Caritas and the African Inland Church (AIC). Funds have been released from the state's central budget to start rehabilitation of roads.



Tanzania Red Cross mobilized all its resources to assist those left with nothing.

Tree nursery development activities have been initiated by local agencies in parts of Dodoma to promote reforestation. The table below summarises the number of people assisted in four of the floods affected regions by the government, TRCS and other non-governmental organizations, whose actions have become known to the Red Cross.

To gauge the full impact of the floods and to identify remaining gaps in needs of the affected communities, a joint TRCS and the Federation team visited the four most affected regions. Their findings reveal that needs significantly outweigh current and planned responses of the government and the humanitarian community. Humanitarian action has kept the destitute alive, but it has not enabled them to recover their livelihoods. Providing people with adequate shelter, access to safe water and adequate sanitation remain top priorities.

In response to the Rift Valley Fever outbreak, the TRCS conducted an education campaign in Dodoma region by facilitating training of 74 volunteers from 56 villages. In turn, each volunteer was to reach 100 households with messages on RVF prevention. The volunteers were also to distribute 4,000 leaflets bearing RVF messages. Furthermore, the National Society supported admitted patients and their relatives with 200 insecticide-treated nets and 200 blankets.

The government has increased awareness campaigns, instituted restrictions of animal movement between and within regions, started vaccinations against Rift Valley Fever and improved provision of health care services to those infected. At least 1.6 million doses of anti-RVF vaccines have been given and so far 300,000 cattle and 200,000 goats and sheep have been vaccinated; the process is continuing in many areas. The government has requested the TRCS to scale up education campaigns within and outside the affected regions.

## **The needs**

The assessment conducted by the Red Cross Red Crescent highlighted gaps in the overall response in the four most affected regions visited by the Red Cross teams.

### **Shelter**

Many families, whose houses were destroyed or damaged by the floods, have returned to their villages and started rebuilding using materials that they managed to salvage or are tapping into whatever limited resources they have. They are the most vulnerable who lack the capacity to rebuild independently and have no other choice but to remain in camps or stay with their relatives whose already scarce resources have been stretched to the limit.

### **Rift Valley Fever**

The long rainy season has started, creating favorable conditions for the spread of mosquitoes (the vector of the RVF). There is an urgent need to step up surveillance to prevent the spread of RVF. The Rift Valley Fever outbreak has a tremendous effect on the livelihoods of the affected communities. The impact is heavier on pastoralist communities as they cannot drink milk or eat meat from their livestock and cannot sell them since movement of livestock has been banned.

Community education efforts must be intensified. TRCS will focus on information, education and communication (IEC) to prevent transmission of RVF from animals to human and to provide adequate information to people at risk on how to protect themselves and how to recognize symptoms for early referral to health centres. The community health education will cover other diseases too such as malaria.

## **Coordination**

The TRCS will take the lead in disaster response and coordination of the International Red Cross and Red Crescent Movement (Movement) intervention. The Federation's regional delegation in Nairobi will provide logistical and information technology (IT)/communications-related support. Regular consultations will be held with non-Movement partners to ensure a coordinated response. Close contact will also be maintained with the community and local government representatives, who will coordinate inter-agency response in their regions.

## **The proposed operation**

The proposed operation is based on the findings of the joint TRCS and Federation assessment team and addresses gaps identified in areas where capacities of the National Society permit. While the needs are great, the Red Cross has prioritized, for its action, the worst hit regions of Dodoma and Shinyanga.

**Goal: To improve the health and wellbeing of the most vulnerable people in Tanzania affected by a succession of devastating floods and health epidemics.**

### **Shelter**

TRCS is targeting the most vulnerable people (those who do not have the capacity to return to adequate shelter without external support). Drawing on experience from past operations, the Red Cross will support 600 households (3,000 persons) currently sheltered in camps or accommodated by their relatives, to rebuild their homes in safer areas within the vicinity of their native villages and close to their farmlands. Priority will be given to women-headed households and people with disabilities. The National Society will provide targeted households with iron sheet, nails and tools, and will support communities to produce bricks using local inputs (by making available manual block presses).

**Objective: To restore shelter conditions of 600 displaced households (3,000 persons) in Dodoma and Shinyanga regions.**

### **Activities:**

- Identify beneficiaries, giving priority to women-headed households and people with disabilities;
- Liaise with local authorities to provide technicians who will oversee the implementation of activities;
- Sensitize communities on the project objective and implementation methodology;
- In consultation with the local communities, promote minimum construction standards;
- Discuss with communities key principles and technically-important aspects of flood-resistant construction;
- Procure and distribute shelter kits;
- Provide on-site technical advice and supervision.

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### **Expected result:**

- 600 flood resistant houses are rebuilt by the community using methodology provided by the Tanzania Red Cross Society.

**Objective: To reduce vulnerability of 10,000 households (50,000 people) in Dodoma and Shinyanga to Rift Valley Fever and other epidemics.**

### **Activities:**

- Train 160 volunteers on community-based first aid (CBFA), and prevention/control of RVF, malaria and other diseases of epidemic potential;
- Conduct community health education using trained volunteers;
- Produce and distribute 10,000 information, education and communication (IEC) materials on RVF.
- Conduct community sensitization meetings on RVF and malaria prevention/control;
- Air radio messages and hold radio talk shows on prevalent health issues;
- Conduct orientation training for volunteers and communities on proper use of insecticide-treated mosquito nets, to control the spread of malaria and RVF;
- Procure and distribute 10,000 long lasting insecticide-treated nets (LLITNs) to 10,000 households in the affected areas;
- Procure two motorcycles to enable closer monitoring and supervision of the operation.

### **Expected results:**

- 10,000 IEC materials on RVF are developed and distributed to 10,000 targeted households;
- 10,000 mosquito nets are distributed to the 10,000 targeted households (one net per household);
- The targeted populations are aware of how to protect themselves from RVF and malaria;
- Outbreak of vector-borne diseases is contained.

### **Capacity of the national society**

The TRCS complements government efforts whenever major disaster occurs. It is represented in almost all regions and enjoys national recognition and respect. The National Society works in partnership with government and non-governmental organizations based in Tanzania, and proactively seeks to reach more vulnerable people with scaled-up programmes and better quality services. In December 2006, the TRCS convened a General Assembly and elected a new board. The new leadership is committed to implementing reforms to improve the way the Society is organized and works.

Through its country-wide network of branches, TRCS is implementing several programmes in various parts of the country: its volunteers work to improve access to health care, water and sanitation; the National Society supports peer education to reduce the vulnerability of youth to HIV and AIDS and provides home care to people living with HIV (PLWHIV). It also provides comprehensive health care services, including water and sanitation as well as distribution of food and non-food items to both Congolese and Burundian refugees in six camps in Kigoma region, western Tanzania. The TRCS also runs safe blood transfusion services in 12 regions, including Tabora, Shinyanga, Kigoma and Tanga. It was involved in a number of emergency operations in the past through which it gained significant disaster management experience. These included provision of water and shelter (supporting reconstruction of homes in Kigoma), health education and hygiene promotion to communities in the aftermath of several disasters in 2005 and 2006. For more details please refer to the [Tanzania country page](#) on the Federation's website.

Red Cross branches in the four targeted regions will lead the implementation of the proposed operation. A total 200 volunteers (50 from each region) will be mobilized to work with the targeted communities. A team of civil engineers and technicians will be also contracted to provide technical advice on site and quality control of shelter reconstruction.

While responding to emergency is the primary objective, given the exposure of the country to hazards, it is equally important to strengthen local preparedness to future potential emergencies. The Federation will support TRCS efforts to improve technical skills of its volunteers, strengthen warehouse and telecommunication capacity and to establish a stock of relief items close to potential disaster sites to ensure quick and effective responses.

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### Capacity of the Federation

The TRCS work will be supported by an experienced and committed team from the Federation's regional delegation in Nairobi. The delegation serves 14 countries in the region; Burundi, Comoros, Djibouti, Ethiopia, Eritrea, Kenya, Madagascar, Mauritius, Rwanda, Somalia, Sudan, Seychelles, Tanzania and Uganda. It coordinates and supports the collective efforts of its membership to better address humanitarian challenges in the region. Various technical departments of the delegation will provide monitoring support and advice to TRCS throughout the operation to ensure appropriate accountability, transparency and financial management.

### Monitoring and evaluation

TRCS has a well-established branch network throughout the country, including in the flood-affected areas. The branches will take lead in the implementation of the proposed operation. The responsibility for day-to-day monitoring will be with the National Society, primarily at branch level, but supervised closely by the national headquarters. The branches will prepare regular reports to analyse progress made, identify constraints and find appropriate solutions. Joint Federation and TRCS teams will visit the operation sites periodically to help identify and, where necessary, resolve any problems. The situation will be reported via operations updates that will be published on the Federation's web site. Midway through the operation, a review will be undertaken jointly by the Federation and the TRCS to reflect on achievements, needs and possible shifts in approach. At the end of the operation, a final evaluation will be conducted to ensure institutional learning.

### Budget summary

See annex below.

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All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation's website at <http://www.ifrc.org>

For longer-term programmes, please refer to the Federation's Annual Appeal for [East Africa sub-regional programmes](#).

<[Budget and map below; click here to return to the title page](#)>

## APPEAL BUDGET SUMMARY

TANZANIA FLOODS 2007

MDRTZ005

ORIGINAL

### RELIEF NEEDS

Shelter	480,000
Construction Materials	
Clothing & Textiles	57,000
Food	
Seeds & Plants	
Water & Sanitation	15,000
Medical & First Aid	
Teaching Materials	12,500
Utensils & Tools	
Other Supplies & Services	

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**Total Relief Needs 564,500**

### CAPITAL EQUIPMENT

Land & Buildings	
Vehicles Purchase	20,000
Computers & Telecom Equipment	
Office/Household Furniture & Equip.	
Medical Equipment	
Other Machinery & Equipment	

### TRANSPORT, STORAGE & VEHICLES

Storage - Warehouse	
Distribution & Monitoring	50,000
Transport & Vehicles Costs	

### PERSONNEL

International Staff	
Regionally Deployed Staff	5,000
National Staff	42,750
National Society Staff	15,000
Consultants	

### WORKSHOPS & TRAINING

Workshops & Training	95,500
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### GENERAL EXPENSES

Travel	
Information & Public Relations	48,750
Office running costs	
Communication Costs	20,000
Professional Fees	
Financial Charges	
Other General Expenses	45,000

### PROGRAMME SUPPORT

Programme Support - PSR	63,019
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**Total Operational Needs 405,019**

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**Total Appeal Budget (Cash & Kind) 969,519**

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**Available Ressources**

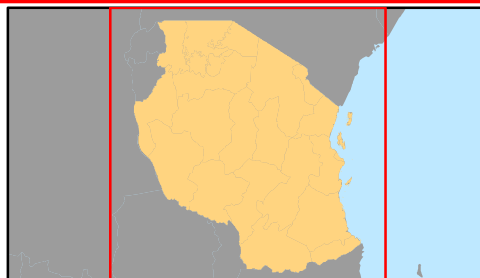
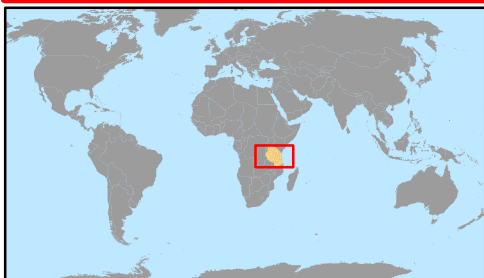
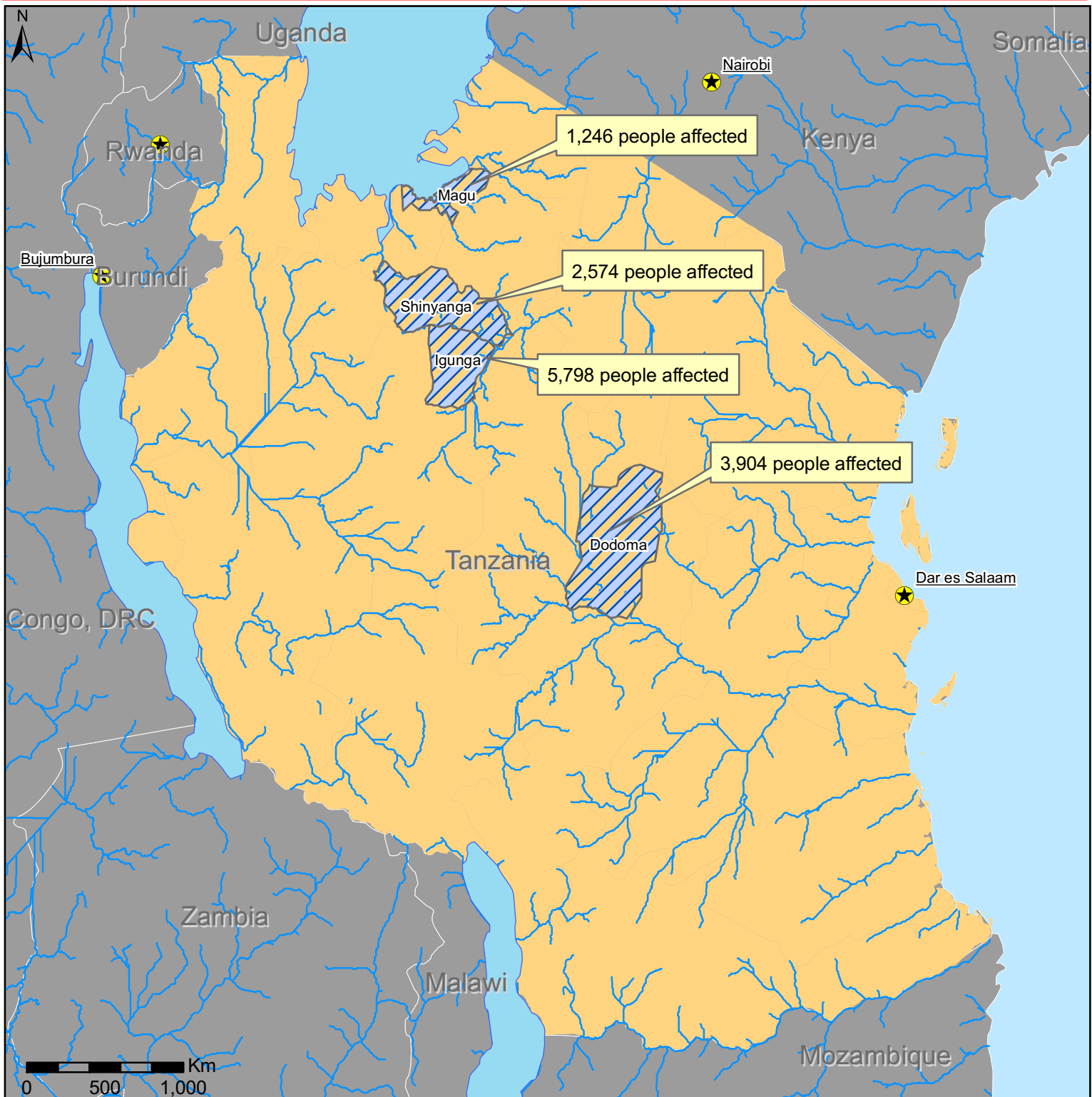
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**Net Request 969,519**

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# Tanzania: Floods



- ★ Capitals
- ▨ Flood affected area