



ZAMBEZI FLOOD

MOZAMBIQUE

MULTI AGENCY INITIAL INVESTIGATION
18-21 February, 2007



OVERVIEW

Heavy rains in central and northern Mozambique and neighbouring Malawi, Zambia and Zimbabwe in January and early February flooded large parts of Mozambique's Zambezi River basin. The entire 800-kilometre-long lower Zambezi River in Mozambique was placed on red alert on February 4th. Peak water levels in Mutarara, Caia and Marrromeu districts were similar to levels last seen during the catastrophic floods of 2001. The waters have recently started receding due to reduced rainfall and decreased discharges from the Cahora Bassa dam but the Zambezi remains above alert levels along much of its length due to inflows from its tributaries – the Luia, Luenha, Revubue and Chire.

An estimated 140,000 people were displaced by the floods, while up to 285,000 people were affected overall. In order to properly address the needs of all these vulnerable people, the government's National Institute for Disaster Management (INGC), the United Nations and other humanitarian agencies urgently required additional information about the situation in the four flood-affected provinces – so a multi-agency assessment mission was conducted between 18-21 February.

OBJECTIVES

The principal objectives of this assessment were to rapidly describe and assess the current humanitarian situation in the accommodation centres for the displaced and to recommend how best to target humanitarian assistance in order to guarantee the greatest impact.

This initial investigation was also intended to consolidate all existing information (contingency plans, preparedness plans, DNA reports, satellite imagery, etc.) on the magnitude of the flood, its geographic scope and the severity of its impact.

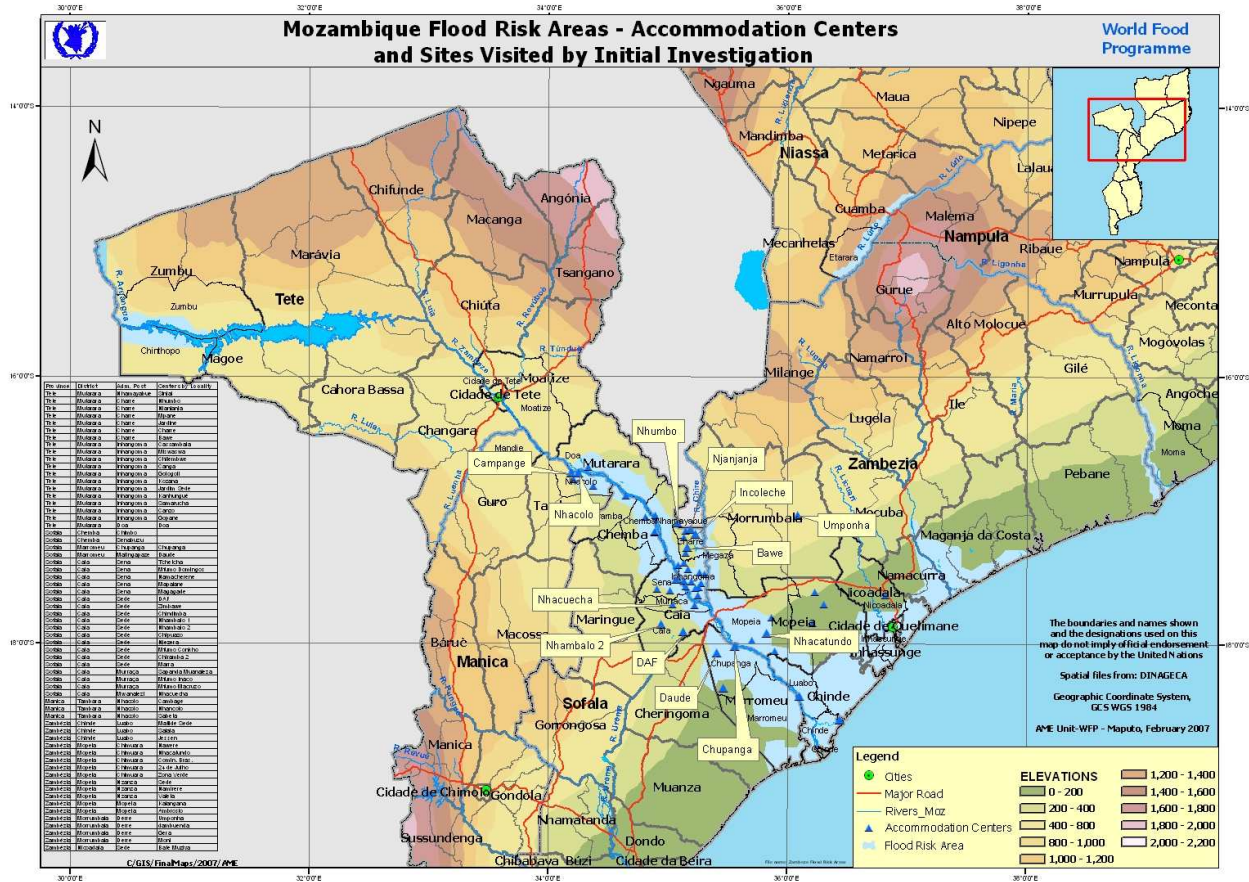
Specific Objectives

1. Preliminary determination of the areas, population groups and number of people (rough estimates) affected as well as the likely impact on food security, especially in relation to households' access to food
2. Recommendations for immediate life-saving assistance, if needed; the localities and priority topics that a follow-up rapid assessment should focus on, if required; and, the type and scale of external assistance, if any, that might be needed.

Methodology

In each of the districts visited, the assessment team met as many key informants as possible – such as district administrators, INGC representatives, agriculture and INAM staff, health authority officials and representative of local groups/associations/NGOs. The team also visited a number of accommodation centres (see map below and Annex 2 list).

The composition of the team can be found in Annex 1 and the key informant questionnaire in Annex 3.



Constraints

1. Accessibility – Only the most accessible accommodations centres could be visited by the team given the mission’s short timeframe and insufficient logistical capacity. The team was unable to reach the districts of Chinde (Zambezia), Zumbo (Tete), Magoe (Tete) and Chemba (Sofala). Therefore, the findings of this investigation have to be treated with some caution.
2. Assessment vs. monitoring – Agencies on the ground can provide a lot of crucial data, especially since government institutions depend on secondary information from local authorities and humanitarian agencies. However, this data is not always updated, particularly in difficult to access areas. It is vitally important to ensure that the officials in charge of accommodation centres and operating agencies report regularly to the CENOE to avoid additional assessment team from being sent in unnecessarily.
3. Validity of findings – The situation on the ground continues to evolve with new people arriving at accommodation centres every day and relief operations expanding. Due to this, the survey team’s findings will be valid for only a very short time.

KEY FINDINGS

(See attached Survey Team Report for detailed data from each accommodation centre visited)

It is worth mentioning that the investigation team was impressed by the ongoing relief operation and especially by the successful coordination between the government and humanitarian agencies, including the use of thematic clusters and daily briefings. The coordination centre in Caia has proven to be particularly effective with operational recommendations being agreed upon during the daily briefings and then implemented the following day. However, some field reports are occasionally delayed because the implementing partners have no direct representation in Caia.

The situation in Moma is unique since displaced people are already starting to return to their home areas and beginning to rebuild their houses (3248 houses were destroyed). Therefore, most of the survey team's findings in Moma are not incorporated into the following section since they are mainly related to the recovery phase.

Number of people affected/ living in accommodation centres

In most areas, the assessment team relied upon figures provided by the INGC. However, the team was supplied with different figures in Mopeia and Morrumbala by the provincial INGC, which still need to be confirmed by CENOE at a central level. The numbers of affected people in Zumbu, Magoe and some other sites were sent in by the local authorities and NGOs and no field assessment has been organised to confirm or update them.

(See Annex 4: Number of people living in accommodation centres/population affected)

Registration is a central issue. The official figures are still only estimates in many areas and do not provide information about family profile, age and gender, which is essential for many targeted aid interventions. In addition, there are reports – most notably at Chupanga – of people continuing to arrive at accommodation centres even though they were not directly affected by the floods in order to benefit from the services and assistance being provided there.

Many of the accommodation centres were set up during the 2001 floods and were later designated as permanent resettlement centres, where health and education facilities have since been established. Some tension has been reported – particularly around Caia – between people who moved to these resettlement centres after 2001 and people displaced by the current disaster. While their houses have been largely untouched by the floods, residents of the resettlement centres have still been affected and also feel that they should benefit from the emergency assistance being provided to the newly displaced.

Most of the accommodation centres that were visited are located near health and education facilities and a (sometimes rudimentary) 'market' – the maximum time to reach a market was around 30 minutes in Tambara. No permanent warehouses were found in the areas around most of the accommodation centres.

In Mutarara, a few small accommodations centres have recently been established next to already existing ones under the auspices of local leaders. However, instead of increasing the already-large number of small accommodation centres, local leaders should follow the recommendations of the authorities in Mutarara and combine the new centres with existing ones (as long as the total population size remains manageable) in order to facilitate the provision of basic services. (For more detailed population figures in centres around Mutarara, please refer to annex 6)

Accessibility

The following areas were particularly difficult to access at the time of the assessment mission and should be given specific attention by the humanitarian community:

Area/ locations	Accessibility
Zumbo, Magoe area	Air or 1 day by boat from CB
Mutarara sede Inhangoma and Doa	Air or more than 7 hr by car Boat from Mutarara or by air
Chemba	Air
Marromeu (Daude)	2.5 hr by boat from Marromeu
Tambara area	Access by road from Chimoio (need to cross the river) and by boat
Chinde	Air or by boat

In terms of the air operation, only three helicopters were available, including: one UN cargo helicopter for relief deliveries; one small INGC helicopter for monitoring missions; and one German Medical organisation helicopter for medical assistance and rescue operations. Since some districts are only accessible by boat or by helicopter, there is an urgent need to provide additional means of transportation to assist with both the delivery of relief assistance and the continuous monitoring of ongoing operations. One additional helicopter would help to speed up the delivery of essential food and non-food supplies (second Mi8 cargo helicopter has since arrived in Caia).

Originally, the team was scheduled to fly on a small passenger plane to Chinde but this was cancelled since no adequate landing strip was available.

Shelter

Tents and plastic sheeting had been distributed and erected in Chupanga and Tambara accommodation centres. However, everywhere else, displaced people were mainly living in shelters constructed from local materials. All the assessment teams reported regular demands for tools to help in the construction of additional shelters.

Water and Sanitation

The river remains the main source of water for most of the displaced people. However, close to Mutarara sede, people living in the resettlement centre do have access to wells, while drinking water tanks were provided early on in Chupanga (Marromeu). Most of the centres already have NGOs committed to taking care of the water and sanitation sector

and many projects are underway. But so far, sufficient action has been taken in only a very few places.

There are too few latrines in many of the centres and often these latrines have been dug by NGOs operating in the area rather than the displaced community. When they were asked why they did not participate in the construction of latrines, the people in the centres said that they lacked the necessary tools. Furthermore, the available latrines are often inappropriately used, mainly because latrines are not common in most of the displaced people's home communities. A substantial amount of work needs to be done to promote better hygiene and educate people about the proper use of latrines, which *activistas* from *Cruz Vermelha de Mocambique* (CVM) are already doing. Finally, latrines never featured on the list of priorities highlighted by the affected communities during interviews.

Soap had not been distributed in any of the centres visited by the team except in Chupanga, where it had been provided by the Provincial Governor's wife.

Blankets and buckets had only been distributed in Chupanga and a few other centres.

Health

Malaria, diarrhoea and fever are the most commonly reported diseases. All centres visited have their own permanent or temporary health post with an activist from CVM and medicine supplied by DDS. However, the supply of medicines was insufficient in Mutarara. The proximity of many accommodation centres to district or *Posto Administrativo* (PA) capitals makes it easier to access already-existing reference health facilities (centro de referencia).

More in depth information on the situation in the area of health is provided in the report of the health assessment conducted by the Government and partners in the affected areas in the four provinces. The report was released on March 6th.

HIV and AIDS

At the time of the assessment, only very few of the centres visited were providing Voluntary Counseling and Testing (VCT) services and had availability of Post Exposure Prophylaxis (PEP) kits - for people who have been exposed to the virus - and Post Rape kits. Condoms were not available in many of the centres visited and where available there was very limited request from the population.

While HIV prevention activities are reported to be ongoing in the majority of the centres, carried out among others by health workers and 'activistas', the findings of the assessment suggest that there is a need for more HIV prevention activities on the ground.

Food / Nutrition

Food assistance has been delivered mainly by WFP and INGC and either 7-day or 15-day rations had recently been distributed by various organisations in all the sites visited by the assessment teams. However, some other centres had not yet received any food assistance or had only received a very limited amount.

Interviewees in the accommodation centres asked for flour to be provided instead of grain because of the lack of pounding tools. However, in Chupanga, which is located near other permanent communities, people managed to borrow tools and pound the sorghum they received. People are satisfied with the peas provided in the food ration. In many locations, there were requests for high-energy food for young children.

A lack of firewood was never mentioned as a problem. In Chupanga, a military car helps people to collect firewood as well as wooden poles for shelter. However, in most of the sites (once again, except for Chupanga) displaced people had not been supplied with cooking utensils. A detailed investigation is required to assess the lack of cooking tools.

Nutrition education for mothers was reported to be carried out only in very few of the accommodation centres.

No evidence was found of distribution of powdered milk or other breast milk substitutes in the affected areas.

Seeds

Seeds and agricultural tools were requested in certain areas, where displaced people still have access to farmland on higher ground, which could be used for second season cropping. (See details in the assessment report)

Protection

In general the families moved together with their communities under the leadership of the community leaders, as a result the ties between members of the communities have not been significantly affected.

Although cases of children separated were reported in many of the accommodation centres, the results of the assessment seems to suggest that in the vast majority of cases this is the result of situation existing prior to the floods. Furthermore there are indications that the majority of the separated children are cared for by extended families and communities. In only one case there was report of active search for the separate child, which seems consistent with the above mentioned separation prior to the floods.

In Nkuletche, Luabo, Mpago accommodation centres there are reports of children living in groups without adults. In Mpago a shelter was set up to host 40 children living without adults. The findings of the assessment do not allow to establish a connection between the living arrangement of these children and the floods.

At the time of the assessment psycho-social support provided by community activists was available only in some of the accommodation centres; and none of the centres had organised group activities for children.

The accommodation centres visited had policing, either from the community or from the government.

The team received no reports of physical violence either.

Some security issues had been raised in relation to Chupanga, which is one of the biggest accommodation centres and is within easy access of Marromeu. A police station has been set up, while a generator has been requested by the community to insure that the warehouse is adequately lighted at night.

Education

Established schools close to post-2001 resettlement centres or new schools set up in accommodation centres by UNICEF and the Department of Education are able to provide enough space for displaced school-age children. In some centres in the three provinces there are reports of insufficient number of teachers available.

In conclusion, a lot of work is already being done across all sectors. Annex 4 gives a brief update of “Who is doing What, Where?” in the surveyed sites.

RECOMMENDATIONS

Immediate intervention per sector

1. Improved registration

It is essential to compile accurate population data from every accommodation centre, disaggregated by age and gender – and make this available as soon as possible. Therefore, camp management needs to be strengthened and responsibility within each centre more clearly defined. Additional support should be provided to ensure that there is more efficient field monitoring and to help the management team in each camp to regularly update and disseminate the population figures as well as the amount of assistance received and assistance still needed.

It would also be very useful to compile a detailed list of the home areas of all of the displaced people along with their GPS coordinates since this would help people involved in the next – early recovery – phase of the operation.

Finally, a mechanism should be found to prevent unaffected people from moving to and staying in the centres. Similarly, affected people should be categorised based upon the degree to which they were affected – such as households who lost everything, including their house, assets and fields; households who only lost their fields and crops in the lowlands; and, households who have been accommodated in the centres as a preventive measure in case the water level increases.

2. More provision of water and sanitation

Humanitarian agencies already committed to providing water and sanitation should speed up the implementation of their plans. Although the capacity seems to be there, the time it takes to deliver and implement these programmes needs to be cut, especially as the need for water and sanitation was listed as the first priority in every site visited by the team. Interventions in the area of hygiene education should also be prioritised and need to be expanded to reach all camps.

3. More tools to increase community involvement in building shelters and latrines

The assessment team believes that making extra tools available would encourage displaced people to participate more in the construction of their own shelters and latrines as well as to begin preparing unaffected fields on higher ground.

4. Soap must be made available

No soap has been distributed so far to the affected community. The proximity of local markets in many instances may provide an opportunity for soap to be provided through a cash-based intervention.

5. HIV prevention needs to be expanded

Condoms must be made available and their use should be promoted. HIV prevention activities should be expanded to reach all centres.

6. Child nutrition interventions should be scaled up

UNICEF has already taken action in relation to this through strengthening of nutritional screening and provision of supplementary food to moderately malnourished children in all affected areas. Nutrition education needs to be implemented in all sites.

7. Ensure a continuous food pipeline in remote areas that are highly dependant on external assistance

Immediate priorities according to the separate survey teams

Mopeia / Morrumbala

1. Increase food assistance
2. Enhance water and sanitation
3. Seeds for second planting season (starting in March)
4. Allocate land on higher ground for second cropping

Mutarara

1. Provide water
2. Distribute tools (to work in centre)
3. Supply seeds for second season cropping and land if not available
4. Build latrines

Caia/ Marromeu

1. Increase aid efforts: latrines, shelter, mosquito nets, soap and food.
2. More community involvement
3. Accommodation centres should have been better equipped with basic infrastructure prior to the crisis, since floods are recurrent in these areas.

Magoe/ Zumbo

1. Allow a team to assess the affected area as soon as possible
2. Urgently mobilise the communities to build latrines
3. Reinforce hygiene and basic health education especially in relation to malaria, cholera and HIV/AIDS

Tambara

1. Increase food assistance
2. Provide drinking water
3. Improve management of accommodation centre

Moma

1. Increase availability of construction material and training
2. Improve availability of transport
3. Allocate new land to affected people living in high risk zones

Transport and logistics

The aerial capacity of CENOE is insufficient given the serious difficulties in accessing all the affected communities. An additional helicopter would ease the pressure on the UN's current cargo helicopter and is the only way to accelerate the recommended interventions in terms of food, shelter, water and sanitation.

In many areas, the lack of fuel proved to be a major constraint in reaching remoter areas.

Morrumbala authority did ask for an additional boat to survey affected islands.

District authorities should be given support so that they can start preparing any possible landing areas, which will allow small aircraft to access their districts.

Satellite phones and radio communications should be provided in a number of key sites, including large accommodation centres, the most isolated accommodation centres and areas that are still at risk.

Early recovery and further assessments:

Most of the interviewed people insist that they are willing to go back to their original land and home as soon as the water levels allow it, which will probably be within the next three months. Therefore, it is absolutely essential to start planning for their return and for the early recovery of these affected communities in their home areas.

Three population categories can be identified:

- households who have lost everything, including house, assets and field;
- households who have only lost their field and crops in the lowlands; and,
- households who are accommodated in the centres as a preventive measure in case the water level increases.

More detailed information is required to better plan for the recovery phase. A rapid food security assessment led by GAV/SETSAN with WFP support is currently scheduled for mid-March. The assessment intends to:

- examine the food security situation in the affected areas, including an analysis of how it is expected to evolve, any future risks, and the capacity of people, communities, the government and other organizations to improve the situation;
- determine whether food and/or cash-based interventions would be appropriate for the vulnerable populations and identify possible response options;
- establish the potential number and location of beneficiaries; and,
- determine the necessary quantity of food assistance in areas where it is viewed as an appropriate response option as well as the most appropriate food aid interventions, the period when they would be most needed and how they should interface with ongoing programmes.

Depending on the accessibility of different affected areas, the survey may be postponed to ensure that the best possible use is made of the field visits.

The situation in Zumbo and Magoe in Tete province is slightly different. Very little information has become available and the investigation team did not manage to visit these areas. Despite the fact that the area faces severe floods every year and is usually cut off from the rest of the country for around three months during the peak of the rainy season, reports tend to suggest that the situation is particularly serious this year and needs to be further assessed. These two do not have any accommodation centres but communities may well be isolated and require external assistance. There is an urgent need to properly assess the situation in these districts in terms of the overall impact of this year's floods, the number of people affected and the type of assistance required.

Annex 1: TEAM COMPOSITION

Hiten Jantilal	MINAG, team leader 1 - Magoe, Zumbo
Jose Da Graca	FAO
Gloria Moreira	WHO
Eulalia Costa	MISAU
Lara Carilho	WFP, team Leader 2 - Mutarara, Marromeu
Oswaldo Come	SETSAN
Tatenda Mutenga	FAO
Ombretta Baggio	UNICEF
Eva de Carvalho	WHO
Olanda Bata	FEWS net, team leader 3 - Marromeu, Caia
Nair Abichande	WFP Sofala
Tim Freeman	UNICEF
Sidney Velado	USAID/ OFDA
Antonio Pacheco	SETSAN Sofala
Jose Joao	MISAU
Gameli Kofi Eadse	WHO ICT Southern Africa
Marcelino Sisenando	INGC, team leader 4 - Mopeia, Morrumbala
Claudio jamal	World Vision
Juvencio Jesus	WFP Zambezia
Paulo Cordeiro	SETSAN Zambezia
M. Jamisse	MIC, team leader 5 - Moma
Tomas Macovela	WFP Nampula
Carlos Jacson	SETSAN Nampula
Lucy Linares	WHO, team leader 6 - Tambara
Julieta Dimande	MISAU

Annex 2: Accommodation centres and sites visited by the team

Province	District	Accommodation centres	Villages of origin	Accessibility
SOFALA	Caia	Nhacuecha	Mwalanezi	1 hr from Caia sede
		Nhambalo II	Ilhas Rosenda	35 min
		Daf	Ilhas Nhane Ilhas Mapalane	Next to Caia sede
	Marromeu	Daude	Nhaminasse, Mabombe, Mazungo, Sakassi, Chilolo, Masegongi (Malinga PA)	2.5 hr boat from Marromeu
		Chupanga	Cundue (caia), muriwa (mopeia), cocorico (mopeia), luabo (chinde), Nzoe, Gombe Gombe, Gorra (marromeu),	1 hr by car from Caia
TETE	Mutarara	Bawe	Oliveira, Maeuja, Nkumbire, Nhamizinja, Matoeca, Toca	1-2 hr from Mutarara sede
		Nhumbo	Ngune, Cussamjombe, Mauco	1-2 hr from Mutarara sede
		Nkoletche	Ilha de balanca, ilha nguni, ilha ncussaombe, ilha da campira, ilha da fombe-muleketa	1-2 hr from Mutarara sede
		Njanjanja	Njanjanja, Mbalawira, Mabuza	1-2 hr from Mutarara sede
MANICA	Tambara	Chingodza (Nhacolo)		
		Campange (Nhacolo)		
ZAMBEZIA	Morrumbala	Umponha	Inhangoma (mutarara)	1hr from Morrumbala - 2hr from Mopeia sede
	Mopeia	Nhacatundo		2 hr from Mopeia Sede
NAMPULA	Moma	no accommodation centres	Namato, Namato A, Mopone, Mpago, Micane, Mutoba, etc.	

Annex 3: Initial investigation – key informant’s questionnaire

Nome do entrevistador: _____		Organização: _____		Data:	Código do Censo:
_____		Contacto telefónico #: _____			Coordenadas
					Longitude: E
					Latitude: S
Província:	Distrito:	Posto Administrativo:	Localidade:	Aldeia/Local:	
1	Observações Iniciais: ESCREVA TODAS AS RESPOSTAS ABAIXO (use NÚMEROS do código sempre que for possível)				
1.1	Descreva o grau de inundação da área residencial (incluindo campos agrícolas adjacentes):	1 = Isolados pelas cheias; 2 = inundado – local debaixo das águas 3 = Inundado – local cheio de lama; 4 = Local isolado (não inundado) 5 = Local de transferência/deslocação			
1.2	Descreva a situação de riscos ambientais causada pelas cheias:	1 = Corpos; 2 = Combustível; 3 = Materiais perigosos; 4 = Tubos de drenagem abertos; 5 = Animais necrofagos (que se alimentam de substancias mortas ou em decomposicao)/pragas; 6 = outros (especifique): _____			
2	Comunidade e assistência: O objectivo é identificar o estado da comunidade em relação às actividades de assistência de emergência.				
2.1	Quem é que está a liderar a organização da comunidade?	Líder da população local: _____ Líder da população desalojada # 1: _____ Líder da população desalojada # 2: _____ Líder feminino da população local: _____ Líder da população desalojada # 1: _____ População desalojada chefiada por uma mulher # 2: _____		NAMES _____ _____ _____ _____ _____	RESPONSABILIDADE _____ _____ _____ _____ _____
2.2	a) Lista de organizações/grupos/associações nacionais e internacionais que prestam assistência: b) Identifique o tipo de assistência prestada por cada organização: [socorro=1; água=2; alimentação=3; acomodacao=4; Saúde=5; outros=6 (especifique _____)] c) Número estimado de pessoas cujas necessidades são satisfeitas no âmbito desta assistência:	a)	b)	c)	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	
		_____	_____	_____	

3 Efeitos do Desastre: Desde a ocorrência de desastre que efeitos este já causou às pessoas?				
3.1	a) Número estimado (população original):	#	f) Número estimado de pessoas desalojadas:	#
	b) Número estimado de mulheres (população original):	#	g) Número de mulheres desalojadas:	#
	c) Número estimado de crianças menos de 5 anos idade (população original):	#	h) Número de crianças com menos de 5 anos de idade:	#
	d) Número estimado de pessoas que morreram:	#	i) Número de crianças não acompanhadas:	#
	e) Número de mulheres que morreram:	#	j) Número de crianças com menos de 5 anos de idade perdidas:	#
3.2 Efeitos do desastre na vida e meios de sobrevivência das pessoas?				
	a) Qual tem sido o impacto geral do desastre sobre a vida das pessoas da área?	..... ..... ..... ..... .....	
	b) Quais os grupos que foram mais afectados e porquê?	..... ..... ..... .....	
	c) Quais são as prioridades imediatas em termos de apoio?	..... ..... ..... .....	
	d) Que mudanças são necessárias para a recuperação a longo prazo das populações afectadas e para reduzir a sua vulnerabilidade a eventos similares no futuro?	..... ..... ..... .....	

4 Acessibilidade da comunidade: O objectivo é de determinar como é o local poder ser alcançado caso assistência seja necessárias.				
4.1	Acesso aberto para que tipo de transporte? (indique todos)	(nenhum por estrada=0; apenas via aérea=1; apenas via fluvial=2; só com carros 4x4=3; =4; 2x4=5; tractores=6)	LIST	LIST
4.2	Condições das vias de acesso para o local:	(Pavimentada=1; terra=2; terra batida=3; pavimentada =4; areia solta=5)		
4.3	Transporte que existe no local:	(Viaturas privadas=11; viaturas do Governo=12; barcos privados=21; barcos do Governo=22; tractores=31; tractores & atrelados=32 outros=40 (especifique)_____)		
4.4	Pista de aterragem mais próxima /condições do aeroporto	(inundada/fora de uso=01; lamacenta/fora de uso=02; terra=11; terra batida=12; pavimentada=13)		
4.5	Pista / aeroporto acessível do local?	(Nao=0; sim=1)		
4.6	As mulheres têm acesso fácil aos mercados?	(Nao=0; sim=1)		
4.7	Tempo que se leva para ir ao mercado:	(Minutos)		
4.8	Combustível disponível localmente (tipo / litros)	(Nenhum=0; diesel=1; gasolina=2; petroleo/parafina=3; combustivel de aviao (avgas)=4)	TIPO	LITROS
			-	-
			-	-
			-	-
4.9	Infra-estrutura de comunicação	(Nenhuma=0; Telefone=1; Rádio =2; E-mail=3; outras=4 (especifique)_____)		

NO LOCAL DE REASSENTAMENTO / COMUNIDADES AFECTADAS					
5	Situação da acomodação e saneamento: O objective é de identificar o estado actual e determinar se a assistência de emergência em termos de abrigo, abastecimento de água e saneamento é necessários.				
5.0	Descreva a capacidade do sector de Aguas (DNA) a nível provincial e distrital para responder à emergência?	_____			
5.1	Tipo de acomodação das pessoas (estimar a % das pessoas):	Tendas	----- %		
		Materiais locais	-----		
		Casas das pessoas locais	-----		
		Edifícios públicos	-----		
5.2	Estimar a percentagem e o número da população sem abrigo:	%		#	
5.3	a) Que tipos de abastecimento de água são usados actualmente? Canalizada-torneiras = 1 Furos = 2	TIPO	DISTÂNCIA (km)	% ESTIM. DE FAMÍLIAS	FIÁVEIS
	b) Qual é a distância à fonte de água? (por fonte identificada) Poços com bombas manuais = 3 Poços profundos / buracos = 4 Riachos = 5 Charcos / lagos = 6 Tanques de água permanentes = 7	-	-	-	-
	c) Qual é a % das famílias que usam cada fonte? Tanques de água flexíveis de emergência = 8	-	-	-	-
	d) As fontes de água são fiáveis (com risco de avariarem/ de serem poluídas)? (Fiáveis=1; não fiáveis=0)	-	-	-	-
5.4	Há formação de filas/bichas na recolha de água? (tempo médio gasto)	(Nao=0; si,=1) (minutos)	BICHAS	TEMPO (min)	
5.5	Que tipo de tratamento de água de emergência existe?	(Nenhum=0; sistema de tratamento de emergência 1; tratamento regular na fonte com o cloro=2; tratamento irregular na fonte=3)		LISTA	
5.6	Quantos acessórios de água seguros são necessários?	Bidões: Balde: Comprimidos purificadores (x100):		#	
5.7	Situação das latrinas – Quantos existem / podem ser usadas?	Inundados = 0 Usáveis = 1 Usáveis mas não em uso = 2	SITUAÇÃO	NÚMERO	
			-	-	
			-	-	
			-	-	
5.8	Existe material local para a construção de latrinas?	(No=0; yes=1)			
5.9	Problemas prioritários de saneamento (avaliação do entrevistador) (Remoção de lixo fecal=1; Remoção de lixos sólidos=2; higiene pessoal=3; higiene alimentar=4; infra-estruturas para lavagem=5; outros=6 (especifique) _____)	ALISTE EM ORDEM DE PRIORIDADE		-	
				-	
				-	
5.10	Usa-se sabão?	(Nao=0; sim=1)			

NO LOCAL DE REASSENTAMENTO / PARA A COMUNIDADE AFECTADA:

6						Alimentação: O objectivo é avaliar a necessidade de apoio alimentar de emergência.					
6.0		Descreva a capacidade do INGC ao nível da provincial e distrito de responder à emergência?				<hr/> <hr/> <hr/>					
6.1		A comida é produzida?		Nao=0; sim=1		6.2		A comida está disponível?		Nao=0; sim=1	
6.3		NECESSIDADES ALIMENTARES NEEDS a) Número de crianças de 6 meses ou com menos de 5 anos de idade b) Número de crianças com 5 – 18 anos de idade c) Número de mulheres grávidas/latentes d) Número de idosos/III/Deficientes e) Número de pessoas não incluídas na lista acima				6.4		RESERVAS ALIMENTARES DISPONÍVEIS (produção própria) a) Número de agregados familiares que perderam todas as suas reservas alimentares b) Número de agregados familiares com alimentos suficientes para 1 mês c) Número de agregados familiares com alimentos suficientes para 2 meses d) Número de agregados com alimentação suficiente para 3 meses			

6.6		QUEM É RESPONSÁVEL PELA GESTÃO E DISTRIBUIÇÃO DE ALIMENTOS a) Comité = 1 b) Chefe da Aldeia = 2 c) Voluntários = 3 d) Outros = 4 (Especifique _____)		6.7		COMPOSIÇÃO DO GRUPO DE DISTRIBUIÇÃO DE ALIMENTOS a) Quantas pessoas compõem o comité ou grupo de voluntários b) Quantas dessas pessoas são mulheres c) As mulheres têm um papel de liderança na distribuição e gestão de alimentos (Nao=0; sim=1)			
6.8		Qual é o número estimado de agregados familiares sem água/equipamento de cozinha para alimentar crianças com menos de 2 anos de idade?		6.9		Estes agentes de saúde dão educação nutricional às mães sobre alimentação de crianças?		Nao=0; sim=1	

NO LOCAL DE REASSENTAMENTO/ COMUNIDADES AFECTADAS

7		Agricultura			
7.1		DISPONIBILIDADE DE SEMENTES Houve disponibilidade de sementes? Para que culturas?		<hr/> <hr/> <hr/> <hr/>	
7.2		DISPONIBILIDADE DE UTENSÍLIOS Houve suficiente disponibilidade de utensílios? Tipo de utensílios?		<hr/> <hr/> <hr/> <hr/>	

Avaliação de áreas perdidas por cultura (inundações e secas)					
7.3	Culturas	Área semeada(ha)	Área perdida(ha)	Necessidade de sementes	Observ.
	Milho				
	Mapira				
	Mexoeira				
	Arroz				
	Amendoim				
	Feijões				
	Mandioca				
	Hortícolas				

7.4	Avaliação das perdas dos animais
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NO LOCAL DE REASSENTAMENTO / PARA A COMUNIDADE AFECTADA:			
8	Infra-estruturas medico-sanitárias: O objectivo é de identificar as necessidades de assistência médica de emergência e riscos de saúde imediatos		
8.0	Descreva a capacidade de resposta à emergência do MISAU ao nível provincial e distrital	..... ..... .....
8.1	Actuais cuidados de saúde prestados a partir dos:	Postos de saúde=1; centros de saúde=2; hospitais=3; serviços privados=4; instalações para o tratamento temporário=5	
8.2	Serviços disponíveis:	Curativos=1; pré-natais=2; maternidade=3; pós natais=4; imunização=5; monitoria do crescimento=6; Tratamento anti retroviral para crianças e adultos, serviços de PTV (Prevenção de Transmissão Vertical) =7	
8.3	Quem é que presta os serviços?	(Governo=1; ONGs=2; outros=3 (especifique) _____)	
8.4	Existe alguma organização que distribui leite em pó ou qualquer outro substitute do leite manterno nas zonas afectadas?	Nome da Organização: _____	
8.5	Os sistemas de vigilância e monitoria nutricionais continuam a funcionar?	Nao=0; sim=1	
8.6	Número total do pessoal médico:	NÚMERO -	
8.7	a) Doenças mais prevalentes (Enumere as em ordem de prioridade na percepção do trabalhador de saúde) b) Qual foi o número de casos registados na última semana?	(Diarreia=1; Desidratação =2; Malnutrição=3; Malária=4; Sarampo=5; Doenças respiratórias =6; Cólera=7)	LISTA # CASOS - - - - - -
8.8	Quantos casos de mulheres grávidas / latentes foram registados na última semana?	#	

8.9	a) Há equipamento e materiais suficientes para satisfazer as actuais necessidades? (No=0; yes=1)	RINGER E CLORO	a)	b) %
	b) Qual é a percentagem das necessidades coberta? (%)	ÁGUA REFRIGERADOR PARA VACINAS CAMAS SAIS PARA HIDRATAÇÃO ORAL FANSIDAR (para malária) ANTIBIÓTICOS BÁSCOS PARACETAMOL	- - - - - - -	- - - - - - -

NO LOCAL DE REASSENTAMENTO/ PARA A COMUNIDADE AFECTADA				
9	HIV: Quais as condições de prevenção do HIV?			
9.1	Há preservativos?		(Nao=0; sim)	
9.2	Os preservativos são levados pela população do local?			
9.3	Existem activistas do HIV a trabalharem no local?		(Nao=0; sim =1)	
9.4	Há necessidade de mais actividades de prevenção contra o HIV?		(Nao=0; sim 1)	
9.5	Que tipo de equipamento o centro de saúde possui para lidar se com o HIV (aliste)	(teste do HIV=1; Jogo para a infusao=2; luvas clínicas =3; equipamento para esterilização=4; locais para o depósito do lixo=5)		ALISTE
9.6	Existem serviços de ATV (Aconselhamento e Testagem Voluntário)? Se sim onde?		(Nao=0; sim =1)	
9.7	Existem kits pós violação sexual? Se sim onde?		(Nao=0; sim =1)	
9.8	Existem PEP (Post Exposure Profilaxis) kits? Se sim onde?		(Nao=0; sim =1)	
9.10	Aa actividade de prevensão do HIV estão sendo levados a cabo? Se sim porQuê? E qual e' o grupo alvo?		(Nao=0; sim =1)	

NO LOCAL DE REASSENTAMENTO/ PARA A COMUNIDADE AFECTADA:						
10	Educação: O objective é avaliar a funcionalidade dos recursos da educação para abrigo de emergência e fins educacionais.					
10.0	Descreva a capacidade de resposta à emergência do MEC ao nível provincial e distrital?	_____				
10.1	Há uma escola?	(Nao=0; sim=1)		Permanentes=2 temporárias=3		Usáveis=4 Não usáveis=5
10.2	Indique o nome da escola: _____					
10.3	Número de professores no local:					#
10.4	Existe algum centro infantil?			(Nao=0; sim=1)		
10.5	Qual é o número estimado de crianças por idade que necessitam da educação primária?					

11	Protecção Infantil.	
11.1	CRIANÇAS SEPARADAS- <i>As crianças separadas são as que não têm ambos os pais ou representante legal ou costumeiro anterior, mas não necessariamente separadas de outros familiares. Eles, portanto, incluem crianças acompanhadas por outros familiares adultos.</i>	
	a) Há algum caso reportado de	
	- Crianças separadas?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	- Familiares com crianças desaparecidas?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	- Crianças enviadas para locais mais seguros?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	b) Houve procura activa de crianças separadas?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	c) Quais foram as principais causas da separação e ainda existem?	..... ..... .....
	d) Que grupos são mais afectados (rapazes, meninas, sub 5s, minorias, etc.)?	
	e) Existem grupos de crianças que vivem juntamente sem adultos?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	f) Quais são os arranjos típicos?	..... ..... .....
	g) Algum adulto assumiu responsabilidade de um grande grupo de crianças?	<input type="checkbox"/> Sim <input type="checkbox"/> Não; <i>se sim, apresente detalhes breves</i>
11.2	VIOLÊNCIA FÍSICA/VIOLÊNCIA BASEADA NO GÉNERO.	
	a) Aumentou o castigo físico de crianças/mulheres?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	b) Que mecanismos existem para reportar casos de violência?	- Posto de Polícia <input type="checkbox"/> Sim <input type="checkbox"/> Não - Centro de Atendimento <input type="checkbox"/> Sim <input type="checkbox"/> Não - Outro:
	c) Que outros serviços estão disponíveis para as vítimas (Saúde, Apoio Legal)?	..... ..... .....
	d) Existem informes sobre casos de abuso e exploração perpetrados por pessoal humanitário/forças de segurança envolvidas no transporte de populações	...............
11.3	QUESTÕES PSICOSSOCIAIS	
	a) Existem actividades de grupo disponíveis para as crianças?	<input type="checkbox"/> Sim <input type="checkbox"/> Não
	b) Há crianças que dormem mal ou demonstram comportamento que preocupa os seus cuidadores, professores, etc.?	<input type="checkbox"/> Sim <input type="checkbox"/> Não; <i>Se Sim, qual é?</i>
	c) Existem trabalhadores formados para ajudar no tratamento psicossocial?	<input type="checkbox"/> Sim <input type="checkbox"/> Não

11.4	ORGANIZAÇÕES A DESENVOLVER ACTIVIDADES NA ÁREA DA PROTECÇÃO DA CRIANÇA	
	a) Liste as organizações que se ocupam de crianças separadas	....................
	b) Liste as organizações com intervenções na área da prevenção/mitigação da violência contra mulheres e crianças	....................
	c) Liste as organizações com intervenções na área do apoio psicossocial	....................

12 *Estado da infra-estrutura básica: o Objectivo é de compreender o grau de danos, para determinar a segurança e estado da população local e a potencial necessidade pela assistência de emergência*

12.1	Qual é o grau de danos às seguintes infra-estruturas? Sem tecto=1 Tecto <50% intacto=2 Sem paredes=3 Paredes <50% intactas=4 Seriamente danificadas=5 <50% Bens/serviços/sistema intactos=6 <50% Infra-estrutura intacta=7	UNIDADE SANITÁRIA SISTEMA DE SANEAMENTO EDIFÍCIOS PÚBLICOS ABASTECIMENTO DA ENERGIA REDE TELEFÓNICA ESCOLAS	GRAU DE DANOS (ALISTE) - - - - - -	FUNCIONALIDAD E (Não em funcionamento=0 Operacionais=1) - - - - - -
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13 *Situação de segurança: O objectivo é de avaliar se é seguro armazenar as reservas alimentares de emergência e operar a partir da comunidade sem necessidade de segurança adicional*

13.1	TIPE: Armazéns privados = 1 Armazéns governamentais = 2 Tendas de emergência = 3 Outros = 4 Que armazéns seguros existentes e qual é a sua capacidade? especifique _____	NÍVEL DE SEGURANÇA: Requer de grandes reparações = 1 Requerem pequenas reparações para a sua protecção contra a entrada de águas = 2 Requerem penas reparações para oferecer mais segurança = 3 Seguros e prontos a serem usados 4	TIPE - - - -	CAPACID ADE (m2) - - - -	Nível de segurança - - - -
13.2	Números de telefones dos responsáveis/donos dos armazéns:	NOME E NÚMERO DE TELEFONE		NOME E NÚMERO DE TELEFONE	
13.3	Que tipo de segurança existe no local?	Policial = 1; Militar = 2; Grupos Comunitários = 3; Outros = 4 (Especifique) _____		LISTA	

13.4	Quais são os principais problemas de segurança? (avaliação dos entrevistadores)	Violência = 1	PRIORIDADE	1
		Roubo = 2		2
		Corrupção = 3		3
		Actos contra mulheres = 4		4
		Actos contra crianças = 5		5
		Outros=6 especifique _____)		6
13.5	Há risco de minas terrestres?	(Nao=0; sim =1)		

14					Necessidades prioritárias: O objectivo é obter se uma perspectiva imediata da assistência prioritária necessária.				
14.1	a) Qual é a disponibilidade imediata das necessidades básicas? (Nenhuma = 0; alguma = 1; suficiente 2) (Avaliação do Entrevistador)	MATERIAIS DE ABRIGO	a) DISPONIBILIDADE		b) % FAMÍLIAS			-	
			COBERTORES	-	-	-			
			ROUPA	-	-	-			
			PANELAS DE COZINHA & LOUÇA	-	-	-			
			COMBUSTÍVEL DE COZINHA	-	-	-			
			COLORO	-	-	-			
			SABAO	-	-	-			
14.2	Priorize a assistência mais urgente: (Avaliação do entrevistador)	1ª PRIORIDADE		2ª PRIORIDADE		3ª PRIORIDADE			

Annex 4 - People living in accommodation centres/population affected

Province	District	PA	Village/ Acc. Centres	Num. Pop.	Remarks
TETE	Zumbo	Zumbo		13,950-16,760	To be verified
	Magoe	Chintopo	bawa	1,650	WFP number
	Mutarara	Charre	Charre	104	
			Nhumbo	629	
			Njanjanja	397	
			Bawe	2,274	Ass. Num.
			Incoleche	206	
			Mpane	129	
			Jardine	492	
		Nhamayabue	Sinjal	923	
		Inhangoma	Cassambala	2,009	
			Miswaswa	6,161	
			Jardim sede	3,382	
			Chilembwe	4,276	
			Canga	4,293	
			Gologoli	12,152	
			Kozana	424	
			Kanhungue	2,207	
			Samarucha	4,713	
			Canzo	1,111	
			Gopane	764	
		Doa		1,441	
SOFALA	Chemba	Chimbo		546	
		Senambuzo		576	
	Caia	Sena	Tchetcha	2,300	
			Namacherene	346	
			Mapalane	325	
			Mpfumo Domingus	385	
			Magagade	319	
		Sede	DAF	1,386	
			Zimbabwe	554	
			Chandimba	1,585	
			Nhambalo 1	4,390	
			Nhambalo 2	1,892	
			Mfumo Conkho	488	
			Chipuazo	300	
			Chiramba 2	232	
			Njezera	1,955	
			Marra	1,205	
		Murraca	Sapanda Muanaleza	579	
			Mfumo Inacio	264	
			Bingala Lole		

			Sapanga Macruzo	345	
			Nhacuecha	973	Ass. Num.
Marromeu	Chupanga		Chupanga	6,792	
	Malingapaze		Daude	1,250	Ass. Num.
MANICA	Tambara	Nhacolo	Campange	935	Ass. Num.
			Nhacolo - Chingodza	1,069	Ass. Num.
			Sabeta	2,000	Concern/ INGC fig
ZAMBEZIA	Chinde	Luabo	Maltide sede	4,651	Concern/ INGC fig
			Salia	3,330	Concern/ INGC fig
			Jessen	427	Concern/ INGC fig
	Mopeia	Chimuara	Noere	683	Ass. Num.
			Nhacatundo	4,060	Ass. Num.
			24 de Julho	2,065	Ass. Num.
			Zona verde	4,294	Ass. Num.
			Bras	575	Ass. Num.
		Nzanza	Sede	405	Ass. Num.
			Namirere	1332	Ass. Num.
			Valeta	809	Ass. Num.
		Mopeia	Kalangana	512	Ass. Num.
			Ambrosio	2135	Ass. Num.
	Morrumbala	Derre	Umponha	960	Ass. Num.
			Dambuenda	1,040	Ass. Num.
			Gera	325	
			Moni	340	
	Nicoadala	Sede	Bate Muziva	280	
	Quelimane	Cidade	Cidade	255	

Source: INGC, Assessment Team, Concern

Annex 5 – Who is doing What, Where?

Province	District	Accommodation Centres	food	health	watsan	shelter	education, social protection
SOFALA	Caia	Nhacuecha/ Mwanalezi	CEDES/ PMA - INGC	DDS			
		Nhambalo II	Adminis/ PMA - INGC	CVM / DDS	CVM - IFRC	CVM - IFRC	CVM - IFRC
		Daf	FHI/ PMA - INGC	CVM/ UNICEF/ DDS	CVM/ UNICEF	CVM/ UNICEF	CVM/ UNICEF
	Marromeu	Daude					
		Chupanga	FHI/ PMA - INGC	CVM - FHI / UNICEF	OXFAM - FHI / UNICEF	CVM - FHI / UNICEF	CVN/ UNICEF
TETE	Mutarara	Bawe	WVI / PMA - INGC	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	UNICEF
		Nhumbo	WVI / PMA - INGC	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	UNICEF
		Incoletche	WVI / PMA - INGC	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	UNICEF
		Njanjanja	WVI / PMA - INGC	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	CVM - MSF L / UNICEF	UNICEF
		Zumbo/ Magoé		ADRM/ PMA - INGC	CVM		
MANICA	Tambara	Chingodza	/PMA - INGC	CVM	Margarino/ Red de Barna/ Concern	CBM	Save the Children Norway
		Campange	/PMA - INGC	CVM	Margarino/ Red de Barna/ Concern	CBM	Save the Children Norway
ZAMBEZIA	Morrumbala	Umponha	Igreja Uniao de Colheita - SCF UK/PMA	CVM /UNICEF	CVM /UNICEF	SCF UK	
	Mopeia	Nhacatundo	Igreja Uniao de Colheita - SCF UK/PMA - INGC	VM - CVM /UNICEF	CVM - MSF/UNICEF	CCM - MSF CVM - SCF UK	
NAMPULA	Moma		INGC and Provincial/ District Directorates and CVM				

CVM Cruz Vermelha de Mocambique
 ADRM Associacao de Desenvolvimento Rural de Magoé
 FHI Food For the Hungry International
 MSF L Medecin sans frontiere Luxembourg
 WVI World Vision International
 CEDES
 IFRC International federation of red cross
 DDS Direccao distrital de saude

Annex 6 – Detailed population figures for Mutarara

Posto Administrativo	CA	Proveniencia	Familias	Pessoas	Pessoas Assistidas	Latrinas	Activistas	Escolas crianças	Posto de Socorro	Area perdida (Ha)
CHARRE	NKULETCHE	ilhas Baklanca, Nguni, Ncussaombe, Campira, Fombe-Muleketa	40	206	206	6	10	250	1	48
	NHUMBO	Ngune, Cussamjombe, Manico	148	629	629	10	10	140	1	168
	JARDENE		124	492	492	4		7		148
	NJANJANJA	Njanjanja, Mbalawira, Mabuza	113	397	397	10	6	140	1	136
	MPANE		69	325	325	4		50		83
	CHARRE SEDE	Ndanca, Macane	28	104		10		142		34
	SUB TOTAL			522	2,153	2,049	44	26	729	3	617
NHAMAYABUE	BAWE	Oliveira, Maeuja, Nkumbire, Nhamizinja, Matoeca, Toca	603	2,274	2,274	10	10	253	1	724
	SINJAL		177	923		10	2		1	212
	SUB-TOTAL		780	3,197	2,274	20	12	253	2	936
INHANGOMA	CANHUNGUE	Gopane, Nanca	535	2,207	2,207	10			1	642
	CANZO	Goba	231	1,111		5			1	277
	GOPANE	Gopane, Nanca	244	1,010	764	5				1,212
	JARDIM SEDE	Zunjaera, Lucuta, Saconche	780	3,382	3,382	10				4,058
KASSAMBALA	SAMARUCHA	Chibue 1, Mulanhica Sede, Nhamitando, Mbuia Joao, Semente, Alfazema, Murinho	1,038	4,713	4,713		5		1	1,246
	MISSUAS/SUCAU		1,488	6,161	816					1,786
	KHOSANA		117	424						140
	KASSAMBALA	Balanca, Nhaeca, Malezi	532	2,009	486	10	5		1	638
	CHILEMBWE		1,163	4,276						1,396
	CANJA		891	4,293						1,069

	GOLI-GOLI		4,186	12,152						5,023
	CACHASSO		594	2,353						2,824
	MAPULANGO		337	1,071						404
	<i>SUB-TOTAL</i>		12,136	45,162	12,368	40	10	0	4	20,715
DOA	DOA		332	1,441			2		1	398
	<i>SUB-TOTAL</i>		332	1,441	0	0	2	0	1	398
TOTAL			13,770	51,953	16,691	104	50	982	10	22,666