

2019 CYCLONE IDAI APPEAL SIX-MONTH REPORT

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CONTENTS

Overview	01
Overview and Key Achievements	02
Background	03
How We Helped	04
How DEC Members Performed	13
Key Challenges	16
The Task Ahead	17
How the DEC Works	17

CONSERV.

Temubura, 50, and his family fetch water from a borehole in Buzi, Mozambique. The borehole was damaged by Cyclone Idai and was repaired with DEC funds.

OVERVIEW

In the middle of March 2019, Cyclone Idai swept through Mozambique, Malawi and Zimbabwe. Strong winds and widespread flooding ripped apart roads, bridges, houses, schools and health facilities and submerged vast swathes of agricultural land. Another major cyclone, Kenneth, followed Idai a few weeks later, the first time in recorded history that two strong tropical cyclones had made landfall in Mozambique in the same season.

Across the three countries, at least 900 people were killed and around three million were left in desperate need of humanitarian assistance. The President of Mozambique called it a "humanitarian disaster of large proportions" and appealed for international humanitarian support.

On 21 March, less than a week after Cyclone Idai made landfall, the Disasters Emergency Committee (DEC) launched an emergency appeal asking the UK public for support. A total of £43 million was raised, including £4 million from the UK Government's Aid Match scheme. This report provides an overview of how funds donated directly to the DEC were spent between March and the end of September 2019.

DEC member charities worked closely with national partners to support government-led relief efforts in Malawi, Mozambique and Zimbabwe. With sanitation facilities wrecked and water sources inundated with contaminated floodwater, they prioritised delivering clean water and building toilets and handwashing facilities to help tackle an outbreak of cholera that began within a few weeks of the disaster. To help the transition

"People [who] have overflown the area speak of inland oceans running for mile after mile, with water above tree level."

Gerald Bourke, World Food Programme, 19 March 2019 from emergency response to recovery, DEC funds were also used to supply seeds and tools so that farmers whose crops had been wiped out could replant. They also delivered emergency shelter materials and blankets, food such as pulses and maize flour, and urgent health assistance.

During the first six months (March to the end of September 2019), DEC funds enabled member charities to provide assistance to more than 352,800 people.

An independent review commissioned by the DEC found the DEC's response to Cyclone Idai to be largely successful.¹ The DEC provided a flexible source of funds that allowed member charities to adapt their response quickly and to address the needs that affected communities said were most urgent. The review also made some recommendations, including that DEC membership should be used as an opportunity for sharing expertise and joint risk assessment, and to explore better programme design alignment. These recommendations have been taken on board by DEC members in their continuing work in Malawi, Zimbabwe and Mozambique.

"Mozambique, Zimbabwe and Malawi have suffered one of the worst weather-related catastrophes in the history of Africa."

UN Secretary-General, 26 March 2019



¹ Key Aid Consulting, 'Real-time Response Review – DEC programme for Cyclone Idai', 2019.

Note: the following sources for humanitarian indicators were used throughout this report: 'Mozambique Humanitarian Response Plan, 2018–2019'; 'Humanitarian Response Plan 2018–2020, Revised August 2019'; OCHA, 'Humanitarian Appeal Revision, Zimbabwe, 2019–2020'; UNICEF, 'Malawi Humanitarian Situation Report', 22–29 March; OCHA, 'Cyclones Idai and Kenneth', https://www.unocha.org/southern-and-eastern-africa-rosea/cyclones-idai-and-kenneth.

RESETTLEMENT SITES IN MOZAMBIQUE

In the aftermath of Cyclone Idai, at least 90,000 people sought refuge in temporary accommodation centres and transit camps. At the beginning of April, the government began to move people to permanent resettlement sites and by mid-June, all temporary sites had been closed. As of mid-July, 66,118 people were living in 63 permanent resettlement sites in Manica, Sofala, Tete and Zambezia provinces.

The resettlement process was criticised by humanitarian agencies for being too rushed and for not respecting basic protection standards by sending extremely vulnerable families to sites that were not ready to receive them. These sites have very little infrastructure, lacking roads, clean water, sanitation, clinics and schools, and very few opportunities for work. Farmers have often been relocated many miles from their farmland with no transport options. Protection risks are high, as families have become separated and some parents need to spend many hours travelling away from the sites to look for work. Children walk up to seven kilometres to get to school, and women and girls are forced to travel long distances to collect firewood and water.

There has also been tension between those living in resettlement sites and neighbouring cyclone-affected communities. These communities also needed humanitarian support but felt that site residents benefited disproportionately from aid activities. DEC member charities worked in both contexts, but this was challenging as there were insufficient funds to meet all needs.

KEY ACHIEVEMENTS AT SIX MONTHS

March to the end of September 2019

220,700 57,400 11,000 people received people received women and food parcels agricultural resources children attended (e.g. seeds, fertiliser, tools) safe spaces 180,700 15,700 56,500 families received families received people benefited emergency shelter materials household items from hygiene kits (e.g. tarpaulins, wooden (e.g. kitchen utensils, (e.g. soap, toothbrush, beams, wire), or vouchers cooking equipment, toothpaste) or cash to buy them mattresses, blankets) 85,500 6 15,100 health facilities families received people reached renovated cash grants to meet with information on their immediate needs gender-based violence

A note on figures: Each sector of activity presented in this report includes net figures for the number of people reached with DEC funds in the first six months. While double-counting in the net number of people reached by sector has been eliminated, some double-counting may persist across sectors and when two or more charities reach the same people with different types of assistance. All figures reported have been rounded down.

BACKGROUND

In March 2019, Mozambique, Zimbabwe and Malawi experienced one of the worst weather-related catastrophes in the history of Africa. Cyclone Idai began as a tropical depression, bringing heavy downpours to parts of southern Malawi and Mozambique, and then strengthened to a cyclone with winds of up to 195 km/h.

On the night of 14/15 March the cyclone made landfall near Beira city, home to 500,000 people, tearing roofs off houses and uprooting trees. It continued into eastern Zimbabwe, where rivers burst their banks. Surge floods of up to 4.4 metres and strong winds tore apart roads, bridges, houses, schools and health facilities, and submerged vast swathes of agricultural land across all three countries.

At least 900 people were killed and around three million were left in desperate need of humanitarian assistance. Mozambique bore the brunt of the cyclone, where an estimated 1.85 million people were affected. The UN warned of devastation outside Beira city, in particular of livestock and crops. Describing bodies floating in the water after two rivers broke their banks, wiping out entire villages, the President of Mozambique called this a "real humanitarian disaster of large proportions" and appealed for international humanitarian support. Heavy rain and flooding in Malawi killed 60 people, nearly 87,000 people lost their homes and almost 870,000 people were affected across 15 districts. In Zimbabwe, the cyclone affected 270,000 people across nine districts and more than 50,000 people were left without homes.

A decade of flooding and droughts, economic instability and political crises in these countries had already pushed families to the very edge of their ability to cope. Even before Cyclone Idai hit, more than 3.3 million people in Malawi were in need of urgent humanitarian support because of consecutive poor harvests. Mozambique's two-year economic crisis and poor harvests saw an estimated 1.78 million people going hungry, while in Zimbabwe, drought had damaged crops and left 5.3 million people in need of food aid.

"We have all seen the heartbreaking images: raging waters; people stranded on rooftops; schools, hospitals and homes in ruins; an entire city – Beira – practically razed to the ground; and enormous expanses of farmland – Mozambique's breadbasket – inundated on the eve of the next harvest."

UN Secretary-General, 26 March 2019

CYCLONE KENNETH

Exactly six weeks after Cyclone Idai, Cyclone Kenneth hit Mozambique – the first time in recorded history that two strong tropical cyclones had made landfall in that country during the same season. With wind gusts of up to 220km/h, Tropical Cyclone Kenneth is the strongest cyclone to ever hit the African continent and left 374,000 people in need.

Almost 55,000 hectares of agricultural land were destroyed and more than 100,000 cashew and coconut trees uprooted, severely impacting the livelihoods of thousands of farmers. More than 45,300 houses were flattened or damaged. This further weakened the country's ability to respond to the destruction already caused by Cyclone Idai.

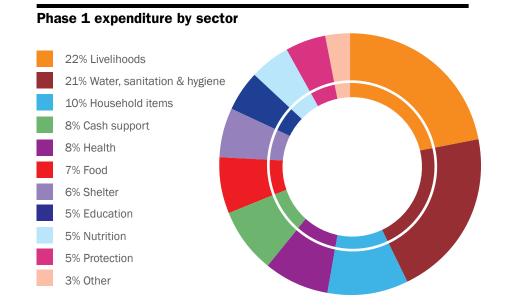


HOW WE HELPED

Within two weeks of the appeal launch, the DEC had allocated £24 million to its member charities. Six months later, the DEC appeal had raised a total of £43 million, including £4 million from the UK Government's Aid Match scheme. Thirteen member charities are receiving funds from the DEC: nine in both Mozambique and Malawi, and seven in Zimbabwe. This report relates to funds raised directly by the DEC and allocated to its member charities.

In this first phase of the DEC-funded response (March to the end of September 2019), DEC member charities and their partners provided relief assistance to more than 352,800 people with £14.2 million from DEC funds.

More than half of the DEC appeal budget was allocated to Mozambique, where DEC member charities integrated longer-term recovery into their emergency response. This included helping people to rebuild their livelihoods, for example, providing seeds and tools to enable families to prepare for the next harvest, reaching 164,500 people.





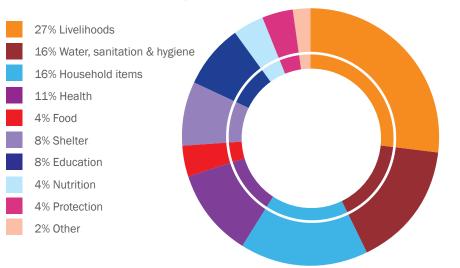


Member charities also acted quickly to renovate wells and boreholes, construct toilets, and run campaigns on the importance of good hygiene, reaching a similar number of people, and helping to contain an outbreak of cholera. Water, sanitation and hygiene interventions were also key activities in Malawi and Zimbabwe, as well as support to replace lost household goods and provide emergency food and health services. In Malawi, the largest form of assistance was cash and vouchers, enabling 75,200 people to buy the things they needed most.

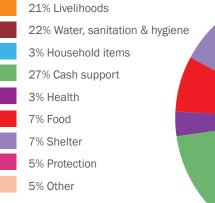
All remaining DEC funds (unbudgeted in Phase 1 plus those allocated subsequently) will be spent between October 2019 and March 2021.

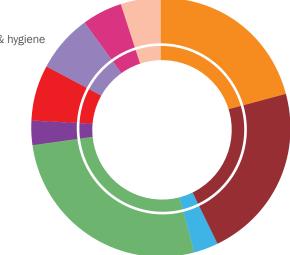


Mozambique expenditure by sector

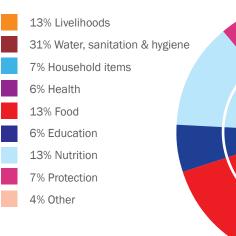


Malawi expenditure by sector





Zimbabwe expenditure by sector



Making a living

Cyclone Idai had a catastrophic impact on people's ability to make a living. Farming is the main source of income for most families in the three countries affected, but in Mozambigue alone, 715,000 hectares of crops were destroyed, along with irrigation systems, agricultural equipment and seed stores. In areas such as Manica and Sofala provinces, which bore the brunt of the cyclone, 76% of families headed by women rely on subsistence farming. During this phase of the response, the largest investment of DEC funds was used to get seeds, fertiliser and tools to affected farmers as quickly as possible, in time for the next planting season, along with other support to restore livelihoods, reaching 273,200 people.

DEC member charities prioritised the most vulnerable people to receive farming inputs. In Mangochi and Chikwawa districts in Malawi, for example, older people, children, people living with disabilities and pregnant and breastfeeding women were among those who received seeds and tools. Feedback suggested that most will be able to harvest between 400kg and 750kg of maize, which will go a long way towards bridging the food gap until the next harvest. Those who had planted vegetables were able to sell some to earn extra cash.

Training was also an important way to help people recover. In Zimbabwe, two of the districts that were hardest hit by Cyclone Idai – Chimanimani and Chipinge – had also been affected by one of the worst droughts to hit the country in over a decade. One DEC-funded project trained 3,423 farmers in Chimanimani and 491 in Chipinge in entrepreneurship and climate-smart agricultural techniques, who will then cascade this information to neighbouring farmers. Seeds and fertiliser were provided for 1,000 families in time for summer planting. DEC funds were also used to deliver training on biological and organic methods of pest control.

Families affected by the cyclone were encouraged to try different types of farming. When an invasion of fall army worms in some parts of Mozambique rendered crops unusable, farmers agreed to switch from growing vegetables to rice and maize, which are less susceptible to attack, and DEC funds supplied the seeds. Families were also encouraged to diversify into livestock and provided with animals, such as goats, as well as training on how to rear them.

Cash-for-work is a good way of providing families with a temporary source of income. In Malawi, 4,500 families benefited from a cash-for-work scheme for a month, helping to rebuild infrastructure within their communities.



- 23,600 people benefited from cashfor-work
- 273,200 people received livelihood support such as agricultural resources including seeds, fertiliser and tools



Providing clean water, sanitation and hygiene

As the floodwaters receded, those who had survived Cyclone Idai were at serious risk of health epidemics such as cholera. Water supplies had been badly affected, and there was a risk that damaged sanitation infrastructure could contaminate groundwater with raw sewage. Families who had lost their homes sought refuge in public buildings and were living in overcrowded conditions with little access to safe water. In these circumstances, it was very difficult to maintain personal hygiene, increasing the risk of disease spreading. In all, DEC funds were used to provide clean water, sanitation and hygiene support to 505,300 people affected by the cyclone.

DEC member charities renovated water sources such as springs and boreholes, replaced old pumps and provided volunteer pump minders with repair toolkits. DEC funds were also used to truck water to areas where the supply had been disrupted and to disinfect water supplies. In Beira city, DEC member charities helped to contain a cholera outbreak and prevent further spread through the blanket coverage of the affected population with household water treatment products and water trucking.

Two mini water treatment plants were set up, one in Beira, reaching 1,205 people, and another in a hospital in nearby Buzi, reaching 4,300. A solar-powered piped water scheme was also installed at Chakohwa rural health centre in Zimbabwe. The health centre has a catchment area of about 10,500 people and its manually operated borehole could not deliver the community's water requirements.

DEC funds were used to construct or renovate 1,168 toilets in homes, communities and resettlement camps. Schools were particularly targeted for improved facilities, as this is an effective way to improve sanitation conditions for children and safeguard their health. In one DEC-funded project targeting schools in Beira and Dondo, Mozambique, for example, 50 new toilets were constructed and 25 repaired, and labelled either male or female in the local language. Toilets in five of the schools were desludged, and all schools received cleaning materials, such as rubber boots, bleach, buckets and brushes. Where possible, DEC charity members sourced materials locally. This reduced costs and channelled much-needed cash into local markets. In Sussundenga, Gondola and Mussorize districts of Mozambique, 444 household toilets were built in this way, along with 200 toilets in accommodation centres, 34 in childfriendly spaces, 22 in mobile clinics and 70 in schools. In addition, 200 metallic handwashing stations were set up for schools, and 180 tippy-taps at communal toilets. The tippy-tap is a simple device that encourages handwashing in villages that don't have running water and can be made from commonly available materials, normally a jerry can.

Good personal hygiene is key to preventing the spread of disease. DEC funds were used to run hygiene campaigns on the importance of handwashing and other simple measures, reaching a total of 374,700 people across the three countries. In Zimbabwe, for example, children in school health clubs helped to run community cleanup campaigns and talked to their relatives and neighbours about the importance of practising good hygiene. This reached more people with preventive health and hygiene messaging than through community health workers alone, and boosted the retention rate of these messages, as children reinforced them with their families at home. In addition, DEC member charities used a wide range of media to pass on information about good hygiene, including radio programmes broadcast in local languages, theatre, leaflets and training manuals for teachers.

As many families had lost everything, even the most basic of personal hygiene items, DEC member charities supplied affected families with kits containing items such as soap, toothpaste and toothbrushes, laundry soap and buckets, as well as sanitary pads and underwear for women and girls.

HIGHLIGHTS

- **108,600** people have access to safe drinking water through repaired infrastructure
- 1,168 toilets repaired and built
- 374,700 people reached with information on good hygiene
- 30,700 hygiene kits distributed, containing items such as soap, toothbrushes and toothpaste

GOOD HYGIENE

Julia manages a team activistas from the local community who go door-to-door promoting good hygiene practices and handing out soap and water purification liquid to prevent the spread of water-borne diseases such as cholera. Cases of cholera have been reduced to the same low level as before the cyclone after public health campaigns such as this one, and a mass vaccination programme conducted by the government. The work of the activistas is funded by the DEC.



Julia is from Beira, and lost her home during the cyclone. The roof blew off and then it collapsed shortly after she got out. She started out as an *activista* herself and was then hired by the project on a full-time basis.



ACCESSIBLE TOILETS

Francisco* used to run his own business, a large stall in Beira, but both his home and the stall were destroyed in Cyclone Idai and he now lives in a resettlement camp outside the city. Each family in the camp was given a small plot of land in what was once rough countryside. DEC member charities ran various programmes in this and other camps, including a project to install toilets on each plot of land to replace communal ones. Francisco has a disability, so his toilet was specially adapted.

"The toilet is new and it helps me," says Francisco. "Before, there were no toilets, only really far [away] on the other side of the camp.

"Now [I need] a house, but I can't build one. We need food, a hospital, and a bus so that we can get to town. We'll stay here because we have no place to stay in Beira."

*Names have been changed to protect identities

Health

Cyclone Idai caused massive loss of life and casualties, particularly in Mozambique, where more than 400 people were killed and at least 1,500 injured. But obtaining medical treatment was extremely difficult, as the cyclone caused major damage to health facilities. In Mozambique, more than 90 health centres were damaged and the emergency room at Beira Central Hospital was put out of action because of extensive damage. DFC funds were used to rehabilitate health centres, set up mobile clinics to bring health services to isolated populations, and train health care professionals. This brought health services to 264,300 people during the first six months of DEC-funded activity.

In Manica and Sofala provinces, eight mobile clinics were set up, offering treatment for communicable diseases, vitamin A supplementation, deworming, and sexual and reproductive health. Staff were trained on clinical protocols and case management in emergencies, and weekly refresher sessions were provided on treating malaria and water-borne diseases. Although all of these health facilities were handed over to the Ministry of Health by the end of August 2019, DEC funds continued to support training and coaching for health care professionals.

Stagnant floodwater, as well as insanitary conditions in overcrowded camps, increased the risk of communicable diseases such as cholera. DEC member charities moved swiftly, helping to contain a cholera outbreak in Mozambique, cases of which leapt to over 6,000 following the disaster. Due to an effective government-run vaccination programme that reached 98.6% of the population alongside an awareness-raising campaign in which DEC member charities took part, cases of cholera were rapidly brought back down to pre-cyclone levels.



- 6 health facilities renovated
- 38 mobile clinics set up
- 630 health workers and community volunteers trained

MOBILE CLINICS

In Sofala province, Mozambique, a DEC-funded project runs mobile clinics in 10 different locations every week. Ana Paula is a nurse at one of them.

"We take care of pregnant women and run a pharmacy to dispense medication. We also have a nutritionist and a lab to test for malaria. We register patients when they come here so that we have records.

"It's important for the clinic to be mobile so that we can help people," says Ana Paula. "We work in remote locations and it's very far to the nearest hospital. When it rains and there's a flood, it's very hard to travel. When people are sick, it's really hard for them to get to the hospital."

Ana Paula is from Beira, a city of 500,000 people that was severely affected by Cyclone Idai. "After the cyclone, it was not the same, everything was destroyed," she says. "Most of the houses were destroyed, even bigger buildings. Many trees had fallen. People had nothing at the beginning, nothing."



Nutrition

A combination of factors – such as poor infant feeding practices, childhood diseases, and limited access to health services – meant that rates of malnutrition were already high in Malawi, Zimbabwe and Mozambique before Cyclone Idai struck. In the aftermath, the risk of acute malnutrition increased greatly because of a lack of nutritious food and the use of contaminated water that led to a steep rise in diseases such as acute watery diarrhoea. Because of limited funding, nutrition interventions were a small but important part of the DECfunded response, reaching 66,300 people.

DEC funds were used to train health workers to screen for malnutrition. In one DECfunded project in Mozambique, for example, health workers screened 6,400 children under five in mobile clinics and resettlement centres in Sofala province. Of these, 180 were referred to health facilities for further treatment. In Chimanimani and Chipinge districts in Zimbabwe, DEC funds provided training for 397 health workers on nutrition in emergencies. They went on to train 828 village health workers who screened 28,190 children under five for acute malnutrition, of whom 953 were referred for treatment.

Health workers were also trained to advise pregnant women and mothers on breastfeeding and the importance of a nutritious diet for children's growth and development. In resettlement centres, cooking demonstrations showed women how to prepare nourishing food for their young children. With DEC funds, mother and baby areas were also set up so that mothers who had difficulty with breastfeeding could be supported in a safe and hygienic space.

Malnourished children and pregnant and breastfeeding women were given nutritionrich fortified food such as corn soy blend. The most vulnerable people were particularly targeted, including young children, pregnant or breastfeeding women, and people receiving treatment for TB or HIV. In one DECfunded project in Chimanimani, Zimbabwe, children aged between two and five and all pregnant and breastfeeding women within the project area received rations of fortified food for three months. However, because of food shortages, some DEC member charities found that rations were often used for the entire family rather than just the targeted individuals.



- **1,700** people treated for moderate acute malnutrition
- **48,400** people made aware of the nutritional requirements for children under five and pregnant and breastfeeding women

Food

Distributing food immediately after the cyclone was critical, as food stocks had been swept away and the next harvest destroyed. In Mozambique, more than 700,000 hectares of crops were damaged and food prices reportedly rose by more than 100% in some affected areas. An invasion of fall armyworms rendered first post-disaster crops unusable and by July, 1.6 million people were going hungry every day. In Zimbabwe, 4,700 hectares of crops were destroyed in Chimanimani and Chipinge districts alone.

With limited funds, DEC member charities focused on the most vulnerable. One DECfunded project predominantly targeted older women and men in Sofala and Tete provinces in Mozambique. Most had lost their homes and had found temporary shelter with neighbours, relatives or in displacement camps. A survey in Sofala province in March, just after the cyclone hit, revealed that 90% were going to bed hungry on average three nights a week. DEC funds provided 369 older women and men with rice, cooking oil, maize flour and beans for three months.

One DEC-funded project in Chimanimani and Chipinge districts in Zimbabwe delivered food packages to pregnant women at health posts, providing an incentive for them to give birth there rather than at home. Food parcels included 10kg of mealie



meal, 2 litres of cooking oil, 1kg of beans and 1kg of dried fish, which were designed to provide 1,600 kcals per person per day.

DEC member charities coordinated with the World Food Programme to ensure maximum coverage with limited funds. When the World Food Programme agreed to take over food distributions in Buhera, Zimbabwe, for example, DEC funds were redirected to neighbouring Bikita, a cyclone-affected area that had not received any outside assistance. As a result, 250 families in this area received a food hamper every month for three months containing maize meal, oil, dried fish, tea leaves, salt and sugar.

In all, 67,200 people were reached with some kind of food assistance during the first six months of the DEC-funded response.



- 57,400 people benefited from food parcels
- **9,800** people benefited from vouchers for food

Cash and vouchers

The government of Mozambique did not permit the use of cash to aid recovery until the end of this response phase, and in Zimbabwe, currency restrictions and economic volatility restricted its effectiveness. In Malawi, however, cash grants were used to support 75,200 people, giving them the freedom to choose what they needed for themselves, as well as providing a boost to local markets.

In Chikwawa and Nsanje districts, 3,972 families used the cash to buy materials to repair damaged homes or build temporary shelters, as well as food and clothes. In another DEC-funded project in Chikwawa, three cash grants reached 2,054 families. Though 97% of the grants were used to buy food, most families said they still preferred receiving cash rather than food parcels.



Those receiving cash grants were able to choose the most cost-effective way of feeding their families. In Nkhwangwa camp, for example, some families preferred to buy sorghum rather than maize as it was less than half the price per kilo.



• 15,100 families received cash grants

Household essentials

Thousands of families lost not just their homes, but all of their household goods – mattresses, kitchen utensils, clothes – when floodwaters swept through their communities. Enabling families to restock was a large part of the DEC-funded response and represented 10% of the total spend. Goods supplied ranged from plates, pots and pans, jerry cans and buckets to sleeping mats and plastic sheeting. As the weather grew colder, warm blankets were particularly appreciated.

Those living in Beira in Mozambique were especially badly affected, as almost every building in the city was damaged. One DEC member charity provided plates, utensils and cooking pots for 700 families living in Inhamizua district and in nearby Mutua camp, where many homeless families had been housed. When families in the camp were asked which additional household item they needed most, they were unanimous – mattresses. They have now been bought and will be distributed as part of Phase 2 of the DEC-funded response.

Supplies of household goods were tailored to meet particular needs. In Beira and Muarara, women who had been identified to receive mattresses and blankets were also given versatile *kapulanas* (wraps) which can be used as clothing or an extra blanket. Many of these items were purchased in Beira once the markets had been re-established, as a way of supporting the local economy.

In all, DEC funds were used to provide household essentials to 186,400 people during the first six months of the response.





 56,500 families received household items such as pots and pans, mattresses and sleeping mats

REPLACING LOST ITEMS

When their house collapsed in the wake of Cyclone Idai, orphans Joao*, 12, Maria*, 8, and Joana*, 6, had nowhere to live and no one to look after them. A DEC-funded project in Buzi, Mozambique placed the siblings with Alphonso's family and provided mosquito nets, blankets and emergency food.

"I took in the children because they had nowhere to sleep," says Alphonso. "I had to – they were just children."

Alphonso and his family built the children a new house, where they now live with Alphonso's son. "They get on with my children like they are brothers and sisters," says Alphonso.

Alphonso grows maize but he lost all of his crops in the cyclone. He received some food from the government but now it's finished and the next harvest isn't until November. "Until then, I will try to do the best I can so that we have food. I also catch fish from the river," he says.

Joao says: "I go to school because I want to be a nurse so that I can cure people."

*Names have been changed to protect identities



Providing shelter

Hundreds of thousands of people lost their homes to Cyclone Idai as floodwaters swept away entire villages. In Mozambique, where some 33,600 houses were totally or partially destroyed or flooded, at least 90,000 homeless people were sheltering in public buildings such as schools and churches at the height of the crisis. DEC member charities provided materials and assistance for people to build or repair homes, or to construct shelters in camps. However, a lack of sufficient funds meant it was difficult to ensure everyone affected was adequately housed, and when asked, people prioritised support for restoring their livelihoods over help with housing. For this reason, support for shelter represented only 6% of DEC expenditure during the first phase of this response, reaching 53,600 people.

In one project in Mozambique, DEC funds were used to provide shelter repair kits, targeting single or female-headed households in particular. They were also taught how to 'build back better', using an approach specifically geared towards local materials, climate and practices. Training was led by skilled local workers (both men and women) who themselves had been trained in particular trades to provide technical support for the wider community. Twelve model houses were also built to demonstrate techniques; local communities will help to decide whether they should be used as community spaces or donated to the most vulnerable families. At the same time, this DECfunded project reached 4,000 people with information on how to build cyclone- and flood-resistant houses through radio messaging, leaflets, community events and demonstrations.

In Malawi, one DEC-funded project initially supported families in evacuation camps, providing them with tools and materials to build their own shelters. When these camps were decommissioned in May, the project switched its support to both those returning home and to other poor families in the area. In Chikwawa district, for example, 1,761 families received vouchers to buy zinc sheets, poles, plastic sheeting, a hammer and nails to construct or renovate a home. A routine survey revealed that these materials were not sufficient, so each family also received a voucher to buy additional zinc sheets, nails, soft wire and timber poles at the local market. These families included people living with disabilities, older people and female-headed households. Monitoring found that 56% of families were "extremely happy" with the shelter assistance they received, while 44% described themselves as "satisfied".

With very limited funds, not all affected families could be targeted. In Zimbabwe, for example, when one DEC member charity built 20 semi-permanent wooden cabins for families in Chimanimani, it received complaints from the rest of the community that this would benefit less than a quarter of those who had lost their homes.



- 15,700 families received emergency shelter materials, such as tarpaulins, wooden beams and wire, or vouchers or cash to buy them
- 230 people trained on the 'build back better' approach

Education

Children's schooling was severely disrupted by Cyclone Idai. Thousands of schools were damaged, including more than 2,800 classrooms in Mozambique, where there was already a shortage of schools. Those still standing were often inaccessible because of damaged roads and bridges, or because they were being used as temporary accommodation centres. DEC funds were used to set up, renovate and repair 47 temporary learning centres in Mozambique and Zimbabwe, often using local labour and local materials. While new buildings were being constructed, DEC member charities set up temporary learning spaces so that children could resume their education as soon as possible. In Chimanimani and

Buhera, as well as repairing two classroom blocks, 20 tents were set up in nine of the worst-affected schools, enabling 8,066 children to start learning again within four weeks of the cyclone. DEC funds also provided desks and blackboards.

Some parents were reluctant to send their children back to school because of the now hazardous journey, or because they were needed at home to take on additional household tasks. This particularly affected girls. In Mozambique, DEC funds were used to run a #BackToSchool! campaign in Buzi, Sofala province. Meetings were held with school councils, student assemblies and parents to emphasise the importance of education and to encourage children - and particularly girls and children with disabilities - to resume their education. As an incentive, 6,353 back-to-school kits were distributed to children just before the beginning of term. Vegetable gardens were also set up to provide pupils with fresh food - a further incentive for hungry families.

DEC funds enabled 30,700 children to resume their education during the first six months of the DEC-funded response.



- 47 temporary learning centres set up or repaired
- **11,600** children benefiting from temporary learning spaces
- 6,800 children received back-toschool kits



Protecting vulnerable people

Cyclone Idai uprooted people from their communities and separated families, creating significant protection concerns. Families sought shelter where they could often in schools or churches - while others were rehoused in overcrowded camps, none of which afforded much privacy or safety for women and children. Children were separated from their families as they fled rising floodwaters, and many were orphaned. Meanwhile, women and girls were forced to walk longer distances to fetch clean water and firewood, exposing them to a greater risk of gender-based violence.

With DEC funds, member charities addressed these issues through a number of approaches. In Buhera and Chipinge in Zimbabwe, DEC funds were used to train social workers, faith leaders, and village-based case workers to provide

counselling to people whose relatives had died in the cyclone and who were finding it difficult to cope. They also helped to organise activities designed to bring the community together again, such as setting up village football and netball teams, and ran drama clubs that helped to raise awareness of genderbased violence.

Women-friendly spaces were set up in both displacement camps and communities to meet the specific needs of women and girls. They delivered advice and information on issues such as hygiene, health and sexual and gender-based violence, and provided women and girls with a safe place to sit and talk with friends. Safe spaces were also set up for children where they could play and learn.

Protecting children was a priority. In Mozambique, for example, DEC funds were used to train child protection committees to identify and refer cases of children who had suffered violence or abuse. These committees in turn trained community volunteers who conducted home visits to 10,235 families.

With DEC funds, 138,400 people were reached with protection interventions during the first six months of the response.





- 11,000 women and children attended safe spaces
- 85,500 people reached with information on gender-based violence
- 120 people trained to provide psychosocial support

SUPPORTING VULNERABLE FAMILIES

Maria's two daughters, Antonia*, 12 and Regina*, 9, fell ill when they were toddlers and now cannot speak or walk. Like thousands of children, they and their parents were caught in rising floodwater when Cyclone Idai swept over their home in Nhamatanda, Mozambique.

"Our house was flooded and there was nowhere to sleep," says Maria. "The water was at waist height, and it stayed like that for 24 hours. I carried one of the children on my back and their father carried the other. We stayed here. We thought about going to the school for shelter, but it was very crowded. We slept standing up in the water, with the children on our backs. No help came for a long time."



Antonia and Regina now attend a child-friendly space, carried there every day by volunteers who were trained as part of a DEC-funded project to support vulnerable families like Maria's.

"When they go there, they can play with the other children. It makes them happy. It's good for me as well, because I can do other things when they are there. Because the children don't walk, it's difficult for me to do things like going to the market. I don't want to leave them alone in case something happens."

*Names have been changed to protect identities

HOW DEC MEMBERS PERFORMED

DEC members are committed to improving the way in which they respond to humanitarian crises, working closely with and for affected communities and upholding international standards of good practice.

Working in partnership and building community capacity

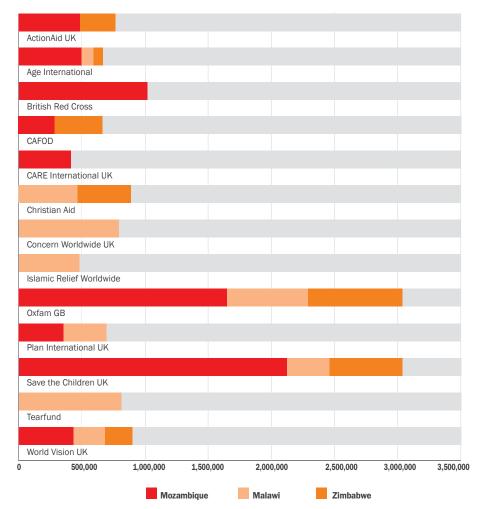
Many DEC member charities worked with local organisations with whom they had long-standing partnerships. This meant the response was led by local people with detailed knowledge of the context and an understanding of community dynamics. It also enabled DEC member charities to respond rapidly. In Mozambique, for example, a DEC member charity that was already working in Sofala province with community associations was able to use them as an entry point for some emergency response activities such as seed distribution and psychosocial support training.

DEC funds were used to boost partner capacity, providing training on issues such as humanitarian standards and the safeguarding of children, as well as onthe-job learning. One DEC member charity ran a week-long training course for its partners in Mozambique to equip them with relevant skills and knowledge to respond to humanitarian emergencies independently. The course addressed gaps in logistics and operational management so that partners could effectively manage supply processes.

To further localise the response and enable people who had been affected by Cyclone Idai to play an active role in the recovery, DEC funds were used to train skilled local tradespeople on building resilient shelters, and architecture and engineering undergraduates on 'build back safer' techniques. Volunteers were trained to manage boreholes, identify child protection issues and pass on key messages about the importance of good hygiene in preventing the spread of disease. These new skills help to make communities more resilient to future shocks. DEC member charities also worked closely with national and local government departments to ensure interventions were sustainable after the end of DEC-funded activities and to capture local knowledge.

In Zimbabwe, for example, agriculture extension officers from the Ministry of Lands, Agriculture, Water, Climate and Rural Resettlement were involved in the design, implementation and monitoring of one DEC-funded project. In Mozambique, DEC member charities trained government workers in preparation for the handover of water systems that had been repaired with DEC funds, and DEC-funded health posts were also managed by the government and volunteers.

Total expenditure of DEC funds in the first six months (\pounds)



Thirteen DEC member charities responded with DEC funds

Following sector standards and being accountable to people affected by the crisis

HUMANITARIAN STANDARDS AND CODES

- Code of Conduct for the International Red Cross and Red Crescent Movement – outlines ethical standards of how organisations and individuals involved in humanitarian work should perform
- Core Humanitarian Standard on Quality and Accountability – covers the essential elements of principled, accountable and high-quality humanitarian action
- Sphere Technical Standards

 define standards for aid work in areas such as shelter, food, water and health care and technical indicators, to be adapted based on context



All DFC member charities have made a commitment to a number of standards and codes that set out principles and guidelines of good practice in humanitarian response. To reinforce these principles and guide interactions with local people, DEC member charities provided training for project staff and volunteers on these standards. Some members also informed communities of their code of conduct through meetings or leaflets translated into local dialects. To strengthen guidance and practice in this area, DEC member charities helped to set up and co-chaired the Prevention of Sexual Exploitation and Abuse network, a forum in which agencies can raise sexual exploitation and abuse concerns with authorities. Work on the ground included training for teachers on how to conduct risk assessments and for local authorities on providing child-friendly feedback mechanisms so that children could report concerns.

An important way to meet these standards is to ensure that those affected by the disaster are able to play an active role in deciding how DEC funds are used to meet their needs. All DEC member charities held meetings with affected communities to share information on the duration of the project, the number of people it intended to reach and the types of activities planned. One DEC member charity conducted door-to-door consultations to seek the opinions of those who are less mobile. Another convened 'listeners groups' to support public health promotion activities, particularly in some camps and resettlement areas, where groups of women, older people, and adolescent girls and boys were convened on a bi-weekly basis. Participants were consulted on a range of issues and planned interventions were sometimes changed as a result of feedback. Other feedback mechanisms included suggestion boxes and toll-free numbers, help desks, local beneficiary committees, and contact numbers for NGO staff.

People who were affected by Cyclone Idai were involved in the design, planning, implementation, monitoring and evaluation of some DEC-funded programmes. In Zimbabwe, for example, project implementation committees were set up, including representatives from people affected by the cyclone and community leaders. These committees reported on project roll-out, such as the distribution of aid items, and the information was used to adjust activities, making programming responsive to the needs of affected populations.

COMPLAINTS AND FEEDBACK PHONE LINE

In Mozambique, the World Food Programme set up Linha Verde, a 24-hours-a-day, seven-days-a-week system-wide phone line through which people could report issues affecting the humanitarian response in their community, including sexual exploitation and abuse. All organisations involved in the response, including DEC member charities, were asked to make communities aware of the hotline number, and some provided training for hotline operators, who all spoke local languages.

Although the large call volume shows that it was an important feedback channel for many, the hotline also had limitations. It wasn't fully functional until about six weeks into the response, and awareness of the hotline among affected communities was uneven. Another concern expressed by DEC member charities was that not everyone had access to a phone or had the confidence to call and complain, and often people preferred to give feedback either face-to-face or in community meetings. For this reason, DEC member charities also set up other feedback mechanisms such as 'listeners groups'.

Coordination

The national governments of Malawi, Mozambique and Zimbabwe worked alongside humanitarian agencies in their respective countries to support working groups on particular sectors, such as water or health. DEC member charities played an active role in these groups, which provided a platform to exchange information and agree priorities and common approaches. On the ground, member charities made use of existing structures and worked closely with local authorities. For example, in Mozambique, distribution of agricultural tools and seeds was coordinated through the Ministry of Agriculture, and back-toschool kits were issued with the support of the Ministry of Education.

There were some challenges around coordination. In Mozambique, language proved to be a barrier, as some meetings were held in Portuguese and others English, although many staff were not comfortable in both languages. Gaps in district-level coordination affected DEC member charities in Malawi, where the 4W matrix, an information management tool indicating needs and agency activities, was only used after organisations had already begun to implement their interventions on the ground.

Including people with specific needs

Many factors influence people's vulnerability to a disaster, such as poverty and discrimination. Women, and particularly pregnant and breastfeeding women, as well as children, older people and people living with disabilities, are often the most vulnerable but have the least say in how interventions should be carried out. DEC member charities therefore prioritised their needs in designing interventions and actively sought their input.

Collecting disaggregated data at the outset enabled member charities to identify specific groups and plan accordingly. When a survey of targeted schools in Mozambique highlighted a lack of accessible toilets for students with disabilities, each newly constructed toilet block included a more spacious cubicle fitted with handrails and a ramp for easier access. In another DEC-funded project in Zimbabwe, data disaggregation helped to highlight the fact that renovating an irrigation system would further enhance existing gender disparities, because the system would almost exclusively benefit men who owned the land nearby. The project therefore opted to also support community gardens which were predominantly owned by women.

Studies have shown that older people's needs are often overlooked in humanitarian responses. One DEC member charity working in Malawi trained outreach workers to assess older people's physical, social and mental well-being through home visits. They conducted interviews with older people and their families and noted living conditions. This information was recorded on a KoBo data collection tool, providing the project with a detailed picture of each individual's needs, and enabling outreach teams to provide bespoke interventions to each older person and their carers.



ADAPTIVE PROGRAMMING

Given the changing needs of those affected by Cyclone Idai during the first few months as well as political and economic uncertainty in all three countries, flexibility was essential. A review of DEC-funded activities in Malawi, Zimbabwe and Mozambique noted that DEC member charities' agility and adaptability was one of the strengths of their interventions.

Good examples included:

- using funds to also respond to the needs of people affected by Cyclone Kenneth
- buying additional seeds and tools with cost savings from other interventions and changing delivery times to align better with the farming calendar
- providing tents as a safe space for children to learn when the renovation of classroom blocks took longer than anticipated because of the scale of damage
- training health care volunteers using the budget that had been allocated to salaries but was covered by other programmes
- building toilets in schools or communities instead of resettlement camps when the camps were closed

THE ENVIRONMENT AND HUMANITARIAN ASSISTANCE

The DEC is working to find more environmentally friendly ways to deliver humanitarian assistance.

- The DEC has commissioned a study, primarily to map out commitments, processes and tools used by DEC member agencies and the wider humanitarian community in relation to environmental sustainability, and to analyse the effectiveness of these, as well as identify gaps; and secondly, to map policy statements and programme practice related to climate change.
- Based on this, the DEC will produce a statement on its approach and practice related to the environmental footprint of DEC-funded activities.
- The environment will be considered as a cross-cutting theme in any evaluation of DEC-funded activities.

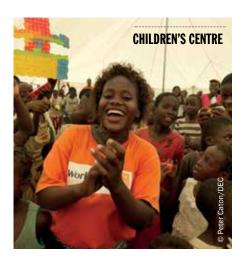
KEY CHALLENGES

Access

Unsurprisingly, following a cyclone of such ferocity, access to affected areas was difficult. Flooding had washed away roads and bridges, and DEC member charities sometimes resorted to using boats or helicopters to deliver supplies, though this was difficult with bulky items such as metal sheeting for shelters. As well as delaying the start of some activities, this meant that assistance wasn't always evenly spread over affected areas. For example, though several DEC member charities intervened in Buzi district in Mozambigue, which was heavily flooded, most of the response was concentrated on just one side of the river. Access to communities on the other side was extremely difficult in the first few months as there was no bridge, and the barge that had ferried vehicles across the river had been damaged by the cyclone.

Operating restrictions

Government restrictions sometimes impeded the work of DEC member charities. In Mozambique, the government has consistently opposed using cash grants as part of an emergency response. This meant DEC member charities had to supply goods instead, such as food, shelter materials and kitchen equipment, rather than enabling people to choose for themselves what they needed.



This only changed towards the end of the first phase of DEC-funded interventions. In Zimbabwe, the government initially banned the construction of temporary shelters, and though the ban was eventually lifted, it caused a three-month delay.

Obtaining supplies

Widespread flooding and damage to infrastructure such as ports, bridges and roads led to shortages of key supplies such as fuel and food. Local traders were often unable to cope with the high demand for certain items after the cyclone, such as water purification tablets and shelter materials. In Zimbabwe, the unpredictable and ever-changing economy, new currency rules and inflation saw suppliers increase their prices by up to 200%. Some DEC member charities were forced to procure goods from outside the project area, or even outside the country, though this delayed project implementation. In Mozambique, where there was a lack of high-quality seeds, quality control requirements on imports significantly delayed things.

Some DEC member charities overcame supply challenges by adapting their response, in consultation with affected families. One changed to zinc sheeting and timbers when their plastic sheet procurement was delayed, as communities informed them that this was their preference.

Elections

National elections took place in Malawi in May and in Mozambique in October, disrupting project activities in the preceding months. This particularly affected work in schools in Mozambique, as teachers are among the few literate residents in some areas and many were called on to help with the electoral process. In Malawi, post-election violence linked to political demonstrations meant security protocols had to be tightened and travel restrictions were imposed on some staff, hampering the delivery of aid.



Recruitment

Recruiting local staff with appropriate technical capacity, humanitarian experience and appropriate language skills was cited as a challenge in Malawi and Mozambique by DEC member charities.

In Mozambique, a DEC-funded health and nutrition programme struggled to identify suitably qualified nurses, midwives and doctors. In Malawi, a lack of livelihood specialists, logistics officers and experienced caregivers for child-friendly spaces undermined timely delivery of some project activities. It also proved difficult to find enough local skilled workmanship to construct sanitation facilities and water points.

Pests

An invasion of fall armyworms devastated crops that had been planted with seeds supplied by DEC member charities. Some DEC member charities switched to seeds that are resistant to this pest, such as rice and maize. They also provided training on organic and biological methods of pest control.

Cyclone Kenneth

Though this cyclone did not strike in the same places as Idai, it affected the response to Idai as some staff and resources were pulled away to address needs in the areas where Cyclone Kenneth landed.

THE TASK AHEAD

Needs remain high. The UN Economic Commission for Africa estimated in October 2019 that over \$4 billion is needed to help Mozambigue, Malawi and Zimbabwe recover from Cyclone Idai and the effects of drought. A Humanitarian Response Plan for Zimbabwe - developed by the UN and humanitarian organisations to respond to the assessed needs of affected communities - is now 95% funded. However, only 38% of funds have been received against the Humanitarian Response Plan for Mozambique. In Malawi, 3.3 million people are still in need of emergency food assistance, while in Mozambique, more than 1.6 million people are going hungry every day. This figure is expected to rise to two million during the lean season (October 2019 to March 2020). Around 77,800 people are still in temporary, sometimes makeshift accommodation in Mozambique.

The aid effort is fully underway and DEC member charities are working closely with national partners to support government-led relief work. The DEC is currently providing the eighth largest funding stream for the Humanitarian Response Plan for Mozambique, and the sixth largest for Zimbabwe.

During the second phase of the DEC-funded response (October 2019 to March 2021), DEC member charities will continue to support people whose livelihoods were destroyed, providing seeds and tools to replant farmland, training to acquire new skills, and cash grants to rebuild or start new businesses. They will also prioritise delivering clean water and building toilets and handwashing facilities, alongside providing safe spaces for women and girls, rehabilitating schools to allow children to return to school, and providing support with mental health issues. Disaster risk reduction and preparedness will also be a focus. Planned interventions include providing training in disease surveillance to strengthen government early warning systems; promoting conservation and climate-smart agriculture; training village child protection committees on evacuation and first aid; providing early warning systems equipment; and supporting afforestation initiatives. Some DEC member charities are also looking at how to connect families affected by the cyclone with their preexisting, longer-term programmes in Malawi. This includes supporting farmers to become more resilient to climate-related incidents through crop diversification, irrigation, livestock production and market access.

A final report on the use of funds from the DEC Cyclone Idai Appeal will be released in August 2021.

HOW THE DEC WORKS

The DEC brings together some of the UK's leading charities to raise funds at times of significant humanitarian need overseas. It allocates appeal funds to its members and ensures that the generous donations of the UK public are spent where the need is greatest. This means providing immediate emergency aid for communities devastated by humanitarian crises as well as providing long-term support to help these communities rebuild their lives and strengthen their resilience. Donating through the DEC is simple and effective. It removes unnecessary competition for funding between aid charities, reduces administration costs and improves coordination, collaboration and efficiency.





DISASTERS EMERGENCY COMMITTEE

1–6 Tavistock Square London WC1H 9NA

Tel: 020 7387 0200 www.dec.org.uk

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