

# Inter-agency real-time evaluation of the response to the February 2007 floods and cyclone in Mozambique



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DRAFT FINAL VERSION TO BE PRESENTED FOR ENDORSEMENT OF THE  
RECOMMENDATIONS AT THE IASC WORKING GROUP MEETING 12-15 JUNE.

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The opinions expressed in this report are those of the evaluators only and do  
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The team was supported by Ana Palao, a researcher based in New York.

### Cover Photo

The cover photo shows a representation of the 2007 floods being sold in the Maputo craft markets. This reflects the television images showing flooding in the city of Quelimane in late January. Most of those displaced by the 2007 floods were poor farmers with simple mud huts and few personal possessions.

# Executive Summary

## *Introduction*

This report summarises the real time evaluation (RTE) of the response to the Zambezi river floods and Cyclone Favio in February 2007. The RTE was commissioned by a group of IASC agencies and it formed a pilot real time evaluation for a broader programme of such evaluations. A team of five carried out the RTE in April 2007.

After a general introduction and a description of the context, this report presents the findings, conclusions and recommendations on:

- The use of the cluster approach in Mozambique
- Emergency funding mechanisms including the CERF and flash appeal
- Connectedness of the response with the longer term context
- The extent to which the needs of the effected population were met
- Support for local institutions

## *Conclusions*

The relief response to the 2007 floods and cyclone in Mozambique was a success. While the operation was not perfect, there was no widespread suffering nor were there avoidable deaths. There reasons for this success included:

- Effective preparedness and coordination by the government.
- The impact of humanitarian reforms such as the cluster approach and the CERF.

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The floods and cyclone in Mozambique were a relatively small emergency. This not only simplified the response but highlighted some general lessons about emergency response that a larger emergency might obscure.

The introduction of the cluster approach was uneven, but it did add to the quality of the response. Interviewees who had experienced both the 2001 and 2007 floods, or the 2000 and 2007 cyclone responses, commented that coordination among the international humanitarian community was far better in the 2007 response.

The early deployment of an OCHA staff member from the Humanitarian Reform Support Unit helped to get the cluster system and the CERF application up and off the ground quickly. However, OCHA did not deploy a large enough team to properly support the roll out of the cluster system in Mozambique.

Cluster coordination is different from normal sectoral coordination. In normal sectoral coordination, agencies coordinate over the areas where their agencies' work overlaps, while each keeping their individual agency objectives. With clusters, the focus is not just on removing gaps and preventing duplication, but on jointly moving towards commonly agreed cluster objectives.

The cluster lead role therefore demands both participatory leadership and a broad presence in the field. Some clusters achieved this and others did not. NGOs and the Red Cross movement are responsible for most humanitarian response. The participation of NGOs and of components of the Red Cross movement in clusters is voluntary. At the start of the response NGO participation was threatened by:

- Press releases and situation reports that minimised their role.
- Directive rather than participative management by cluster leads.

- A lack of transparency in dealing with applications for CERF funding.

While these issues improved over time, they were critical issues, as the cluster approach can only work if there is full participation by NGOs and components of the Red Cross movement. One specific issue for IFRC was that the procedure for activation set out in the guidelines was not followed.

Cluster leadership demands investment by the leads. They need to have suitable staff to lead clusters; the capacity to provide support for cluster coordination at field level; and the staff to promote information flow within the cluster. Not all cluster leads had a presence in the field limiting their ability to capture information from the field level or to support coordinated action. It was notable that the clusters regarded as the most successful had seen a large investment by the cluster leads.

Cluster leadership places many responsibilities on agencies. Sharing these responsibilities throughout the cluster could lead to more attention being paid to some of the lead's responsibilities that are getting less attention, such as quality control. Delegating specific cluster lead responsibilities to specific cluster members could lead to higher levels of participation, and a more even participation.

Overall, the cluster approach was a success in Mozambique. It encouraged a cooperative ethos between agencies that led to a better quality and more effective response. The cluster approach is not a magic bullet, it takes investment by the cluster leads and commitment from the cluster members to make it work.

The CERF helped to ensure a rapid response, and a larger programme of assistance than would otherwise have been possible. The poor support for both the IFRC appeal and the Flash Appeal suggests that without the CERF, relief funds would have been significantly less, especially in the first month of the response. However, agencies need to be better prepared so that they can prepare their CERF request faster.

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Because of the time pressure, the CERF secretariat cannot vet applications for funding except in the most rudimentary way. Some clusters thoroughly discussed CERF applications before submitting them, others did not. Some of the activities funded seem much more appropriate than others and some control is needed to ensure that applications for CERF funds are of a higher quality than Consolidated Appeals have been in the past

Growing local capacity is a key disaster preparedness measure. The strong performance of the Mozambican Red Cross in the response showed this. For capacity to grow, it needs nurturing with access to funds. The CERF needs a mechanism to nurture such capacity during an emergency response.

In this emergency, it was very clear that there was a payback from preparedness, both in terms of community disaster preparedness, general agency preparedness, and specific preparedness for the floods. The level of contingency planning varied between agencies in Mozambique. It was led by the National Institute for Disaster Management (INGC)

There is severe flooding on the Zambezi every five to ten years. This poses a risk of death and demands immediate action from outside the flooded area to prevent widespread distress and suffering. People have their traditional coping mechanisms for dealing with floods, but such coping mechanisms are not free. The government has over the years, made several attempts to resettle the population on higher ground, but the lowlands have the most fertile land. Resettlement needs to be based on an assessment of both the benefits and risks of settlement in flood prone areas.

Poverty, rather than disasters, is the real issue in the lower Zambezi Valley and in rural Inhambane. Many of the real needs of the affected population reflected structural poverty rather than the impact of the disaster. However, disasters and their related coping mechanisms contribute to this poverty, and this poverty in turn

makes people more vulnerable to disaster. The HIV/AIDS epidemic threatens poverty reduction efforts in the disaster-affected areas, and this has to be a high priority for any continuing assistance.

Registration is a common problem in humanitarian emergencies and it was particularly difficult in this response. The initial registration was not thorough, but it was made before people were attracted to centres by the possibility of aid. This initial survey was probably the most reasonable basis for planning overall levels of assistance but this did mean that some affected populations got less assistance than they should have.

The team concluded that the real needs for emergency relief were largely met for both the flood and cyclone-affected populations. However, the critical needs for the population now are not relief needs, but recovery needs, specifically the restoration for livelihoods for the flood affected, and shelter for both groups.

Some aspects of the response in Mozambique represented the ideal of what a response in a developing country should be. In particular, and despite some constraints, INGC behaved as the very model of an ideal National Disaster Management Institute. This strong national coordination also helped with coordination of the international humanitarian response. Strong national coordination and good international coordination supported each other.

### *Recommendations*

Three types of recommendations are presented in this report: recommendations for the IASC; for the HCT; and other recommendations, most of which are for OCHA.

<b><i>IASC Recommendations</i></b>	<b><i>Page</i></b>
<i>The IASC should develop further guidance on the scale of emergency at which use of the cluster approach is appropriate for particular sectors.</i>	34
<i>The IASC should develop a checklist for the country team to use when considering which agencies should lead clusters.</i>	34
<i>The IASC should consider introducing a requirement that staff delegated as cluster leads hold delegated budgetary authority within their agencies.</i>	34
<i>The IASC should consider making the issuing of a concept of operations a standard procedure for all service provision clusters.</i>	35
<i>The IASC should consider changing cluster ToRs to make it explicit that field presence is a requirement for all cluster leads.</i>	35
<i>The IASC should amend the generic terms of reference for clusters to promote the delegation of some of the cluster lead responsibilities to other cluster members. Such delegation could include lead responsibility for specific geographical areas.</i>	35
<i>The IASC should discuss measures that could be taken to discourage agencies from making commitments that they cannot keep.</i>	35
<i>The IASC needs to agree benchmarks for each cluster. These should draw on existing benchmarks within the humanitarian sector rather than trying to formulate new ones.</i>	35
<i>The IASC should consider establishing response standards for focal point agencies who have responsibility for key cross cutting issues.</i>	36
<i>The IASC should consider introducing a deputy-lead in all clusters to improve participation by agencies from the deputy-lead's sector.</i>	36

<b><i>IASC Recommendations</i></b>	<b><i>Page</i></b>
<i>The IASC should develop clearer guidelines for access to CERF funding by cluster members.</i>	40
<i>The IASC should consider introducing a special allowance for lead agencies that don't have large reserves - or restrict leads to those with significant un-earmarked funds.</i>	40
<i>The IASC should introduce the requirement for automatic independent external ex-post evaluation of the use of CERF funds to encourage discipline in their use.</i>	40
<i>The IASC should consider establishing in each CERF funded response the possibility of having an umbrella fund for NGO response to be managed by the HCT.</i>	40

<b><i>HCT Recommendations</i></b>	<b><i>Page</i></b>
<i>Increase support for community and district DRR in the ongoing development programmes.</i>	46
<i>Specialist agencies should prepare viable contingency plans for the most common emergencies in Mozambique.</i>	46
<i>All clusters should play a full role in the annual simulation by INGC</i>	46
<i>The HCT should continue with the concept of the continuing IASC at country level. The current DMT should be folded into this.</i>	46
<i>The HCT should support targeted resettlement based on a risk benefit analysis for individual communities.</i>	46
<i>The HCT members should support INGC to develop the capacity to conduct verifiable registrations together with the local authorities.</i>	50
<i>The broad focus of the post-disaster phase should be on poverty reduction (and on the control of HIV/AIDS), rather than just on resettlement for some of those at risk.</i>	50
<i>The HCT and the government should agree, at the start of the response, what the minimum package of assistance is likely to be and what the qualifying conditions are, and then publish this widely, including making this information available to beneficiaries.</i>	50
<i>Members of the HCT should continue and deepen their support to INGC</i>	53
<i>HCT members should include national civil society actors in their own emergency planning, so that their capacity is developed, and they are included in funding requests.</i>	53

<b><i>Other Recommendations</i></b>	<b><i>Page</i></b>
<i>OCHA should quickly deploy teams to support cluster roll-out in other emergencies, and support this with sufficient staff in country for information management and a field presence to support inter-cluster coordination.</i>	34
<i>OCHA should develop a more formal country-based dispute resolution mechanism for intra-cluster disputes. Such a mechanism should probably be based around arbitration with a mutually agreed arbitrator.</i>	34

<b><i>Other Recommendations</i></b>	<b><i>Page</i></b>
<i>OCHA should establish a web framework that can be used for cluster coordination in future emergencies, and provide ion-country support for clusters to use it.</i>	35
<i>OCHA needs to provide training for agency information officers on how to operate in a clustered environment.</i>	35
<i>NGOs need to provide information about their operations in a format that makes it easy to include them in situation reports.</i>	35
<i>OCHA should broaden its roster to include people who can stay in place for at least six weeks and who have appropriate language skills.</i>	35
<i>OCHA needs to increase training for potential cluster and sector leads to reach all countries at risk of disasters.</i>	35
<i>The CERF mechanism needs a clear and simple system for reprogramming grants in the event of changed circumstances.</i>	41
<i>OCHA should provide strong support for the Resident or Humanitarian Coordinator for inter-cluster coordination at national level during emergency responses.</i>	46
<i>Donors, the UN, the NGOs, and the Red Cross should support the development of strong national coordination in other countries.</i>	53





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## Acronyms, Initialisms and Abbreviations

Term	Meaning
BCPR	Bureau for Crisis Prevention and Recovery (a UNDP office)
CERF	Central Emergency Response Fund
DFID	Department for International Development (the UK's ODA administration)
DMT	Disaster Management Team
HCT	Humanitarian Country Team
IASC	Inter-Agency Standing Committee
IFRC	International Federation of the Red Cross and Red Crescent Societies
INEE	Inter-agency Network on Emergency Education
INGC	Instituto Nacional de Gestão de Calamidades - National Disaster Management Institute
IOM	International Organisation for Migration
ITU	International Telecommunications Union
NGO	Non Governmental Organisation
OCHA	Office for the Coordination of Humanitarian Affairs
ODA	Official Development Assistance
OFDA	Office for Foreign Disaster Assistance, a branch of USAID
SP	Samaritan's Purse
SRSA	Swedish Rescue Services Agency
TWG	Technical Working Group
UN	United Nations
UNDP	United Nations Development Programme
Unicef	United Nations Children's Fund
USAID	United States Agency for International Development
WASH	Water, Sanitation, and Hygiene
WFP	World Food Programme
WHO	World Health Organisation
WVI	World Vision International



# Map



Map No. 3706 Rev. 5 UNITED NATIONS  
June 2004

Department of Peacekeeping Operations  
Cartographic Section





# 1 Introduction

This evaluation has been commissioned by a grouping of members of the Inter Agency Standing Committee. Appendix 1 presents the Terms of Reference. The evaluation was intended to have a primary focus on lesson learning rather than on accountability and the terms of reference sets out two objectives:

- in the context of humanitarian reform, assess the overall appropriateness, coherence, timeliness and effectiveness of the response,
- provide real-time feedback to support senior management decision-making and to facilitate planning and implementation.

The evaluation was managed by OCHA's evaluation office in New York on behalf of a steering committee of the interagency steering committee. This evaluation is an initial pilot for a planned series of real-time evaluations over the coming two years. Its cost was approximately \$90,000.

Following this chapter and a brief introduction to the context, the evaluation results are presented in five chapters:

- The cluster approach
- Emergency funding mechanisms
- Connectedness
- How well the needs of the affected population were met
- Support for local institutions

These are supported by a series of appendices including: the Terms of Reference; a brief chronology; a list of persons met; the consultant's itinerary; additional comments on the WASH cluster; details of possible benchmarks for the clusters; comments on the evaluation process; and a bibliography.

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## 1.1 Acknowledgements

The team would like to thank all of 580 or so people who answered their questions, either in groups or in individual interviews. Special thanks are due to the OCHA Team Leader, Birte Hald who briefed us on arrival and set up the initial meetings. Thanks also to David Lubari of OCHA and to Barbara van Logchem for organising the logistics for our visits. Special thanks are also due to the UN agencies that facilitated our many field visits- WFP and Unicef.

We would also like to thank all of those who commented on the draft report (over 300 comments were received from over 30 individuals or teams).

## 1.2 Constraints

The main constraints faced by the team were those faced by any real time evaluation:

- the conflict between being early enough to capture useful data and being so early that no-one has any time for the team;
- the limited depth of analysis implicit in the requirement to deliver a report at the end of the fieldwork; and
- the imbalance implicit in looking closely at one time period – the concerns of the moment are perhaps given greater weight than concerns earlier or later in the response.

A further constraint was the delay in the recruitment of the second nationally-recruited consultant - this meant that the male team leader had to conduct some beneficiary interviews without a female partner to interview women.

The emergency operation was winding down as the evaluation team arrived. Several of the deployments for surge had already left before the team arrived including IFRC, DFIC, UNDP BCPR, and WHO. The evaluation team's feedback for senior management is more for future possible emergencies than for this one.

The team undertook the initial field work before conducting key interviews in Maputo. While this was perhaps essential to capture data from an emergency operation that was winding down, it did mean that some issues were identified too late to investigate them fully in the field.

The team of five did the evaluation from 2 April to 23 April, supported by a researcher in New York. Appendix 3 presents the team itinerary. The initial draft report was circulated on 24 April, and the evaluation was presented to IASC members in Geneva on May 1<sup>st</sup> and 2<sup>nd</sup> and in New York on May 3<sup>rd</sup>. The evaluation is based on the response in Mozambique, and therefore does not necessarily reflect discussions at the global level on the humanitarian reform process.

### *1.3 Research*

The team collected a set of over 700 documents relating to the floods and cyclone response. These were indexed and distributed to the team complete with a search engine to access the data. In addition, the researcher in New York prepared a basic chronology to which the team later added, and a summary of the lessons learned from previous evaluations.

### *1.4 Survey of beneficiary views*

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The terms of reference specified that the team should conduct a questionnaire survey. The team began developing a questionnaire for this. However it soon became clear that this would not be an appropriate data collection method for beneficiary views. The time available did not allow the proper testing of a questionnaire or the recruitment and training of assistants to allow a sufficiently large data-set to provide statistically valid results.

Instead, the team opted to use focus group meetings with beneficiaries to ask them about their experience of the floods and cyclone and their views on the response. The team met with over 400 beneficiaries at 16 different sites (with multiple meetings on some sites) to ask them about their views. The team visited both flood affected and cyclone affected areas.

These meetings were held using a prepared script covering what happened during the emergency, what assessments were made, what assistance they got, and their view of the future.

The team normally did field interviews with both a female and male interviewee. This arrangement allows the interview team to split to interview women and men separately.

The depth of the field-work with beneficiaries have provided the team with a good understanding of the pre-disaster situation of the beneficiaries and of how they were affected by the disasters and response. This depth was essential as we found that beneficiaries were sometimes less than truthful about their situation prior to the floods, or about their intentions. However, the information that beneficiaries gave about the assistance that they had received was generally well correlated with the records of aid agencies.

## 1.5 Interviews

Semi-structured interviews using a prepared question list were the principle technique with key informants. The team interviewed 35 people individually and another 60 people in small groups. Appendix 4 presents details of persons met.

## 1.6 Observation

During the site visits the team noted the conditions of the shelters, the condition of water points and latrines, and the presence of school tents and other infrastructure. Where the displaced had been given plots, the team looked carefully to see whether people had just moved their shelters onto the plots, or had also begun building hen-houses and granaries<sup>1</sup>. The team visited over 20 accommodation centres in the flood-affected zone.

## 1.7 Triangulation

The evaluation team triangulated the information received by comparing:

- what different interviewees said;
- documents against interviews;
- research against interviews;
- prior knowledge of the affected areas against interviews;
- observation against interviews.

Triangulation allowed the team to determine how much weight to put on different sources of information. It also helped the team to deepen some of the questioning to get a more accurate picture. Triangulation was particularly critical in this evaluation, especially when dealing with beneficiary statements in the Zambezi valley.

Triangulation was also used to determine how comments on the draft report should be treated. Comments were checked against interview notes and records prior to deciding the extent to which the comments should be incorporated into the text.

## 1.8 Presentation of draft report and comments

The draft report was presented in Geneva to IASC members (May 1<sup>st</sup>) and the weekly ISAC meeting (May 2<sup>nd</sup>) and New York (May 3<sup>rd</sup>) to IASC members, Unicef, and OCHA.

Comments on the report were made at these presentations, and 30 sets of written comments totalling 368 points were received. Some of these comments were particularly helpful to the team leader in completing this report.

<b>Source of comments on first draft report</b>	<b>No</b>
HRSU Two	63
UNICEF Maputo	55
DFID	33
OCHA NY	29
HRSU One	25
EU Delegation	21
WFP Set Two	21
WFP Maputo	17
ICRC	13
ED and Prot Cluster	12
FAO comments	8
World Vision	7
RC Mozambique	7
Logs Cluster Lead	7
Care International	6
WHO comments	5
ETC Cluster	5
WFP Set One	5
Wash cluster	5
IOM Maputo	4
ETC Two	4
UNAIDS	3
UNDP Mozambique	2
UNFPA	2
Nutrition Cluster	2
Unicef Protection	2
Unicef Policy	2
NGO Team Member	1
UNDP DRR	1
Unicef Nutrition	1
<b>Total</b>	<b>368</b>

<sup>1</sup> Together with housing, hen houses and granaries reflects significant investments in non-portable assets by the displaced population and so are a good indication of real intentions. Relatively little work was being done on housing as it was clear the people did not want to prejudice the possibility of getting shelter housing assistance by building something better than a basic shelter.



## 2 Context

### 2.1 History



Figure 1: The railway for which this 3.6km long bridge over the Zambezi was built was destroyed during the civil war and is only now being repaired. (Photo credit: Polastro).

Mozambican independence in 1975 followed a ten-year guerrilla war of liberation. Frelimo (the Front for the Liberation of Mozambique) took over the running of the country. Independence led to the flight of many of the Portuguese who had managed the economy. This created many problems for the new state, as due to the policies of the colonial government there had never been a large cadre of educated and trained Mozambicans. The new leaders of Mozambique opted to have a one-party state and later adopted Marxist-Leninist doctrine.

The new Mozambican state supported the liberation movements fighting in neighbouring Rhodesia and South Africa. As a counter to this support, the Rhodesians created Renamo in 1976 to destabilise Mozambique. Following the Lancaster House agreement that led to the creation of Zimbabwe, the South Africans took over support of Renamo. They intensified the campaign of violence in Mozambique. Renamo plunged the country into a highly destructive civil war, drawing not only on their foreign backers but also, on popular dissatisfaction with Frelimo policies in some areas.

Renamo support among the population was strongest in the centre and north of the country, including the areas most affected by the flooding along the lower Zambezi. During the civil war, Renamo targeted symbols of government rule such as schools and clinics and destroyed a great deal of infrastructure in the rural areas, some of which is only now being replaced. Road travel was unsafe in much of the country. UNDP classified Mozambique as the poorest country in the world by the late 80's. In 1992, a General Peace Agreement was signed between Renamo and the Government. By then, one third of the entire population was displaced, with one and a half million taking refuge in neighbouring countries.

Since the peace agreement, Mozambique has held presidential and parliamentary elections three times (in 1994, 1999, and 2004). In every case Frelimo has had a comfortable majority of the poll, with about one third of the vote going to Renamo.

Donor support for Mozambique has shown a broad upward trend since independence, rising sharply in the mid to late 80's when the government, under President Chissano, began to introduce economic and political reforms, eventually dropping the single party constitution in 1990.

The Mozambican economy has grown by about 8% per year since the mid 90's. Even so, Mozambique is still one of the poorest countries in the world. It is ranked 168th (tenth from the bottom) on the Human Development Index, with 54% of the population living below the poverty line. Just more than half the population live beyond 40 years of age.

Mozambique is very dependant on Donor assistance, with donor assistance in 2004 and 2005 equivalent to 20% of the gross domestic product. Much of the donor assistance to Mozambique is in the form of direct budget support, paid directly into the government's coffers, rather than as support for specific projects.

HIV/AIDS is a growing problem, responsible for an estimated 140,000 deaths in Mozambique in 2005. It is already though to have reduced life expectancy at birth by 10 years.

#### Donor Support for Mozambique

Source: Table 2, OECD/DAC

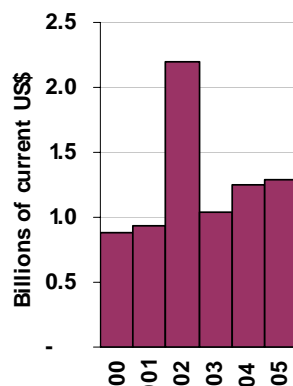


Figure 2: Donor support

## 2.2 Government disaster management structures

Mozambique is subject to frequent natural disasters including Indian Ocean cyclones and flooding. The government established a national institute for disaster management in 2000 (INGC - Instituto Nacional de Gestão de Calamidades).

The INGC took over from an earlier logistics based structure that had delivered food and non-food assistance to those displaced by the war, as well as the much smaller number affected by other disasters. In 2006, a new head was appointed to lead INGC, Mr Paulo Zucula, and he emphasised the coordination role of the agency over its former operational one. During emergencies the INGC has a direct reporting line to the Prime-Minister.

The INGC built a number of regional centres for managing emergency operations. The operational response to emergencies is managed by the National Emergency Operations Centre (CENOE - Centro Nacional Operativo de Emergência). This is a component of the INGC. CENOE has several centres around the country which serve as the operations rooms for emergency response.

The centre for the central region is in Caia. Another is located in Vilanculos for the South, and a third is planned for Angoche in the North. In an emergency, personnel drawn from the national level of INGC and from the governments of the affected provinces staff the CENOE.

## 2.3 Recent disasters

The largest natural disaster in Mozambique in recent times was cyclone Eline. In 2000 this cyclone deluged southern Mozambique and the neighbouring countries with millions of tons of water and led to widespread flooding with 700 deaths. The World Bank estimated that losses, damage, and reconstruction costs from Eline were equivalent to 20% of the Mozambican gross national product. This disaster attracted a great deal of international attention and large amounts of aid.

The lower Zambezi was little affected by cyclone Eline, but it had its own flooding the following year. The flooding in 2001 killed 81 and displaced over 155,000 people. Agencies which had mobilised to respond to the 2000 cyclone were able to respond quickly to the floods, and the response was regarded as being well coordinated at the time.

### 2.3.1 FLOODING ON THE ZAMBEZI

The Zambezi is the fourth largest river basin in Africa and drains water from parts of Tanzania, Malawi, Zambia, Angola, Namibia, Botswana, and Zimbabwe, as well as Mozambique. The annual average river flow is about 3,400m<sup>3</sup>/s, with an average annual flood peak of about 7,000m<sup>3</sup>/s before the Kariba dam was built. Dry season flows were as low as 700m<sup>3</sup>/s.

Flooding on the Zambezi has a long history, with major floods every five to ten years. Before the construction of the Kariba Dam in 1959, there was an annual flood in February or March. The new dam halted these annual floods. The lack of annual flooding encouraged encroachment on the lowlands in the lower Zambezi.

One interviewee noted that people live on the flood prone lands because they are fertile - it is the regular flooding that makes them fertile. Thus floods, while threatening lives, also ensure livelihoods. Even though the silt load of the upper Zambezi is trapped in the Kariba or Cahora Bassa reservoirs, the lower Zambezi still benefits from the silt load of tributaries below the Cahora Bassa dam.

The impact of flooding on the population of the river low-lands depends on three factors.

1. The height of the flood, which determines how much land the floods cover.

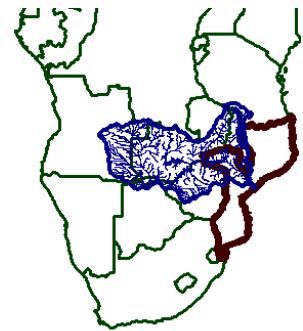


Figure 3: The Zambezi Basin

*... people live on the flood prone lands because they are fertile – it is the regular flooding that makes them fertile...*

<i>Year</i>	<i>Max river height at Marromeu</i>
1939	8.01
1940	7.91
1944	7.97
1948	7.85
1952	8.00
1955	7.77
1958	7.97
1963	7.85
1978	7.92
2001	7.69
2007	7.05

*Note: Height in m above mean sea level (low water level is about 1m, and the flood alert level is 4.75m.*

2. The duration that the river stays at a particular flood level - weeks or months in the worst cases. This also influences how much land the floods cover.
3. The speed of rise of the water.

This last factor is critical in that a fast rise in water levels can lead to people becoming trapped or drowning. Interviewees who had fled flooding from the Shire river, which drains lake Malawi into the Zambezi, complained that the Shire had risen very quickly this year, making these floods worse than in previous years. Rapidly rising water also means that river rice crops are lost as the water rises faster than the rice can grow.

Generally, interviewees in the flooded areas reported that the 2001 floods were worse than the 2007 floods on all the above aspects. The available documentary evidence supports this. This should not be seen as detracting from the achievements of the INGC, which are formidable in any case.

### 2.3.2 WHY THE DAMS DISCHARGE WATER

While the completion of the Cahora Bassa dam in 1974 further controlled flooding, neither it nor Kariba can prevent the very large floods that occur on the river every five to ten years. Neither dam has the spillway capacity for the design flood, so they always need to maintain some space in the reservoir for some of the water from such a flood. The amount of space needed varies throughout the year based on the calculated design flood for any given month.

This means that the dam operators have to spill water from the dams even though this may lead to flooding downstream. In 2001 for instance, Kariba was full for the first time in 20 years and the operators there had to spill at the maximum rate. This in turn meant that the Cahora Bassa operators had to spill at a high rate from their dam. In 2001, the dam operators did not have a staged discharge, but went immediately from a low rate. This caused a very fast rise in water levels downstream.

In 2007, dam operators had to spill water from the dam due to flooding on the Luangwa river that joins the Zambezi just before Cahora Bassa. However, the discharges from the dam were controlled with a phased rise over several days. This slower rise allowed people to evacuate from the threatened area.



Figure 4: Favio after landfall - NASA

### 2.3.3 THE CYCLONE

Tropical cyclones are a recurring hazard in Mozambique. Cyclones that hit Madagascar may gain momentum as they cross the Mozambique channel. Tropical cyclones present a totally different impact pattern from the flooding on the Zambezi. Cyclones pose a risk with their high winds, which damage buildings and can kill people with flying debris. Cyclones can also bring very large amounts of rain, causing widespread flooding as did cyclone Eline in 2000.

Tropical Cyclone Favio did most of its damage through high winds. Favio made landfall at Vilanculos and winds speeds of over 200km/h. The high winds damaged many buildings removing roofs and leaving the contents open to damage by the accompanying rain.

The damage from Favio's high winds was concentrated along the track of the cyclone. The rain associated with the cyclone also caused flooding in parts of Southern Mozambique.

## 2.4 Humanitarian reforms

The UN's 2005 Humanitarian Response Review identified problems in Humanitarian Response including: longstanding gaps; erratic coordination; insufficient accountability and inconsistent donor policies.

Two key pillars of the reforms introduced to meet these problems were enhancing the central emergency revolving fund to become the Central Emergency Response Fund (CERF) and the introduction of the Cluster Approach.

The objectives of the cluster approach at the country level are to:

1. strengthen humanitarian response by demanding high standards of
  - a. predictability;
  - b. Accountability; and
  - c. partnership in all sectors or areas of activity.
2. achieving more strategic responses and better prioritization of available resources by:
  - a. clarifying the division of labour among organizations;
  - b. better defining the roles and responsibilities of humanitarian organizations within the sectors; and
  - c. providing the Humanitarian Coordinator with both a first point of call and a provider of last resort in all the key sectors or areas of activity.<sup>2</sup>

Cluster leads do not necessarily lead the overall humanitarian response within their sector. In countries with functioning governments cluster leads are responsible for promoting close cooperation among international humanitarian actors and appropriate linkages with the Government both at national and local level.

The CERF has two funding windows, one for under-funded or 'forgotten' emergencies and the other for rapid response. The CERF is intended to be \$500mn in size and pledges and contributions for 2007 already stand at \$344mn (April 20<sup>th</sup> 2007).

### The 13 responsibilities of the Cluster Lead

Inclusion of key humanitarian partners.

Establishment and maintenance of appropriate humanitarian coordination mechanisms.

Coordination with national/local authorities, State institutions, local civil society and other relevant actors.

Participatory and community-based approaches.

Attention to priority cross-cutting issues (e.g. age, diversity, environment, gender, HIV/AIDS and human rights).

Needs assessment and analysis.

Emergency preparedness.

Planning and strategy development.

Application of standards.

Monitoring and reporting.

Advocacy and resource mobilization.

Training and capacity building.

Provision of assistance or services as a last resort (Inter-Agency Standing Committee (IASC), 2006, p. 7).

<sup>2</sup> (Inter-Agency Standing Committee (IASC), 2006, p. 2). The same sources notes that: "The success of the cluster approach will be judged in terms of the impact it has on improving the humanitarian response to those affected by crises."



## 3 The Cluster Approach in Mozambique

*The UN Country Team in Mozambique, at their retreat on February 8th decided to recommend the adoption of the Cluster Approach to the wider humanitarian community for the response to the floods on the Zambezi.*

### 3.1 The background

Cluster	Lead Agency in Mozambique
Nutrition	Unicef
Water, Sanitation and Hygiene	Unicef
Health	WHO
Shelter	IFRC
Camp coordination	IOM
Protection	Save the Children/Unicef
Early recovery	UNDP
Education	Save the Children/Unicef
Food Security	WFP/FAO
Logistics	WFP
Telecoms	WFP

Note: UN Habitat took the lead in Shelter from IFRC on 13<sup>th</sup> March. Camp coordination merged with Shelter on 21<sup>st</sup> March. The camp coordination cluster was not formally launched as such by the Resident Coordinator, as the Government said it was not necessary, but it was formed as a working group.

Prior to the introduction of the cluster approach, coordination of the aid community in Mozambique was largely around thematic issues such as HIV/AIDS. There were some emergency related coordination efforts. One of these was WFP's meetings with NGOs in May 2006 to discuss how the common logistics service would work in an emergency. This led to a series of meetings that helped to develop relationships between agencies and knowledge of each others stocks. There had been some general discussion on the cluster approach in the Disaster Management Team's Technical Working Group (DMT TWG) in the second half of 2006, but this was limited.

There were warning signs for some time that the Zambezi would have large floods in 2007. The National Disaster Management Institute (INGC - *Instituto Nacional de Gestão de Calamidades*) acted on these warnings. In addition to the general pre-flood preparedness, it held meetings in Caia for District Administrators on January 24<sup>th</sup> to plan the response. NGOs and the Mozambican Red Cross had also begun to mobilise.

On February 4<sup>th</sup> the Council of Ministers issued a red alert and called for the evacuation of people along the lower Zambezi.

The formal decision to initiate a possible cluster approach in Mozambique was taken on February 8<sup>th</sup> at the UN Country Team retreat. The UN Country Team decided to approach the other humanitarian actors in country to form an *ad hoc* Humanitarian Country Team, make a Central Emergency Response Fund (CERF) application for the expected floods, and adopt the cluster approach. The team asked for assistance from OCHA to set things up. OCHA immediately dispatched Sune Gudnitz from the Humanitarian Reform Support Unit in Geneva.

There had been relatively little discussion about the cluster approach with potential cluster members prior to this. Some agencies in the region had attended a regional workshop on reform in January. The cluster approach, and the possibility of getting CERF funding, were both novelties for many potential cluster members. The lack of prior discussion meant that there were some rearrangements of clusters after the initial assignments of cluster leads.

In Mozambique, the humanitarian community adopted the cluster approach during the emergency response. This added some complexity to what was a complex task in any case.

The cluster approach was adopted for the Zambezi valley floods, but it was not used on the ground for the response to Cyclone Favio. Here, INGC managed field level coordination on the ground using their own four-pillar model. In the INGC model, most humanitarian action fits into the social affairs pillar. However, the HCT response to the cyclone was discussed within the clusters in Maputo.

### 3.2 Coordination

One key to the coordination of the response was the role of the INGC. This national institution is discussed in chapter 7.

Interviewees reported that cluster coordination improved steadily over time. Those with experience of the 2001 floods reported that coordination was better than in

that year. This applied both for coordination with government and within the international community. This is an achievement as, at the time, the response to the 2001 floods was regarded as being relatively well coordinated.

Coordination varied between clusters. Interviewees generally indicated that the Water, Sanitation, and Hygiene (WASH) cluster and the logistics cluster were the best co-ordinated of the clusters.

- These two clusters were the only ones to hold cluster meetings at Caia. Clusters like education or protection had few members at any one location in the field to make holding meetings there very useful.
- Logistics was a service cluster. The other service cluster, emergency telecommunications, did not require the intensive daily coordination that the logistics cluster did.
- Both the logistics and the WASH cluster had the lead role delegated to staff who were already well known to many of the cluster members. One held a leadership role in the sector prior to the emergency and the other had been involved in extensive contingency planning with the cluster members.
- Both clusters produced regular timely updates for members.

The logistics and WASH clusters were probably the clusters with the largest membership in the field, and with which agencies had most contact, so many interviewees were unaware of the work of smaller clusters. This may have biased the results somewhat, however, even interviewees familiar with the work of the small clusters still singled out WASH and Logistics as probably the best coordinated. One interviewee explained that while some of the smaller clusters were well coordinated, coordination for them was much easier than coordination in WASH, with so many actors, or in Logistics, with so many competing demands.

No Humanitarian Coordinator was formally appointed for Mozambique, so the Resident Coordinator effectively took on this role. His willingness to listen, his previous humanitarian agency experience, and diplomatic skills were key to coordinating the response. He liaised with government and helped to resolve issues between the clusters and the government. The Resident Coordinator also liaised with the donors and facilitated OCHA's coordinating role.

The Resident Coordinator also helped to resolve the conflict within the Food Security cluster when NGOs were unhappy with what they perceived as WFP's lack of support for their opposition to communal kitchens. Several NGO interviewees referred to this as having damaged the trust that is essential between cluster members and the lead in a clustered environment.

OCHA responded very quickly to the request from the Resident Coordinator for assistance with setting up a humanitarian country team and cluster structure. After a request on a Thursday, the staff member from the Humanitarian Reform Support Unit was on the ground by the following Saturday. His knowledge of the cluster approach and of the CERF process helped to steer the process forward. However, he was only able to deploy quickly by buying his own ticket as OCHA operates under the administrative rules of the UN secretariat. These make rapid travel difficult if not impossible.

Several agencies interviewed complained that there was too much turnover with three OCHA team leaders in two months. Worse, OCHA did not deploy anyone from the formal surge pool, but only used ad hoc arrangements through the response. The lead position for OCHA was filled by the staff member from the Humanitarian Reform Support Unit, then by a Desk Officer, and finally by a senior staff member from the Danish Red Cross.



Figure 5: Shared working space in Caia

Adding to this, OCHA simply did not have enough staff in country at any one time to fulfil the task of supporting inter-cluster coordination. The lack of field officers outside Maputo in the early stages limited OCHA's coordination role.

While the cluster approach promoted good attention to their central theme, coordination between clusters did not work as well. Coordination between clusters was often better in the field than at Maputo level.

UN agencies shared a common working space in Caia at the UN house (which was also open to others). The INGC's office also served as a common working and meeting space. These common working spaces encouraged inter-cluster coordination for the clusters whose members were present.

### 3.3 Partnership

The larger NGOs had begun mobilising prior to the creation of clusters. This was particularly the case for NGOs with an operational presence in or near the flood affected areas. It does not seem that clusters really played any role in the mobilisation of NGOs. However, the possibility of accessing CERF funds may have increased the number of NGOs responding, especially as many agencies recognised that the relatively small scale and low media interest made other funding less likely.

One NGO interviewee said that the possibility of accessing CERF funds made his organisation more interested in participating in the cluster approach, others said that they would have participated in any case, but that the funding was useful.

The perception among member of the WASH cluster was that the coordination within the cluster was stronger between those who had accessed cluster funding than for those who had not<sup>3</sup>. Certainly coherent funding helps to ensure coherent programming.

The cluster approach demands an approach to partnership, in which cluster members are full partners rather than subsidiary ones. This worked well in some clusters, but less well in others. One issue was the style of chairing of cluster meetings.

NGOs complained that some cluster meetings were not participative. They said that some cluster leads chaired meeting as if they were traditional meetings of funded partners, rather than of full partners. They complained that while some cluster leads were open to discussion about policy issues, others were not. While this improved over time, we note that cluster leads have no specific training for their role, or in the participatory approach needed to maximise the commitment of partners.

Leading clusters demands some of the same skills as for the role of humanitarian coordinator. Such skills are needed not only at the Maputo level, but also at the field level where there are operational clusters. The evaluation team were happy to note that OCHA held the first training for cluster and sector leads in Montreux in March. Two more workshops will take place in 2007. However we also note that cluster leadership skills are not easy to build.

The cluster system brings advantages for NGOs – it gives them a space at the table where strategic decisions are made for the sector as a whole. However, partnership is a two way street, it brings costs, and demands full involvement. Some cluster members were slow to take an active role in the clusters, or to provide information about their activities. Some took a secondary role in the clusters. One UN

<sup>3</sup> Intermon-Oxfam, International Relief and Development, Samaritans Purse, Food for the Hungry International, and Unicef all accessed CERF funds for the WASH cluster. IFRC, Médecins sans Frontières, the Mozambican Red Cross and others worked in the WASH cluster but did not access CERF funds.

interviewee commented that NGOs needed to get out of their comfort zone of criticising and take an active role in the clusters.

A few NGOs made commitments that they did not honour, leading to gaps in service delivery in some areas. It was not clear why this happened, whether it was due to financial or capacity constraints. It may also have been due to an initial overestimation of agency capacity or an underestimation of the logistics difficulties of working in the flood affected area. While failing to meet commitments is common with sectoral coordination, it is more critical with cluster coordination agencies because of the joint nature of the endeavour and the level of trust implicit in an equal partnership.

Partnership was threatened by the initial press releases on the crisis. NGO's complained that these press releases made no reference to NGOs or minimised their role. NGOs raised this issue with the Resident Coordinator and it was resolved.

#### 3.4 Information

By the time the evaluation team arrived, information management was working well. Interviewees were particularly happy with the *'who's doing what where'* lists. Several interviewees suggested that the improved information sharing was one of the biggest gains from the cluster approach. However, information sharing between clusters was slow to start, and there was considerable criticism of OCHA's failure to deploy enough staff at the early stages to take the lead in this area.

For the initial part of the response, the flow of information from Caia to Maputo was patchy, preventing a strategic approach to coordination, and not allowing a strategic oversight of the response. There were significant differences between the clusters, with some taking a long time to get *'who's doing what where'* lists organised.

page 28 A basic problem for information providers was the issue of the number of beneficiaries. The lack of clarity about the numbers in need meant that information on service delivery was in the form of units delivered rather than of the percentage coverage achieved.

The logistics cluster established a web site for minutes of the logistics cluster meetings and other information. While not perfect, this was an example of the type of information sharing and transparency that is essential to make the cluster approach work.

Information flow to communities was quite weak. The evaluation team's extensive consultation with affected communities clearly showed that communities did not know what they could expect to receive or from whom. This is discussed further in the chapter on needs.

Another area of weakness was the difference between what cluster members were doing on the ground and what they were reporting in Maputo. Sometimes reports in Maputo overstated what agencies had achieved on the ground. This was a problem at the start of the operation, not only for the Clusters but also for the INGC. The information flow improved over time, especially after internet access was available in Caia. The presence of cluster leads at the field level also improved the information flow. OCHA's late and limited field presence contributed to the initial information gap.

#### 3.5 Monitoring and quality control

Monitoring was at a basic level. Monitoring reports dealt with the quantity of inputs rather than with the quality of assistance provided or its impact. Cluster lead and member staff were more focused on delivering services to a very disperse population than on monitoring the quality of the services being delivered overall.

The initial monitoring focus was simply on coverage rather than of the quality of service, and cluster reporting reflected this. This improved to a limited extent later on and there was some qualitative monitoring by staff in the field, but this was *ad hoc* rather than systematic.

A further problem for monitoring is that there are no agreed standards or benchmarks for different clusters at the Global level. The joint nature of action with the cluster approach demands a single standard across each cluster.

Of the cluster members, only the United Nations agencies do not formally adhere to the Sphere standards. Some clusters set standards locally, with Unicef using the Sphere standards for WASH. Other clusters like emergency telecommunications or logistics already have well defined technical standards, but less on service delivery.

One positive example of quality control was Unicef's internal review of their emergency response. Such internal reviews provide essential information for agencies to improve their future performance as cluster leads.

### 3.6 Cross-cutting themes

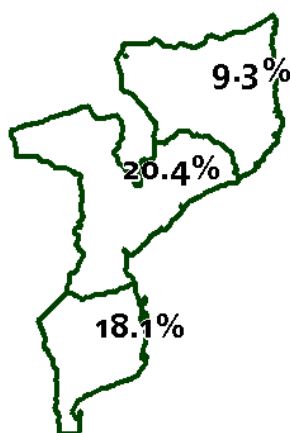


Figure 6: HIV prevalence (2004)

Interviewees widely agreed that cross cutting themes were poorly served at the beginning. This is particularly the case for HIV/Aids, which is more prevalent in the central region than in the northern or southern region. Displacement and congregation at camps often leads to increased risks of HIV transmission. Even so, it was quite late in the response before some clusters paid it much attention. It was March for example before UNAIDS attended its first Nutrition Cluster meetings, and April before UNFPA met with provincial governors and ministries to discuss HIV/AIDS.

The lack of attention to HIV/AIDS was surprising as many of the agencies responding in Mozambique have programmes addressing HIV/AIDS. The issue was discussed early on, and the OHCA Humanitarian Reform Support office drew attention to the Inter-agency Standing Committee (IASC) guidelines on HIV/AIDS in emergencies. However, this did not lead to any effective programming on the increased risks at this stage.

During the evaluation the team saw children using condoms as balloons, a sure indication that condom distribution (late in any case) had not been accompanied by an effective information campaign. Part of the problems with HIV/AIDS was that it took UNAIDS three weeks to dispatch a support person from the regional office to support the integration of HIV and AIDS awareness into the emergency response.

Early recovery is itself a cluster at the global level as well as a cross-cutting theme. While UNDP sent two very competent staff within the first three weeks there was a gap between their departure and the arrival of a dedicated staff member for early recovery in April, nearly two months after the start of the emergency.

The cross cutting area of protection was supported by its own cluster. This cluster was quite active and supported widespread training on protection issues, as well as special initiatives on gender based violence.

Gender was a cross-cutting theme that got some limited attention. Several agencies distributed items specifically for women. The protection cluster supported training for police on dealing with gender based violence and rape, and provide post-rape kits with post-exposure prophylaxis.

Gender is not about women's needs but about the differential needs of women and men, and the differential impact that the disaster has had on them. There appears to have been little analysis of this, and disaggregated statistics were seldom available. For example, there was little attention to the issue that many of the tasks associated with recovering from the flooding are traditional male tasks, including clearing land, and rebuilding houses.

UNFPA should be the focal point for gender, but again they were slow to react and as with UNAIDS their initial support to the clusters took the form of long printed manuals that no-one involved in an emergency response would have the time to read.

Looking at the persons interviewed by the evaluation offers another clue to why gender received little attention. Almost all of the government officials interviewed (88%) and the majority of UN staff (76%) or Red Cross and NGO staff (81%) interviewed were of one gender. Such a gender imbalance does not promote an awareness of the differential needs of women and men.

The plight of the elderly without families was often overlooked, and while there were many initiatives centred on children, no programmes were seen that specifically targeted the elderly and their needs. This is an issue as HIV/AIDS is increasing the number of elderly people with no surviving families.

There were large differences between different accommodation centres as to how issues of gender and vulnerability were treated. At some sites, vulnerable groups got priority for tents (as they do not have the capacity to build shelters with plastic sheeting). At other sites, there was no such attention.

Camp management is regarded as a cross cutting area within the cluster approach. This was widely acknowledged as being one of the weakest areas of the response, even by government, which was nominally responsible for camp management. Camp management merged with the shelter cluster on March 21<sup>st</sup>. The weakness of this cluster is discussed below.

### *3.7 Leadership*

Clusters are demanding in terms of the administrative and financial load that they place on the cluster leads. Cluster leads need:

page  
30

- A skilled staff member to take the demanding role of a cluster lead.
- Administrative support for the day to day operation production and circulation of minutes, guidelines and other documents.
- Sufficient field staff to provide a field presence both to support cluster coordination in the field, and to ensure that there is a good flow of accurate information to the cluster lead at the capital.

Agencies with flexible funding and reserves have enough resources to support a cluster lead role, but this is not true of all agencies. Neither IOM nor Habitat appeared to have the funding to assume the role of cluster or working group lead before they had CERF funding.

IOM is the global cluster lead for camp management in non-conflict situations. However, IOM had no delegation in Mozambique, and had only one consultant working on a separate project. IOM assumed the lead role for what was a “working group” rather than formally a cluster in Mozambique, but then failed to invest the resources necessary to take the lead in an effective way.

IFRC became the lead for shelter, but felt that this had been foisted upon them without any consultation at the global cluster level. Interviewees from other agencies were critical of the speed with which IFRC withdrew from Mozambique, whereas IFRC made the point that emergency shelter needs were already largely met.

Some cluster leads had little or no staff at field level. This meant that the cluster lead was poorly placed to support coordination within the cluster, or with other clusters at the field level. It also limited the quality of the information flow for that cluster from the field to Maputo.

The cluster lead were usually not the heads of their agencies, but a staff member within the agency to whom the lead was delegated. This was sensible as being a cluster lead is a full time job, and the cluster lead needs to put the broader interests of the cluster ahead of the narrower ones of their agency.

In some cases, the staff to whom the cluster lead role was delegated were budget holders for significant funds, but this was not always so. Cluster leads without delegated budgetary authority cannot commit their own agencies to take specific actions, and this reduces their authority when dealing with cluster members who have such authority.

The scale of the emergency in Mozambique meant that the key staff responsible for the ongoing programmes were responsible for the emergency response and were not displaced by emergency response staff as sometimes happens in larger emergencies. This meant that cluster leads had existing relationships with cluster members. This contributed to the quality of coordination and to the effectiveness of the response.

Having cluster co-leads raises issues about the ultimate responsibility for delivery on the cluster responsibility, including that of provider of last resort. However, having NGOs in designated leadership roles makes the cluster more approachable for other NGOs.

The logistics cluster produced a Concept of Operations that defined how the logistics cluster would operate. The emergency telecommunications cluster produced a short Description of Services document setting out what the cluster could do. These were excellent initiatives and were particularly appropriate for service-provision clusters like these.

Both logistics and emergency telecommunications clusters used web based systems for sharing documents and other information. In the first coordination meeting IFRC with OCHA support suggested using Google Groups as an information sharing tool. These had been a success in the Philippines and in Uganda, but this was not taken up.

### 3.8 Conclusions

OCHA's early deployment of a staff member from the Humanitarian Reform Support Unit helped to get the cluster system and the CERF application up and off the ground quickly. However this deployment was somewhat *ad hoc* and was not supported by a large enough team to fully support the cluster system.

The lack of a large deployment by OCHA was disappointing as small emergencies like the Mozambique floods allow lessons to be learned about the cluster approach that can be applied in larger emergencies. Fine tuning the cluster and CERF mechanisms in small emergencies can facilitate a more effective response in large emergencies later on.

Cluster coordination is different from normal sectoral coordination. In normal sectoral coordination in the past, agencies coordinate over the areas where their agencies' work overlaps, while each maintaining their individual agency objectives. With a cluster model, the focus is not just on eliminating gaps and preventing duplication, but on jointly moving towards commonly agreed cluster objectives.

These agreed common objectives brought about synergistic cooperation in some clusters, with one agency providing equipment and another the staff to install it, or agencies taking on different phases of the response, with one trucking water and relying on another agency to install a longer terms system. This was one of the factors in the improved international coordination noted by interviewees when compared with previous emergencies in Mozambique.

The floods in Mozambique are at the bottom end of the scale of disasters at which using a cluster approach is justified in a country with a functioning government. However, even in small emergencies, use of the cluster approach may be justified in terms of preparing humanitarian actors to respond to larger-scale emergencies.

One distinction between the floods response and the cyclone response is that the cluster approach was not used for field coordination in the cyclone response, although the response was discussed in the clusters in Maputo. This was appropriate as the cyclone response was too small to justify having an international response coordination system as opposed to agencies simply plugging into the governments coordination system.

Even for the flood response, not all cluster leads had a presence in the field. This limited the ability of that cluster lead to capture information from the field level or to support coordination action by cluster members in the field. When the number of cluster members is very low and the cluster lead is not present, it might be more appropriate to have fewer clusters, with an 'omnibus' cluster with all the sectors for which a full cluster approach is not justified.

The use of joint working space at the 'UN House' Caia was a positive innovation as it encouraged communication between clusters. The presence of wireless internet connectivity in the joint working space encouraged visits and contributed to the usefulness of the space. The impact of such simple measures on the exchange of information and of supporting common objectives should not be underestimated. The joint working space provided by the INGC served a similar function.

NGOs and the Red Cross movement are responsible for the bulk of humanitarian response. Their participation in clusters<sup>4</sup> is conditional on there being a full and equal partnership, especially for the larger NGOs who are not dependant on common services. NGO participation was threatened by:

- Press releases and situation reports that failed to mention, or minimised the role of NGOs. This improved after complaints by NGOs.
- Cluster lead management of the clusters that was directive rather than participatory. Again, this improved over time.
- A perceived lack of transparency in dealing with NGO applications for CERF funding (discussed in the financing section below).

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The UN Resident Coordinator played a role in resolving some of these issues. However, a more formal and structured approach might be useful rather than an informal reliance on the good offices of the Resident Coordinator.

The participation of NGOs and of components of the Red Cross movement in clusters is voluntary. If NGOs do not perceive cluster leads as dealing openly and fairly, they will not support clusters in other operations, or will establish competing coordination mechanisms. The possible non-participation by NGOs and components of the Red Cross movement is one of the biggest threats to the success of the cluster initiative.

Some cluster leads took on the role of cluster lead without making the necessary investment to be an effective cluster lead. Some NGOs made commitments to provide services that they did not keep. The cluster mechanism needs a stronger system for discouraging agencies from making commitments that they cannot or will not meet.

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<sup>4</sup> Of the components of the Red Cross Movement, the ICRC, does not work inside clusters because of its stance of strict neutrality. It does cooperate with clusters where appropriate.



Agencies assuming a cluster lead role take on all the responsibilities of the cluster lead. It might make more sense to delegate some of these responsibilities from the cluster lead to cluster members as this could:

- reduce the administrative burden of being a cluster lead; and
- encourage cluster members to take a more active and participative role in the clusters.

**Core cluster lead responsibilities**

Inclusion of key humanitarian partners.

Establishment and maintenance of appropriate humanitarian coordination mechanisms.

Coordination with national/local authorities, State institutions, local civil society and other relevant actors.

Provision of assistance or services as a last resort.

Planning and strategy development.

Advocacy and resource mobilization.

**Other cluster lead responsibilities**

Participatory and community-based approaches.

Attention to priority cross-cutting issues (e.g. age, diversity, environment, gender, HIV/AIDS and human rights).

Needs assessment and analysis.

Emergency preparedness.

Application of standards.

Monitoring and reporting.

Training and capacity building.

This last point is important, as the opportunity to share in decision making for the cluster should be matched by a share in the responsibility for delivery of the cluster objective. Some of the cluster responsibilities are core and could not be delegated to other cluster members. Others are much more suitable for delegation. There may also be scope for delegation of some of the cluster lead responsibilities to agencies that have a stronger presence in some geographical areas.

The clusters did not play a major role in quality control, apart from basic input indicators like the amount of water per head. There are no agreed benchmarks for the clusters, although some clusters adopted benchmarks (based on Sphere) at the field level. Of the cluster members, only the United Nations agencies have not formally adhered to the Sphere standards.

The Sphere standards have their limits - they do not cover all sectors, and the Sphere indicators are not context based. Such is the poverty in Mozambique that a large part of the population do not enjoy services at the guideline values presented by the Sphere project. Nevertheless, they represent a broad consensus within the humanitarian community and adopting a default standard at the global level gives clusters at the national level a basis from which they can set their own benchmarks.

The cluster leads were very involved in service delivery themselves. This limits the role that they can play in quality control, as staff will naturally give first attention to providing assistance rather than monitoring the assistance of others. Given the many other responsibilities of the cluster lead, responsibility for quality control is a key candidate for delegation to another member within the cluster.

Cluster leadership was delegated to staff within agencies. However, these staff did not always have delegated financial authority. This places the cluster lead in a poor position when dealing with cluster member representatives who control significant resources directly.

The scale of the emergency in Mozambique meant that the key staff responsible for the ongoing programmes were responsible for the emergency response and were not displaced by emergency response staff as sometimes happens in larger emergencies. The fact that cluster leads had existing relationships with cluster members was a positive aspect of the response and contributed to the effectiveness of the response.

The logistics cluster prepared a concept of operations. This was particularly useful for a service cluster like logistics, but the concept could be spread across all clusters with cluster defining clearly what service level they are committed to deliver, and what components of this they are prioritising.

Both the logistics and the emergency telecommunications clusters mounted a website which gave access to the cluster minutes and other information. Again this was a positive innovation. However, clusters could have made use of tools like Google groups for information sharing.

Cross cutting themes were not well served. The cluster approach encourages a closer focus on the sectors covered by the cluster - this may be at the cost of cross-cutting themes. The clusters themselves contain three cross cutting areas – camp management, protection, and early recovery. Of these, camp-management is debatably a technical sector rather than a cross cutting area.

Of the other two 'clustered' cross-cutting areas, protection was the most active. The other cross cutting issues such as HIV/AIDS, the elderly, gender, etc are not supported by dedicated clusters. While the flooding is an obvious disaster, HIV/AIDS is having a far bigger impact. The clusters initially failed to consider adequately the increased risk of transmission that accompanies displacement. Part of this was due to the slow mobilisation by the focal points for Aids and gender.

The presence of co-leads raised questions about the ultimate responsibility for leadership of the cluster. Clearly, each cluster should ideally have a single lead agency. At the same time, NGO co-leads made some clusters more accessible to other NGOs, or even vice versa for clusters with a non-UN lead.

Overall, the introduction of the cluster approach was a success in Mozambique. The cluster approach encouraged a cooperative ethos between agencies and this led to a more coordinated and effective emergency response.

This success was due to the hard work of all of those associated with the cluster approach in Mozambique. While clusters have had some initial "teething" problems, many of these are global cluster issues rather than Mozambique specific ones.

### 3.9 Recommendations

Recommendations are presented below with a brief reference to the context and the recommendation.

OCHA's early deployment worked well, but was not supported by the scale of deployment needed to fully support the cluster approach in Mozambique and to learn lessons from the roll-out there.

*Other Recommendation*      ***OCHA should quickly deploy teams to support cluster roll-out in other emergencies, and support this with sufficient staff in country for information management and a field presence to support inter-cluster coordination.***

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The cluster approach has an administrative overhead which needs to be weighted against the benefits it brings for each sector.

*IASC Recommendation*      ***The IASC should develop further guidance on the scale of emergency at which use of the cluster approach is appropriate for particular sectors.***

Cluster leadership is demanding. Agencies do not always consider the full implications of leadership when accepting the leadership role.

*IASC Recommendation*      ***The IASC should develop a checklist for the country team to use when considering which agencies should lead clusters.***

Not all delegated cluster leads had delegated budgetary authority within their own agencies. This lessens the authority of the cluster lead in meetings as the representatives of cluster members often have significant budgetary authority and can themselves make commitments at meetings.

*IASC Recommendation*      ***The IASC should consider introducing a requirement that staff delegated as cluster leads hold delegated budgetary authority within their agencies.***

When there is a dispute or difference of opinion between the cluster lead and some cluster members, it is difficult for the cluster lead to resolve this given that it is a party to the dispute.

*Other Recommendation* **OCHA should develop a more formal country-based dispute resolution mechanism for intra-cluster disputes. Such a mechanism should probably be based around arbitration with a mutually agreed arbitrator.**

The logistics and emergency telecommunications cluster in Mozambique set up a website that was a useful tool for sharing information from the cluster.

*Other Recommendation* **OCHA should establish a web framework that can be used for cluster coordination in future emergencies, and provide ion-country support for clusters to use it.**

The production of a concept of operations by the logistics clusters and a description of services for the emergency telecommunications clusters were useful initiatives.

*IASC Recommendation* **The IASC should consider making the issuing of a concept of operations a standard procedure for all service provision clusters.**

Some clusters were not present at field level.

*IASC Recommendation* **The IASC should consider changing cluster ToRs to make it explicit that field presence is a requirement for all cluster leads.**

NGOs complained that initial press releases ignored their role.

*Other Recommendation* **OCHA needs to provide training for agency information officers on how to operate in a clustered environment.**

UN agencies complained that NGOs did not always provide information about their operations in a timely manner for inclusion in situation reports.

*Other Recommendation* **NGOs need to provide information about their operations in a format that makes it easy to include them in situation reports.**

Agencies complained that there were three OCHA representatives during only 9 weeks, and that OCHA had a limited presence.

*Other Recommendation* **OCHA should broaden its roster to include people who can stay in place for at least six weeks and who have appropriate language skills.**

The role of a cluster lead is demanding. OCHA has already begun training for cluster and sector leads in March 2007. Two more training events are planned for 2007.

*Other Recommendation* **OCHA needs to increase training for potential cluster and sector leads to reach all countries at risk of disasters.**

Cluster leads have a great many responsibilities.

*IASC Recommendation* **The IASC should amend the generic terms of reference for clusters to promote the delegation of some of the cluster lead responsibilities to other cluster members. Such delegation could include lead responsibility for specific geographical areas.**

Some cluster leads and members failed to deliver what they undertook to provide.

*IASC Recommendation* **The IASC should discuss measures that could be taken to discourage agencies from making commitments that they cannot keep.**

There are no benchmarks for clusters.

*IASC Recommendation*     ***The IASC needs to agree benchmarks for each cluster. These should draw on existing benchmarks within the humanitarian sector rather than trying to formulate new ones.***

Cross cutting issues (with the exception of protection) were poorly attended to in the response, especially in the early stages. Agencies with focal point responsibilities did not prioritise their response.

*IASC Recommendation*     ***The IASC should consider establishing response standards for focal point agencies who have responsibility for key cross cutting issues.***

Smaller NGOs may not perceive clusters led by UN agencies as being accessible. Co-leadership raises issues of responsibility, but formally allocating a deputy leadership role may encourage NGO and Red Cross participation in UN led clusters and vice versa.

*IASC Recommendation*     ***The IASC should consider introducing a deputy-lead in all clusters to improve participation by agencies from the deputy-lead's sector.***

## 4 Emergency Funding Mechanisms

### 4.1 The CERF

#### The CERF Timeline

Date	Event
Mon 05 Feb'07	DMT TWG meets and resolves to recommend a CERF funding application and the cluster approach to the Country Team
Thu 08 Feb	UNCT retreat decides in favour of a CERF request and asks OCHA for support
Sat 10 Feb	OCHA humanitarian officer arrives from Geneva
Thu 15 Feb	Cluster meeting to discuss the inputs for the CERF already assembled.
Thu 15 Feb	First draft of Mozambique CERF appeal circulated among HCT and OCHA Geneva
Tue 20 Feb	CERF request sent to New York requesting \$13.5mn
Wed 21 Feb	CERF secretariat approved \$7.625mn,
Thu 22 Feb	WFP and Unicef appeal CERF decision
Fri 23 Feb	CERF allocation for WFP and Unicef increased following their clarifications
Wed 28 Feb	IOM and Habitat submit CERF request for shelter to OCHA
Sat 10 Mar	CERF request for shelter forwarded to New York
Sun 25 Mar	CERF request for shelter approved by New York

Without the CERF grants it would not have been possible for the UN agencies to respond to the floods as they did. The knowledge that CERF funds would be available also increased the interest of NGOs in the cluster approach.

Without the CERF, the response would have been far slower and smaller in scale - this is especially true as the government never declared an emergency or openly appealed for funds. Some agencies and donors could not release emergency funds as the government, as part of a policy of promoting national self-reliance, had not formally declared an emergency.

The first draft of the CERF request was prepared relatively quickly given that this is a collaborative process, and that this was the first time that the country team had made a CERF request. It is notable that the first draft of the CERF request was ready one day before IFRC launched their appeal.

There was then a delay of some five days before the final draft was submitted. This delay (over a weekend) was largely due to the shelter cluster taking time to decide if they needed CERF funds or not. The CERF secretariat approved the request the day after receiving it.

The CERF Secretariat questioned some aspects of the request. The amount requested for food was cut in half. Logistics and food aid were reduced; and Unicef did not get funding for insecticide treated mosquito nets, as these were already in country. Funding for education was reduced as the CERF secretariat thought that the plans could not be achieved in the budget timeframe.

WFP and Unicef appealed to the CERF Secretariat, providing more details. In particular, Unicef explained that the mosquito nets being distributed were being loaned from the development programme and would need to be replaced, and that educational activities were already being carried out across the affected area using reprogrammed materials.

The most difficult area of the CERF process was the application for funds for NGOs from the CERF via the cluster leads. NGOs cannot get funds directly from the CERF, but they can apply for funding via a UN agency.

Initially, WFP was handling the NGO applications for the logistics cluster, but this caused problems when the CERF secretariat approved funding for WFP within the logistics cluster but did not approve the NGO applications in the cluster.

The CERF Secretariat questioned whether the NGO applications for logistics funding were not already included in sectoral budgets, included in sectoral budgets, or were already financed from other NGO sources (for example, staff salaries). This raised a whole lot of issues about responsibility for vetting CERF requests from cluster members. It also left NGOs very unhappy as there was a perception of a two tier CERF funding, with priority for UN cluster leads.

Eventually the CERF secretariat granted the funding, but the logistics cluster then asked UNDP to handle the disbursement as WFP was dealing with large amounts of CERF funding on its own account.

Unicef led clusters developed the CERF proposals in an inclusive way and used Partner Cooperation Agreements to quickly disburse funding even before CERF funds were received. NGOs were very happy with Unicef's approach. However not all CERF proposals were prepared in so inclusive a way.

## 4.2 *The role of self-financing*

It was more than a week after the peak of the flooding when the HCT sent the CERF request to New York. The IFRC had issued their appeal four days earlier, on 16<sup>th</sup> February, a few days after flooding peaked.

Clearly if agencies had had to wait for CERF Funds, there would have been a considerable delay in assistance. UN agencies and NGOs with flexible funding were able to operate before CERF funds were authorised with the help of:

- Emergency Funds (such as Unicef's Emergency Programme Fund or WFP's Immediate Response Account, the IFRC's Disaster Response Emergency Fund, and various NGO emergency funds).
- Emergency stockpiles: the INGC, the Mozambican Red Cross, Unicef, and several NGOs had stockpiles of relief goods in-country. Unicef had pre-positioned emergency supplies with ministry counterparts as part of a preparedness measure in the regular country programme.
- Reprogramming development programme materials, such as insecticide-treated mosquito nets.

WFP was able to start air operations with some logistics funds it had put by, but it had no food stocks<sup>5</sup> of any significant size to re-programme, and reprogramming food would have had serious consequences for the WFP beneficiaries who were living with HIV/AIDS. In general, the expectation of getting CERF funding allowed agencies to use internal borrowing mechanisms and reprogramming.

However, agencies that did not have such internal resources found it difficult to take a leadership role. This was particularly the case for IOM which had no funds with which to begin active cluster management in advance of getting a CERF application.

## page 38 4.3 *The flash appeal*

The HCT took the decision to await the Government's appeal before issuing the Flash Appeal. The decision to launch a flash appeal was a difficult one as the government did not want it as it contradicted their policy of self-reliance. The government itself never appealed for funds, instead it simply notified donors of the likely cost of reconstruction. Some interviewees argued that the UN has an obligation to mobilise resources to cover humanitarian needs regardless of the position of any particular government.

All of this led to the appeal, which the HCT had planned as a Humanitarian Response Plan, being issued more than a month after the decision to make a CERF request.

The Flash Appeal has not been a success as a resource mobilisation tool. While the Financial Tracking System shows that \$21.5mn had been paid or pledged by April 21<sup>st</sup>, over half of this is composed of CERF funds. Other funds are included in the Flash Appeal figures which were regarded by the donor as being direct support to a particular agency rather than a response to the Flash Appeal. A further \$3.3mn predated the issuing of a Flash Appeal. At most, \$1.5mn of funding may be in response to the Flash Appeal.

Fund Source	\$mn
CERF	11.2
Donor: "not flash"	4.9
Predates Flash	3.3
May be Flash Appeal	1.5
Internal appeal	0.6
Reprogrammed	0.1
Grand Total	21.5

Analysis of Mozambique floods and cyclone Flash Appeal data on OCHA's Financial Tracking Service on 21 April 2007.

<sup>5</sup> Some interviewees commented that cash might have been more appropriate than food aid and been distributed far more quickly. This may be true for the cyclone affected areas, where there is a strong cash economy, but cash would have been of little use in the flood affected areas where the cash economy is relatively weak.

### *Other appeals and funding*

The other major appeal was the appeal by the International Federation of Red Cross and Red Crescent Societies (IFRC). This was issued on 16<sup>th</sup> February for \$6.0mn and a revised appeal was issued on March 14<sup>th</sup> for \$16.9mn. However, this appeal has been poorly supported with the most recent update on April 14<sup>th</sup> showing that the appeal had only raised \$2.2mn by then.

NGOs generally did not make appeals as the 2007 flooding was not a big news story. They felt that there was little hope of raising enough money to justify the cost of an appeal. The lack of a declaration of an emergency was a complicating factor for some NGOs.

The total international humanitarian funding for Mozambique was \$36mn from all sources recorded in the UN's financial tracking service. Of this the CERF is the largest single component at 30%. If funding after mid March is excluded, the CERF proportion is higher. However, some of the other funding, including the first grant from the European Commission, and grants from other EU donors, and Red Cross societies, predated the CERF approval and disbursement.

Humanitarian Funding for Mozambique from 1 Jan to 14 April 2007. Millions of USD (source OCHA Financial Tracking Service)

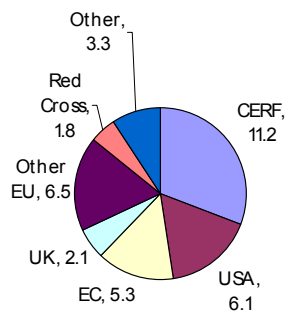


Figure 7: Humanitarian funding

### *4.4 The role of flexible budget support*

Much of the official development assistance for Mozambique is in the form of direct budget support that pays money into the exchequer for the government to use. This allowed the government far greater flexibility than does project based funding. This flexibility allows the Government to plan for contingencies and to shift funds around to meet the needs flowing from the emergency.

The government also has the facility, under the agreement with the IMF to increase spending by 20Mn to respond to natural disasters. This contributes to the Government's ability to respond to disasters.

### *4.5 Inflexibility of funding*

During the field visit the evaluation team noted that in the Cyclone affected area IOM was about to begin the distribution of plastic sheeting supplied by OFDA. Interviewees in the cyclone-affected area repeatedly said that relief supplies were no longer needed. Unicef stopped the distribution of relief items there on March 15<sup>th</sup>. IOM has apparently little choice as the plastic sheeting for the cyclone affected area has been provided by a donor for distribution.

While the plastic sheeting for Inhambane was not CERF funded, it was included in the original budget and was only removed from the CERF application when OFDA offered it to IOM. However, it appears that if it had been in the CERF application, it would have been difficult to re-programme, as there is no easy way of reprogramming CERF funds once granted. Identified needs can change and it would be useful to have a simple mechanism for reprogramming funds as agencies understand the needs better, or in response to assistance by other actors.

### *4.6 Funding for local NGOs*

It is difficult for local NGOs to access CERF funds. The difficulty such agencies have with preparing proposals means that they may miss out on funding windows. Local NGOs in Mozambique felt that they had been left out of the international response.

Local organisations that had funding, such as the Mozambican Red Cross, played a very effective role. They demonstrated the advantages that local civil society can bring to the response. Similarly, there was a very strong civil society response in the cyclone affected areas. However, local NGOs were constrained by a lack of funding.

## 4.7 Conclusions

The CERF helped to ensure a rapid response, and a larger programme of assistance than would otherwise have been possible. The poor support for both the IFRC appeal and the Flash Appeal suggests that without the CERF, relief funds would have been significantly less, especially in the first month of the response.

Agencies that do not have significant reserves or un-earmarked funds have difficulty leading clusters. Such agencies would not be able to meet their responsibility to be the provider of last resort.

Because of the time pressure, the CERF secretariat cannot vet applications for funding except in the most rudimentary way. Each agency prepares its own application and the HCT submits these jointly. The level of consultation varied between clusters. Some of the activities funded seem much more appropriate than others.

Detailed vetting prior to issuing grants would slow down grants and destroy the whole intent of the rapid-response funding window of CERF. However, some control is needed to ensure that applications for CERF funds of a higher quality than Consolidated Appeals have been in the past. One mechanism of doing so would be to introduce an automatic requirement for an external independent ex-post evaluation of the use of all grants provided by CERF. This type of mechanism can encourage the careful use of CERF funds.

Growing local capacity is one of the best disaster preparedness measures as is demonstrated by the strong performance of the Mozambican Red Cross in the response. For capacity to grow, it needs nurturing with access to funds.

In order to promote the inclusion of local civil society and NGOs, it would be useful if the Humanitarian Country Team had some funds that could be allocated to NGOs and Civil Society partners for needs that arise after the initial CERF proposal. This would allow a more inclusive response while preserving appropriate controls.

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## 4.8 Recommendation

There was confusion over the indirect access of NGOs to funds through the Cluster leads.

*IASC Recommendation      **The IASC should develop clearer guidelines for access to CERF funding by cluster members.***

It is difficult for agencies without significant reserves to lead clusters.

*IASC Recommendation      **The IASC should consider introducing a special allowance for lead agencies that don't have large reserves - or restrict leads to those with significant un-earmarked funds.***

Time pressure limits the depth of analysis of applications for CERF funds.

*IASC Recommendation      **The IASC should introduce the requirement for automatic independent external ex-post evaluation of the use of CERF funds to encourage discipline in their use.***

Local NGOs have little opportunity for CERF funding, and needs may change after the original CERF grant.

*IASC Recommendation      **The IASC should consider establishing in each CERF funded response the possibility of having an umbrella fund for NGO response to be managed by the HCT.***



*Other Recommendation*

***The CERF mechanism needs a clear and simple system for reprogramming grants in the event of changed circumstances.***



## 5 Connectedness

### 5.1 The speed of response

Interviewees identified the following factors as permitting a rapid response:

- Warnings from the INGC about the risk of flooding being higher this year.
- INGC's leadership role and its preparations before the flooding.
- Prior contingency planning by agencies – in some cases as a result of the October INGC simulation exercise.
- The contingency stocks held by some agencies.
- The large project volume of some agencies, such as Unicef, meant that they had resources in-country that could be immediately re-programmed.
- Existing field presence of agencies and existing relationships with national, provincial, and district or municipal government.
- The early warning to populations meant that there was less need for a rescue operation and this freed up resources for the response.
- INGC centres in Caia and Vilanculos provided a focal point in the field and greatly facilitated a rapid and coordinated field response.
- The possibility of funding from the CERF contributed to a rapid response in flood-affected areas.
- Internal emergency funds and borrowing mechanisms were cited by many agencies as being key to their early operations.
- Investment in surge capacity by agencies meant that they could build-up their teams quickly. Preliminary figures for nine agencies show that they mobilised nearly 100 international staff between them to respond to the emergency. We consider that the true figure for the whole humanitarian sector is between 150 and 200. WFP made the earliest, largest, and most sustained use of surge resources.

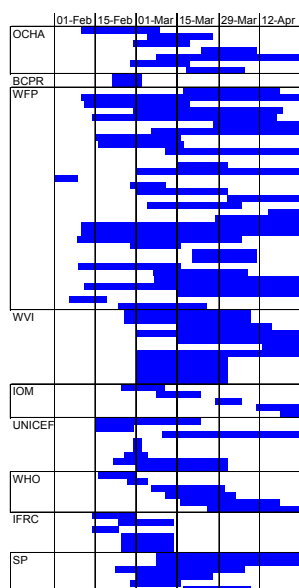


Figure 8: Agency surge into Mozambique from Feb 1<sup>st</sup> to April 25<sup>th</sup>. Bars show the dates in country for individual staff members. (Source: OCHA)

While the availability of stocks that could be reprogrammed helped with a rapid response, the opposite was also true. WFP's low food stocks, due to a low level of donor support for the ongoing programme meant that it took time for WFP to begin distributing food in the quantities needed.

### 5.2 Shifting from development to relief and back again

For most of the cluster members, the emergency response represented a brief shift from their longer term development programmes. This had an important impact on the clusters, in that the cluster leads and cluster member representative often knew each other from prior development programmes.

It was noticeable that some agencies were far faster at responding quickly and shifting resources than others. Interviewees identified the key factors facilitating a quick shift to relief as:

- Human resources – having appropriately skilled staff or the surge capacity to provide them. Save the Children UK had no food distribution programme, but borrowed an experienced food distribution team from Save the Children US's food programme in Mozambique's Gaza province.

- Existing sectoral coordination fora, such as the *Group de Água e Saneamento*, and prior relationships between many of the players facilitated a rapid roll out of the sectoral clusters.
- Financial resources – both in terms of emergency funding systems and a large programme volume.
- Logistics, communications, and material resources, such as own transport, stocks of relief supplies etc.
- Existing relationships with other humanitarian agencies. This facilitated a quick response through the sharing of information and resources.

### 5.3 Preparing for future emergencies

Interviewees acknowledged that disaster risk reduction programmes were very patchy and that they could be broadened. One interviewee noted that community based disaster risk management is particularly appropriate for areas subject to flooding. It was generally agreed that disaster risk reduction is not being addressed in the response except through some limited programmes and resettlement.

Contingency planning varied between agencies. Both Unicef and WFP had contingency plans in place, but there does not seem to have been any planning for HIV/AIDS programming for the displaced population, despite the increased transmission risks that arise when dispersed populations are concentrated in accommodation centres. Nor did contingency planning include such basic measures as having stocks of large scale maps.

Several agencies commented very favourably on the utility of having a simulation exercise prior to the floods. Many people felt that the October 2006 INGC emergency simulation exercise had contributed to the response.

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Some interviewees thought that OCHA should maintain an office in Mozambique as it is so disaster prone. Other opposed this because of the cost and the presence of a nearby Regional Office in Johannesburg.

However, there is a key role for OCHA in the emergency response. Inter-cluster coordination was weak in Mozambique in part because of the focus of each cluster on their key task. Such coordination could be improved by having strong OCHA support for inter-cluster coordination by the Resident Coordinator. There is also a role for OCHA in improving information flows.

The work-load imposed on the cluster leads by the cluster approach means that the cluster approach cannot be maintained beyond the emergency. Several interviewees made the point that relationships rather than structures are the key to rapid response, and that it would be good to preserve some of the relationships established by the clusters. In the education cluster, the members have agreed to support the creation of an INGC working group for education that will include all the cluster partners and will meet regularly.

The advent of the cluster system raises a question of OCHA's role. Under the cluster system, the cluster structure itself is responsible for coordinating the response. The presence of a continuing skeleton HCT structure would suggest that there is no need for an in-country OCHA presence. However, one role for OCHA may be providing a strengthened HCT secretariat during an emergency response.

Membership of the UN's Disaster Management Team (UNDMT) is restricted to UN agencies and IOM. However the UNDMT's technical working group (UNDMT-TWG) is open to other agencies and played a key role in preparedness among international actors. In the context of the HCT, it would seem more appropriate for the UNDMT to be an IASC DMT.

The HCT has prepared a draft terms of reference for an IASC Humanitarian Country Team that would provide a skeleton cluster structure. This is a very good initiative. This draft ToR foresees close coordination with the government and the ToR is currently being discussed with them to see what changes the government would like from their side.

People in the lower Zambezi often live in dispersed households or extended household settlements rather than in villages. They live in areas at risk of flooding. The government has made at least two previous efforts to resettle the population from the lower areas in the Zambezi valley to villages on higher ground.

The first attempt was three years after Independence, after the very bad floods of 1978. This resettlement effort was part of the broader government project to promote the establishment of a settlement pattern of communal villages rather than dispersed households. In theory, such villages make it much easier to provide services such as health and education.

However, patterns of human settlement are not accidental but flow from economic, social, and cultural reasons. The attempt to persuade people to move to communal villages on higher ground is commemorated in the local name for the flood '*Cheia M'aldeia*' or the 'villages' flood. It was not a success. The 2001 floods were followed by a concerted effort to have populations resettle, often on the same sites which had proved problematic in 1978.

#### 5.4 Conclusions

In this emergency, it was very clear that there was a payback from preparedness, both in terms of community disaster preparedness, general agency preparedness, and specific preparedness for the floods.

The level of contingency planning varied between agencies in Mozambique. Some agencies, such as Unicef, WFP, and the Mozambican Red Cross had exemplary contingency plans. Many of these were based on the INGC's own contingency plans for the 2006-2007 rainy season. Some NGOs also had good contingency plans. Contingency planning was lacking for some of the cross cutting sectors.

The plan to have a continuing HCT appears sensible. The current plan, to fully involve the government is a good one. However there appears to be a risk of duplication between a continuing HCT and a UNDMT. The UNDMT has no non-UN representation and does not reflect the current trend in reform.

There is a role for OCHA in promoting good coordination between clusters by strengthening the HCT secretariat during emergencies.

INGC's October 2006 simulation exercise developed links between key individuals that were useful when the floods came. The simulation identified potential bottlenecks and problems. It also reinforced levels of preparedness. Participation in such exercises gets everyone thinking about what they would need to do in the event of an emergency.

The government has again prioritised resettlement of populations on higher ground as a risk reduction measure for regular flooding on the Zambezi. Resettlement can be an effective means of reducing risk from natural disasters but it has often failed in the past due to the livelihood impact of resettlement. For the lower Zambezi there are three problems:

- The low-lands are often the most fertile in the area as they are naturally fertilised by the silt in the flood-water.
- Residual moisture in the low lands may permit a harvest even in years when rain-fed crops in other areas fail.

- The whole delta, by definition, lies below the maximum flood level of the river, so moving people to higher ground within the delta reduces the risks in some floods but not all.

It would seem therefore that what is needed is not a blanket resettlement policy, but one that is based on a mapping of the risks and benefits for each particular locality.

### 5.5 Recommendations

Disaster preparedness paid off. While this was good at national and agency level, community and district level programmes were limited.

*HCT Recommendation*      ***Increase support for community and district DRR in the ongoing development programmes.***

There was no contingency plan for some cross cutting issues.

*HCT Recommendation*      ***Specialist agencies should prepare viable contingency plans for the most common emergencies in Mozambique.***

The INGC simulation exercise contributed to the quality of the response.

*HCT Recommendation*      ***All clusters should play a full role in the annual simulation by INGC***

Inter-cluster coordination needs strong support to work well.

*Other Recommendation*      ***OCHA should provide strong support for the Resident or Humanitarian Coordinator for inter-cluster coordination at national level during emergency responses.***

page 46      The HCT has developed a draft terms of reference for a continuing IASC Country Team.

*HCT Recommendation*      ***The HCT should continue with the concept of the continuing IASC at country level. The current DMT should be folded into this.***

Blanket resettlement is not likely to be successful.

*HCT Recommendation*      ***The HCT should support targeted resettlement based on a risk benefit analysis for individual communities.***

## 6 The Needs of the Affected Population

### 6.1 *The affected population*

#### Misleading informants

In one interview, beneficiaries reported that they had received relief blankets. When asked why they needed blankets they replied that they had lost them in the flood.

After further discussion the interviewees acknowledged that they had not had any blankets and that they brought all their household possessions with them when they fled the low lands.

The interview teams were often told by beneficiaries that the whole population intended to settle at the resettlement site. At some sites, this was clearly true as people had already begun to invest in the sites by constructing assets such as granaries and bird houses.

However, at other sites many of the shelters had grass growing in them or had un-repaired damage to them showing that they were used only occasionally or had been abandoned. This demonstrated that the centre population had already returned, either to the lowlands or to the neighbouring villages.

As can be seen from the number of beneficiaries consulted, a great deal of the evaluation team's effort was directed to getting a beneficiary view of the response. This was quite difficult as the beneficiaries, in their effort to maximise the potential aid flows, misrepresented what they had lost, or what they intended to do.

This population is "aid aware". During the later years of the civil war, most of the then population from the flood affected areas were refugees in Malawi. Unlike some other populations, who started returning to Mozambique when the peace agreement was signed, a large part of this population only returned when WFP stopped distributing food in the refugee camps there.

The distribution of aid after the 2001 floods was quite generous, as many agencies had large stocks of relief items that had arrived too late for distribution to those affected by Cyclone Eline in 2000. Many of the displaced received roofing sheet in 2001 to enable them to build their new houses in upland areas. Few roofing sheets were seen by the evaluation team, suggesting that a great many were sold by the recipients.

The populations in the cyclone affected area had shared in the relief items bonanza that followed Cyclone Eline in 2000.

### 6.2 *Economic Impact*

The affected population in the Zambezi valley live from subsistence agriculture and fishing. They often produce little or no surplus for sale. Their location on the river or on the low land surrounding it makes access to market difficult in any case.

The populations are very poor and apart from houses etc, household assets typically include their clothing, agricultural tools, and items of their own manufacture, such as clay pots, sleeping mats, or even occasional pieces of local furniture. Clay pots are used both for cooking and for water storage. Clothing, agricultural tools, and sometimes eating utensils, often represent the only mass produced items in the home.

### 6.3 *Involvement of the population*

Invariably, when the team asked beneficiaries if anyone had asked them what their needs were the answer was 'No'. Assessments of beneficiary needs were rudimentary, but the needs of the population are fairly obvious<sup>6</sup>.

However, many of their needs flow from their poverty rather than from the impact of the emergency. Most of the flood-affected didn't have jerricans, plastic buckets, or metal cooking pots before the floods.

Communities did manage the assistance they provided themselves, such as temporary sites for those fleeing the floods. They had little role in the management of donated aid, apart from sites where there was no NGO and donated aid was distributed by community leaders or camp heads.

<sup>6</sup> This comment applies to needs assessment at the community level only. Service clusters (logistics and emergency telecommunications) assessed needs at the organisation level.

### 6.4 Meeting needs

When beneficiaries were asked whether all their needs were met the answer was always a resounding 'No!'. Again, this is a complicated issue, because there is a difference between:

- The actual needs arising from the flooding (or the cyclone).
- The actual needs flowing from chronic poverty.
- The expectations of assistance based on memories of the generous assistance in 2000 or 2001.

The wide variations in the numbers of affected people in need further complicates the question as to whether needs were met.

In terms of the needs flowing directly from the floods, what people lost was one harvest – a loss of about four months' food given that the lowland areas can produce several harvests a year. They may also have lost their houses and perhaps some other built infrastructure, but this is part of the risk that they knowingly accept when living in the low areas near the river. The flood affected population also had to move to higher ground, but this is part of their normal coping mechanism for floods.

When we asked flood-affected people what assistance they valued most, they generally answered 'food'. This is because this is what they lost. They generally regard all the household items as useful, but in many cases they have not had such items for several years.

The flood affected population expected assistance with housing. There were occasional references to the roofing sheets received in 2001. However, it is questionable as to whether this is a 'real' need or not, as the population is well able to make roofs from traditional materials.

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However, while they valued food the most, the flood affected population asked about seeds and tools. This reflected their concern with livelihoods. These needs were being met by FAO, Action Aid, World Vision and others through the distribution of agricultural tools and seeds, via seed fairs with the ministry of agriculture in some cases.

The cyclone-affected population often nominated plastic sheets as the most useful assistance as they had lost their roofs, and the plastic sheeting allowed them to cover their houses to prevent further rain damage. The cyclone-affected population were more concerned about shelter – a reflection that the principle impact of the cyclone was on people's houses.

### 6.5 Was this an emergency or not

Some interviewees questioned as to whether this was an emergency or just another episode in a pattern of regular flooding in the Zambezi valley. People who choose to live in the low-lying areas do so in full knowledge of the risk and have coping mechanisms for dealing with flooding. They suggested that needs were over stated by agencies who had problems funding their ongoing programmes.

The evaluation team noted that the affected population did need external assistance to help them weather the impact of the flooding. Without external assistance, there would have been widespread suffering and some excess deaths.

### 6.6 The numbers issue

There were many problems around the numbers of affected. Different levels of government used different figures, with INGC sticking to the numbers for its first



Figure 9: Packing sanitary towels into family kits at Caia.

#### Inappropriate aid:

The UNFPA distributed "dignity kits" with CERF funds to women and girls in flood-affected areas. While the kits included useful items like wrappers and tee-shirts they also included culturally inappropriate items such as tooth-brushes and toothpaste.



approximate surveys. Districts often gave higher numbers for accommodation centres than those given by the national level, and the numbers given by the centre chiefs were higher still. The actual numbers at any centre varied because of:

- Delayed arrivals from places where groups had temporarily taken refuge;
- returns to the low-lands; and
- opportunism by neighbouring communities.

One interviewee noted that the number in accommodation centres varied with distributions, with lots of people arriving at distribution times. Another interviewee reported that in some of the villages where they have regular development programmes, people sent youngsters to build shelters at the accommodation centres to try to get access to some of the aid.

Part of the government's concern is that non-affected people have gone to the accommodation centres in the hope of getting assistance. The government is promoting a policy of national self-reliance. People trying to take advantage of aid flows are acting counter to this policy.

However, district officials have to live with complaints from those who resettled on high ground in 2001 but farmed in the low lands. These had not gone to the accommodation centres as they still had their houses, and were therefore not included in the initial INGC lists. However, they did lose their crops as well, so argue that they should have got food assistance at least.

WFP is planning to distribute a once-off one-month ration to all in the affected areas, so this group will receive some assistance.

## 6.7 Conclusions

Registration is a common problem in humanitarian emergencies. The initial registration was not thorough. A thorough initial registration would have made it easier to control later changes. This is a very difficult issue in a population without ID cards and where community officials may be open to the temptations for patronage or profit provided by controlling access to assistance.

Given the lack of a thorough registration, the initial INGC survey, made before people were attracted to centres by the possibility of aid, was probably the most reasonable basis for planning overall levels of assistance. However, this did mean that some affected population got less assistance than they should have.

However, the intent of humanitarian action is the prevention of large-scale suffering and avoidable death. The evaluation team concluded that, despite issues about the numbers, and the slow assistance to some communities, the assistance did prevent large-scale suffering and excess deaths.

The team concluded that the real needs for emergency relief as a result of the flooding were largely met. There were no outbreaks of serious diarrhoeal disease or indications of either excess mortality or acute nutritional distress. This conclusion is based on: the team's extensive fieldwork; the team's analysis of the histories provided by the affected populations; and on the concerns raised by them.

The relief needs of the cyclone-affected population were met, but the real need there was not so much relief as the recovery need was for permanent shelter. Provision of this was still ongoing during the team's visit.

While major floods occur on the Zambezi every five to ten years, they still pose a risk of death and demand immediate action from outside the flooded area to prevent widespread distress and suffering. People have their traditional coping mechanisms for dealing with floods, but such coping mechanisms are not free.

Assistance from those living on high ground may bring future obligations. The cost (in labour) of building a new house is significant. Such costs may be crushingly expensive for those already suffering from poverty.

The criticism can be made that assisting the population every time there is a major flood promotes a moral hazard, i.e. the population can afford to live in a risk environment because they know that the government and the international community will come to their aid, and that such assistance is part of their coping strategy for dealing with floods. However, living in the flood zone is not so much a matter of choice as of economic necessity. Poverty allows people few other options.

Poverty, rather than disasters, is the real issue in the lower Zambezi Valley and in rural Inhambane. Many of the real needs reflected structural poverty rather than the impact of disasters. However, disasters and their related coping mechanisms contribute to this poverty, and this poverty makes people more vulnerable to disaster.

The HIV/AIDS epidemic threatens poverty reduction in the disaster-affected areas, and this has to be a high priority for any continuing assistance.

The affected population did not know what assistance they could expect. At times, this promoted unrealistic expectations of what assistance they could receive, and encouraged a wait-and-see attitude among the population.

## 6.8 Recommendations

The initial registration was not very thorough and did not involve local authorities fully.

*HCT Recommendation*      ***The HCT members should support INGC to develop the capacity to conduct verifiable registrations together with the local authorities.***

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The real issue for most of those affected by the 2007 floods and cyclone is poverty for which disasters are a contributory factor.

*HCT Recommendation*      ***The broad focus of the post-disaster phase should be on poverty reduction (and on the control of HIV/AIDS), rather than just on resettlement for some of those at risk.***

People did not know what they would receive, and sometimes had unrealistic expectations.

*HCT Recommendation*      ***The HCT and the government should agree, at the start of the response, what the minimum package of assistance is likely to be and what the qualifying conditions are, and then publish this widely, including making this information available to beneficiaries.***

## 7 Support for local institutions

Many of the issues of support for local institutions have been discussed in previous chapters as this is a cross-cutting issue.

### 7.1 *The role of the INGC*

All interviewees acknowledged the lead role played by the INGC. The INGC, under its present director, has adopted an exemplary preparedness and risk reduction stance. INGC made significant investments in preparedness that paid off in the emergency. They had built offices in both Caia and Vilanculos which served as the operational hubs for the response to the floods and cyclone respectively.

The INGC preparations were quite broad, ranging from the flood-response simulation exercise in October 2006 to the distributions of radios to alert teams in some villages. The INGC held a planning meeting at the office on January 24<sup>th</sup> with the administrators of the districts along the Zambezi. The INGC went on to play a leading role in the coordination of the response, and directly coordinated some sectors, such as camp management, where there was no formal cluster.

Several agencies, including WFP, Unicef, the Mozambican Red Cross, UNDP, and some NGOs have supported the development of INGC capacity. This is very positive and a broader and deeper cooperation should bring additional benefits.

The INGC, in its turn, assisted the international community directly through facilitating rapid customs clearance. Cluster members were full of praise for this facility, which allowed all customs clearance formalities to be completed in less than 24 hours in many cases<sup>7</sup>.

### 7.2 *Other Government Structures*

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The INGC is an emergency response coordination structure only. While the INGC did do some work directly on the ground, most of the work done by the Government was done by different Government departments at the district level.

Many of these government structures have benefited from support from both donors, at the budget and programme level, and from agencies at the project level. Many of the cluster leads used existing links with their government counterparts, at the central, provincial, and district level during the response.

Links at the provincial and district level, based on existing working relationships, were particularly critical for NGOs.

### 7.3 *Coordination with government*

Coordination with the government took place at several levels. One issue that did arise was the holding of almost simultaneous HCT and INGC briefings. This was not helpful and was quickly changed after INGC raised the issue with the Resident Coordinator. This type of duplication needs to be avoided in future.

Several Mozambican interviewees questioned the need for a cluster structure in a country with a strong national government. They argued that while the cluster

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<sup>7</sup> One exception was for the telecommunications cluster, whose equipment took a month to clear. However, this was due to the highly technical nature of clearance for telecommunications equipment. However, this had no major operational impact as WFP already had a substantial in-country stock of telecommunications equipment following the closure of some sub-offices.

structure were appropriate in countries undergoing complex political emergencies, it was not suitable for a natural disaster where there is effective government coordination. However, the cluster approach is not meant to coordinate the response, but to coordinate the international components of the response to offer a coherent and predictable interface for government coordination.

While the government was keen to coordinate all aspects of the response, the capacity to do so was constrained by the capacity limits inherent in being the tenth poorest country in the world.

#### *7.4 District level coordination*

Interviewees reported that coordination was generally good at the district level, and the district level meetings attended by the team support this. At the district level, coordination was generally cross-sectoral rather than cluster based.

#### *7.5 Support for civil society generally*

The Mozambican Red Cross received extensive international support, not only from within the Red Cross movement, but also from Unicef, other UN agencies and NGOs. However, other national agencies received scant support in the response, except as the implementing partners of international NGOs.

The key role of the Mozambican Red Cross illustrates the effective role that national civil society can play in emergencies and the importance of supporting the development of this capacity.

#### *7.6 Conclusions*

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Some aspects of the response in Mozambique represented the ideal of what a response in a developing country should be. In particular, and despite some constraints, INGC behaved as the very model of an ideal National Disaster Management Institute. This strong national coordination also helped with coordination of the international humanitarian response.

This is not to say that the response was perfect, but that it was an effective response with all the applicable constraints.

Strong national coordination and good international coordination supported each other. The key role of the INGC contributed to the quality of the international response.

While there was strong national coordination, the cluster structure still played a useful role as it offered:

- a set of coherent and predictable points of contact for the Government with the international community; and
- a predictable interface that agencies deploying into the country to dock into.

If this had been a larger emergency, the need for the international community to have a single point of contact for each sector would have been more obvious. Even for this emergency response, the clusters reduced the number of different agencies that the INGC had to work with directly.

#### *7.7 Recommendations*

Strong national coordination maximised the benefits offered by the cluster system.

*Other Recommendation*      **Donors, the UN, the NGOs, and the Red Cross should support the development of strong national coordination in other countries.**

The INGC played a key role. Prior support by some members of the HCT had assisted the development of INGC.

*HCT Recommendation*      **Members of the HCT should continue and deepen their support to INGC**

Support for national civil society was inadequate.

*HCT Recommendation*      **HCT members should include national civil society actors in their own emergency planning, so that their capacity is developed, and they are included in funding requests.**



## Appendix 1 Terms of Reference

*Note: The evaluation team leader was invited to comment on the terms of reference for this evaluation but made only minor comments.*

*A second terms of reference covering the water, sanitation, and hygiene (WASH) cluster was annexed to this ToR, but this was later reduced to the ten questions at the end of this ToR.*

### 1. Background events leading to the crisis

Mozambique's population is vulnerable to the impact of natural disasters. A 16-year civil war together with the impact of HIV/ AIDS have undermined the economy and increased poverty. While economic and poverty indicators suggest that the humanitarian situation has improved in recent years, Mozambique still ranks 168<sup>th</sup> out of 177 countries on the UNDP Human Development Index and almost one quarter of the country's children are underweight, according to UNFPA.

On 4 February, with water levels rising due to heavy rains, the Mozambique Government's National Disaster Management Institute (INGC) declared a 'red alert' leading for the evacuation of the communities along the Zambezi River Basin. An estimated 285,000 people have been affected by the floods, including 163,000 people displaced.

On 22 February, Cyclone Favio made landfall on the coast of Vilanculos in the province of Inhambane. Approximately 134,000 people are estimated to have been affected by this second natural disaster as well key infrastructure and essential services damaged and crops destroyed. Access to safe drinking water and adequate sanitation has also been compromised.

The magnitude of the cyclone and floods (together with drought conditions in the south of the country, which have not been part of the UN humanitarian response) all point to the effects of global warming. These natural disasters risk are growing more frequent and more severe with time, highlighting the importance of national preparedness to reduce the vulnerability of the population to such events and minimize their impact.

### 2. Humanitarian Response

The Government of Mozambique launched its \$71m recovery and reconstruction plan on 5 March to address flood, drought and cyclone-affected areas. The plan seeks to reduce vulnerability of affected populations and restore normalcy to socio-economic conditions through continued humanitarian and resettlement assistance, the restoration of agricultural and economic activity and the rehabilitation of basic services and infrastructure.

The United Nations Country Team (UNCT) has been engaged in an ongoing development programme in Mozambique. Following the floods and cyclone in February 2007, the CT shifted to address the new emerging humanitarian needs. The IASC Humanitarian Country Team (IASC HCT) adopted the Cluster Approach to complement the Government's effective emergency response efforts. Nine clusters were established and correspond to the sector working groups created in the national and regional emergency operation centres.

The HCT requested at least \$13m grant to scale-up immediate emergency response activities from the Central Emergency Relief Fund (CERF) managed by the Emergency Relief Coordinator (ERC). As of 23 February, the CERF had made \$9.6m available through grants. The HCT launched a Flash Appeal (FA) for approximately \$18m.

### 3. Objectives and Scope of the IA-RTE

The need for an Inter-Agency Real-Time Evaluation (IA-RTE) was identified early in the disaster by the Regional Director's Team members of RIACSO, the regional IASC forum, with strong support from the UNCT. This would be a light evaluation

involving a team of five people to be conducted over a period of approximately three to four weeks. As a result, it was included in the FA. The primary objective of the IA-RTE is two-fold: (1) to assess the overall appropriateness, coherence, timeliness and effectiveness of the response, in the context of humanitarian reform and (2) to provide real-time feedback to support senior management decision-making and to facilitate planning and implementation. More generally, the exercise is expected to help strengthen effective coordination and response among partners in line with humanitarian reform principles and to also provide real-time learning on key response elements.

The time period covered by the evaluation is February - April 2007. The IA-RTE will look at pre-emergency issues, such as contingency planning and preparedness, and how these affected the response, as well as assess real-time response issues with a focus on the broader humanitarian response provided by both national and international actors as well as the involvement and perspectives of the affected population.

#### 4. Resources and Agency Involvement

The evaluation will be conducted by a five-person team, including two international and two national external consultants and an international NGO representative. This team is jointly funded through a cost-sharing arrangement by participating agencies, through the Flash Appeal. The evaluation is managed by an UNOCHA Evaluations Officer in UNOCHA NY with the support of a part-time research assistant.

#### 5. Key Issues to be Covered by the IA-RTE

The following five areas will be the focus of the IA-RTE:

1. The implementation of the **Cluster Approach** and its effectiveness, including issues such as:

- coordination between the UN, NGOs and the Government and the INGC (national and province/local); with special attention to effectiveness of the UN in mobilising NGOs
- the leadership role of the Resident Coordinator (RC), with specific regard to his role as interlocutor between the clusters and the Government;
- the role of cluster leads as responsible for information management and for the monitoring and quality control of the emergency response;
- inter-cluster coordination;
- operation of the clusters at the Maputo and field levels and linkages between the two;
- the ability of cluster leads to act impartially;
- The extent to which the different clusters are meeting with performance benchmarks set for their cluster;
- Role of the clusters as for a for discussing disaster preparedness, mitigation and risk reduction;
- Role and capacity of the OCHA Regional office and OCHA surge;
- The effectiveness of work on cross-cutting themes such as gender, DRR and HIV/AIDS;
- The extent to which the cluster approach will be maintained and/or integrated as the mainstream approach to humanitarian and early recovery coordination

2. **Humanitarian Financing** to include issues such as:

- The FA and the CERF as resource mobilisation tools to improve the timeliness and effectiveness of the response;
- Relationship between the FA and other humanitarian community appeals and the government appeals;
- participation and funding of NGOs through the CERF;



- the coherence of HCT initiatives in resource mobilisation;
3. **Preparedness / Connectedness** between short-term and longer-term problems and response, including issues such as:
    - the factors that facilitated preparedness and a rapid response to the natural disaster;
    - UNCT's ability to shift from a development-oriented programme to one focused on humanitarian emergency response;
    - How disaster preparedness is being taken on when there is not a permanent OCHA office present, with reference to the Disaster Management team and the Disaster Preparedness Plan;
    - the transition from relief to early recovery and linkages between the two phases;
    - surge capacity
    - extent to which disaster risk reduction (DRR) is being reflected in the response
    - Extent to which DRR elements have been addressed in the regular development programmes and connectedness between emergency DRR action and development DRR action
  4. **Meeting the Needs of the Affected Population**, including issues such as:
    - support of household and community coping mechanisms and resilience;
    - partnerships between national and international organisations;
    - support provided to local capacities, livelihoods and the capacity of local government and civil society;
    - the involvement of affected populations in the delivery and management of humanitarian assistance;
    - quality of needs assessments and involvement of affected population in needs assessments and planning exercises;
    - extent to which needs identified by the affected population are being met.
  5. Supporting **national capacity**, including:
    - Review how the international community responds in the context of a strong national government lead and the impact this has on planning, implementation and coordination;
    - Review how the international community has worked with other local institutions, including the civil society, private sector and the media
    - Consider the nature of cooperation between the humanitarian response and the UN resident agencies, including the RCs office and the Disaster Management Team.

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## 6. Methodology

The methodology will use the "lite-RTE" approach which will include such methods as field and meeting observation, site visits, key informant interviews, focus group meetings and mini-workshops with the HCT. In addition, surveys to understand the perceptions and needs of the affected population (by age group, gender, origin) will be undertaken in at least three different camp situations. Surveys will also include host population and will be designed by the team leader and conducted by the national consultants.

## 7. Management of the IA-RTE

The RTE will be managed by an evaluation officer in OCHA New York. A small, HQ-based inter-agency RTE Management Group composed of evaluation staff of participating agencies will be set up and will provide guidance on the drafting of the TOR and provide neutrality and ensure quality-control for IA-RTE products. A mirror group of the RTE Management Group is also being set up at country level with broad representatives from key humanitarian agencies, NGOs and the Government, including the provincial and district authorities. The country-level

group will interact with the team as a whole, will participate in possible briefing and debriefing workshops, ensure full engagement of their agencies, and provide feedback on the IA-RTE report.

## 8. Proposed Team

Two internationals (1 Team Leader and 1 humanitarian response consultant) are required with the following skill sets:

- Experience in emergency response, particularly in natural disaster settings;
- Familiarity with Humanitarian Reform;
- Excellent knowledge of the UN and NGOs in Mozambique;
- Good facilitation skills;
- Experience using participatory techniques in information collection;
- Working knowledge of Portuguese.

Two national consultants are required with Natural Disaster experience and gender-participation to work exclusively with the affected population. They should have:

- Knowledge of relevant local language(s);
- Experience using participatory techniques in information collection;
- Knowledge of or experience working with local NGOs or local government structures;
- Knowledge of water, sanitation and hygiene issues would be an asset;
- Experience working on gender issues.

In addition there will be an international NGO representative to help facilitate consultations with NGOs and disaster-affected communities. He will focus on the accountability systems that the different stakeholders have used to determine whether or not they were meeting the needs of the affected population.

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## 9. Timeframe

8 Mar	Concept Note drafted
9 Mar	TOR drafted and sent to Field and potential partners for comment;
Week of 12 March	Identification and contracting of team;
16 March	First meeting of the RTE Management Group
20 March	Finalization of TOR
31 March - 20 Apr	Start of Evaluation (25 working days each, including travel)
1 Apr	Briefing by OCHA, Meeting with the team, meeting with Management Team.
2 Apr	Meeting with INGC, Initial workshop with IASC-CT Afternoon departure for Caia.
3 Apr	Meetings with INGC/CENOE and district authorities, meetings with clusters, UN agencies, Red Cross and NGOs
4 - 7 Apr	Field visits. Address SETSAN in the first day and other clusters at the end of the first field trip
8 Apr	Return to Maputo
9-14 Apr	Meetings with different stakeholders including Management Team, INGC and relevant ministries, donors including

	USAID/OFDA, ECHO and DFID, UN Agencies, IFRC, Mozambique Red Cross (CVM) and other Participating Red Cross national societies, NGOs. Preliminary findings and report drafting
15-19 Apr	Second field trip focusing on surveys and focus groups with beneficiaries
20 Apr	Debriefing workshop(s) with RTE Management Group at the national level, UNCT, NGOs
21-22 Apr	Finalising draft report
23 Apr	Final meetings with stakeholders and departure
1 week in May	Finalise and submit report and disseminate findings to OCHA / UNICEF, IASC, donors, / implement findings; Monitoring of actions taken in response to evaluation (5 additional days for finalisation)

## 10. Expected Outputs

- A timeline that summarizes key events of the response
- A literature review summarising the findings and recommendations of past evaluations conducted on Mozambique.
- A concise and fully edited report in English which describes the disaster, the response provided and key achievements and challenges in line with the questions raised under point 5. The report, or parts of it, may also be translated into Portuguese.
- A one -two page executive summary of key findings and recommendations
- A brief (2-4 pages) report focusing on process-related issues, highlighting examples of "good practice" that should be repeated in future RTEs, significant gaps and recommendations.
- A power point containing key findings and recommendations. Presentations made to donors, IASC and UNCT.
- Identification of possible benchmarks to be used by each of the clusters to assess effectiveness of the response and progress against them.
- RTE reference group do an AAR afterwards

## 11. Use of the IA-RTE

The draft report will be discussed during an exit workshop held while the team is still in the country to validate findings and facilitate "real time" follow-up on recommendations by field managers. During that exit workshop agencies will seek to agree on how to address the recommendations via a management response matrix and commit themselves to their immediate implementation to ensure the real-time nature of the exercise is maximised. The report will also be presented to the IASC, highlighting issues that require discussion at a global level. Similarly, follow-up action will be recorded in the form of a management response matrix by the IASC.

### *A1.1 Additional WASH cluster questions*

*The following questions were negotiated by the evaluation team as the key questions relating to the second ToR cover the WASH cluster. These replaced a full ToR for WASH that was annexed to the main terms of reference above, it having been agreed within the management team that WASH would not have a separate evaluation, but would be incorporated in the main evaluation.*

#### Impact

1. Assess the added value of the Cluster Approach versus the traditional coordination mechanisms to meet these objectives?

Effectiveness

2. For the responsibilities of the cluster lead what have been the key constraints which may have impacted optimal achievements?
3. Is there any gap identified versus those responsibilities?

Efficiency

4. Assess if the level of resources and time allocated by the different partners to the development of the cluster approach is appropriate to expected and realized benefits. A specific question to be looked at is that UNICEF as Cluster lead did not have a dedicated WASH cluster Coordinator.
5. Assess how the WASH cluster coordination mechanisms have been combined with former coordination mechanisms, have they been complementary to those former coordination mechanisms, have they been linked to each other, how efficient has been the inter-cluster coordination?
6. Detailed analysis of the role of the Pooled Fund in the development of the cluster approach (allocation mechanisms and decision criteria, transparency, monitoring mechanisms).

Relevance appropriateness

7. What analysis supported the launch of the cluster approach to the WASH sector? How relevant is the cluster approach to Mozambique context?
8. What was the level of participation of the different stakeholders (State institutions, NGOs, international organizations, the Red Cross and Red Crescent Movement and UN agencies, Donors), in this analysis?
9. How have been defined the priorities / planned results / timeline of Mozambique WASH Cluster have been defined? How have been the different stakeholders involved in the Cluster priorities setup?
10. Assess the level of satisfaction of the different involved stakeholders (State institutions, NGOs, international organizations, the Red Cross and Red Crescent Movement and UN agencies, Donors) regarding the WASH cluster approach?

## Appendix 2 Brief Chronology

The chronology has been developed from a number of sources including the initial work by Ana Palao, articles on Relief Web, on interviews with key informants, and on Unicef's excellent real time review of the response.

<i><b>Date</b></i>	<i><b>Description</b></i>
Wed 24 May'06	WFP hosted meeting on emergency preparedness and response for disasters in Mozambique. This led to a series of occasional meetings with NGOs on disaster preparedness.
Sep 06	UNDMT TWG undertook an IASC self assessment for in-country disaster preparedness and response - leading to an agreement that there should be a UNHCT and that the Cluster Approach should be developed
Oct 06	INGC launched the National strategy for the prevention and mitigation of natural disasters - a seven year plan - establishing CENOE
Oct 06	INGC launched the Contingency plan for the 2006-07 rainy season (from Oct to March)
Oct 06	Simulation exercise held by INGC
Fri 10 Nov'06	A funding shortfall of more than 70 percent has forced WFP to halve its rations in Mozambique
Thu 18 Jan'07	IFRC reports that 6 provinces in Mozambique are badly affected by rain storms and flooding
Sat 20 Jan'07	INGC starts calling daily coordination meeting to respond to flooding in Quelimane
Tue 23 Jan'07	INGC increases planning for flooding on the Zambezi in response to rising water levels upstream
Tue 23 Jan'07	Rainfall of 345mm in one day causes heavy flooding in Quelimane. Preparation by INGC pays off as people take shelter in five emergency shelters.
Wed 24 Jan'07	INGC hold meeting for administrators from the 13 potentially affected districts along the Zambezi in Caia
Wed 24 Jan'07	INGC asks focal points to begin planning for a response
Wed 24 Jan'07	In Zambia, rain has swamped at least 21 of the country's 73 districts and is threatening disappoint expectations of a third consecutive year of a surplus on the maize harvest. Heavy downpours have occurred since the second week of December 2006 in the agriculturally rich regions of Eastern, Northern, Western and North-Western provinces.
Wed 24 Jan'07	Cahora Bassa Discharge at 2,500m <sup>3</sup> /s just above the base discharge of 2,000m <sup>3</sup> /s needed for navigability of the ferry at Caia.
Fri 26 Jan'07	Warning that discharges from Cahora Bassa may have to increase as the reservoir is filling up

<i>Date</i>	<i>Description</i>
Fri 26 Jan'07	OCHA issues Floods Situation Report No 1 for the region. Major rivers in the region, such as the Pungwe, Lucite, Licungo, Mutumba, Shire and Zambezi are swollen and, specifically in the Zambezi River and surrounding tributaries, water levels have reached their alert threshold. Further flooding is to be expected. The water management authorities are working closely together with the disaster management authority of Mozambique to ensure that adequate time is given to evacuate populations down stream in case the dam needs to increase the release. In some districts along the lower Zambezi though, water levels have exceeded alert levels due to local rains.
Fri 26 Jan'07	First WFP staff on the ground in Caia and Mutarara.
Tue 30 Jan'07	INGC Deputy head briefs the UNCT on preparations for the floods
Tue 30 Jan'07	The Zambezi River is rising rapidly, increasing significantly the risk of flooding in lowland areas.
Wed 31 Jan'07	Floodwater from neighboring Malawi's Shire River, which flows into Mozambique and becomes a tributary of the Zambezi River, has led to 500 people to be evacuated from islands in the river where it flows through Mutarara District. The INGC used motorboats and local people assisted with canoes during a four-hour operation during the night to rescue people marooned by the rising water.
Thu 01 Feb'07	Unicef informally discusses the potential use of the cluster approach with INGC.
Thu 01 Feb'07	Cahora Bassa discharge increased to 3,300m <sup>3</sup> /second
Fri 02 Feb'07	OCHA issues Floods Situation Report No 2 for the region
Sat 03 Feb'07	IFRC reports nearly 4,000 cases of cholera in Angola as well as flooding there and an increase in cholera cases in Zambia
Sun 04 Feb'07	INGC formally declares a preparedness red alert due to rising river levels
Mon 05 Feb'07	Inflow to Cahora Bassa reaches 8,000m <sup>3</sup> /s. Reservoir is close to safe capacity.
Mon 05 Feb'07	DMT TWG meets and resolves to recommend a CERF funding application and the adoption of the cluster approach to the Country Team retreat on 8 February.
Tue 06 Feb'07	OCHA issues Floods Situation Report No. 1: for Mozambique
Tue 06 Feb'07	World Vision hosted and NGO meetings on the Zambezi floods
Tue 06 Feb'07	Cahora Bassa now discharging at 4,600m <sup>3</sup> /s
Wed 07 Feb'07	Government's technical committee for disaster management (with ministries, UN, Red Cross and NGOs) meet. INGC announces that director relocating to Caia for emergency
Wed 07 Feb'07	Cahora Bassa discharging 6,600m <sup>3</sup> /s
Thu 08 Feb'07	UNCT retreat discussed the likely emergency and agreed on the formation of a HCT, to initiate the Cluster Approach and a CERF request. UNCT also requested OCHA for support for these processes
Thu 08 Feb'07	Mozambique's 'Noticias' newspaper reports that the prime minister has told the army to forcibly evacuate over 2,500 people who have defied government orders to leave areas threatened by serious floods.

<i>Date</i>	<i>Description</i>
Thu 08 Feb'07	Inflows to the Cahora Bassa Dam reservoir reach 11,000 m3/s
Thu 08 Feb'07	Cahora Bassa discharging 6,600m3/s
Fri 09 Feb'07	First Unicef team on the ground in Caia
Fri 09 Feb'07	Cahora Bassa discharge increased to 8,400m3/s
Sat 10 Feb'07	OHCA humanitarian officer arrives from Geneva
Sun 11 Feb'07	UNDMT TWG meets with OHCA humanitarian officer on the establishment of the HCT and the Clusters and for preparing the CERF appeal
Mon 12 Feb'07	Follow-up UMDMT meeting with Resident Coordinator sets up ten clusters. Cluster leads were discussed but they were later reshuffled as WHO, IOM, and IFRC became actively involved
Mon 12 Feb'07	IFRC appeals for \$5.97Mn for the floods
Mon 12 Feb'07	NGO meeting is briefed on the Cluster Approach by OCHA team leader and Unicef Rep
Mon 12 Feb'07	Cahora Bassa discharge reduce to 6,600m3/s. Flooding peaks downstream as earlier discharges make their presence felt.
Tue 13 Feb'07	UN Resident Coordinator meets with the international humanitarian community in Mozambique to officially establish the HCT and the clusters
Tue 13 Feb'07	INGC officially requests assistance for the disaster
Wed 14 Feb'07	The Resident Coordinator presented the HCT and the Clusters to the donor community and INGC at a donor briefing held by INGC
Wed 14 Feb'07	Cahora Bassa discharge reduced to 6,000m3/s.
Thu 15 Feb'07	Cluster meeting to discuss the inputs for the CERF already assembled. HCT agrees to delay Flash Appeal to wait for indications on how the Government would appeal to avoid duplication
Thu 15 Feb'07	First draft of Mozambique CERF appeal circulated among HCT and OCHA Geneva
Fri 16 Feb'07	Resident Coordinator briefed the Donors on the strategy of the HCT, the Cluster composition, and the CERF request.
Tue 20 Feb'07	CERF request sent to New York requesting \$13.5mn
Tue 20 Feb'07	Cahora Bassa discharge reduced to 3,600m3/s, Intake is still at the 10,000m3/s level.
Wed 21 Feb'07	First WFP staff on the ground in Vilanculos, in anticipation of the cyclone.
Wed 21 Feb'07	CERF secretariat approved \$7.625mn, only half of food aid request met, health, education, and logistics also reduced
Thu 22 Feb'07	WFP and Unicef appeal CERF decision - providing extra information
Thu 22 Feb'07	Cyclone Favio strikes the coast and causes extensive damage in Vilanculos
Fri 23 Feb'07	CERF allocation for WFP and Unicef increased following their clarifications
Wed 28 Feb'07	IOM and Habitat submit CERF request for shelter to OCHA rep
Sat 10 Mar'07	INGC declares that the relief effort is over in the cyclone affected areas.

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<b><i>Date</i></b>	<b><i>Description</i></b>
Sat 10 Mar'07	CERF request for shelter forwarded to New York
Wed 14 Mar'07	WFP makes last food distribution to the cyclone-affected population
Wed 14 Mar'07	IFRC revises appeal to 15.9Mn USD
Thu 15 Mar'07	Unicef stops delivering relief aid to the cyclone-affected population.
Sun 25 Mar'07	CERF request for shelter approved
Sun 01 Apr'07	Real-time evaluation team arrives

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## Appendix 3 Persons Met

### A3.1 Summary

The team interviewed over six hundred persons individually or in groups. The individual or group interviews were as follows:

<i>Summary of Interviews</i> Category of person interviewed	Cat	No	as %	of which	
				♀	♀ as %
United Nations Staff	U	43	29%	11	26%
Government Official	G	25	17%	3	12%
NGO or Red Cross staff	N	54	37%	10	19%
Beneficiary	B	14	10%	2	14%
Trader	T	3	2%	0	
Donor	D	8	5%	3	38%
<b>Total</b>		<b>147</b>	<b>100%</b>	<b>29</b>	<b>20%</b>

<i>Summary of Interview Methods</i> Type of interview method	Type	No	as %	of which	
				♀	♀ as %
Semi-structured Interview (Individual)	ssi	35	24%	6	17%
Semi-structured Interview (Group)	ssg	63	43%	11	18%
Group Meeting	gm	42	29%	8	20%
Brief Discussion	bd	7	5%	4	57%
Telephone interview	tc	w	1%	0	
		<b>146</b>	<b>100%</b>	<b>29</b>	<b>20%</b>

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The list below lists those interviewed along with the method used and the interviewers. The interviewers are:

<i>Interviewer</i>	<i>Initials</i>
John Cosgrave	jc
Célia Gonçalves	cg
Riccardo Polastro	rp
Daryl Martyris	dm
Muchimba Sikumba-Dils	ms
Birte Hald (not a team member- attended one interview only)	bh

### A3.2 Details of key informant and individual interviews

<i>Surname, Name</i>	<i>Org. and function</i>	<i>♂♀</i>	<i>M</i>	<i>Cat</i>	<i>Place</i>	<i>Date<sup>0</sup></i>	<i>By</i>
Ahlers, Nick	IRD, Chinde Programme Coordinator	♂	ssg	N	Matilde	04-Apr	rp ms
Aida Mohamed	UNICEF, Programme Officer	♀	ssg	U	Caia	13-Apr	dm ms
Aide, Emmanuel	WHO, HIV Programme Officer	♂	ssg	U	Maputo	11-Apr	jc
Alberto, Madungue	World Vision, Assistance Officer,	♂	gm	N	Caia	03-Apr	jc cg rp
Alexandre, Michaela	Head of the International Rivers Office	♀	Ssg	G	Maputo	12-Apr	jc
Alface, Alberto	Programme Analyst for mine action DRR and small arms, Cluster Lead for early recovery	♂	ssi	U	Maputo	11-Apr	jc
Alfandega, Paulo	WFP, Food Aid Monitor	♂	ssg	U	Matilde	04-Apr	rp ms
Alfredo	Regulador	♂	ssg	B	Marra	04-Dec	ms
Aligy, Imane	ActionAid, Zambezia coordinator	♂	gm	N	Caia	03-Apr	jc cg rp

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Amani	District director of Health and acting administrator	♂	ssi	G	Mutarara	04-Apr	jc
Amjia, Suleimane	Mayor of Villanculos	♂	ssi	G	Vilanculos	16-Apr	rp, cg
Andrade, Silvero	IRD, Project Officer in Matilde	♂	ssg	N	Matilde	04-Apr	rp, ms
Antoneta	Beneficiary	♀	ssg	B	Ndambuen da	04-Dec	
Antonia, Orlando	Seed trader	♂	bd	T	DAF	04-Apr	jc
Apece, Santo	Camp leader	♂	gm	B	DAF	04-Apr	jc
Araujo, Bibo	Position unknown	♂	ssg	B	Mponha	04-Nov	ms
Bacher, Julia	WFP Logistics Officer	♀	gm	U	Caia	03-Apr	jc, cg, rp, dm
Bafumo	Bafumo	♂	ssg	B	Tchetcha	04-Apr	jc
Bagnoli, Andrea	WFP IASO	♂	gm	U	Caia	03-Apr	jc, cg, rp, dm
Baiets, Bruno	Belgian Red Cross, Relief ERU	♂	gm	N	Caia	03-Apr	jc, cg, rp
Barsamian, Karén	WFP, ICT Officer, and cluster lead for the telecommunications cell	♂	ssi	U	Maputo	10-Apr	jc
Berit Kristin Tvette	First Secretary, Norwegian Embassy	♂	ssi	D	Maputo	16-Apr	jc
Brown, Denis	World Vision, Food Aid Manger, Mozambique	♂	ssi	N	Maputo	09-Apr	jc
Bureau, Antoine	WHO, Programme Officer, NGOs	♂	Ssg	U	Maputo	11-Apr	jc
Burtet, Mauricio	WFP Emergency Coordinator	♂	ssg	U	Vilanculos	15-Apr	rp, cg
C. Samo, Fernando	Permanent Secretary of Inhassouro district	♂	ssi	G	Inhassouro	17-Apr	rp, cg
Caetono, Custoseaio	IRD, Watsan Monitor	♂	ssg	N	Matilde	04-Apr	rp, ms
Caibone, João	WFP Programme Officer	♂	gm	U	Caia	03-Apr	jc, cg, rp
Cameron, Heather	Canadian Embassy, Counsellor, development	♀	Ssg	D	Maputo	17-Apr	jc
Cangela, Elias	INGC	♂	ssg	G	Vilanculos	16-Apr	rp, cg
Carlos Isidoro	Manica Province, Provincial Director of Transport	♂	ssg	G	Caia	03-Apr	jc, cg, rp
Chamusso, Alfredo	Care, Manager of Vilanculos sub office.	♂	ssg	N	Vilanculos	17-Apr	rp, cg
Chandimba, Ines Artur Agustinho	traditional leader	♀	ssg	B	Chandimba	04-Dec	ms
Chaveiro Masinho, Francisco	Ward leader Macune	♂	ssi	G	Vilanculos	16-Apr	rp, cg
Checha, Chapaman	Regulo (since 1965)	♂	ssg	B	Tchetcha	04-Apr	jc
Chiconela, Domingos	Unicef, Mutarara WASH Team Leader	♂	gm	U	Caia	03-Apr	jc, cg, rp
Cooke Noel	NGO Programme Officer	♂	Ssg	D	Maputo	13-Apr	jc
Cortar, Albano Doda	Camp leader	♂	ssg	B	Tchetcha	04-Apr	jc
Councillor	Councillor	♂	ssg	B	Tchetcha	04-Apr	jc
Crespo, Joanna	WHO, Admin Officer	♀	Ssg	U	Maputo	11-Apr	jc
Custema, Gorge	Sena Sugar Company	♂	ssg	T	Matilde	04-Apr	rp, ms
Davies, Ken	WFP Representative	♂	ssi	U	Maputo	10-Apr	jc
de Fretas, Manuel E. Maciel	WASH lead, UNICEF	♂	ssi	U	Maputo	17-Apr	dm
de Jesus Maria, Fnacerlina	INGC Delegate, Matilde	♀	ssg	G	Matilde	04-Apr	rp, ms
Dereau, Heloise	IRD, Hydraulic engineer	♀	ssg	N	Matilde	04-Apr	rp, ms
do Lisa, Rainha	Elderly Woman	♀	bd	B	DAF	04-Apr	jc
Domingos, Leonor	USAID, Food Security and Disaster Response Advisor	♀	ssi	D	Maputo	17-Apr	jc
Domingos, Meque	CARE, assistant of emergency mananger	♂	ssg	N	Vilanculos	17-Apr	rp, cg
Dupraz, Jean	UNICEF, Chief of social policy, planning information and monitoring	♂	ssg	U	Vilanculos	15-Apr	rp, cg
Emerson, Paola	OHCA, Team Leader	♀	bd	U	New York	03-May	jc
Fernandes, Melissa	Unicef, Emergency officer (information)	♀	ssi	U	Maputo	10-Apr	jc
Ferreira, Carla	Permanent Secretary, Dist Admin	♀	ssi	G	Mopeia	04-Oct	dm, ms
Fussi, Fabian	Intermon HC in Barcelona	♂	ssg	N	Maputo	11-Apr	jc

Gabonie, Alfred	WFP Programme Officer	♂	gm	U	Caia	03-Apr	jc cg rp dm
Ganobe, Luciano	Ward leader of Macocuene	♂	ssg	G	Inhassouro	17-Apr	rp cg
Gaspar, Zozino Antonio	German Agro Action, Monitor	♂	ssg	N	Matilde	04-Apr	rp ms
Gilbert, Micheline	Canadian Embassy, First Secretary, Development	♀	ssg	D	Maputo	17-Apr	jc
Grey, Eduarda	DFID, Deputy Programme Manager	♂	ssi	D	Maputo	16-Apr	jc
Gudnitz, Sune	OCHA, Humanitarian Support Unit	♂	ssi	U	Geneva	02-May	jc
Guente, Albano Vasco	Mozambican Red Cross	♂	gm	N	Mutarara	04-Apr	jc
Hald, Birte	OCHA, Team Leader	♀	gm	U	Maputo	01-Apr	jc rp
Hamial, Jorge Caetano	Chefe da localidade da Matilde	♂	ssg	G	Matilde	04-Apr	rp ms
Harari, Maya	Canadian RC Emergency Response Unit, Team Leader	♀	bd	N	Vilanculos	16-Apr	rp
Heffernan, Mark	IOM, Regional Representative	♂	ssi	U	Maputo	17-Apr	jc
Helmet, David	CARE, Shelter specialist for Favio programme	♂	ssg	N	Vilanculos	17-Apr	rp cg
Helyar, Will	Assistant CD Programmes, Concern	♂	ssi	N	Maputo	12-Apr	jc
Hopkins, Jeremy	Unicef, Team Leader for Caia	♂	gm	U	Caia	03-Apr	jc cg rp dm
Jacquet, Bertrand	Unicef, Health and Nutrition Mutarara	♂	gm	U	Caia	03-Apr	jc cg rp dm
Jagubov, Yusif	IFRC, Logistician	♂	gm	N	Caia	03-Apr	jc cg rp
Jana, José	German Agro Action, Local Coordinator	♂	ssi	N	Vilanculos	17-Apr	rp cg
Janela, Fernando	Provincial Director of Public Works	♂	gm	G	Mutarara	04-Apr	jc
João, Francisco	Seed trader	♂	bd	T	DAF	04-Apr	jc
Johnstone, Malcolm	IFRC, Shelter Department, Project Officer	♂	tc	N	Geneva	01-May	jc
Jonas, João	Chef do Posto	♂	ssi	G	Chupanga	04-Dec	dm ms
Jose Danbiro	INGC, Director Regional	♂	ssg	G	Caia	03-Apr	jc cg rp
Lab, Bruno	MSF Switzerland, head of mission	♂	ssi	N	Maputo	11-Apr	jc
Lai, Joana	HIV/AIDS Programme Manager, Samaritan's Purse	♀	ssi	N	Beira	12-Apr	rp
Laise, Carlos Noa	Emergency Commission member	♂	ssi	G	Maputo	11-Apr	jc
Lantz, Petra	UNFPA	♀	gm	U	Maputo	02-Apr	jc cg rp
Linares, Dr Estela Lúcia Oliva	WHO epidemiologist, Expanded Programme of Immunisation Officer	♀	ssi	U	Maputo	12-Apr	jc
Lionel, Lionel	President of Mozabican RC branch of Vilanculos	♂	ssi	N	Vilanculos	16-Apr	rp cg
Losseau, Albert	Food Security Officer	♂	Ssg	D	Maputo	13-Apr	jc
Lt Col Raimundo Fringe	UNAPROC Liaison Officer	♂	ssg	G	Caia	03-Apr	jc cg rp
Lubari, David	OCHA, Field Officer	♂	gm	U	Caia	03-Apr	jc cg rp
Lubari, David	OCHA, Field Officer	♂	ssg	U	Vilanculos	15-Apr	rp cg
M'Bere, Pedro	INGC	♂	ssg	G	Vilanculos	16-Apr	rp cg
Mabasso, Samson	Logistics Officer WFP	♂	ssg	U	Vilanculos	15-Apr	rp cg
Mabureza, José	District Administrator	♂	ssg	G	Vilanculos	16-Apr	rp cg
Manhica, Samuel	Unicef, WASH Programme Officer	♂	gm	U	Caia	03-Apr	jc cg rp
Manhique, Joel	Food aid FO World Vision	♂	ssg	N	Mutarara	11-Apr	rp cg
Martins, Jorge Aderito	INGC Marromeu District	♂	ssi	G	Chupanga	04-Dec	dm ms
Matias, Matias	Subsistence farmer	♂	bd	B	DAF	04-Apr	jc
Matsinghe, Daniel	INGC Caia	♂	gm	G	Caia	03-Apr	jc cg rp
Maultique, Joel	World Vision	♂	gm	N	Mutarara	04-Apr	jc
McIvor, Chris	Save the Children (UK), Representative.	♂	ssi	N	Maputo	12-Apr	jc
Mendes, Anisio	Unicef, Telecommunications Officer	♂	gm	U	Caia	03-Apr	jc cg rp

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Miovet, Antonio	Bafumo	♂	ssg	B	Nhambalo 2	04-Apr	jc
Moyon, Jacinte	CVM, Finance Director	♂	ssg	N	Maputo	10-Apr	jc
Muchache, Enice	CVM, Programme Director	♀	Ssg	N	Maputo	10-Apr	jc
Mutemba, Luis Antonio	SAOIEV	♂	ssg	N	Vilanculos	16-Apr	rp cg
Namashulua, Adolfo	INGC, Director, Vilanculos	♂	ssi	G	Vilanculos	16-Apr	rp cg
Nelson	Beneficiary	♂	ssg	B	Moponho	04-Dec	dm
Neweu, Mike	Oxfam, Logistics Coordinator,	♂	gm	N	Caia	03-Apr	jc cg rp
Ngokwey, Ndolamb	UN Resident Coordinator	♂	ssi	U	Maputo	10-Apr	jc
N'gote, Jose Faria	Camp leader	♂	ssg	B	Tchetcha	04-Apr	jc
Nhancale, Greson	Save the Children Fund	♂	gm	N	Caia	03-Apr	jc cg rp
Nirona, Sylvester	Oxfam, Head of field office in Mutarara	♂	ssi	N	Mutarara	11-Apr	rp cg
Novela, Helena	Save the Children Norway, Representative	♀	bd	N	Maputo	12-Apr	jc
Nutura, Ikto	IRD Emergency coordinator,	♂	gm	N	Caia	03-Apr	jc cg rp
Nwaehwe, Philip	IFRC, Regional Water & Sanitation Officer	♂	gm	N	Caia	03-Apr	jc cg rp
Obra, Pedro	Water Sanitation WVI	♂	ssg	N	Mutarara	11-Apr	rp cg
Olcoth, Patrick	Public Health Promotion, Team Leader	♂	ssg	N	Caia	12-Apr	rp cg
Oosterkamp, Hugo	Oxfam, Water Sanitation,	♂	gm	N	Caia	03-Apr	jc cg rp
Osjuana, Manuel	WFP, Programme Officer	♂	gm	U	Caia	03-Apr	jc cg rp
Pakkala, Leila	Unicef, Representative	♀	ssi	U	Maputo	10-Apr	jc
Pietri, Pierre	FITIS, dubai, telecom cluster	♂	ssg	U	Caia	13-Apr	dm ms
R. de Leon, Alfredo	Administración	♂	ssg	N	Caia	12-Apr	rp cg
Radies, Tracey	American Red Cross, Relief ERU Team Leader	♀	gm	N	Caia	03-Apr	jc cg rp
Rooijackers, Michel	Support Services Manager, Save the Children	♂	ssi	N	Maputo	12-Apr	jc
Rudert, Christiane	Unicef, Health and Nutrition Team Leader, Mopeia	♂	gm	U	Caia	03-Apr	jc cg rp
Samuel Manhica	UNICEF, Asst. project Officer	♂	ssg	U	Caia	13/04/2007	dm ms
Sande, Mhawa Manuel	Position unknown	♂	gm	N	Vilanculos	16-Apr	rp cg
Sanders, Graham	IFRC, Head of Shelter Department	♂	tc	N	Geneva	02-May	jc
Sangara, Moussa	Relief Manager WVI	♂	ssg	N	Mutarara	11-Apr	rp cg
Sangiza, Jose	Camp leader	♂	ssg	B	Tchetcha	04-Apr	jc
Sansó Llenas, Oscar	Project manager	♂	ssg	N	Caia	12-Apr	rp cg
Sarnen, Jack	WFP, Emergency Logistics Officer	♂	gm	U	Caia	03-Apr	jc cg rp
Sergio	Civil Engineer, Member of the Zambezi River Commission	♂	ssg	G	Maputo	12-Apr	jc
Sheach, Chris	FHI, Relief Coordinator	♂	gm	N	Caia	03-Apr	jc cg rp
Siguissone Muileva, João	Health FO World Vision	♂	ssg	N	Mutarara	12 Apr'00	rp cg
Simbinge, Isaque	AMURT	♂	gm	N	Mutarara	04-Apr	jc
Sinose, Manuel Francisco	INGC	♂	gm	G	Mutarara	04-Apr	jc
Smith, Tim	WFP Rome, Head of Logistics Cluster Support Cell	♂	gm	U	Maputo	02-Apr	jc cg rp
Spalviero, Mathias	UN-HABITAT	♂	gm	U	Maputo	02-Apr	jc cg rp
Sr. Selestino	Administrador, Murrumbala	♂	ssi	G	Morrumbala	04-Nov	dm ms
Teixeira, Fernanda	CVM, General Secretary	♀	Ssg	N	Maputo	10-Apr	jc
Tesoura, Michael	Intermon Oxfam Humanitarian Coordination	♂	Ssg	N	Maputo	11-Apr	jc
Thulkanam, Michelle	OCHA, Information Officer	♀	gm	U	Maputo	01-Apr	jc rp
Thyregod, Ida	UNFPA	♀	gm	U	Maputo	02-Apr	jc cg rp
Van Logchem, Barbara	WFP, Head of Logistics Cluster	♂	ssi	U	Maputo	12-Apr	jc
Vasquez, Luis	WHO, Programme Officer	♂	gm	U	Caia	03-Apr	jc cg rp

Von Pistohlkors, Erik	First Secretary, Social Sectors and Humanitarian Affaris	♂	Ssg	D	Maputo	13-Apr	jc rp
Vonvarle, Tessa	World Vision	♀	gm	N	Mutarara	04-Apr	jc
Waela, Judith	Save the children, programme officer	♀	gm	N	Caia	03-Apr	jc cg rp
Weijmans, Philip	Representative, LWF	♂	Ssi	N	Maputo	13-Apr	jc
Whande, Eunile	Public Health Promoter	♀	ssg	N	Caia	12-Apr	rp cg
Zimba, Gaspar Joaquim	CARE, Training Supervisor for better building	♂	ssg	N	Vilanculos	17-Apr	rp cg
Zucula, Paulo	Director, INGC - National Disaster Management Institute	♂	ssi	G	Maputo	02-Apr	jc rp bh

### A3.3 Focus group and similar interviews

<i>Place</i>	<i>Group Description</i>	<i>♀</i>	<i>♂</i>	<i>Chief Topics</i>	<i>Date</i>	<i>By</i>
24 Julho	Beneficiaries	nc	nc	Floods and aid	10 Apr'07	dm ms
Barrio Mocuene, Inhassouro	Mixed group	5	3	Cyclone and aid	17 Apr'07	rp cg
Chandimba	Beneficiaries	nc	nc	Floods and aid	12 Apr'07	ms
Chupanga	Beneficiaries	nc	nc	Floods and aid	12 Apr'07	ms
Chupanga	Resettled people from 2001 flood	3	4	Reasons for staying	12 Apr'07	ms dm
Chupanga	Mixed group	40	50	Floods and aid	04 Apr'07	rp
Daf near Caia	Women	6		Floods and aid	04 Apr'07	jc
Daf near Caia	Latrine Mobilisers	3	1	Floods and latrines	04 Apr'07	jc
Goli Goli	Mixed group	17	23	Floods and aid	11 Apr'07	rp
Inhassouro	Women	20		Cyclone and aid	17 Apr'07	rp cg
Macune	Women	2		Cyclone and aid	16 Apr'07	rp
Magagade	Mixed group	5	7	Floods and aid	12 Apr'07	rp
Marra	Beneficiaries	nc	nc	Floods and aid	12 Apr'07	ms
Matilde	Focus Group	30	40	Floods and aid	04 Apr'07	rp
Moponho	Beneficiaries	nc	nc	Floods and aid	11 Apr'07	ms
Ndambuenda	Beneficiaries	nc	nc	Floods and aid	11 Apr'07	ms
Nhacadzedze	Women in Accomodation Center		16	Floods and aid	12 Apr'07	rp
Nhacatundo	Focus Group	40	50	Floods and aid	05 Apr'07	rp
Nhambala I	Focus Group	7	7	Floods and aid	12 Apr'07	rp
Nhamirere	Focus Group	10	10	Floods and aid	05 Apr'07	rp
		188	211			

nc- the number of attendees was not counted



## Appendix 4 Consultants' Itinerary

<i>Date '07</i>	<i>John Cosgrave</i>	<i>Célia Gonçalves</i>	<i>Daryl Martyris</i>	<i>Riccardo Polastro</i>	<i>Muchima Sikumba-Dils</i>
Sat 31 Mar	Depart Ireland			Depart Spain	
Sun 01 Apr	Arrive Maputo: Briefing with OCHA			Arrive Maputo: Briefing with OCHA	
Mon 02 Apr	Interview with INGC Director Meeting with RTE Management Team Meeting with Humanitarian Country Team	Meeting with RTE Management Team Meeting with Humanitarian Country Team		Interview with INGC Director Meeting with RTE Management Team Meeting with Humanitarian Country Team	
Tue 03 Apr	Travel to Caia via Beira. Meeting with District officials, INGC officials, and attend cluster meetings	Travel to Caia via Beira. Meeting with District officials, INGC officials, and attend cluster meetings		Travel to Caia via Beira. Meeting with District officials, INGC officials, and attend cluster meetings	
Wed 04 Apr	Interview with Mutarara District Administrator. Visits to DAF, Nhambalo 2, and Tchetcha accommodation centres in Caia. Coordination meeting in Mutarara	Travel to Chupanga and Matilde to interview government officials and beneficiaries in accommodation centers		Travel to Chupanga and Matilde to interview government officials and beneficiaries in accommodation centers	
Thu 05 Apr	Interview with acting District Administrator. Visits to four accommodation centres in Mutarara. Return to Caia.	Travel to Nhacatundo and Nhamirere to interview beneficiaries and travel back to Maputo		Travel to Nhacatundo and Nhamirere to interview beneficiaries and travel back to Maputo	
Fri 06 Apr	Travel to Maputo	Team meeting and mission report writing		Team meeting and mission report writing	
Sat 07 Apr	Team meeting and mission report writing	Team meeting and mission report writing	Arrive Maputo	Team meeting and mission report writing	
Sun 08 Apr	Team meeting and mission report writing	Team meeting and mission report writing	Reading-in	Team meeting and mission report writing	
Mon 09 Apr	Team Meeting. Presentation of initial findings to HCT. Interview with World Vision	Team Meeting. Presentation of initial findings to HCT	Presentation of initial findings to the HCT. Interviews with World Vision and UN-Habitat representative	Presentation of initial findings to the HCT. Interview with UN-Habitat representative	Team Meeting. Presentation of initial findings to HCT
Tue 10 Apr	Interviews with the Resident Coordinator, WFP, Unicef, and the Mozambican Red Cross.	Travel to Caia via Beira. Field work in accommodation centers in Caia and Sena and travel to Mutarara	Travel to Caia, fieldwork in Mopeia area camps	Travel to Caia via Beira. Field work in accommodation centers in Caia and Sena and travel to Mutarara	Travel to Caia, fieldwork in Mopeia area camps
Wed 11 Apr	Interviews with the UNDP, WHO, Oxfam, MSF and national water directorate.	Interviews with districts officials, INGC officials and NGOs in Mutarara and visit to Goli Goli accommodation centers	Travel to Morrumbala, fieldwork in area camps	Interviews with districts officials, INGC officials and NGOs in Mutarara and visit to Goli Goli accommodation centers	Travel to Morrumbala, fieldwork in area camps

## APPENDICES

<i>Date '07</i>	<i>John Cosgrave</i>	<i>Célia Gonçalves</i>	<i>Daryl Martyris</i>	<i>Riccardo Polastro</i>	<i>Muchima Sikumba-Dils</i>
Thu 12 Apr	Interviews with WHO, Save the Children, the International Rivers Office, WFP and Concern	Travel to Beira and Maputo	Fieldwork in Caia area camps	Travel to Beira and Maputo	Fieldwork in Caia area camps
Fri 13 Apr	Interviews with LWF and the European Commission. Team meeting	Interview with EC representatives and report writing	Interviews with UNICEF, WFP staff, Overflight of camps	Interview with EC representatives and report writing	Interviews with UNICEF, WFP staff, Overflight of camps
Sat 14 Apr	Team meeting and report writing	Report writing and team work on initial findings	Attend INGC briefing, return to Maputo	Report writing and team work on initial findings	Attend INGC briefing, return to Maputo
Sun 15 Apr	Report writing	Departure to Vilanculos. Interview with UNICEF and WFP	Writing up notes	Departure to Vilanculos. Interview with UNICEF and WFP	Writing up notes
Mon 16 Apr	Team meeting. Meeting with DFID, Norwegian Embassy	Interviews with districts officials, INGC officials and NGOs in Vilanculos and visit to the main hospital and to Machune and other areas in the district	Team meeting, writing up notes	Interviews with districts officials, INGC officials and NGOs in Vilanculos and visit to the main hospital and to Machune and other areas in the district	Team meeting, writing up notes
Tue 17 Apr	Meeting with USAID, IOM, Canadian Embassy and the national water directorate	Interviews with districts officials Inhassoro and visit to the affected areas in the district	Interview with UNICEF WASH cluster representative	Interviews with district officials Inhassoro and visit to the affected areas in the district	Writing up notes
Wed 18 Apr	Team meeting and preparing draft for presentation	Departure to Maputo via Beira and report writing	Writing up WASH notes	Departure to Maputo via Beira and report writing	Writing up notes, commenting on draft
Thu 19 Apr	Team meeting and revision of presentation draft.	Team meeting and revision of presentation draft.	Team meeting and revision of presentation draft.	Team meeting and revision of presentation draft.	Team meeting and revision of presentation draft.
Fri 20 Apr	Debriefing with the local evaluation management team and with humanitarian country team	Debriefing with the local evaluation management team and with humanitarian country team	Debriefing with the local evaluation management team and with humanitarian country team	Debriefing with the local evaluation management team and with humanitarian country team	Debriefing with the local evaluation management team and with humanitarian country team
Sat 21 Apr	Report writing and team work on draft of initial chapters	Report writing and team work on draft of initial chapters	Report writing and team work on draft of initial chapters	Report writing and team work on draft of initial chapters	Report writing and team work on draft of initial chapters
Sun 22 Apr	Depart Maputo			Departure from Maputo	
Mon 23 Apr	Report writing				
Tue 24 Apr	Report writing and editing	Commenting on report	Commenting on report	Commenting on report	Commenting on report



## Appendix 5 Comments on the WASH cluster

*These comments have been prepared by Daryl Martyris with additional comments by Riccardo Polastro and John Cosgrave. These comments were prepared to provide additional information about the WASH cluster during the overall RTE in place of a specific RTE on the WASH cluster.*

*The WASH cluster includes the following active member: The Mozambican Red Cross, OXFAM, MSF, IRD, SP, WVI, IFRC, FHI; as well as the Mozambican Government. The success of the WASH Cluster was dependent on the close collaboration of these partners and the Cluster Lead.*

### A5.1 Impact

*Assess the added value of the Cluster Approach versus the traditional coordination mechanisms to meet these objectives?*

Interviewees had a range of experience in coordination ranging from no coordination experience to experience in cluster-like approaches in Somalia and South Sudan.

One interviewee said that given the small number of members on the cluster, and the fact that of the UN agencies only UNICEF deals with water, he didn't see a big difference in a sector or cluster mechanism, and that the personal relationships ultimately made the difference.

Opinions on the added value of the cluster mechanism suggest that information sharing was one of the biggest gains from the cluster approach. The role of the RC as facilitator to convene meetings was also considered as an added value, as his office "carries more weight". Clusters also provided a mechanism to resolve contentious issues such as different opinions on the need to pay camp volunteers a stipend to clean latrines, which was contrary to government policy.

Comparing the cluster approach with the sectoral approach, the main difference seems to be that cooperation is the default mode for cluster coordination. This is a significant difference from sectoral coordination where people cooperate on issues where these offer some individual advantage, rather than on the whole response.

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### A5.2 Effectiveness

*For the responsibilities of the cluster lead what have been the key constraints which may have impacted optimal achievements?*

Interviewees generally rated the WASH and Logistics clusters as the two most effective clusters.

A number of challenges have been faced in regard to the implementation of WASH interventions, particularly regarding sanitation (incorrect use of facilities and user participation) and the limited availability of water trucking equipment in some areas. Furthermore, the limited accessibility of many sites continues to impede the logistics of water and supply distribution. In many cases, the only option is to use helicopters to distribute supplies (Mopeia and Mutarara).

*Is there any gap identified versus those responsibilities?*

Interviewees generally indicated that the WASH cluster was the best coordinated both at national level and at field level (Caia). The WASH cluster lead allocated responsibilities to ensure there were no geographic gaps.

*a. coordinating the analysis of needs and information sharing*

A multi-sector assessment was done on Feb 18-21 with Govt/UNICEF/NGO participation and before that WASH assessments in many camps were done by UNICEF staff. These assessments were shared at INGC meetings. NGO Interviewees were particularly happy with the sharing of the *who's doing what where* lists.

In common with other sectors, WASH assessments had quite low level of beneficiary participation - although local government structures were involved. The WASH cluster also had the same problem of fluctuating numbers of beneficiaries.

*b. securing and following up on commitments to respond*

The cluster lead followed up on commitments, including for commitments on Latrine construction. UNICEF now has to deal with NGO's wanting to wrap-up operations and not stay for the resettlement phase. The phase out process is being discussed within the wash cluster and should ensure a coordinated exit strategy that will avoid any major disruptions in service.

*c. acting as provider of last resort*

UNICEF worked through government and NGOs - did no direct implementation at all.

*d. managed quality control in the cluster*

Monitoring was done at a basic level and dealt mainly with coverage and inputs rather than quality of assistance provided. The only examples of quality control that a few interviewees shared, was the quantity of water available per head, and to a lesser extent depth and use of latrines. Trends for diarrhoeal disease were also monitored by UNICEF staff as a proxy indicators for sanitation quality.

Sphere standards form the basis for the guidance in Unicef's Field Handbook for Emergencies. The Sphere standards were generally agreed upon in the WASH cluster. However, cluster member recognise that not all benchmarks were fully met, due to cultural factors and other reasons.

Though there were almost no complaints from beneficiaries regarding water and sanitation provision in accommodation centres, from observation at accommodation centre Sphere standards relating to time spent queuing for water were not observed in several camps.

### *A5.3 Relevance appropriateness*

*Assess how the WASH cluster coordination mechanisms have been combined with former coordination mechanisms, have they been complementary to those former coordination mechanisms, have they been linked to each other, how efficient has been the inter-cluster coordination?*

Prior to the flood emergency, and since 2002, there has been a coordination group in existence - Grupo Água e Saneamento (GAS). This is an advisory group that meets once a month and is chaired by the Chief of Department, the National Directorate of Water, with Unicef as co-chair. CARE, the Mozambican Red Cross, The Mennonite Central Committee, Cowater and several donors are all members of this group. The experience of the people in this group working together transferred over to the WASH cluster when it was established.

The GAS meetings will resume on April 27<sup>th</sup>, and preparedness has been added as a priority area for this group.

The WASH cluster met on a regular basis, under the coordination of UNICEF, at both national level and in the district 'hubs' of Caia (Sofala province), Mutarara (Tete province) and Mopeia (Zambezia) province. In Caia, the WASH and Health clusters are holding joint meetings. Cluster partners have maintained ongoing liaison with the Ministry of Public Works and Housing.

The cluster has discussed the preliminary Government Reconstruction Plan and the suggestion was made to schedule a specific meeting with DNA/INGC to discuss and identify ways in which to link the emergency phase with the transition and reconstruction phases.

*What analysis supported the launch of the cluster approach to the WASH sector? How relevant is the cluster approach to the Mozambique context?*

There was no discussion about the cluster approach prior to the emergency and no analysis. In the Mozambique context, prior to emergency, Unicef had a very close working relationship with the National Directorate of water and subsequently with INGC. Unicef had a very close relationship also with the provincial directorates. These played a very constructive and "hand-on" role, and valued the cluster structure as a way of managing the coordination on the NGO partners.

*What was the level of participation of the different stakeholders (State institutions, NGOs, international organizations, the Red Cross and Red Crescent Movement and UN agencies, Donors), in this analysis?*

No analysis (see previous item)

*How have the priorities been defined / the planned results / the timeline of Mozambique WASH Cluster? How have the different stakeholders been involved in the Cluster priorities setup?*

The provision of support for: water tanking and water treatment; the provision of water and sanitation supplies; latrine construction, including the promotion of community participation; and hygiene training and promotion via activists, multimedia mobile units and community theatre groups.

- The group met to determine which camps were experiencing gaps in WASH provisions.
- Secondly, it was reported that the Government priority was aimed at reducing the number of people in camps by moving people to resettlement camps. Given this, it was suggested that the group develop a strategy for the transition from accommodation centres to resettlement centres. It was emphasized that this transition would need to be carefully planned so as to continue providing WASH assistance to those in accommodation centres while still planning for the resettlement phase.

The WASH cluster has been meeting on a regular basis, under the coordination of UNICEF, at both national level and in the district 'hubs' of Caia (Sofala province), Mutarara (Tete province) and Mopeia (Zambezia) province. In Caia, the WASH and Health clusters are holding joint meetings. Cluster partners have maintained ongoing liaison with the Ministry of Public Works and Housing.

This improved coordination within the sector has facilitated consensus on a clear division of labour between all humanitarian partners to ensure coverage of WASH interventions in all of the accommodation centres in flood affected areas, including in remote locations. Water, sanitation and hygiene education are critical concerns in many affected districts. As the division of labour was being developed, additional support was mobilised from partners such as Oxfam and MSF, to expand WASH operations into affected areas receiving less support.

*Assess the level of satisfaction of the different involved stakeholders (State institutions, NGOs, international organizations, the Red Cross and Red Crescent Movement and UN agencies, Donors) regarding the WASH cluster approach?*

Interviewees said that the WASH cluster was the most inclusive, and that there was good participation from all members from the beginning (WVI was not initially represented at the Caia cluster).

There was also regular participation from the public works ministry in the provincial government.

#### *A5.4 Efficiency*

*Assess if the level of resources and time allocated by the different partners to the development of the cluster approach is appropriate to expected and realized benefits. A specific question to be looked at is that UNICEF as Cluster lead did not have a dedicated WASH cluster Coordinator*

While UNICEF's WASH coordinator was of the opinion that the cluster approach required about the same level of coordination as other coordination mechanisms others suggested that it required greater effort than other mechanisms. NGOs,

especially those engaged in many clusters felt that cluster meetings in general took up a lot of time, but the majority opinion was that the benefits justified the effort.

*Detailed analysis of the role of the Pooled Fund in the development of the cluster approach (allocation mechanisms and decision criteria, transparency, monitoring mechanisms).*

The interviewees with whom this question was raised were not familiar with the pooled funds in question, unless this refers to CERF funds.

Unicef made good use of reprogramming and of emergency programme funds.

## Appendix 6 Potential standards for the Clusters

### *A6.1 WASH Cluster*

#### A6.1.1 SPHERE STANDARDS

##### *A6.1.1.1 COMMON - PARTICIPATION*

The disaster-affected population actively participates in the assessment, design, implementation, monitoring and evaluation of the assistance programme.

##### *A6.1.1.2 COMMON - INITIAL ASSESSMENT*

Assessments provide an understanding of the disaster situation and a clear analysis of threats to life, dignity, health and livelihoods to determine, in consultation with the relevant authorities, whether an external response is required and, if so, the nature of the response.

##### *A6.1.1.3 COMMON - RESPONSE*

A humanitarian response is required in situations where the relevant authorities are unable and/or unwilling to respond to the protection and assistance needs of the population on the territory over which they have control, and when assessment and analysis indicate that these needs are unmet.

##### *A6.1.1.4 COMMON - TARGETING*

Humanitarian assistance or services are provided equitably and impartially, based on the vulnerability and needs of individuals or groups affected by disaster.

##### *A6.1.1.5 COMMON - MONITORING*

The effectiveness of the programme in responding to problems is identified and changes in the broader context are continually monitored, with a view to improving the programme, or to phasing it out as required.

##### *A6.1.1.6 COMMON - EVALUATION*

There is a systematic and impartial examination of humanitarian action, intended to draw lessons to improve practice and policy and to enhance accountability.

##### *A6.1.1.7 COMMON - AID WORKER COMPETENCIES AND RESPONSIBILITIES*

Aid workers possess appropriate qualifications, attitudes and experience to plan and effectively implement appropriate programmes.

##### *A6.1.1.8 COMMON - SUPERVISION, MANAGEMENT AND SUPPORT OF PERSONNEL*

Aid workers receive supervision and support to ensure effective implementation of the humanitarian assistance programme.

##### *A6.1.1.9 PROGRAMME DESIGN AND IMPLEMENTATION*

All facilities and resources provided reflect the vulnerabilities, needs and preferences of the affected population. Users are involved in the management and maintenance of hygiene facilities where appropriate.

#### *A6.1.1.10 ACCESS AND WATER QUANTITY*

All people have safe and equitable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene. Public water points are sufficiently close to households to enable use of the minimum water requirement.

#### *A6.1.1.11 WATER QUALITY*

Water is palatable, and of sufficient quality to be drunk and used for personal and domestic hygiene without causing significant risk to health.

#### *A6.1.1.12 WATER USE FACILITIES AND GOODS*

People have adequate facilities and supplies to collect, store and use sufficient quantities of water for drinking, cooking and personal hygiene, and to ensure that drinking water remains safe until it is consumed.

#### *A6.1.1.13 ACCESS TO, AND NUMBERS OF, TOILETS*

People have adequate numbers of toilets, sufficiently close to their dwellings, to allow them rapid, safe and acceptable access at all times of the day and night.

#### *A6.1.1.14 DESIGN, CONSTRUCTION AND USE OF TOILETS*

Toilets are sited, designed, constructed and maintained in such a way as to be comfortable, hygienic and safe to use.

#### *A6.1.1.15 INDIVIDUAL AND FAMILY PROTECTION*

All disaster-affected people have the knowledge and the means to protect themselves from disease and nuisance vectors that are likely to represent a significant risk to health or well-being.

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#### *A6.1.1.16 PHYSICAL, ENVIRONMENTAL AND CHEMICAL PROTECTION MEASURES*

The numbers of disease vectors that pose a risk to people's health and nuisance vectors that pose a risk to people's well-being are kept to an acceptable level.

#### *A6.1.1.17 CHEMICAL CONTROL SAFETY*

Chemical vector control measures are carried out in a manner that ensures that staff, the people affected by the disaster and the local environment are adequately protected, and avoids creating resistance to the substances used.

#### *A6.1.1.18 COLLECTION AND DISPOSAL*

People have an environment that is acceptably uncontaminated by solid waste, including medical waste, and have the means to dispose of their domestic waste conveniently and effectively.

#### *A6.1.1.19 DRAINAGE WORKS*

People have an environment in which the health and other risks posed by water erosion and standing water, including stormwater, floodwater, domestic wastewater and wastewater from medical facilities, are minimised.

## *A6.2 Nutrition Cluster*

### A6.2.1 SPHERE STANDARDS

*The Sphere standards for nutrition are complex, only the barest outline is given here.*

8 Common Standards - participation, initial assessment, etc

*A6.2.1.1 THE NUTRITIONAL NEEDS OF THE POPULATION ARE MET.*

The nutritional and support needs of identified at-risk groups are met.

Moderate malnutrition is addressed.

Severe malnutrition is addressed.

*A6.2.1.2 MICRONUTRIENT DEFICIENCIES ARE ADDRESSED.*

Rations for general food distributions are designed to bridge the gap between the affected population's requirements and their own food resources.

The food items provided are appropriate and acceptable to recipients and can be used efficiently at the household level.

Food distributed is of appropriate quality and is fit for human consumption.

Food is stored, prepared and consumed in a safe and appropriate manner at both household and community levels.

*A6.2.1.3 SUPPLY CHAIN MANAGEMENT*

Food aid resources (commodities and support funds) are well managed, using transparent and responsive system

The method of food distribution is responsive, transparent, equitable and appropriate to local conditions.

*A6.3 Education Cluster**A6.3.1 INEE STANDARDS**A6.3.1.1 ACCESS AND LEARNING ENVIRONMENT.*

Standard 1: Equal access. All individuals have access to quality and relevant education opportunities.

Standard 2: Protection and well-being. Learning environments are secure, and promote the protection and mental and emotional well-being of learners.

Standard 3: Facilities. Education facilities are conducive to the physical well-being of learners.

*A6.3.1.2 TEACHERS AND OTHER EDUCATION PERSONNEL*

Standard 1: Recruitment and selection. A sufficient number of appropriately qualified teachers and other education personnel based on selection criteria that reflect diversity and equity.

Standard 2: Conditions of work. Teachers and other education personnel have clearly defined conditions of work, follow a code of conduct and are appropriately compensated.

Standard 3: Supervision and support. Supervision and support mechanisms are established for teachers and other education personnel, and are used on a regular basis.

*A6.3.1.3 EDUCATION POLICY AND COORDINATION*

Standard 1: Policy formulation and enactment. Education authorities prioritise free access to schooling for all, and enact flexible policies to promote inclusion and education quality, given the emergency context.

Standard 2: Planning and implementation. Emergency education activities take into account national and international educational policies and standards and the learning needs of affected populations.

Standard 3: Coordination. There is a transparent coordination mechanism for emergency education activities, including effective information sharing between stakeholders.

#### *A6.3.1.4 TEACHING AND LEARNING*

Standard 1: Curricula. Culturally, socially and linguistically relevant curricula are used to provide formal and non-formal education, appropriate to the particular emergency situation.

Standard 2: Training. Teachers and other education personnel receive periodic, relevant and structured training according to need and circumstances.

Standard 3: Instruction. Instruction is learner-centred, participatory and inclusive.

Standard 4: Assessment. Appropriate methods are used to evaluate and validate learning achievements.

### *A6.4 Logistics Cluster*

#### A6.4.1 SPHERE STANDARDS

8 Common Standards - participation, initial assessment, etc

##### *A6.4.1.1 SUPPLY CHAIN MANAGEMENT*

Food aid resources (commodities and support funds) are well managed, using transparent and responsive system

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No other commonly agreed benchmarks were found by the team, but the Logistics Cluster did publish a concept of operations setting out clearly how they were going to operate.

### *A6.5 Food Security Cluster*

#### A6.5.1 SPHERE STANDARDS

8 Common Standards - participation, initial assessment, etc

##### *A6.5.1.1 FOOD SECURITY*

Where people are at risk of food insecurity, programme decisions are based on a demonstrated understanding of how they normally access food, the impact of the disaster on current and future food security, and hence the most appropriate response.

##### *A6.5.1.2 NUTRITION*

Where people are at risk of malnutrition, programme decisions are based on a demonstrated understanding of the causes, type, degree and extent of malnutrition, and the most appropriate response.

##### *A6.5.1.3 GENERAL FOOD SECURITY*

People have access to adequate and appropriate food and non-food items in a manner that ensures their survival, prevents erosion of assets and upholds their dignity.



Primary production mechanisms are protected and supported.

#### *A6.5.1.4 INCOME AND EMPLOYMENT*

Where income generation and employment are feasible livelihood strategies, people have access to appropriate income-earning opportunities, which generate fair remuneration and contribute towards food security without jeopardising the resources on which livelihoods are based.

People's safe access to market goods and services as producers, consumers and traders is protected and promoted.

Rations for general food distributions are designed to bridge the gap between the affected population's requirements and their own food resources.

The food items provided are appropriate and acceptable to recipients and can be used efficiently at the household level.

Food distributed is of appropriate quality and is fit for human consumption.

Food is stored, prepared and consumed in a safe and appropriate manner at both household and community levels.

#### *A6.5.1.5 SUPPLY CHAIN MANAGEMENT*

Food aid resources (commodities and support funds) are well managed, using transparent and responsive system.

The method of food distribution is responsive, transparent, equitable and appropriate to local conditions.

### *A6.6 Telecommunications Cluster*

*The following is based on the comments of the emergency telecommunications cluster on the first draft.*

The IASC created the Sub-Working Group on Emergency Telecommunications (WGET) is an important forum for the promotion of standards, interconnectivity and interoperability in support of emergency telecommunications. The ETC has adopted WGET recommended standards and the ETC has established a broad range of standards covering both security communications and data communications, standard operating procedures as well as structured training programs and ETC simulation exercises. The standards cover:

#### A6.6.1 OVERALL STANDARDS

- ETC Roles, Responsibilities and Services Offered
- Emergency Telecommunications Needs Assessments
- ETC Project Document
- Security Communications
- ETC Security Communications Kits (HF radio kits, VHF radio kits)
- Frequency, call-sign and sel-calls standards and the associated standards for coordination and management services
- Vehicle tracking
- Auxiliary equipment standards (generators, voltage regulators, solar power kits, etc.)

## A6.6.2 DATA COMMUNICATIONS

- ETC-Data Communication Response Approach - Modular phased response with pre-defined response timeframes within 1 week, 3 weeks, 8 weeks and beyond 9 weeks. Each phase defines provision of distinct services and staff, equipment and logistical requirements.
- ETC-Data Communication Response Guidelines- Define the phased response approach, process and accountabilities
- ETC- Data Communication Reporting Templates - Set of documents (data communications rapid assessment, project proposal, client acceptance form, etc.)
- ETC- Data Communication Equipment Standards - Tested and approved data communication equipment packaged into Phase I Kit, Phase II and Phase III kit which are VSAT systems

There are training Programs and Simulation Exercises on ETC Deployments - Multiple programs scheduled per year

## A6.7 Health Cluster

### A6.7.1 SPHERE STANDARDS

8 Common Standards - participation, initial assessment, etc

#### *A6.7.1.1 PRIORITISING HEALTH SERVICES*

All people have access to health services that are prioritised to address the main causes of excess mortality and morbidity.

#### *A6.7.1.2 SUPPORTING NATIONAL AND LOCAL HEALTH SYSTEMS*

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Health services are designed to support existing health systems, structures and providers.

#### *A6.7.1.3 COORDINATION*

People have access to health services that are coordinated across agencies and sectors to achieve maximum impact.

#### *A6.7.1.4 HEALTH SERVICES ARE BASED ON RELEVANT PRIMARY HEALTH CARE PRINCIPLES.*

People have access to clinical services that are standardised and follow accepted protocols and guidelines.

#### *A6.7.1.5 HEALTH INFORMATION SYSTEMS*

The design and development of health services are guided by the ongoing, coordinated collection, analysis and utilisation of relevant public health data.

#### *A6.7.1.6 CONTROL OF COMMUNICABLE DISEASES - PREVENTION*

People have access to information and services that are designed to prevent the communicable diseases that contribute most significantly to excess morbidity and mortality.

#### *A6.7.1.7 CONTROL OF COMMUNICABLE DISEASES - MEASLES PREVENTION*

All children aged 6 months to 15 years have immunity against measles.

*A6.7.1.8 CONTROL OF COMMUNICABLE DISEASES - DIAGNOSIS AND CASE MANAGEMENT*

People have access to effective diagnosis and treatment for those infectious diseases that contribute most significantly to preventable excess morbidity and mortality.

*A6.7.1.9 CONTROL OF COMMUNICABLE DISEASE - OUTBREAK PREPAREDNESS*

Measures are taken to prepare for and respond to outbreaks of infectious diseases.

*A6.7.1.10 CONTROL OF COMMUNICABLE DISEASES - OUTBREAK DETECTION, INVESTIGATION AND RESPONSE*

Outbreaks of communicable diseases are detected, investigated and controlled in a timely and effective manner.

*A6.7.1.11 CONTROL OF COMMUNICABLE DISEASES - HIV/AIDS*

People have access to the minimum package of services to prevent transmission of HIV/AIDS.

*A6.7.1.12 CONTROL OF NON-COMMUNICABLE DISEASES - INJURY*

People have access to appropriate services for the management of injuries.

*A6.7.1.13 CONTROL OF NON-COMMUNICABLE DISEASES - REPRODUCTIVE HEALTH*

People have access to the Minimum Initial Service Package (MISP) to respond to their reproductive health needs.

*A6.7.1.14 CONTROL OF NON-COMMUNICABLE DISEASES - MENTAL AND SOCIAL ASPECTS OF HEALTH*

People have access to social and mental health services to reduce mental health morbidity, disability and social problems.

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83*A6.7.1.15 CONTROL OF NON-COMMUNICABLE DISEASES - CHRONIC DISEASES*

For populations in which chronic diseases are responsible for a large proportion of mortality, people have access to essential therapies to prevent death.

*A6.8 Shelter and non-food items Cluster**A6.8.1 SPHERE STANDARDS*

8 Common Standards - participation, initial assessment, etc

*A6.8.1.1 COVERED LIVING SPACE*

People have sufficient covered space to provide dignified accommodation. Essential household activities can be satisfactorily undertaken, and livelihood support activities can be pursued as required.

The design of the shelter is acceptable to the affected population and provides sufficient thermal comfort, fresh air and protection from the climate to ensure their dignity, health, safety and well-being.

The construction approach is in accordance with safe local building practices and maximises local livelihood opportunities.

The adverse impact on the environment is minimised by the settling of the disaster-affected households, the material sourcing and construction techniques used.

### *A6.8.1.2 HOUSEHOLD GOODS*

The people affected by the disaster have sufficient clothing, blankets and bedding to ensure their dignity, safety and well-being.

Each disaster-affected household has access to sufficient soap and other items to ensure personal hygiene, health, dignity and well-being.

Each disaster-affected household has access to cooking and eating utensils, stoves, fuel and lighting.

Each disaster-affected household has access to communal cooking facilities or a stove and an accessible supply of fuel for cooking needs and to provide thermal comfort. Each household also has access to appropriate means of providing sustainable artificial lighting to ensure personal security.

### *A6.8.1.3 TOOLS AND EQUIPMENT*

Each disaster-affected household responsible for the construction or maintenance and safe use of their shelter has access to the necessary tools and equipment.

## *A6.9 Early Recovery Cluster*

### A6.9.1 SPHERE STANDARDS

8 Common Standards - participation, initial assessment, etc

There are no other current widely agreed benchmarks that the team could identify.

## *A6.10 Camp Management Cluster*

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### A6.10.1 SPHERE BENCHMARKS

7 Common Benchmarks - participation, initial assessment, etc

There are specific current benchmarks, but some standards are implicit in chapter 17 of NRC's Camp Management Toolkit and some issues are covered to some extent by Sphere chapter 1 and 4

#### *A6.10.1.1 STRATEGIC PLANNING*

Existing shelter and settlement solutions are prioritised through the return or hosting of disaster-affected households, and the security, health, safety and well-being of the affected population are ensured.

#### *A6.10.1.2 PHYSICAL PLANNING*

Local physical planning practices are used where possible, enabling safe and secure access to and use of shelters and essential services and facilities, as well as ensuring appropriate privacy and separation between individual household shelters.

The NRC toolkit covers the following issues:

- Negotiations prior to camp set up
- Camp Setup and Care & Maintenance of Camps
- Community Participation and Camp Committees
- Registration and Data Collection
- Protection
- Prevention of Gender-Based Violence

- Camp Security
- Distribution of Food and Non-Food Items
- Education
- Enhancing Livelihood Strategies for Self-Reliance
- Youths and Recreation
- Health Care and Health Education
- Psychosocial Care
- Peace-building and Reconciliation
- Responsibilities of Camp Management Team
- Camp Closure

### *A6.11 Protection Cluster*

#### A6.11.1 INTERNATIONAL HUMANITARIAN LAW

- The four Geneva Conventions and their two additional protocols

#### A6.11.2 SPHERE STANDARD

8 Common Standards - participation, initial assessment, etc

#### A6.11.3 UNHCR STANDARDS

- Physical protection (cases of refoulement)
- Legal Status ( registration and documentation)
- Enjoyment of rights (freedom of movement)
- Special protection needs (separated and unaccompanied children, SGBV survivors who receive help, SGBV training for stakeholders)

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#### A6.11.4 ALNAP CHECKLISTS

##### *A6.11.4.1 LEGAL STANDARDS AND RESPONSIBILITY*

- Determine which specific standards of national, regional and international law are relevant to the pattern of violations and threat in order to identify the laws, conventions, declarations and specific articles that clearly define what protection is afforded to whom in a given situation. Single out articles that refer expressly to the kinds of incidents observed and the strategies and policies functioning in this instance. • Also take account of applicable domestic law that is not in contradiction with international standards (such as indigenous custom or shariah law) that may carry much weight locally and provide important protection guarantees.
- Clarify which authorities have primary responsibility for stopping the perpetrators under national and international law, and which other states have particular responsibility for responding to and halting these violations under international law.
- Clarify which authorities have responsibility for dealing with the consequences of the violations - for example providing for the basic needs of people forced from their homes or compensation for people whose assets have been destroyed.

- Identify which international agencies and/or international human rights mechanisms are mandated to respond to such violations or deal with their consequences.
- Clarify the particular responsibilities of your own organisation under these laws and decide on its position in regard to submitting evidence to current or future investigations or proceedings of international or national courts. Protective capability, intent and compliance aptitude.
- Identify how key policies of the authorities aim to realise effective protection or not, and whether the practice in the field lives up to the policy espoused in political capitals.
- Gauge the realistic capacity of the political and military actors to provide sufficient and appropriate protection. Identify gaps in resources, including human resources, material, knowledge and expertise that are preventing them from doing so.
- Gauge the willingness of political and military actors to comply with international legal standards. In doing so, also assess their susceptibility to influence - in the form of pressure or support - and identify other valuable individuals and organisations that may not have obvious material resources but may have significant moral authority, willingness to take action and political leverage.
- Identify the positive attributes, such as expertise, previous experience, innovation, courage and effective leadership, among potential protectors that may contribute to their protective ability.
- Map the strengths of, and the gaps in, any network of powerful relationships that may determine the ability of state authorities, humanitarian agencies and vulnerable communities to encourage a strong and positive protection environment. Identify any key individuals particularly responsible for shaping and sustaining such relationships.

#### *A6.11.4.2 HUMANITARIAN ASSISTANCE*

- Never put together a team of protection specialists only, but ensure that you have a majority of assistance experts who can work to see protection needs and protection solutions in the round. Humanitarian assistance programmes responding to current violations or remedying past abuses are best designed with a protective edge that consciously tries to reduce current threats and prevent future violations.
- Health, water, shelter or livelihood programmes are best designed with people's protection from violence in mind. All humanitarian aid programmes need to 'think protection' and focus on ways in which assistance programming in all sectors can reduce people's vulnerability to other forms of attack, violation, coercion, cooption or deprivation.
- Humanitarian assistance programmes should be scrutinised continuously to ensure that they are not becoming counter-protective in any way by putting people in new danger or at further risk via some form of protection paradox.
- In the way that they are designed and managed, humanitarian assistance programmes should be respectful of the wider rights of protected persons enshrined in human-rights law, international humanitarian law and refugee law, including freedom of expression and freedom of religion.
- Wherever possible, use humanitarian assistance programmes to disseminate humanitarian law, human rights law and the Code of Conduct and include humanitarian values and principles in Educational programmes.

## Appendix 7 Notes on the evaluation process

*Report on process related issues faced in Mozambique Inter Agency Real Time Evaluation: Prepared by Riccardo Polastro after discussion with the evaluation team. Some later additions were made by John Cosgrave.*

### A7.1 Planning of an RTE mission

While the RTE was requested by RIASCO no formal briefing was planned or done. On the first day the RTE team met the HCT and directly deployed the second day to the field. The team should extensively brief and interview with the Regional Office and most of the HCT at national level before deploying to the field. This way it will gain insight in what issues need to have the focus during the field mission.

- Any future RTEs should visit any regional office that have played a significant role on their way to the country concerned.
- Fieldwork should not normally be programmed at the start of a mission but only after the team have had the opportunity to interview a selection of the key informants.

### A7.2 Timing of an RTE

The team was deployed during the Easter holidays it had to come back at capital level as most of the cluster leaders and partner's staff that was present in the field since the beginning of the emergency took leave.

- When a RTE is planned avoid planning field work during bank holidays.

The team deployed at different times: three were working during the first week while the other team members were present only the second week after the mission began.

- Contractual arrangements should be addressed before the mission starts.
- When a team is deployed at different times an update on all findings and information gathered must be defined and handed over.

The timing of the RTE<sup>8</sup> was a concern for some of the staff in the field that qualified as "wrong time evaluation". In the view of some UN country field staff interview

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<sup>8</sup> Real-time evaluation differs from ordinary ex-post evaluation in that it is conducted simultaneously with implementation of the emergency operation. It differs from ex-post evaluation principally in that

- (i) evaluation takes place during implementation of an operation and
- (ii) it often entails more than one field mission to cover different phases of the operation. These differences have implications for the profiles of evaluators, the number of field missions, methods of work, costs, and the nature and readership of reports.

Stakeholders see real-time evaluation as potentially useful in improving quality by:

- (i) solving operational problems as they occur,
- (ii) enabling organizational learning for improvement of future emergency operations and
- (iii) providing an independent assessment of results.

Stakeholders' suggested changes to real-time evaluation have been incorporated in the review's recommendations. *Review of WFP's experience with real-time evaluation p.4. Executive Board Second Regular Session Rome, 27–28 May 2004 WFP/EB.2/2004/2-B*

RTE should take place during the emergency response and not after just in the middle of the recovery phase. However other Senior Management Staff considered it as the right time, 6 to 8 weeks after the emergency, to look what had happened during the emergency and draw lessons learnt.

### *A7.3 Team composition*

The number of team members was all but light: If 5 evaluators had deployed before they would have represented a huge burden for the operational personnel in the field.

- A maximum of 3 team members is more appropriate.

An alternative would be to use a single very experienced reviewer, or a gender-balanced team of two, as this has a much smaller footprint at field level. However, any reduction in team size would have decreased the depth of coverage of the team.

The team had good geographical and gender balance. The team had skills and extensive experience in humanitarian aid response and in the region. This is a critical issue to consider when recruiting the RTE team members.

- RTE teams must have the right composition in terms of size, skills, context knowledge, and experience to achieve their purpose.

### *A7.4 Skills*

Operational learning requires that the RTE team has sound understanding and familiarity with the current UN reform, experience of the type emergency response, be it be conflict, natural disaster or complex emergencies settings depending on the context; knowledge of the country humanitarian systems; participatory evaluation skills and not intrusive.

- All teams should be familiar with evaluation methods of data collection and analysis and have good interpersonal skills.
- Team members should be experienced people with good management skills.

### *A7.5 Sharing findings*

The RTE shared initial findings with the HCT during the first week. A debriefing was organized for the humanitarian. Agencies interviewed saw additional value of having an RTE mainly because of timing and rapid feedback.

- Include immediate feedback in all RTEs.

Draft findings were sent via e-mail to the UN NY RTE management team. Senior management at country level felt they should have been consulted before the findings are sent to HQ level. Formal debriefing with Agencies Senior Management should be planned before the last official working day of the evaluation.

### *A7.6 Country debriefing and teleconference*

A formal debriefing was held with the RTE country management team in the morning and with the HCT during the afternoon. The presentation used for the morning briefing was changed based on comments and clarification received that morning.

Staff in New York and Geneva participated in the latter meeting via a teleconference. While both an earlier draft presentation had been sent the previous



evening, and the revised version used for the afternoon presentation had been sent the New York immediately before the meeting, these were not circulated to Geneva. This made it very hard for people there to follow the briefings, and requiring the presenter to read the slides, rather than just commenting on them.

- Presentations should be circulated prior to meetings so that people can better follow the sessions and ask questions.

### *A7.7 Later debriefings*

The team leader conducted three debriefings each in Geneva and in New York. Such debriefings are probably far more useful for dissemination of the findings than the RTE report alone. These debriefings were not included in the initial plan of work and the Team Leader was only available due to the postponement of another mission.

- All RTEs should have a clear dissemination plan, including any headquarters level debriefings.

### *A7.8 Presence of agencies during field visits*

Agency members involved should initially introduce the RTE team but they should avoid being present during the semi structured bilateral and group interviews. Semi-structured interviews flow better with small groups.

### *A7.9 Surveys*

Even if RTE are considered to be a useful resource encouraging and advising on appropriate baseline surveys and monitoring systems, this RTE decided to carry out focus group interviews as there was no sufficient time to do extensive surveys as asked per the ToR. This exercise might not be cost-effective.

- Avoid including surveys in RTEs unless there is an existing surveying capacity on the ground.

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### *A7.10 Contractual arrangements*

Contractual Arrangements for locally recruited consultants were very slow. Their contracts were only issued on the morning of the presentation to the HCT at the end of the mission, and will only received their DSA after the international team members have left, despite one nationally recruited consultant have already conducted three field mission.

International team members had to loan money to nationally recruited team members to cover their expenses.

- Such contractual matters need to be set up as soon as the consultants have been identified and an advance of DSA paid immediately.



## Appendix 8 Bibliography

In addition to a series of over 700 documents including reports on Relief Web, situation reports, and meeting minutes, the team consulted the following in the course of this evaluation:

- Beilfuss, R., & dos Santos, D. (2001). *Patterns of hydrological change in the Zambezi delta, Mozambique: Working paper 2: Program for the sustainable management of Cahora Bassa dam and the lower Zambezi valley*. Maputo: International Crane Foundation, USA and Direcção Nacional de Aguas, Mozambique.
- Cosgrave, J., Sylvester, K., Fidalgo, L., Hallam, A., & Taimo, N. (2001). *Independent Evaluation of DEC Mozambique Floods Appeal Funds March 2000 - December 2000 : Volume 1 - Main Findings and Volume 2 - Appendices*. London: Disasters Emergency Committee.
- Haacker, M., & International Monetary Fund. (2004). *The macroeconomics of HIV/Aids*. Washington: International Monetary Fund.
- Inter-Agency Standing Committee (IASC). (2006). *Guidance note on using the cluster approach to strengthen humanitarian response*. Geneva: Inter-Agency Standing Committee (IASC).
- Wikipedia contributors. (2007, 3 January). *Elections in Mozambique*. Retrieved 6 May, 2007, from [http://en.wikipedia.org/w/index.php?title=Elections\\_in\\_Mozambique&oldid=98160424](http://en.wikipedia.org/w/index.php?title=Elections_in_Mozambique&oldid=98160424)
- World Bank. (2006). *Mozambique at a Glance*. Washington: World Bank.