

HUMANITARIAN RESPONSE

Cabo Delgado

Health Cluster Bulletin No. 4

Month: April 2022

Country: Mozambique



1.3M

People in Need of Health Assistance



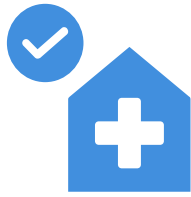
784,319

Internally Displaced

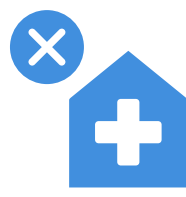


609,185

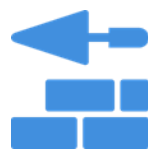
People Targeted by Health Cluster



99 Functional Health Facilities



36 Non functional Health Facilities



14 Health Facilities Rehabilitated



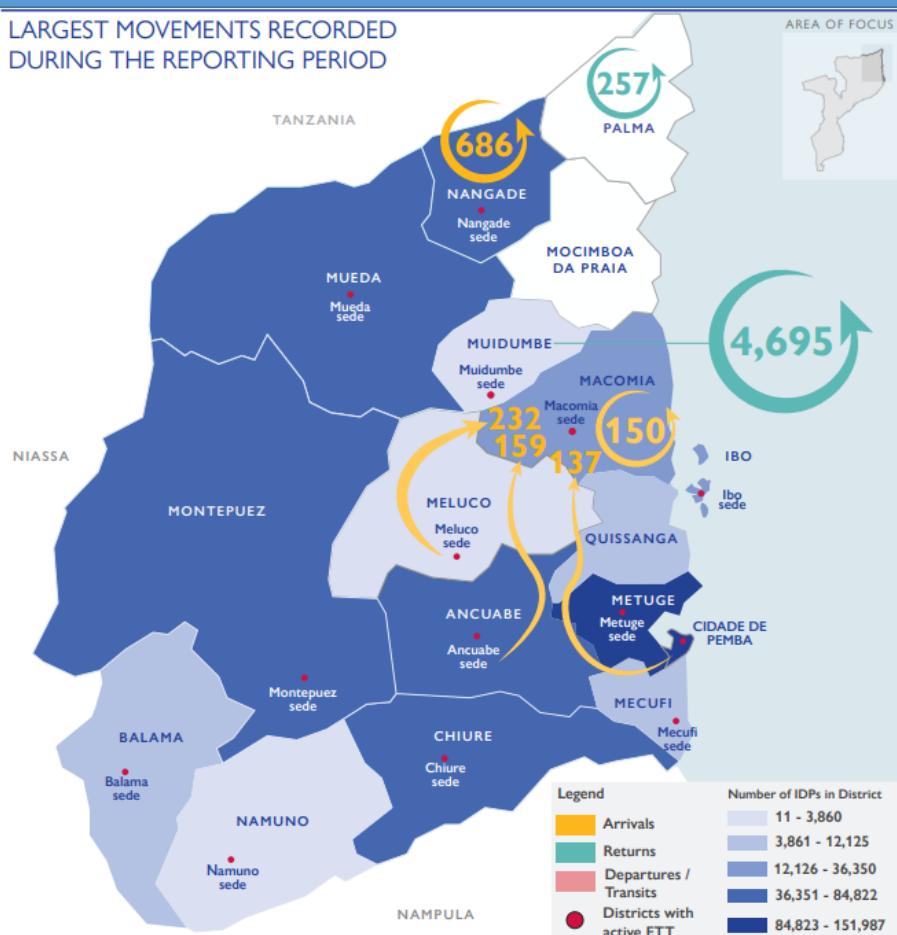
17 Districts Affected

Security Update

- The government has indicated that the province is entering a more stable phase defined by three fundamental aspects; *restoration of government authority*, both political and military, in order to bring back the security and legitimacy of the state in areas affected by the conflict; *rehabilitation of infrastructure* and capacity building of state institutions to bring services to normalcy; and *gradual return of civilian population*
- However, the security situation in Cabo Delgado province remains unpredictable, continuing to pose a serious problem in the delivery of basic humanitarian services including essential healthcare in the districts
- During the month there were clashes *between* insurgents and security forces in Nangade town East ward towards Palma town. The security in Nangade deteriorated after insurgents were pushed out of Palma in late February

Population Movements

LARGEST MOVEMENTS RECORDED DURING THE REPORTING PERIOD



IOM-DTM, ETT Report: No. 155, 20 - 26 April 2022.

Observed Movements

- 66 movements, 51 arrivals (1,706 individuals), 2 departures (110 individuals) and 13 returns (4957 individuals)
- Largest arrivals: Macomia (784 individuals), Nangade (686 individuals) and Muidumbe (215 individuals)
- Largest departures: Metuge (110 individuals)
- Highest returnees: Muidumbe (4,695 individuals) and Palma (257 individuals)
- 11% of mobile groups were displaced for the first time, and 89 per cent of reported individuals have been displaced more than once prior to this movement
- 5854 persons have shown interest to return and a total 4957 have returned

Health Cluster: Key Response Figures

ACTIONS		RESULTS
	Coordination	2 Health Cluster coordination meetings convened
	Response	19 Health Cluster partners implementing health response in 2022
	Essential Supplies	200 assorted emergency medical kits distributed in crises affected locations
	Vaccinations	554,920 children under five vaccinated during round 2 of Polio campaign in Cabo Delgado, with 120% coverage
	Disease Surveillance	cVDPV2 outbreak declared, 2 cases in Cabo Delgado & Nampula provinces.
	Cyclone	Cyclone Gombe affected more than half a million persons, destroyed 69 health facilities, schools and roads in Nampula & Zambezia provinces.
	Preparedness	2 Taskforce meetings convened as part of cholera outbreak preparedness, COVID-19 response and Polio campaign debriefing
	HeRAMS	Baseline assessment for Cabo Delgado province completed 30 out of 135 Health facilities destroyed during the conflict
	Reconstruction	14 health facilities reconstructed or rehabilitated
	Assessment	Protection cluster assessment in Palma district indicate 51% of households have at least one case of special need 92% of IDP preferred to return to their place of origin

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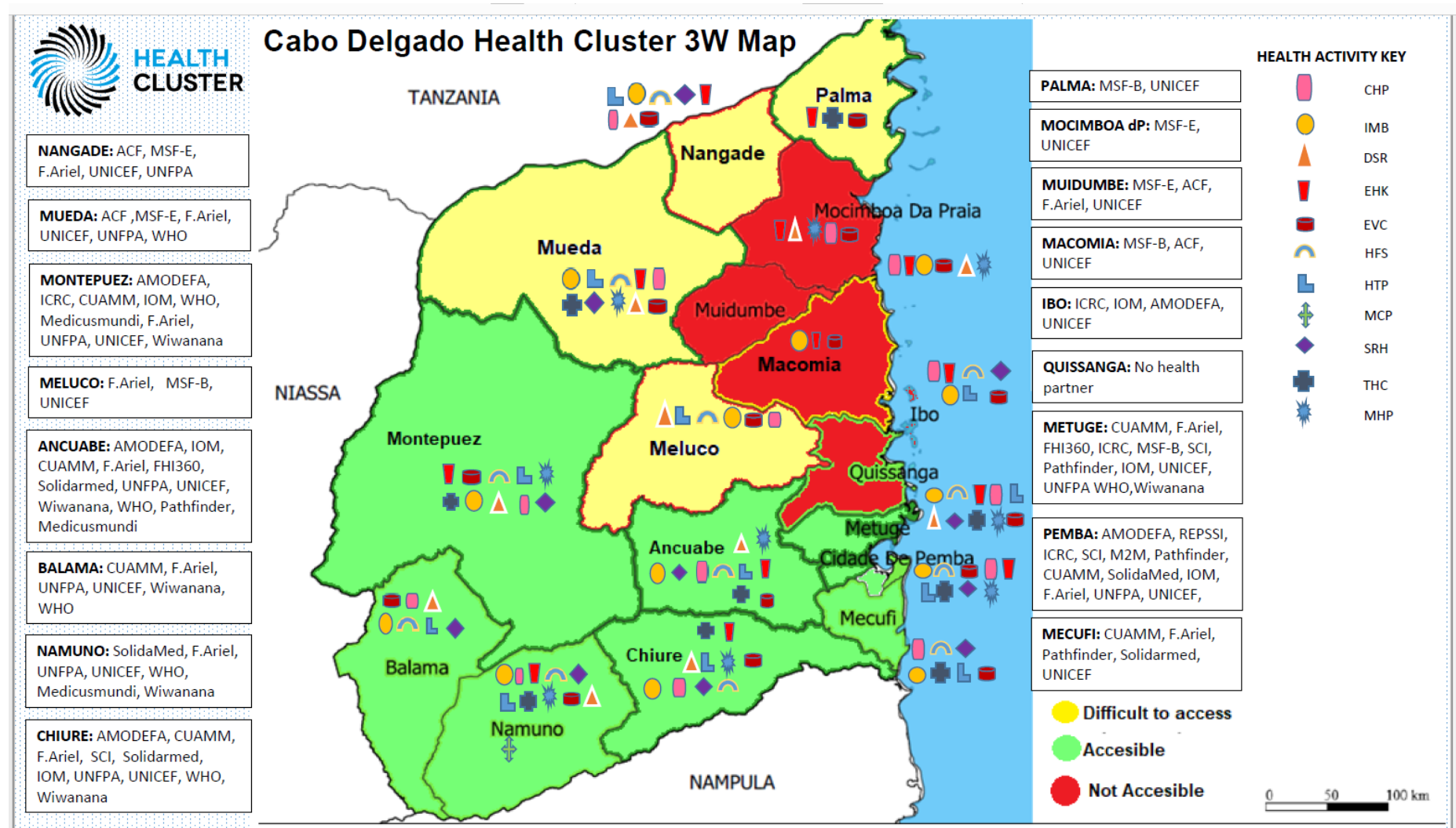
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Health Partners Presence - Cabo Delgado 3W Map (Who, Where, What)



Humanitarian Response Plan Monitoring 2022 - Achievement

S/N	HRP 2022 Indicators	HRP Target 2022	Jan	Feb	Mar	Apr	Total Reached
1	Number of health facilities and mobile teams supported in crises affected locations	76	22	159	222	209	222
2	Number of total OPD consultations (consultation rate)	609,000	2,772	98,375	79041	127,969	308,157
3	Number of normal deliveries attended by skilled birth attendants	12,236	-	7,769	9726	7,958	25,453
4	Number of women in child bearing age receiving modern contraceptives	70,356	1,091	20,015	23143	19,609	63,858
5	Number of community members receiving health IEC messages	609,000	248	51,007	68545	49,589	169,389
6	Number of assorted emergency medical kits distributed in crises affected locations	1,200	-	8	114	200	322
7	Number of PLHIV on ART screened and linked to HIV services	5,800	1,687	2,103	1405	569	5,764
8	Number of cases with injuries and disabilities treated and referred for further care	45,689	-	35	0	-	35
9	Number of cases receiving mental health and psychosocial support services	67,011		1,825	4266	1,010	7,101
10	Number of survivors of GBV receiving clinical care for rape	7,036	12	107	330	6	455
11	% of epidemic prone disease alerts verified and responded to within 48 hours	80	-	-		-	-
12	Number of cholera cases treated	5,536	-	-	-	-	-
13	Number of children 6 months to 15 years receiving emergency measles vaccination	262,730	59	249	1061	416	1,785

Humanitarian Response Plan Monitoring 2022 - Partners Reporting, April 2022

No	Health Partner	Form B - HRP Indicators	Bulletin Summary
1	ACF	No	Yes
2	AMODEFA	Yes	No
3	CUAMM	Yes	No
4	F. Ariel	Yes	Yes
5	FHI360	Yes	Yes
6	IOM	Yes	Yes
7	Johanniter	No	No
8	REPSSI	No	No
9	SCI	Yes	Yes
10	UNFPA	Yes	No
11	UNICEF	Yes	Yes
12	Wiwanana	Yes	No
13	WFP	Yes	No
14	WHO	Yes	Yes
15	Medicusmundi	Yes	Yes
16	Mother 2 Mother	Yes	Yes
17	Pathfinder	Yes	Yes
18	Solidarmed	Yes	Yes
19	MSF-E	Yes	No
	Total Reports Expected	19	19
	Total Reports Received	16	11
	% Reporting	84%	58%

Health Cluster Partners Actions In Pictures



Pathfinder: Counseling session on SRH for women group carried out by CHW in Pemba



WHO/SPS/DPS: Polio Vaccination Campaign Round 2

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Health Cluster Bulletin No. 3

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Health Cluster Partners Actions: Provision of Life Saving Healthcare

	Health Partner	Highlights
1	Save Children  <p>Model mothers and counsellor during a nutrition education session</p>	<ul style="list-style-type: none"> • Provided health education talks, conducted clinical consultations, screen children aged 0-15 years, pregnant and lactating women for malnutrition • Provided Vitamin A supplementation and deworming, prenatal and postnatal consultations, nutritional education sessions and cooking demonstrations guided by model mothers with the support of counsellors • Allocated fire extinguishers to the District Drug Deposits (Chiure and Metuge), set up two tents donated by WHO (Katapua and Nanlia). • Challenge: Shortage of essential medicines
2	Fundação Ariel Glaser  <p>Training of the health committee of Bairro Cimento Vila de Mueda</p>	<p>Project Karibu</p> <ul style="list-style-type: none"> • Trained health committee of Bairro Cimento Vila de Mueda composed of 14 members • An approach to ensure they play part in mobilization of communities and identification of health problems • To ensure continuity of primary healthcare services to IDP • Trained 22 religious leaders on HIV/AIDS/TB and community mobilization for demand creation for TB and GBV services • Trained leaders will train others in their communities to support community mobilizations and referral of cases to health facilities and mobile brigades
3	Mother to Mother(M2M)  <p>Integrated supervision visit to Meculane RC</p>	<ul style="list-style-type: none"> • m2m followed up pregnant and lactating women under PMTCT in Metuge and Chiure districts • 403 clients were attended to with 330 being tested and 4 diagnosed with HIV • Lack of health technicians in the RC of Ngalane, Nangua and Manono • The team also conducted Integrated supervision visit to Meculane RC • Challenge: Lack of essential medicines in all RC
4	IOM  <p>Integrated Mobile Brigades and COVID-19 vaccination drive in Ntokota, Metuge district</p>	<ul style="list-style-type: none"> • Conducted integrated mobile brigades reaching communities in Montepuez, Ibo and Metuge districts, and in Memba and Corrane district, Nampula, reaching 10,319 beneficiaries in host communities and IDP, with 16,099 clinical consultations • Supported SDSMAS in Ibo, Montepuez, Metuge, Nampula and Corrane to conduct COVID-19 vaccination drives. 8,112 • Active case finding of 93 new HIV and TB patients in collaboration with DPS, SDMAS and health facilities • IOM's network of community activists reached 8,754 people in 5 districts of Cabo Delgado with awareness on health topics through IEC materials
5	SolidarMed  <p>Integrated Mobile Brigades conducting outreach services and conducting cooking demonstrations with locally available foods</p>	<ul style="list-style-type: none"> • Held 14 health lectures in Ancuabe district benefiting 1229 IDP, and visited 975 families in the resettlement centers • Delivered 13 health lectures to 784 beneficiaries in Chiure district and visited 903 families in the resettlement centers • Conducted 21 GBV lectures for 827 people in Ancuabe district and visited 800 families in the resettlement centres • 29 GBV cases were reported in Ancuabe, 6 of which were sexual violence, and 12 cases were referred to the health centres • Delivered 30 GBV lectures in Chiure district, reaching 1022 beneficiaries, and visited 739 families in resettlement centers • 29 GBV cases were reported in Ancuabe, of which 5 were sexual violence, and 12 were referred
6	Action Against Hunger (ACF)  <p>Screening and for MAM/SAM and different diseases in the Mueda</p>	<ul style="list-style-type: none"> • ACF supported the integrated mobile brigades in Mueda, Muidumbe and Nangade and strengthening of resources at the Hospital Rural de Mueda • Mobile brigades screened 1,740 children for MAM/SAM in the three districts • 3,008 children screened for different diseases • Challenges: Due to worsening security conditions in Nangade district, mobile brigades visits were suspended the first weeks of April but later resumed. • ACF is working to improve coordination and communication on security among all actors involved in the activities. • Coordination meetings are planned and to be carried out on a regular basis with health authorities and other actors involved in the implementation of the visits.

Health Cluster Partners Actions: Provision of Life Saving Healthcare

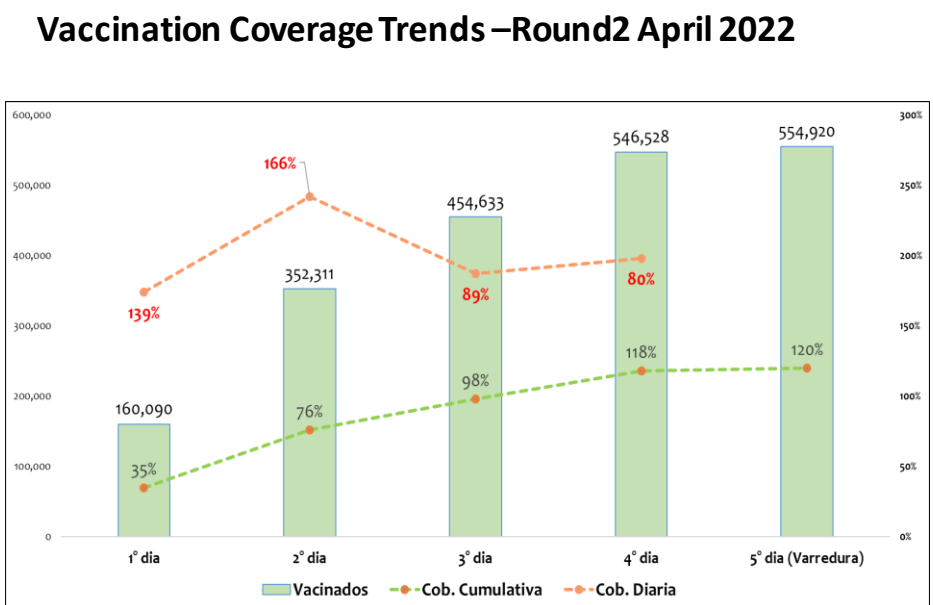
	Health Partner	Highlights
7	FHI360  <p>Supervision of community health workers (APE) in Metuge district</p>	<ul style="list-style-type: none"> Supported integrated mobile brigades in Ancuabe and Metuge districts Supported surveillance for acute watery diarrhea/ cholera Health activists are supporting ongoing health and WaSH promotion activities in 8 communities, in Ancuabe and Metuge districts Started rehabilitation of Meza health center in Ancuabe and Nacuta in Metuge Supported round 2 polio vaccination campaign with 6 vehicles, in Metuge and Ancuabe districts Conducted supervision visits to APE in Ancuabe and Metuge as follow up of the training in March Challenge - Only 9 out of 30 planned visits due to limited availability of Medicines.
8	Pathfinder  <p>Counseling session on SRH in Marrocane resettlement center (Meza)</p>	<ul style="list-style-type: none"> 762 Counseling and support sessions on SRH and HIV 81 women and adolescents were referred to health facilities for contraceptives 59 awareness and prevention sessions for STI, HIV and TB, benefiting 754 people in Pemba and Ancuabe Awareness sessions on WaSH for 811 mothers and caregivers of children 280 people reached in the group sessions on malaria prevention in Ancuabe and Pemba 43 suspect malaria cases referred to health facilities Psychological screening for 430 people 15 group sessions for mental health awareness and community protection for 211 people 1726 water purifying bottles distributed benefiting 2227 people in Pemba and Ancuabe) 896 personal cleaning supplies (Soap) for IDP* were distributed benefiting 1332 people
9	World Health Organization (WHO)  <p>Delivering Medical kits and surgical items to SDSMAS in Ancuabe district</p>	<ul style="list-style-type: none"> Donation of 3 basic IHEK and 3600 water purifiers for temporary clinics in Mueda district 11 Medical kits and surgical materials were delivered to SDSMAS Ancuabe to support health unit 400 bottles of Ringer Lactate, 100 of 5% Dextrose, 300 ampoules Insulin donated to the provincial warehouse 6 temporary clinics supported in 3 districts Clinical consultations for 3729 people in 3 districts 313 women received modern contraceptives 6 Patients received mental health consultation 907 community members received health messages Supported SPS/DPS in implementation and monitoring round 2 of polio vaccination campaign Monitoring of 3 water boreholes for 3 temporary clinics in Ntocota, Nicavaco and Cujupane
10	UNICEF  <p>Distribution of mosquito nets by Joint Aid Management organization (JAM) in Montepuez district</p>	<ul style="list-style-type: none"> Equipped CHW/APE with basic medical kits Supported integrated mobile brigades Delivered 200 CHW kits to DPS for 10 districts, enabling CHWs reach 8,633 people with consultations Implementation of iMB by ACF and Helpo in partnership with UNICEF, resulted in 2,454 consultations and 361 malaria treatments Through Joint Aid Management organization (JAM), UNICEF delivered 1,459 mosquito nets to 730 families in Montepuez and Mecufi districts

Polio Vaccination Campaigns in Cabo Delgado Province

- A cVDPV2 polio outbreak was confirmed in Mozambique on 14 February 2022. The first case was in Nampula province, a male child aged 21 months who had 3 doses of oral polio vaccine, and reported acute flaccid paralysis from 29 April 2021
- Also notification of a case of wild polio virus type 1 (WPV1) in the neighboring Republic of Malawi (Lilongwe)
- Key response actions undertaken by MISAU include adherence to IHR protocols, activation of the national polio emergency operations centre, engagement with WHO/UNICEF regional office and headquarters, and a costed response plan
- Implementation of 4 rounds of synchronized vaccination campaigns to prevent the transmission of WPV1 and cVDPV2 in the country is ongoing
- Round 1 was conducted from 24-28 March 2022 and round 2 from 28 April -02 May 2022, reaching 0.55 million children under five, and 120% province-wide coverage

Results of Vaccination Coverage by District-Round 2

Districts	Target	Daily Target	Vaccinated	Coverage
Ancuabe	40 248	10 062	50 436	125%
Balama	29 340	7 335	36 848	126%
Chiure	60 955	15 239	67 373	111%
C. Pemba	66 198	16 550	85 730	130%
Ibo	5 160	1 290	6 400	124%
Macomia	11 308	2 827	12 526	111%
Mecufi	11 199	2 800	12 856	115%
Meluco	6 362	1 591	6 624	104%
Metuge	35 359	8 840	45 222	128%
Moc Praia	4 448	1 112	4 664	105%
Montepuez	71 651	17 913	83 647	117%
Mueda	37 827	9 457	47 135	125%
Muidumbe	5 159	1 290	6 243	121%
Namuno	43 914	10 979	49 995	114%
Nangade	16 960	4 240	19 092	113%
Palma	11 273	2 818	14 251	126%
Quissanga	4 889	1 222	5 878	120%
Provincia	462 250	115 563	554 920	120%



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Public Health Risks and Gaps

Health risks

- **Conflict and population displacement;** the unpredictable security situation and continued shift in insurgent fighting in Cabo Delgado pose great threat to access to basic health care. This creates increased demands for health services due to population displacement, destruction and looting of health facilities, physical trauma, poor hygiene and living conditions, new and pre-existing conditions and diseases, mental health burden, sexual and gender-based violence, and other sexual and reproductive health needs
- **Climatic hazards;** this includes occurrence of cyclones and tropical storms which leads to increased risks for waterborne disease as for instance, tropical storm Ana made landfall in January 2022 and cyclone Gombe on 11 March both affecting thousands of people. Warnings for other cyclones and tropical storms are regularly issued
- **High risk of COVID-19 spread;** factors including populations living in congested IDP sites, weak surveillance system, porous international borders, poor compliance in implementation of control measures by the general public
- **Communicable disease (cholera, measles, polio) outbreaks;** due to poor and congested living conditions, limited access to WaSH facilities and poor practices, and low vaccination coverage
- **Food insecurity and malnutrition;** resulting from erratic rains and drought in some locations, which contribute to higher vulnerability of children and other people to infectious diseases and other disease conditions

Challenges

- 1) Insecurity and continued insurgent attacks denying access to the mostly affected areas for provision of basic health services especially in the Northern districts of Cabo Delgado province
- 2) Most of the health response is happening in the Southern IDP-hosting districts of the province, with minimal to no coverage of the Northern districts, that are becoming more important as the access improves and IDP start to return
- 3) There is still room for improvement of partners' coordination and information sharing in some districts, to avoid duplication of effort and gaps in response
- 4) Stock-outs of essential medicines and medical supplies for health facilities and mobile clinics in some districts continue to impede access of essential healthcare by the vulnerable population

Recommendations

- 1) Considering the difficulties of procuring medicines both internationally and locally, it is important to advocate with donors to support the establishment of health cluster emergency pipeline
- 2) Continue advocating with the provincial health authorities to address the gaps in pharmaceutical supply chain management to ensure sufficient stocks and distribution of essential medicines
- 3) Health partners are reminded that monitoring and reporting of the humanitarian response is a requirement for accountability and ensuring that the needs of affected populations are met
- 4) Health partners should be flexible in their projects in order to scale up as need be and expand to cover the Northern districts as IDP returns increase
- 5) Health partners to strengthen and participate in district health coordination meetings where joint planning, scheduling of mobile brigades, and identification of response gaps is conducted

Health Cluster Partners

Participating Partners: F. Ariel, FHI360, SolidarMed, ICRC, M2M, MSF-B, MSF-E, ACF, AMODEFA, Pathfinder, SCI, Johanniter, WHO, UNICEF, IOM, UNFPA.



This bulletin is produced monthly by the health cluster. We acknowledge the support of all government agencies and health partners for their role in providing life-saving primary health services in the affected locations. Equally, we appreciate all the contributions of reports and information based on field experiences during the humanitarian response.

Link for cluster bulletins, dashboards and infographics:

<https://www.humanitarianresponse.info/en/operations/mozambique/health>

Other important link:

<https://www.unocha.org/mozambique>

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