

# Rapid Gender Analysis Sofala – Beira

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### Author

Ernesto Paulino – Care International, Mozambique

Veronica Gazitua – Care International Mozambique

Yarin Abdul – Care international Mozambique www.caremozambique.org

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The views in this RGA are those of the author alone and do not necessarily represent those of the CARE or its programs, or the Australian Government/any other partners.

Cover page photo: Individual story telling interview by a CARE's volunteer at the Ressetlement site of Chindo 2021, in the District of Buzi, locality of Guara-Guara

Image: @CARE/Josh



## Contents

Abbreviations	4
Executive Summary	5
Key findings	
Introduction	
Background information	6
The Rapid Gender Analysis objectives	6
Demographic analysis	7
Beira district	8
Findings and analysis	8
Gender Roles and Responsibilities	9
Access	11
Participation	12
Protection	12
Shelter	15
Needs and Aspirations	18
Recommendations	19
Overarching recommendation	19
Gender mainstreaming recommendations	19
Gender-specific programming recommendations	19

## **Abbreviations**

FGD - Focus group discussion

FHH - Female-headed household

GBV - Gender-based violence

HH - Household

KII - Key informant interview

MHM - Menstrual hygiene management

NFI - Non-food item

PSEA - Protection of sexual exploitation and abuse

PwD - Persons with disabilities

RGA - Rapid Gender Analysis

SADDD - Sex, age and disability disaggregated data

WASH - Water, Sanitation and Hygiene.

SEA - Sexual Exploitation and Abuse

## **Executive Summary**

On the 23<sup>rd</sup> of January 2021 Tropical Cyclone Eloise made its landfall, in central Mozambique.. Over 441 686 people were affected, with 43 327 persons being displaced (the *Instituto Nacional de Gestão Redução do Risco de Desastres* (INGD).) The storm also destroyed farmland, infrastructure and thousands of homes. Most of the areas hit by Cyclone Eloise were the same areas affected by Cyclone Idai less than two years ago and hit by tropical storm Chalane on 30 December 2020.

CARE conducted a Rapid Gender Analysis from the 12<sup>th</sup> to the 18<sup>th</sup> of February in three of the affected districts in Sofala Province, Beira (with the focus on Inhamizua, IFAPA accommodation center, and Chipangara) Nhamatanda (with focus on Tica, and Jhon Segredo Accommodation center), and Buzi (with focus on Guara-Guara), at the transit centers, resettlement sites, and catchment areas.

About 56 364 houses were totally or partially destroyed, others flooded, forcing some families to shelter with host families. Others families had been evacuated from flooded areas and were staying in crowded temporary accommodation. Those that were staying in accommodation centres had lost most of their resouces, and were dependent on government for daily provision.

#### **Key Recommendations**

Decision making: Have gender balanced teams in decision making structures established during crisis to reduce or mitigate instances of Sexual Exploitation and Abuse.

Shelter: Prioritise vulnerable families that include female headed households, the elderly, people living with disability and child headed families in the provision of building materials, skills and support in the construction of durable shelters.

Protection: Conduct protection audits and come up with strategies to mitigate protection risks in accomodation centres and newly resettled sites. En

## Key findings

- Shelter Family tents provided by Government, were accommodating more than 10 people and not necessarily from the same household. Women reported not feeling safe. The situation was exacerbated by fear of contracting Covid19, as they could not practice social distancing.
- WASH: Women and adolescent girls reported lack of safe latrines and bathing facilities at accommodation centres.
   Furthermore the facilities did not have lighting and women and girls did not feel safe using the facilities during the night.
- Decision making: There was limited participation of women in decision making.
   Most of the accommodation centres and decision making structures were being led by men, resulting in allegations of SEA being levelled against the chief of centres.
- Menstrual Hygiene Management. Most women reported lack of privacy to wash and dry menstrual hygiene materials. Cultural norms inhibit women for drying MHM materials in the open.
- Livelihoods- In Buzi and Nhamatanda, many people lost their livelihood, resulting in high levels of food insecurity. Women, who do not have many sources of income were thus adversely affected.
- Protection Concern, Due to the lack of lighting in most of the accommodation centres, women and girls expressed protection concerns.
- There was also an increase in number of theft cases reported.

accomodation centres and newly resettled sites. Ensure that Protection sysreems, GBV services are activated to provide safety, and responsive support to affected women and adolescent girls.

Protection Sexual Exploitation and Abuse: Disseminate clear messages on free access to humanitarian assistance and put in place multiple community based complaints mechanisms to facilitate communication and accountability to affected communities.

### Introduction

## **Background information**

On the 23 rd of January, Mozambique was hit by Tropical Cyclone Eloise. It hit the central part of Mozambique, affecting Sofala, Manica, and the southern part of Zambezia, Inhambane, and Gaza provinces. Sofala Province was the province that was heavily affected. 59 accommodation centres were activated, 52 in Sofala and 7 in Manica. The cyclone brought heavy rainfall that caused Chicamba Dam and Mavuzi Reservoir to overflow. The resulting flooding affected the residents of Vila Sede, Guara-Guara, Ampara, Grudja, Estaquinha, Inhamuchindo, and Bândua localities in the Buzi district. Other affected districts are Dondo Nhamatanda and Chibabava in Sofala. According to the ANGC, eleven (11) deaths were recorded, close to 442,000 people affected, and more than 43 327 people displaced and moved to temporary accommodation centers in Sofala and Inhambane provinces. 29,310 houses were damaged: 17,738 were destroyed. In the Sofala province 8,565 were damaged, and 3,007 were flooded, mainly in Sofala province. 579 classrooms and 86 health centers will need repairs. 242,000 hectares of crops were destroyed in areas hit by Eloise<sup>1</sup>.

## The Rapid Gender Analysis objectives

The Rapid Gender Analysis (RGA) gathered information on the different needs'of the affected population, the capacities and coping strategies of women, men, boys, and girls in a crisis. The objectives of the RGA were to better understand:

- The roles and responsibilities of women, men, boys, and girls as well as at-risk groups and how these have changed since the crisis.
- The main needs, concerns, and priorities for women, men, girls, and boys as well as at-risk groups, among CARE's key sector of intervention as well as future areas of intervention.
- How CARE's emergency response can adapt services and assistance to meet the different needs of women, men, boys, and girls, as well as at-risk groups.

#### Methodology

Rapid Gender Analysis is built up progressively: using a range of primary and secondary information to understand gender roles and relations and how they may change during a crisis. It provides practical programming and operational recommendations to meet the different needs of women, men, boys, and girls and to ensure tha no harm' is done. Rapid Gender Analysis uses the tools and approaches of Gender Analysis Frameworks and adapts them to the tight time-frames, rapidly changing contexts, and insecure environments that often characterize humanitarian interventions.

 $<sup>\</sup>underline{\text{https://reliefweb.int/sites/reliefweb.int/files/resources/20210217\_acaps\_briefing\_note\_mozambique\_cyclone\_elois} \\ \underline{e\_v2.pdf}$ 

The primary data collection was undertaken from February 12<sup>th</sup> to February 18<sup>th</sup>. Primary data collection was carried out in three districts of Sofala Province, (Beira, Nhamatanda, and Buzi). Information was collected from those in accommodation centers/transit or resettlement sites as well as the catchment areas. Secondary data review included a review of organisational assessments, sector assessments as well as Joint Rapid Assessments that were conducted at provincial and district level.

- **22 Focus Group Discussions** were conducted across the three districts, with groups of men, women aged (18-70 years old), and groups of boys and girls aged (12-17 years old).
- **22 Key Informant Interviews** were conducted. Key informants included community leaders, local government officers and other humanitarian agencies
- 37 Individual interviews were conducted, targeting the elderly and other vulnerable groups
- The assessment in **Nhamatanda** was done in one accommodation center of Jhon Segredo with 460 households and 1,570 individuals. (240 men, 307 women, 615 children, 310 elderly people, PWDs 76, and 22 pregnant women),

	Household Q			KII			FGD				Individual Interviews		
District	total	М	W	total	М	W	T FGD	Total	М	W	Total	Men	Women
Beira	170	80	90	8	4	4	10	67	30	37	17	8	9
Nhamat	127	67	60	2	1	1	4	45	16	29	4	2	2
Buzi	150	75	75	12	7	5	12	88	40	48	16	8	8

#### The research had limitations,

- For the household questionnaire, KoBo tool was used, however due to the lack of electricity in the village of Buzi, there were times in which there was no power on the tablets and this affected the processes
- The data collection process in the District of Nhamatanda had to be delayed due to logistical issues and heavy rains. As a result, the team focussed only on one accommodation/transit center.
- In the District of Buzi the team was unable to access some of the sites as they were not accessible by cars.

## Demographic analysis

According to the INGD, a total of 442,000 people across Mozambique's Sofala, Zambézia, Gaza, Manica, and Inhambane provinces were affected by Cyclone Eloise.<sup>2</sup> Below is the district profile for the areas CARE conducted the RGA

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<sup>&</sup>lt;sup>2</sup> USAID; 2 March 2021, South

#### **Beira district**

Beira district has a total population of 592,090 (295,362 male / 296,728 female;) In Beira Distric, about 22,474 households ,112,370 individuals were affected by the cyclone. Sex and age disaggregated data (SADD) could not be accessed.

- 7890 people (3091 families) moved into temporary accommodation. However, these accommodation centres have since been deactivated.
- Number of flooded homes: 22,474
- Number of Flooded Cropland: 517 hactres
- Number of affected Health Units: 8
   Number of Damaged Classrooms: 30<sup>3</sup>

At the accommodation center of IFAPA at the time of the assessment there were 385 households; 1,112 individuals, from which 243 were children, 372 women, 290 men, 20 lactating women, 19 pregnant women, 113 elderly people and 55 persons with disabilities. Women and children constituted the majority of those that were in accommodation centres.

#### **Guara Guara, Buzi District**

Buzi has a total population of 177,415; 94,204 female, and 83,211male, and a large population of youth (104,111 aged between 0-14). 81% of the population was affected by the Cyclone Eloise. Guara-Guara is one of the locality in the district of Buzi and according to the statistics availed by Government, 2,710 Households were affected, and 13.550 individuals. SADD was not available. Most of the affected population came from the village of Buzi.

#### Jhon Segredo, District of Nhamatanda

Nhamatanda has a total population of 279,081 (135,455 Male; 143,626 Female). 11 % of the population in Nhamatanda, 29,763 were affected by the Cyclone Eloise. Jhon Segredo is a new accommodation center, accomodating people from the neighborhood areas. Before, the establishment of the Jhon Segredo accommodation centre, displaced people were staying at the Secondary School of Tica (temporary accommodation centre), but it was overcrowded, and affected people had to be moved to Jhon Segredo transit center were 460 households were accomodated and 1,570 individuals (240 men, 307 women, 615 children, 310 elderly people, 76 persons with disabilities and 22 pregnant women). The official language predominant is Sena, and Portuguese

## Findings and analysis

The cyclone that hit Mozambique affected about 458 000 people, 291,452 in Sofala province, 167,026 in Manica. A total of 43, 327 people were displaced, with 34 566 people evacuated. (INGC) Cyclone Eloise also destroyed infrastructures and shelters, especially in resettlement areas. The resettlement areas had been established in 2019, to resettle those who had been displaced by Cyclone Idai. Over 261 000 hectares of crops were destroyed, including stocks of food. According to the assessments, Female headed-household (FHH), persons with disabilities (PWDs), the elderly and orphans, had been adversely affected.

During the time of the analysis, displaced people were staying either in temporary settlement, 44% in Buzi, 7% in Beira and 12% in Nhamatanda, or being hosted by other families 5% in Beira and 3% in Nhamatanda. However, all the accommodation centers in Beira have since been deactivated. In Nhamatanda, there is only one active accommodation center, (Jhon Segredo) and in Buzi, there are four accommodation centers

<sup>&</sup>lt;sup>3</sup> Data provided from the Needs assessment done by INGD/OCHA

operational and only a part of the families in the accommodation centers have been relocated to the resettlement sites, as there are not enough tents and plots of land distributed.

## Gender Roles and Responsibilities

According to the survey and FGD, women still have the primary role of caregiving. Findings from the household interview, indicate full and partial involvement of some men in household activities, in Buzi 56%, Beira 25% and Nhamatanda 23%. The majority of men, do not engage in any domestic labour, some said that this is exclusively a woman's duty, 'I can only do it, in case she gets sick".

Women have the responsibility for water and firewood collection, as well as cooking, They are the ones that stay at home taking care of children and the house. Men in Buzi are mainly responsible for cattle herding. Girls and boys are responsible for collecting water and firewood.

In the camp, both men and women were working in the kitchen

#### Decision making within the household

Decisions at household level are mainly made by men, though there is a shift in some households towards joint decision making. 65% of the men who participated in the survey alleged that there was joint decision making at household level. 49%

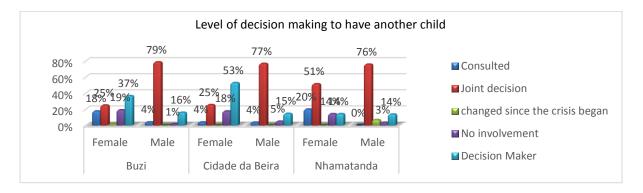
#### Gender roles and responsibilities

Women and men's role have dramatically changed because of the cyclone. Men reported that before the cyclone they were able to go to the farm and to work to get some money to feed their family, and provide for their education, but now, they don't know from where to start, "we are psychologically affected", and most of us have skills in carpentry, fishing, construction, and farming, but there are no resources available for us, and even up to now we can't go back to our farms because it is flooded and the crops destroyed. We just stay here waiting for government assistance.

We can't even build our house because there is no specific plot of land allocated to us. For boys and girls, the routine has also changed, now they just stay in the accommodation centres without going to school, they wash the dishes and wait for food, and the most difficult aspect they have pointed out is that there are no more those odd jobs where they could get some money to support their studies and family.

men, 29 % women alleged joint decision making on working/ engaging income generating activities; 63% male, 31% women on disposal of assets; 55% male, 33% women on decision to migrate; 81%Men, 41% Women on children attending school; 78% male 33% women on having another child, and 77% Male and 33% Women on child's health. Women have limited decision making over children's health and education. Women, alleged that decisions were made by the the head of the household. 16% in Beira and 19% women in Nhamatanda alleged non –involvement on decisions pertaining to access to health services for children.

Decision making on **household income:** - whilst men and women indicated joint decision making over family income, 61% of men in Beira indicated that they only shared part of their income with their family. More men across the districts had money they could make decision on their own in Buzi 55% Beira 33%, Nhamatanda 20%. Only in Nhamatanda, did we have 31 % of women having decision making over their finances. Without financial means, women's decision making at household level as well as capacity to cope and adapt are limited.



#### Control of resources

Women and men have differential access to resources. In all the three districts, women have limited access to land compared to their male counterparts. Of those that participated in the household survey, 54% of women compared to 34% men did not have access to land jointly or alone. The largest number of men that did not have access to land were from Beira 54%. 4% women compared to 17% men had access to land alone. This underlies women's vulnerability considering that 36% of the households are female headed. According to the National Directorate of land in 2015, only 20% women as compared to 80% men had Duats (right to exploit land) registered in their name. Rural women's access to land are defined through their realationship to men, and young widows usually find themselves dispossessed inspite of the land law<sup>4</sup>. In terms of houses 59% men had houses alone, with the exception of Buzi, were 39% indicated they had houses with their wives. Women's access to resources has a bearing to their ability to recover from the crisis.

In the accommodation centres, men were the ones mostly in control of the resources, such as water and food. Men were in charge of waterpoints and monitoring adherence to COVID 19. Men were also in charge of food. Allegations of mismanagement were raised againt the men. Instead of 3 meals the IDP were receiving two meals a day.

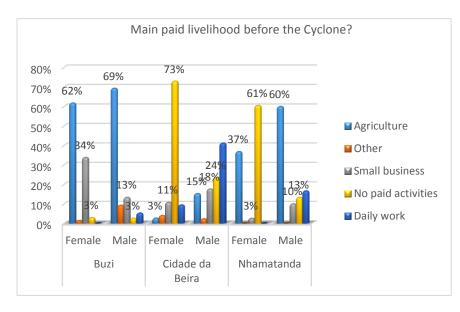
#### Livelihoods

Agriculture is the main source of livelihood in rural areas, for both men and women. In Buzi, 62% women and 69% men of those surveyed are dependent on agriculture, followed by small business for women 34% and men 13%. In Nhamatanda and Beira, few women were engaged in income generating activities before Cyclone Eloise.

40% men in Beira and 13% in Nhamatanda were engaged in daily work prior to the cyclone. The Agriculture Committee President in Buzi, mentioned that almost all the crops and farms were destroyed by the cyclone and floods, thereby making most families vulnerable and forcing them to rely of food assistance. Few of the households had any additional source of income outside agriculture.

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<sup>&</sup>lt;sup>4</sup> Adecru, Forum Muhler and LANDAC, 2018, Securing women's land rights in Africa, LANDac, Utrecht



Men in accommodation centres were not engaging in any livelihood activities. They said that there was nothing they could do, and were reliant on humanitarian assistance. They had not gone back to their homes, as the places were still flooded. Besides that, men said that they do not go seeking for jobs, or to the farm because of the fear of being excluded from humanitarian support. situation is extremely bad for women who have the primary responsibility for caregiving.

Because of the displacement, they have children most of the time, which leaves them with limited time to engage in income generating activities. In all the three disticts, women constituted the majority of those that did not have any monthly income. The women were reliant on kitchen food to feed their children which was inadequate and inconsistent. The little additional food that they have, is prepared for the kids. Also affected, are child headed families that do not have an adult to provide for them.

#### Access

There is a huge gap in terms of resources and accessibility. What was of concern for the IDPs was their heavy dependence on the government and humanitarian agencies to get food, water, or a plot of land to build their houses. For those who have been resettled, there has been minimal impact as they do not have resources to build shelters or engage in income generating activities. Due to high levels of food insecurity in the country, there is also conflict between the IDPs and the neighboring communities over food, and water. According to FEWSNET, 2.9 million people in Mozambique are facing acute food insecurity, a situation that has been worsened by Cyclone Eloise, that flooded some of the farmland in Buzi and Nhamatanda.

#### Access to services and resources

Services	Access to these services
Water	The service is accessible, the only challenge is that in some settings the water is not adequate, forcing people to resort to unprotected water souces.
Food	There is limited access to food. It was reported during FGDs that people were spending days without having the three meals. Both women and men are involved in food preparation, however, it is the man who controls the food stocks.
Clothes	The IDP had not received clothing, besides the ones they had brought with them.

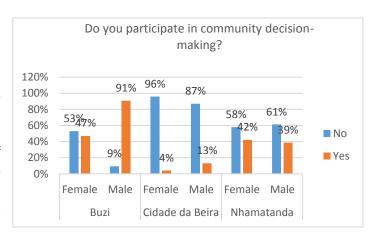
NFI Distributions	In the sites the team visited, the IDP reported that they had not yet received any NFIs; although some areas had received NFIs. CARE distributed cooking pots in coordination with IFRC in 2 accommodation shelters (Samora Machel and October 12) on Jan 27th. COSACA (consortium with CARE, Save the Children and Oxfam) distributed 20 handwashing stations and 24 bars of soaps as COVID-19 prevention measures in 2 evacuation centers
Health Services	Both men and women indicated access to health facilities, however, these health centers are not always on the site. In accommodation and resettlement sites, there is a lack of some services, like family planning as well as some medicines, and because of that they have to travel long distances to the nearerest hospital. This affects vulnerable groups's access to health services, especially, women, girls, elderly people, PWDs, and people with chronic diseases. In some of the resettlement areas, there are some community health workers, however they only have pain medication.
Latrines	On all the sites there are latrines, however, there is a great need to reinforce safety and privacy. It was reported that the latrines did not have doors.

## **Participation**

#### <sup>5</sup>Decision making about humanitarian services

According to both men and women, decisions related to the Cyclone Eloise has manily been taken by the local government.

In each community, there is a leadership structure made up of Chief of Center, Neighborhood Secretary, and there is also a chief of 10 houses. Participation in terms of decision-making is done by these leadership structures. There are few accommodation centers in which there is a female as a leader, such as IFAPA accommodation



center. As the graphic illustrates from the HH survey, there is little participation of the affected community in decision-making, especially women. 69% of women alleged no participation in decision making at community level. Women's participation within the public space is limited, few women had membership or were participating in club or association, and for women, participation was high in religious associations, that is Buzi and Nhamatanda at 48.5%. In Beira, 50% of women were involved in women's groups, and 50% in politics. In Buzi and Nhamatanda, of those interviewed, none of them had membership to a political party, while men were mainly active in social groupings and politics.

#### **Protection**

Women who participated in the survey reported an increase in concerns about the safety of adolescent girls and women, though men did not feel the same; 81 % female 73% male in Buzi and 63% Female and

<sup>&</sup>lt;sup>5</sup> HH survey RGA 2021 data analysis

13% male in Nhamatanda. Whilst in Beira, 40% men 19% of women had concerns over the safety and security of adolescent girls.

#### Gender-Based Violence (GBV)

During the FGD, women mentioned that there had been an increase in GBV. In cases of Gender Based Violence, especially sexually abuse, the cases are usually reported to the police, community leaders and GBV service providers. In accommodation centers, women and adolescent girls tended to rely mostly on the support of their families, community leaders and religious leaders for protection. There is generally an underreporting of cases, mainly because women do not have confidence in the processes. According to the women and girls FGDs in Guara Guara, they did not feel safe in reporting their cases. At the time of visit, GBV services were not available, as well as the department of Social Action.

#### **Child marriages**

An increase in early marriages was also reported, though most of the cases were linked to the pandemic. Mozambique has one of the higher early marriage rates, one in every two girls, a situation that is likely to

#### **Protection**

It has been mentioned that due to unsafe bathing and latrines facilities, women and girls are at risk of SEA.

Furthermore, more than 10 people were living together, which not only puts them at risk of SEA, but at risk of getting COVID, as it is difficult to practice social distancing. People expressed fear, though there was little they could do.

And there is also a concern when it comes to the police. There are some centers without the police office, and there are only "Policia Comunitaria" but these same police are being the ones perpetuating cases of sexual abuse.

have been exercerbated by the consecutive crisis. The situation is likely to be exacerbated by the displacement, shared accommodation, higher levels of food insecurity.

#### **Sexual Exploitation**

During FGDs with women and girls, it emerged that there were cases of SEA, as well as transactional sex in the accommodation centers. There were also reports of the chief of the center asking women (especially young girls) for sex in exchange for food, and if they refused, they would not get the same amount as the other girls. According to the women that participated in the FGDs, SEA of young girls is not new, but a common practice, especially by those in leadership position. In one of the accommodation sites, there was also a case of sexual abuse perpetrated by a community police, and the case had already been referred to the police. However, there is generally an underreporting of cases and normalisation of SEA.

#### Safety

People do not feel safe, especially when living in a tent with more than 10 people. Furthermore the accommodation centres, did not have lighting at night. While, there are police posts in the accommodation and resettlement sites, as well as, the community police, the groups reported that there are cases of theft.

The Jhon Segredo accommodation was situated near a main road, and women cited this as a hazard, as women have to cross the road to access washing facilities. People also expressed concern over there shelters. They are still living in tents and they feared that there would be more rain coming, making their condition worse..

An assessment conducted by the protection cluster also revealed that there were a host of protection challenges, some dating back to Cyclone Idai, and had been further exercebated by COVID 19 especially for vulnerable members, people living with disability, female and child headed families. Some of the protection challenges include

- lost civil documentation and birth documents during the cyclone for IDPs.
- People living in damaged houses that puts them at risk of theft and violence, especially PLWD
- **Elderly persons:** HelpAge in partnership with ASADEC has been doing assessments in IDP resettlement sites
- **MHPSS:** Families are reporting prevalent cases of trauma in their households that require psychosocial and specialized mental health care.
- COVID-19: risk of spreading COVID-19 in tightly packed accommodation centers
- WASH: the reduced numbers of latrines and bathing areas in the accommodation centers
  means that women and girls, men and boys are resorting to open defecation in poorly lit
  areas.
- **PSEA**: limited access to services and weak accountability systems in accommodation centers.

### **Shelter**



Lucia Francisco, 33, is a mother of six children. She is seen with her youngest daughter who is six months old

Cyclone Chalane also destroyed and damaged shelters. 20 798 houses were destroyed, whilst 35 566 were damaged (shelter cluster report.) 8 500 (6790 in Sofala: Buzi 4619 HH, Dondo, 1230 HH, Chibabawa 773 HH, Caia (66) Nhamatanda 102). The area that was mainly affected were resettlements. Following Cyclone Idai, 2 years ago, resettlement sites were established across Sofala province, build back better initiatives have not yet been fully supported nor implemented. Thousands of tents and temporary shelters were destroyed, as well as permanent structures such as schools and hospitals.

The group that was most affected were vulnerable households headed by women, children, the elderly and persons living with disability. Overall, 2,310 shelters of vulnerable families, encompassing, female and child headed households,the elderly and chronically ill living alone or caring for minors, were partially or totally destroyed by Tropical Cyclone Eloise. Almost half (1,073) of the affected vulnerable households are headed by women, 676 in Buzi district alone, most of them in Bandua Sede and Maxiqiuri Alto 1 resettlement sites. The second most affected group were elderly living alone or caring for minors, likewise mainly in Buzi's Bandua Sede and Maxiqiuri Alto 1 sites.

Among child headed households, 19 had their tents totally destroyed and 8 partially destroyed, most of them in Begaja site/Buzi district. This situation exposes families headed by women and children to considerable protection risks in terms of physical safety and security.<sup>6</sup>

According to the FGDs and individual surveys, in accommodation centres more than two families were sharing accommodation, although, there was separation of sexes. Government supplied family tents, that could accomodate 10 people, and these were not necessarily coming from the same family. In Buzi 80% of those who participated in the RGA assessment, indicated that they were sharing shelters with other families. This seriously undermines the safety, privacy and dignity of the affected people raising protection concerns. Furthermore, they indicated that they did not have adequate blankets. Of those surveyed, more women than men reported not feeling safe in their shared accommodation, in Buzi, 82%, Beira 86%, and Nhamatanda 92%. At the time of visit, no NFIs had been distributed.

Of those interviewed, 86% in Buzi, 7% Beira and 45 % Nhamatanda, reported that their shelters had been destroyed. Buzi 9%, Beira 76% and Nhamatanda 14 % reported that their shelters had been partially destroyed. Persons living with disabilities, elderly people, and pregnant women were the most affected.. At the time of writing, the Government had deactivated most of the accommodation centres, with families going back to their homes, others staying with other families, with others being moved into the new resettlements opened by the government. 5 new resettlement sites had been opened in Sofala.

#### Water Sanitationa and hygiene

Early assessments conducted by ION and INGD on 31 January noted insufficient latrines and poor hygiene in all the accommodation centres. During the primary data collection process, it was reported that water was being trucked. In most of the accommodation centres as such women were not spending time collecting water. Both men and women felt safe accessing water from the water points. However, the water was inadequate to meet the needs of the IDPs. In some of the accommodation centers, host communities were also taking advantage of the trucked water to access safe and clean water, forcing IDP women to travel outside the accommodation centres to get water from unprotected sources. There were instances of diarrhear reported in the camps due to driniking contaminated water.

In the accommodation centres visited by the team, IDP had access to latrines and bathing spaces, although they were considered unsafe, especially during the night. Most of the latrines did not have doors, and furthermore they were few. There were reports of people practicing open defecation.

Ines Salomao, 49 years old, head of the family, said that her husband has been chronically ill for some time, and her four children and two grandchildren (her daughter is deceased) are in her care. She requested for help in organizing a tent so that she and her sick husband, children and grand children can live together, and she can take better care of her husband and see her children go to school.

Her entire crop has been lost for this year so she has nothing to sell to buy school supplies for her children.

The Protection cluster had distributed dignity kits for women,

however, these were inadequate, and women had to use torn cloth to manage their menses. This also created challenges for women and adolescent girls when it came to washing and drying of reusable pads, taking into consideration that they were sharing the tents with other families, and also for adolescent girls,

<sup>6</sup> IOM: Flash Report 2: Tropical Cyclone Eloise Rapid assessment: Impact of Tropical Cyclone Eloise on Vulnerable Households in Resettlement sites in Manica and Sofala

taboos and mythy surrounding MHM, such as that if men sees your MHM materials, you will become infertile, precluded them from drying the cloth in the open.

#### **Food Security and Livelihoods**

Before the cyclone, men were in charge of providing food for the family, but now they have to wait for government aid. Most of the crops had been destroyed by the cyclone and floods. In the transit centres, as well as in the resettlement sites, it is difficult for for both men and women to engage in incoming

Ajussa Francisco, 41 years old,

Before the crisis, he had paid activities and was able to support his family, a wife and six children. He saw his house completely destroyed, today they live in tents in the center where they share the space with other families. He told the team that many of his family members were in the same situation. They had no resources to count on due to the loss of their house and possessions. He used to work as a bricklayer's helper, at the moment this skill has not helped him to get employment.

If he could get help with building materials, he would build his own house, in order to have his family together again. During the time of visit, he and his four children were living in the the men's tent, while his wife and 2 daughters were in the women's tent.

generating activities, as they do not have the money or resources to do so. Men have some skills in agriculture, fishing and running small enterprises, however, due to the floods and lack of resources they cannot engage in any activities. Female headed households are in the vulnerable position, because they can not travel outside the camp to look for daily work.

In most of the camps, there was inadequate food, and this had resulted in some camps having two meals instead of three. Boys and girls complained that the food they ate was not well cooked and they had to wait for a long time in queues under the sun to get their food. Issues of vulnerabliity were not considered, affecting the elderly and people living with disability. They boys and girls also lamented the issue of having no choice. Food, in some accommodation centers, had been used by those in charge to target young girls. It was alleged that young girls, who gave in sexually got a bigger portion.

#### **Education**

Attendance to school across the district and for boys and girls prior to and after Cyclone Chalane and Eloise differs. In Beira, which is an urban area, an average of 80% of the children attended school, in Nhamatanda, 70% and Buzi 40%. However, the displacement, is likely to affect attendance for some children, as resettlement areas have no schools, and both boys and girls have to travel distances to access schools. Mozambique's overall literacy rate is 47%, female literacy 28% compared to male literacy 67%. This is likely to adversely affect girls who have loe levels of retension and transition to higher grades and secondary. According to USAID, web page on Mozambique (24 March 2021), more than half of the girls drop out by the fifth grade, 11% transition to Secondary level and only 1% continue to college.

#### Coping capacities

Men, women, boys and girls had limited coping capacities, after they had lost most of their assets, during the displacement and evacuation. Whilst they had various skills, such as capentry, fishing, they could not use them in the camps. Some had set up some small businesses in the accommodation centres, selling dried fish, biscuits and vegetables. There were also reports of women and adolescent girls engaging in transactional sex.

## **Needs and Aspirations**

During the assessment, men, women, boys, and girls were consuled on their needs, and all the groups expressed the need for a plot of land, especially for those that no longer wanted to go back to their places of origin. According to the DTM, INGD, 5 February, 39% of the total number of camps reported that people staying there do not want to return to their place of origin. They wanted to start the process of rebuilding their lives. They also mentioned the need for capital to help them start some income-generating activities, as well as purchase materials to rebuild their houses. The people also wanted an improvement in the food they were being given.

Women and adolescent girls also needed disposable pads, as there is no privacy in the site for them to wash, put to dry, and dispose of the reusable pads.

The men, women,boys and girls also needed blankets, buckets, pots, plates, spoons and sleeping mats. They had not received any NFIs following the discplacement and movement to accommodation sites.

Women and men have also said that because their crops were destroyed there is a need of having some farming equipment and seeds so they can start over again.

Boys and girls indicated the need to have light in the accommodation sites, whether through torches or electricity. This, they felt would enhance their sense of security during the night, when it is dark. They also indicated they were afraid of going out at night as they did not have any lighting. They also mentioned the need to have a school on site to enable them to continue with their studies. For those that were being resettled, they hoped they would have access to schools as they could not go back to their previous schools due to the distance.

People Living with disability and elderly people wanted to be prioritised in access to basic services. During the individual story telling interview, one of the PWD, pointed out that his tents had been placed far from the water point, food distribution point, and health services, as such it was challenging for him to move to these points.

Fatima Tomas, 71 years old, lives with her 17-year-old grandson (her son is deceased). She said that cyclone Eloise had brought a lot of misfortune to her. Before they lived in the house that her son left and now she has nothing, the house was destroyed. Many times she sleeping without eating because the food comes out late, if she could return to live with her grandson only things would be different, but they need help to have a shelter and utensils such as (plate, pot, cup. ...) at the center people don't respect the elderly. she can't eat beans every day anymore, now she only has stomach aches, but she has no other way out because there is no other food at the center.

#### Conclusion

At the time of writing, most of the accommodation centres had been deactivated with IDPs being resettled or going back to their homes, whilst others continued to stay with other families. Most of the IDPs had not received NFIs to enable them to rebuild the shelters that had been damaged or destroyed. For those that had been moved to new resettlement areas, families continued to share tents. The situation had not improves. According to USAID FACT sheet, about 2.9 milliom people in Mozambique will likely face acute food insecurity between January to March 2021, a situation that has been further excercabated by Cyclone Chalana and Cyclone Eloise<sup>8</sup>. This had been further exarcerbated by tropical Cyclone Eloise and Chalana,

<sup>&</sup>lt;sup>7</sup> ACAPS, 17 February, Mozambique, Impact of Tropical Cyclone

<sup>&</sup>lt;sup>8</sup> USAID, March 2, 2021; Southern Africa Regional disasters

that had seen hectares of farmland being destroyed. With no livelihoods, the communities are in need of basic life saving support.

## Recommendations

## Overarching recommendation

This Rapid Gender Analysis report, is a living document, that should be updated and revised as the crisis unfolds and relief efforts continue. It is recommended that organizations continue to invest in gender analysis, that new reports are shared widely and that programming will be adapted to the changing needs.

## Gender mainstreaming recommendations

- Consult women, men, girls and boys, people living with disability during assessment, designing, implementation, of the activities, to ensure that interventions are responsive to the differential needs and capacities of all groups.
- Ensure equal representation and participation of women and men in both sector response and recovery committees.

## Gender-specific programming recommendations

- CARE to map available GBV services, and update the referral pathway in areas of operation
- Provide safe space for women and girls in both accommodation and resettlement sites, to enable them to access GBV and psycho-social support.
- Provision of MHM kits and raise awareness on the good hygiene menstrual practices

#### **WASH**

- Select design for latrines based on consultation with targeted communities with consideration for safety for women and adolescent girls (i.e. lighting and sanitation)
- Improve community and displaced persons access to safe treated water
- Ensure that there is shared decision making and responsibility for water and sanitation. Include both men and women in water point committee

#### **SHELTER**

 Provision on NFIs to enable families whose homes were partially or totally destroyed to rebuild their shelters, additionally for vulnerable householdss, build capacity to build own homes, or provide support

#### **Food Security and Livelihoods**

• Provide support to vulnerable households to enable them to rebuild their Livelihoods and

### **Decision Making**

• Conduct PSEA training for volunteers as well as those that hold leadership positions in accommodation and resettlement areas. Have cases or rumours of Sexual Exploitation and Abuse investigated in collaboration with the parent ministry and take corrective action.

## **CARE International Mozambique**

Av. Martires de Mueda, 596

Maputo, Mozambique

Tel +258 21 49 20 64/6

mozcaremozambique@care.org

www.care.org.mz www.care-international.org

## **Detalhes do contacto:**

Ernesto Paulino, Gender and Protection Coordinator Ernesto.Paulino@care.org

Elias Antoniou, Emergency Team LeaderElias Antoniou@care.org

