

actalliance

Emergency Response to Cyclone Idai in Mozambique, Malawi and Zimbabwe

SAF 191



Appeal Target: US\$ 8,814,191

Balance requested: US\$ 8,814,191



SECRETARIAT: 150, route de Ferney, P.O. Box 2100, 1211 Geneva 2, Switzerland

TEL.: +4122 791 6434 – FAX: +4122 791 6506 – www.actalliance.org



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Project Summary Sheet	
Project Title	Emergency Response to Cyclone Idai in Mozambique, Zimbabwe and Malawi
Project ID	SAF191
Location	<p>Mozambique - Sofala Province (Beira, Nyamatanda, Dondo, Mbuzi, Caia, Tete, Chimoio and Buzi)</p> <p>Malawi - Southern Region Phalombe, Chikwawa, Nsange.</p> <p>Zimbabwe - Manicaland & Masvingo Provinces (Chimanimani, Chipinge, Mutare Rural & Buhera districts)</p>
Project Period	<p>1 April 2019 to 31 March 2021</p> <p>Total duration: 18 months (Zimbabwe and Malawi) 24 months (Mozambique)</p>
Modality of project delivery	<p><input checked="" type="checkbox"/> self-implemented <input type="checkbox"/> CBOs <input type="checkbox"/> Public sector</p> <p><input checked="" type="checkbox"/> local partners <input checked="" type="checkbox"/> Private sector <input type="checkbox"/> Other</p>
Forum	ACT Mozambique Forum, ACT Malawi Forum, ACT Zimbabwe Forum
Requesting members	<p>Mozambique</p> <ol style="list-style-type: none"> Ecumenical Committee for Social Development (CEDES) The Lutheran World Federation (LWF) Finn Church Aid (FCA) <p>Malawi</p> <ol style="list-style-type: none"> Churches Action in Relief and Development (CARD) Evangelical Lutheran Development Service (ELDS) <p>Zimbabwe</p> <ol style="list-style-type: none"> Christian Aid DanChurchAid HEKS-EPER
Local partners	<p>Zimbabwe:</p> <ol style="list-style-type: none"> Methodist Development and Relief Agency (MeDRA) Farmers Association of Community Self-help Investment Groups (FACHIG) Fambidzanai Permaculture Centre Silveira House Africa Ahead
Thematic Area(s)	<p><input checked="" type="checkbox"/> Shelter / NFIs <input checked="" type="checkbox"/> Protection / Psychosocial</p> <p><input checked="" type="checkbox"/> Food Security <input checked="" type="checkbox"/> Early recovery / livelihoods</p> <p><input checked="" type="checkbox"/> WASH <input checked="" type="checkbox"/> Education</p> <p><input checked="" type="checkbox"/> Health / Nutrition <input type="checkbox"/> Unconditional cash</p> <p><input type="checkbox"/> Other sector Click here to enter text.</p> <p><input checked="" type="checkbox"/> Advocacy</p> <p><input checked="" type="checkbox"/> DRR/Climate change</p> <p><input checked="" type="checkbox"/> Resilience</p>
Project Impact	To save lives, reduce vulnerability, and alleviate suffering of Cyclone Idai affected populations in Mozambique, Malawi and Zimbabwe.

<p>Project Outcome(s)</p>	<ol style="list-style-type: none"> 1. Cyclone IDAI households (men, women and youth) supported in meeting their basic needs through the provision of vouchers, basic non-food items and improved shelter. 2. Improved accessibility to quality and timely food and nutrition support assistance through cash, vouchers, kits distribution and enhanced health and nutrition practices for affected persons. 3. Better access to safe water & sanitation facilities, and improved hygiene practices through the provision of WASH infrastructure, hygiene kits, trainings and sessions. 4. Reduced risk of malnutrition especially for children under five through access to food and nutrition requirements . 5. Psychosocial wellbeing, of affected persons especially children traumatized by the storm/flood have been addressed. 6. Increased access to engagement on agriculture activities and livelihood opportunities for vulnerable individuals in affected communities. 7. Disaster affected school aged children are able to return to school through school reconstruction and teacher training. 8. Strengthened community awareness on DRR. 9. Improved coordination and participation amongst SAF 191 national Forums. 																																																																												
<p>Target beneficiaries</p>	<div style="border: 1px solid black; padding: 5px;"> <p>Beneficiary profile</p> <p> <input type="checkbox"/> Refugees <input checked="" type="checkbox"/> IDPs <input type="checkbox"/> host population <input type="checkbox"/> Returnees </p> <p> <input checked="" type="checkbox"/> Non-displaced affected population </p> </div> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="2"></th> <th colspan="10">Age / Gender</th> </tr> <tr> <th colspan="2">0 - 5 yrs</th> <th colspan="2">6 - 18 yrs</th> <th colspan="2">19 - 65 yrs</th> <th colspan="2">above 65 yrs</th> <th colspan="2">Total</th> </tr> <tr> <th>Country/Gender</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> </tr> </thead> <tbody> <tr> <td>Malawi</td> <td>200</td> <td>400</td> <td>620</td> <td>1300</td> <td>2200</td> <td>6200</td> <td>300</td> <td>780</td> <td>3,320</td> <td>8,680</td> </tr> <tr> <td>Mozambique</td> <td>2,072</td> <td>2,248</td> <td>5,592</td> <td>5,724</td> <td>6,977</td> <td>10,503</td> <td>404</td> <td>504</td> <td>12,735</td> <td>16,521</td> </tr> <tr> <td>Zimbabwe</td> <td>616</td> <td>914</td> <td>1,666</td> <td>2,525</td> <td>5,886</td> <td>8,776</td> <td>318</td> <td>549</td> <td>8,486</td> <td>12,764</td> </tr> <tr> <td>Totals</td> <td>3088</td> <td>3562</td> <td>7878</td> <td>9549</td> <td>15063</td> <td>25479</td> <td>1022</td> <td>1833</td> <td>24541</td> <td>37965</td> </tr> </tbody> </table> <p>Households who have suffered serious damage to tangible assets and / or lost family members from Cyclone Idai will be selected as beneficiaries in the appeal. Priority will be given to displaced HH and start with those living in temporary shelters e.g. schools. Special focus will go towards supporting pregnant, lactating women and single headed households with priority focussing on households with children under five years. Disabled and elderly persons will also be supported and given priority.</p> <p>Psychosocial support will target the same households who have lost family and relatives, personal belongings or livelihoods from effects of the cyclone.</p> <p>Number of Beneficiaries: the regional appeal aims to benefit HH 62,506 (60% females) from the three affected countries.</p>		Age / Gender										0 - 5 yrs		6 - 18 yrs		19 - 65 yrs		above 65 yrs		Total		Country/Gender	M	F	M	F	M	F	M	F	M	F	Malawi	200	400	620	1300	2200	6200	300	780	3,320	8,680	Mozambique	2,072	2,248	5,592	5,724	6,977	10,503	404	504	12,735	16,521	Zimbabwe	616	914	1,666	2,525	5,886	8,776	318	549	8,486	12,764	Totals	3088	3562	7878	9549	15063	25479	1022	1833	24541	37965
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	The project will address the needs of children under 5 years, pregnant and lactating mothers, female-headed households and the most vulnerable farming households, and people with special needs. *People with special needs are on average 7-10% of the target population
Project Cost (USD)	\$ 8,814,191

Reporting Schedule

Type of Report	Due date
Situation report	1 May 2019 monthly for the first 6 months; to be revisited
Narrative and financial interim report (covering the 6 months period of the appeal).	31 October 2019
Mozambique: Final narrative and financial report (60 days after the ending date)	31 May 2021
Mozambique: Audit report (90 days after the ending date)	30 June 2021
Malawi and Zimbabwe: Final narrative and financial report (60 days after the ending date)	30 November 2020
Malawi and Zimbabwe: Audit report (90 days after the ending date)	30 November 2020

Please kindly send your contributions to either of the following ACT bank accounts:

US dollar

Account Number - 240-432629.60A

IBAN No: CH46 0024 0240 4326 2960A

Euro

Euro Bank Account Number - 240-432629.50Z

IBAN No: CH84 0024 0240 4326 2950Z

Account Name: ACT Alliance

UBS AG

8, rue du Rhône

P.O. Box 2600

1211 Geneva 4, SWITZERLAND

Swift address: UBSWCHZH80A

Please note that as part of the revised ACT Humanitarian Mechanism, pledges/contributions are **encouraged** to be made through the consolidated budget of the appeal, and allocations will be made based on agreed criteria of the concerned forums/members. For any possible earmarking, budget lines per member can be found in the "Budget Summary per member" Annex 2, and detailed budgets per member are available upon request from the ACT Secretariat. For pledges/contributions, please refer to the spreadsheet accessible through this link <http://reports.actalliance.org/>, project ID SAF191. The ACT spreadsheet provides an overview of existing pledges/contributions and associated earmarking for the appeal.

Please inform the Head of Finance and Administration, Line Hempel (Line.Hempel@actalliance.org) and Marjorie Schmidt (Marjorie.Schmidt@actalliance.org) with a copy to ACT Regional Representative-Africa Elizabeth Kisiigha Zimba (Elizabeth.Zimba@actalliance.org) and ACT Humanitarian Officer-Africa Caroline Njogu (Caroline.Njogu@actalliance.org) of all pledges/contributions and transfers, including funds sent direct to the requesting members.

We would appreciate being informed of any intent to submit applications for back donor funding and the subsequent results. We thank you in advance for your kind cooperation.

For further information, please contact:ACT Regional Representative-Africa, Elizabeth Kisiigha Zimba (Elizabeth.Zimba@actalliance.org).ACT Humanitarian Officer, Africa- Caroline Njogu (Caroline.Njogu@actalliance.org).Mozambique Forum Focal Point- Anne Kasabai (Annekasabai@gmail.com) and Venancio A. Nhandime (Vanhandime@emilmoz.com)ACT Zimbabwe Forum Coordinator, Sostina Takure (takures@gmail.com).ACT Malawi Forum Coordinator, Mathews Msiska (mathewsmsiska@gmail.com).ACT website: <http://www.actalliance.org>**Alwynn Javier**

Head of Humanitarian Affairs

ACT Alliance Geneva

1. BACKGROUND

1.1. Context

Mozambique

Heavy rains caused by powerful tropical Cyclone Idai hit the central and northern regions of Mozambique on 14th March 2019, leading to massive floods and leaving more than hundreds of people dead and hundreds of thousands affected. The cyclone then barreled on to southern Malawi and eastern Zimbabwe. The death toll has continued to rise with current figures putting the death toll to 518 in Mozambique alone. The situation is likely to deteriorate as forecasts predict heavy rainfall in Sofala and Manica provinces and at least 350,000 people are at risk (OCHA Flash Update, 19 March). Most of the affected population are in the provinces of Zambezia and Sofala.

According to the National Institute of Disaster Management (INGC) by March 26th the number of affected families was at 158,000 with at least 468 confirmed dead. The President of Mozambique has asked for international support due to the magnitude of the unfolding emergency, for between 600,000 and 1.7 million people who need assistance. The Minister of Land is coordinating the overall response on behalf of the government and the clusters are providing the necessary support.

On Friday 22nd March, the UN OCHA officially declared the activation Scale Up (formerly L3) mechanism for the response in Mozambique, owing to the scale of damage and needs brought about by the cyclone. This system-wide activation of global humanitarian mechanisms means that ACT Alliance has also mobilized its global humanitarian mechanism to respond to this emergency, with a view of scaling up the capacity of its members present in-country and international members setting up humanitarian operations as necessary.

Zimbabwe

The flooding caused by the Tropical Cyclone Idai weather system since 15 March 2019 continues to cause destruction in Zimbabwe, although rains have begun to dissipate in Manicaland and Masvingo provinces. At least 415 deaths and over 200 injuries have been officially reported, mainly in Chimanimani and Chipinge, and at least 217 people are reportedly still missing. These figures are expected to rise in the days ahead as the full extent of the damage and loss of life becomes known. At least 16 000 homes have been destroyed in Chimanimani, Mutasa, Mutare, Chipinge, Buhera, Chikomba, Gutu and Bikita districts and family members displaced. In Chimanimani alone, eight bridges have been destroyed. In Buhera, the Marowanyati dam has overflowed and many families are displaced. People living along the Mwerahari River have been advised to be on high alert. The Tongogara refugee camp in Chipinge has been affected by flooding, and 49 households have been relocated within the camp.

The hardest-hit district of Chimanimani remains inaccessible, as is Ward 2 in Chipinge district. Heavy rains have damaged roads and main access bridges have been washed away. Water supply stations have been affected, particularly in Manicaland, including Murambinda, Nyanga, Mutasa, Checheche, Biriwiri, Chibuwe, Chakohwa, Nyanyadzi, Berzely Bridge and Buhera. In Masvingo, water stations affected include Gutu, Zaka, Mutimurefu and Ngundu.

Crops and livestock have been destroyed in all affected areas, which were already facing rising food insecurity. Both Chimanimani and Chipinge were classified in Crisis (IPC phase 3) and Buhera was facing Emergency food insecurity (IPC phase 4) prior to the loss of crops caused by the Cyclone Idai weather system. Overall, more than 16000 households (+/- 50,000 people) are estimated to be affected. However, an accurate assessment of the number of people impacted and displaced is still difficult to establish at this point, as many district wards remain inaccessible. As the heavy rains

subside, the full extent of the cyclone's impact and response required will become clearer in the coming days.

The displacement of people, together with damaged water supply infrastructure, heightens the risk of malaria, cholera and other diarrheal diseases and the potential for a communicable disease outbreak. Damage to the port in Beira and its access roads in neighbouring Mozambique may affect fuel and food supplies to Zimbabwe, as well as livelihoods of people in eastern Zimbabwe that rely heavily on the Zimbabwe/Mozambique trading corridor.

Malawi: More than 922,900 people have been affected by Tropical Cyclone Idai on 5 March 2019, including more than 75,900 displaced, with 56 deaths and 577 injuries reported by the Government of Malawi. The heavy and persistent rain led to severe flooding across some districts in southern Malawi. Fourteen districts have been impacted. Nsanje (18,000 households), Chikwawa (16,000 households) and Phalombe (22,848 households) recorded the highest number of displaced persons. Nsanje district recorded the 17,400 people or 3,867 households IDPs. Phalombe recorded 22,848 households (102,816 people) affected and 1,228 households (5,526) people displaced. In 2015, Malawi was also affected by floods with close to 147,000 people were in IDP centres with an estimated 26,000 IDPs located outside centres/in hard to reach areas. The same districts, Nsanje, Chikwawa, Phalombe and Zomba were the most affected.

With agriculture being the main source of livelihood for rural population in the country, the heavy rains and floods have affected the districts as follows; 12,759 Ha in Nsanje District, 3,362 Ha in Phalombe and 5,200 Ha in Chikwawa district. Crops that have been affected includes Maize, Rice, Tobacco and Sorghum. The following livestock have also been affected Cattle, Goats, Pigs, and Chickens in the three targeted districts. With a generally low sanitation coverage in the affected and targeted districts and with the collapse of most toilets, most IDPs are sheltered in schools. Some water sources in Phalombe Chikwawa and Nsanje, particularly those that are open have been contaminated and existence of fecal and pesticide contamination of the water points due to latrines that have collapsed.

1.2. Needs

All requesting members employed participatory and consultative approaches in conducting rapid needs assessments. This is to ensure the appropriateness of the planned assistance, and ensure strong ownership by beneficiaries of project activities. Subsequent needs assessments will be conducted in recognition of the rapid-changing context typical of sudden-onset emergencies such as Cyclone Idai.

Mozambique:

In Mozambique, displaced persons are in makeshift camps and the number currently stands at 128,000 according to the national disaster management (26th March 2019). Immediate needs to support those in camps include food, safe water, shelter support. Within makeshift camps there is also need for protection (including psychosocial support), proper hygiene and sanitation and child friendly spaces.

There is need to provide relief items to support basic needs of affected population by providing food, water hygiene and sanitation, preventive health, non food items, shelter and psychosocial support. These needs will be addressed during the first phase (0-6 months) of the response. The first phase will also be centered around search and rescue operations of the people isolated in flooded areas. Education in Emergency (EiE) activities will also be applied in the first six months. In addition, support to the people in temporary centres is key in Mozambique as several centres are schools'

buildings and churches which do not have the conditions necessary to accommodate persons for long stay. Based on initial assessments from ACT member Comité Ecuménico para o Desenvolvimento Social (CEDES)/Ecumenical Committee for Social Development, 683 of those affected in Zambezia by the floods have been identified as orphans and vulnerable children, and 165 have been identified as elderly and these will need protection support.

During the second phase, since the damage to agricultural lands is also very significant, with at least 83,813 hectares of crops such as maize, cassava, sorghum and millets flooded, support to at least 53,318 small farmers whose livelihoods depends on farm produce will be required.

Some 3,140 schools have been destroyed, affecting more than 90,000 students, according to Government figures on 23 March. More than 33,600 houses have been destroyed (20,282), partially destroyed (17,137) or flooded (2,184), according to the authorities, and nearly 500,000 hectares of crops have reportedly been destroyed, heightening the risk of rising food insecurity in affected communities. Women in Mozambique play a critical role in agricultural production and at the same time remain responsible for most of the caregiving. With the caregiving burden likely to increase in the aftermath of the cyclone and floods – as illness and injury have risen – women may have to decrease their agricultural production, risking further increases in food insecurity (OCHA Flash Update 23 March 2019).

CEDES and Finn Church Aid will work together in education sector response. The partners will address the education sector needs by through an integrated approach consisting of education infrastructure rehabilitation, support to teachers and psychosocial support to crisis affected education personnel and learners.

Malawi

As per declaration by the State President of the Republic of Malawi on national disaster as a result of devastating flooding caused by Cyclone IDAI from 5th March 2019, as well as incessant rainfall, there is eminent food shortage, water-borne disease outbreaks and shelter needs in 17 out of 28 districts of the country. Worst hit are the districts of Nsanje, Phalombe and Chikwawa. Identifying humanitarian needs is the result of consultation, joint assessment missions, information sharing and coordination with Government at national, district and local levels. Inter-Agency Assessment and Act Malawi Forum Needs Assessments indicate that support is urgently needed to provide affected communities with food, drinking water, proper sanitation, livelihoods and psychosocial support/protection. Act Malawi Forum is responding in Nsanje District focusing on shelter, food Security and WASH with financial support from Norwegian Church Aid and Dan Church Aid. The appeal will complement the already launched Act Malawi Forum work and will expand the work in scope and beneficiary reach. The following are the sectors that will be addressed by the Malawi Appeal for ACT Malawi Forum

Food Security: There is an urgent need for food as access is difficult in the affected districts of Phalombe Chikwawa and Nsanje. Providing food will not only be for the people sheltered in relief camps but also for those who will be returning to their homes once the water levels recedes. The affected communities have lost food sourced from their farms and reserves as this has been damaged. Children under five are more vulnerable and their nutrition need to be addressed.

WASH: Water systems have been destroyed by the floods that water access has been difficult. Water points for drinking and household use need to be restore. The risk of water borne diseases is high.

Livelihoods: After two consecutive bad production years, the 2017's harvest saw a much-needed return to normalcy. However, the 2018 maize production was estimated to drop largely due to prolonged dry spells and fall army worm infestation in the Southern Region Districts. Nsanje Phalombe and Chikwawa Districts are not exceptional. This year's floods and heavy rains caused extensive damage to field crops (crops were washed away or submerged in water), livestock and fisheries. This will consequently affect the food, income and nutrition security of affected households.

Psychosocial Support: Some affected people have been traumatized due to the flood emergency which has displaced them and has caused loss of property and lives of their family members and relatives. Life in the camp is also difficult where there is nothing to do while living in cramped spaces with other families that often people don't know. Psychosocial support is deemed critical to the affected households to help them cope with the impact of the disasters on their families.

Zimbabwe

As of 21 March 2019, a total of 250,000 people were reported to be affected by the floods in nine districts. An estimated 48 per cent of the affected population is under 18 years of age.

- There is limited road access in the Chimanimani, the worst affected district.
- An estimated 60,000 children are in need of immediate protection services, and 100,000 children are in need of welfare and civil registration services in nine flood affected districts.
- Initial estimates indicate that 54 classrooms from 114 schools have been affected by the floods, impacting about 30,000 learners.

Official statistics and figures are not always reflective of the specific needs of some affected families, as were estimations based on national development indicators. However, community focus groups and rapid assessments established additional dimensions. To meet other needs, the project will coordinate with well wishers collecting clothes and blankets in the country, as affected households have lost a lot of household items including capacity to self provide.

Most communities are traumatised, with loss of property, near death or loss of family members and friends, they are in need of psychosocial support. The disruption of social fabric, and vulnerability places women and other groups in a security risk- Gender-Based Violence (GBV) manifestations are at risk of increasing. Therefore, women need support in protection from harassments/violence and its different manifests. Communities are without a system for Complaints and Response Mechanisms (CRM) and safeguarding, this cannot be ignored.

The affected areas had indicated that there is absolute lack of WASH facilities, such as toilets. A total of 13 ZINWA pumping stations in Manicaland Province were affected by flooding. To date in Chipinge 1,073 toilets have collapsed, 144 drinking water facilities have been destroyed. Globally, 14,800 NFI kits are urgently needed to support affected households. The needed emergency WASH NFI services vary but mainly are: Water purification chemical /tablets, soap, jerry cans, water storage buckets, sanitary pads for women, diapers for children and complement this support with hygiene promotion. Need for additional resources: Medicines and medical supplies, fuel, additional manpower due to the increased demands. The disruption of water supplies, sanitation facilities and access to services which may expose further to disease and possible outbreaks requiring appropriate prevention measures and surveillances of diseases.

The floods that have affected Chipinge and Chimanimani Districts has worsened the food and nutrition security situation and increase the risk of malnutrition. Infrastructure destruction has affected household access to markets for their livelihood and food security needs. The affected communities who have had houses completely and partially destroyed express need for support with shelter kits/tents. At least 14 400 shelter kits are urgently needed to support the affected households in all the districts. The same households will need to be supported with resettlement, and reconstruction of the destroyed structures. In the interim, camp management will need to be provided to the affected households without shelter now, the need for displacement tracking matrix cannot be overstated for households that will be eventually displaced.

1.3. Capacity to respond

The three ACT Forums have long presence in the response countries and had been actively responding and closely coordinating amongst members since. The Forum builds on decades of ACT Alliance members' experience in the region in providing humanitarian response to all people in need, without discrimination. ACT members will continue to work collaboratively in the countries as well as in coordination between the 3 forums to ensure maximum benefits and coordination. The responding members of the forums have extensive knowledge and experience in responding to emergency situations, and responses in the sectors such WASH, Protection and Psychosocial support, health and nutrition, CASH, livelihood and early recovery.

Mozambique

In Mozambique, the Ecumenical Committee for Social Development (CEDES) is responding to communities affected by Cyclone Idai. CEDES is a religious non-profit organization founded in 1997 by the Christian Council of Mozambique and Caritas Mozambican and Lutheran World Federation (LWF). CEDES is a national ACT member and has been providing guidance in coordination and planning of emergency activities; providing training on disaster preparedness, response and mitigation. Its recent emergency experience includes: Response to Drought in Southern Africa, MOZ 161, and earlier response to flooding in Central and Southern Provinces (MOZ 131). Currently, CEDES field staff and local church leaders are already on the ground leading in rescue operations and mobilizing relocation efforts. The organization works through an ecumenical Emergency Response Committee (ERC) which is established to closely monitor the situation and provide emergency assistance effectively and efficiently. CEDES is collaborating with the Mozambique government and other stakeholders to respond in a coordinated way. It has an office in Maputo, and five field offices in Beira, Nhamantada, Dondo and Buzi in Sofala province. CEDES currently has development programs in Maputo, Gaza, Inhambane, Sofala Niassa, and Nampula. The General Director is based in Maputo as well as a Head of Finance, Program coordinator, Planning, Monitoring and Evaluation and Livelihood Officer who are currently involved in responding to this emergency. In Sofala where Beira office is located, CEDES has a Provincial Coordinator, administration and Finance Officer and Field officers based in the districts of Caia, Nhamatanda, Buzi, Chibabava Beira and Dondo. There are plans to deploy field officers from provinces that have not been affected to Sofala province and from Maputo 20 volunteers will be deployed to support in Sofala. CEDES have warehouses in Sofala where they will store relief items before distribution. There are two warehouses, one in Maputo and one in Beira which they use for disaster work. In addition, there is an arrangement with WFP to use WFP warehouse in Muchugwe. CEDES have several vehicles including trucks, 4X4 cars even though there is a need to hire more trucks to support the logistic function during this emergency.

LWF worked in Mozambique for over 35 years before closing its offices in 2017, and handing over to local partners in the country. LWF worked in Mozambique and built capacity of several local

organizations, including CEDES and JUSTAPAZ. LWF being a global confederation, has also members in Mozambique through the local Church “IELM”, from which LWF can start building the response. LWF, through its humanitarian wing, World Service, is recognised as a major humanitarian player globally. It has responded to a number of natural disasters and man-made crisis in the recent past such as Nepal, Iraq, Cameroon, Central African Republic etc., and has proven to be efficient and effective in terms of scale, promptness and quality. With its history in Mozambique, LWF has kept its registration, and would be able to reactivate it at short notice to be operational. An emergency roster is managed by its Geneva office, of which former LWF staff in Mozambique are part. The coordination team in Geneva, composed of 2 humanitarian experts, has also hubs in different continents, including a hub for Africa based in Nairobi. This gives the organisation the capacity to deploy qualified staff at short notice in case of emergency. The above factors, confirm that LWF is able to scale up any time, to fulfil its humanitarian mission and mandate anywhere in the world. Besides the ACT appeal mechanisms, LWF has the capacity to mobilize funds from a number of donors worldwide to complement the response.

Finn Church Aid (FCA) is the largest Finnish international aid organization. It operates in 14 countries, where the needs are most dire. It works with the poorest people, regardless of their religious beliefs, ethnic background or political convictions. Its work is based on rights, which means that our operations are guided by equality, non-discrimination and responsibility. Permanent change in developing countries can only be achieved through persistent cooperation with local communities and people. Finn Church Aid is committed to working until the people in need can independently secure their livelihood and satisfy their basic needs.

In 2017, FCA provided aid for 38.6 million euros in value. The majority of its funds come from private donors, international institutional donors, the Ministry for Foreign Affairs of Finland, and parishes. Over 87 percent of the donated funds are directed to aid work. The share of domestic operations and general administration is about 13 percent. Most of FCA’s assistance goes to Africa. The need for assistance on the continent has been caused and maintained by political instability, prolonged crises and natural disasters.

FCA plans to provide support to the education sector in Mozambique to ensure that children can return to learning in a safe environment as soon as possible. A team of specialized staff is currently conducting a rapid needs assessment in the education sector in Mozambique. It also participates in the education cluster coordination in the country. It will refine its workplan and operational arrangements based on the findings of the assessment. Additionally, FCA is in position to provide secondments in different field of expertise to other ACT members working in Mozambique.

Malawi

CARD and ELDS will be implementing members due to their existence in the target Districts as well as their technical and professional expertise in humanitarian programming, psychosocial support, and resilience building. CARD and ELDS have over 20 years proven experience implementing humanitarian assistance, development activities and advocacy in the country. CARD and ELDS are implementing long-term programmes in the target Districts which will be linked to the interventions in this appeal. The Malawi Forum members are members and active contributors to the national and local level clusters for food security, health/nutrition and WASH. This will promote continued learning and sharing of best practices for the benefit of the ACT appeal.

Zimbabwe

All three requesting members have many years of experience of supporting communities with life skills necessary for the rebuilding of the affected communities. Christian Aid, HEKS-EPER and DanChurchAid have operated in Zimbabwe for more than 40 years, and have a long-standing relationship with local members. Their main strengths are on strengthening capacity of partners to respond to disasters and implement early recovery initiatives. Implementing partners Africa Ahead, MeDRA, Fambidzanai Permaculture, and FACHIG have implemented various humanitarian, recovery and development programs, focused on sectors such as food and nutrition security, water, sanitation and hygiene (WASH), sustainable livelihoods and resilience programs, education and vocational training, as well as enterprise development. The organizations have reached all the provinces of the country and have Memorandums of Understanding with local authorities to operate. The organizations participate in annual national food security assessments, and regularly carry out participatory vulnerability and capacity assessments, local level market, livelihoods and need specific assessments.

Other ACT Members Responding/Total ACT Response

Considering the categorization of the Cyclone Idai emergency as Scale Up (L3) for Mozambique, a number of ACT Alliance members are in various stages of planning and mobilization to be able to respond through fundraising, surge support, responding through members in-country, working in other partnerships, or setting up operations. Some of these members may eventually become part of the Regional Appeal in subsequent appeal revisions, or work outside of the Appeal mechanism. All information will be put together to constitute the Total ACT Response.

As an example, a parallel process was undertaken by Church of Sweden to secure rapid response funding from a back donor, working with two international members as implementing partners in Mozambique (DanChurchAid) and Zimbabwe (Christian Aid). This initiative is seen as integral part of the ACT Appeal, and will be annexed as separate projects to be able to meet specific donor requirements.

1.4. Core Faith values

All requesting members ascribe to the core faith values of dignity, love, justice and equality. This elaborates the partners will put the human life as reverential and puts the being at the center of programming. This allows the organisations to restore the dignity of all beings ensuring they are all encompassing to work with faith and non faith organisations and individuals. Ensuring a just society will be a pillar for supporting the most marginalised, and victims of GBV. Ensuring that all beings are treated with equality is the ultimate and has to be restored position among the poor people.

In Malawi, both ELDS and CARD are faith-based organizations and adhere to the Core Humanitarian Standard. They both believe that all people have both spiritual and social needs thereby necessitating a holistic approach if their needs are to be effectively addressed. Both ELDS and CARD believe that all humans are of equal value deserving equal attention bearing in mind personal integrity and selflessness as a guide to its actions.

2. PROJECT RATIONALE (Logical Framework [Annex 3])

2.1. Intervention strategy and theory of change

The main purpose of the appeal is to save lives, provide and protect assets lost by the affected households while managing substantial threats of physiological, physical, psychological damage and

infectious disease outbreaks through psychosocial support, livelihoods and WASH interventions. The affected households' capacity to re-engage in livelihoods activities will be supported through internal savings and lending schemes (ISALs) and Agriculture input support subsidies and vouchers. Effects of social and environmental vulnerabilities will be reduced through building capacity of communities and institutions to prepare and respond to disasters through effective civil protection capacities from government. The response will identify possible remedies to environmental rehabilitation, and will ensure that no negative environmental impacts will come out as a result of the interventions.

The appeal will maintain a strong focus on supporting the most vulnerable communities and protect the rights of all and address the protection and assistance needs of the affected population, in non-formal settlements and within and among local communities.

The appeal approach draws on the most relevant aspects of social protection and livelihoods development to deliver results. It links relief interventions with medium term resilience. The approach will also contribute to the broader social goals of breaking entrenched, multigenerational poverty and of reducing inequality.

2.2. Impact

To save lives, reduce vulnerability and alleviate suffering of Cyclone Idai affected populations in Mozambique, Malawi and Zimbabwe.

2.3. Outcomes

Shelter and Settlement NFI's

Cyclone IDAI households (men, women and youth) supported in meeting their basic needs through the provision of vouchers, basic non-food items and improved shelter

1.4 Food Security:

Improved accessibility to quality and timely food and nutrition support assistance through cash, vouchers, kits distribution and enhanced health and nutrition practices for affected persons

1.5 Water, Sanitation and Hygiene (WASH)

Better access to safe water & sanitation facilities, and improved hygiene practices through the provision of WASH infrastructure, hygiene kits and awareness sessions.

1.6 Health and Nutrition:

Reduced risk of malnutrition especially for children under five through access to food and nutrition requirements

1.5 Protection/Psychosocial Support:

Psychosocial wellbeing, of affected persons especially children traumatized by the cyclone/floods have been addressed.

1.7 Early recovery and Livelihoods restoration:

Increased access to engagement on agriculture activities and livelihood opportunities for vulnerable individuals in affected communities.

1.8 Education:

Disaster affected school aged children are able to return to school through school reconstruction and teacher training.

1.9 Strengthening Capacities/Emergency preparedness and resilience:

Strengthen community awareness on DRR

1.9 ACT Local Partners/ National members strengthening:

Improve coordination and participation amongst SAF 191 national Forums

2.4. Outputs**Shelter/NFIs**Mozambique:

- 2.1.1 **CEDES** 6 assessments in six locations to identify shelter beneficiaries.
- 2.1.1.2 **CEDES**-500 urban based households receive shelter¹ cash/voucher worth (\$310 USD).
- 2.1.3 **CEDES**- 5,000 HH receive an NFI kit
- 2.1.4 **LWF**-3,000 HH receive emergency shelter/house construction material.

Zimbabwe:

- 2.1.5 **CAID**- 1,000 shelter voucher kits.
- 2.1.6 **CAID** – 350 Reconstruction kits vouchers.
- 2.1.7 **DCA** -1,200 shelter kits

Mozambique:

- 2.1.8 **CEDES**- 5,000 HH receive NFI kits
- 2.1.9. **LWF**- 1,500 HH receive NFI Household kits

Food Security:Mozambique:

- 2.2.1 **CEDES**-5000 HH are provided with food kits ².
- 2.2.2 **LWF**-500 HH with special needs receive Food Aid.

Malawi

- 2.2.3. **CARD**- 800 HH receive 50 kg Maize for 4 months.
- 2.2.4 **CARD**– 800 HH receive 10 kg for 4 months.
- 2.2.5 **CARD**- 800 HH receive 2 litres Cooking oil for 4 months.
- 2.2.6 **CARD**- 8 On-site post distribution monitoring.
- 2.2.7 **CARD**- 1,100 ration cards are printed.

WASH:Mozambique:

- 2.3.1 **CEDES**- 5,000 HH receive NFI kit which contains WASH items
- 2.3.2 **CEDES**- 120 persons receive Training of Trainers (ToT) on hygiene and sanitation education.
- 2.3.3 **LWF**- 3,000 HH receive WASH Kits.
- 2.3.4 **LWF**- 467 HH receive water purification sachets
- 2.3.5 **LWF** 200 water sources are rehabilitated or disinfected.
- 2.3.6 **LWF** 50 water committees are established after water points are rehabilitated.
- 2.3.7 **LWF** 50 latrines are rehabilitated and/or constructed.
- 2.3.8 **LWF** 300 community health workers are trained.
- 2.3.9 **LWF** 3 sensitization campaigns are held.
- 2.3.10 **LWF** 3 radio messages are aired.
- 2.3.11 **LWF** 3 communication material produced.
- 2.3.12 **LWF**- 300 HH receive incentives for latrines construction.
- 2.3.13 **LWF**- interactive health messages given.

¹ Plastic roller(12m), 5m rope, 1 hoe, 1 machete, 1 work scissors, 1 saw, 1 kg of nails, 1 shovel, 500g of binding wire, 1 hammer. Tool kit-1 hoe, 1 machete, 1 work scissors, 1 sawmill, 1 shovel, binding wire, 1 hammer.

² Maize 100kg, per HH for 2 months, Beans, 20 Kg per HH for 2 months, Oil 2 LTS per HH for 2 months, Salt 1 kg per HH for 2 months, Sugar 4 kg per HH for 2 months.

2.3.14 **LWF**- HH surveys conducted.

Zimbabwe:

2.3.15. **CAID**- 2,250 HH receive WASH kits

2.3.16. **CAID**- 25,200 HH will receive hygiene kits.

2.3.17 **HEKS** EPER- 1,000 HH receive WASH kits.

2.3.18 **HEKS** EPER 1,000 HH receive toilet construction vouchers.

2.3.19 **HEKS** EPER 90 HH receive basic training on hygiene.

2.3.20 **HEKS** EPER 4,600 HH receive IEC materials on hygiene education.

2.3.21 **HEKS** EPER 30 HH receive builder tools for toilets.

2.3.22 **HEKS** EPER 25 boreholes are rehabilitated.

Malawi:

2.3.23 **CARD**- Water Guard distributed to 800 HH (2 bottles/HH/month).

2.3.24 **CARD**- 800HH are provided with buckets (20L with cover).

2.3.25 **CARD**- 8 Awareness meetings held on WASH.

2.3.26 **CARD**- 15 Water points are rehabilitated, and water point committees trained.

2.3.27 **CARD**- 4 Hygiene and Sanitation hygiene campaigns are held.

2.3.27 **ELDS**- 800 HH receive 2 bottles of water guard for 3 months.

2.3.28 **ELDS** 800 Buckets are distributed to affected HH.

2.3.29 **ELDS** 16 hygiene awareness campaigns are held among affected communities.

2.3.30 **ELDS** 8 safe sanitation campaigns are held among affected community members.

2.3.31 **ELDS** water points are rehabilitated and water point committees strengthened/established.

Health and Nutrition:

Malawi:

2.4.1. **CARD** -600 HH with under five receive Corn Soya Blend at 10 kg per HH for 4 months.

2.4.2. **CARD** – 800 HH receive edible cooking oil 2 L per HH for 4 months.

2.4.3 **CARD**- 8 health and nutrition sensitization campaigns.

2.4.4 **CARD**- 8 sessions held to sensitize affected communities on best nutrition services.

2.4.5 **ELDS**- 1,600 HH receive 50 kg of Maize, 10 kg of pulses, 2 litres of cooking oil, for 4 months.

2.4.6 **ELDS**- 1,600 HH receive 10kg per month of CSB for 4 months.

2.4.7 **ELDS**- 1,600 HH receive edible cooking oil t 2 L per household per month for 4 months.

2.4.8 **ELDS**- 16 nutrition best practise sessions are held among affected communities.

Protection/Psychosocial Support:

Mozambique :

2.5.1. **CEDES** receives Psychosocial surge support technical person.

2.5.2 **CEDES** conduct 1 Training of trainers on community based psychosocial support.

2.5.2 **CEDES** one assessment and coordination of psychosocial community needs.

Zimbabwe:

2.5.3. **CAID**- 23 faith leaders trained on psychosocial support.

2.5.4. **DCA**- 20 sessions conducted to train faith leaders on psychosocial support.

Malawi

2.5.5. **CARD**- 8 awareness meetings on CBPS conducted.

2.5.6 **CARD**- 2 sessions held on CBPS among local committees (90 children and youth attend counselling sessions).

2.5.7. **CARD**- Monitoring and Evaluation of CBPS.

- 2.5.8 **ELDS**- 16 awareness meetings held in CBPS.
- 2.5.9. **ELDS**- 4 training held for local committees on CBPS.
- 2.5.10 **ELDS**- 2 monitoring and evaluation visits on CBPS.
- 2.5.11 **ELDS**- 16 sessions held on strengthening early warning systems.

Early recovery/ Livelihoods:

Mozambique:

- 2.6.1 **CEDES**- 10,000 HH are provided with seed kits.
- 2.6.2 **CEDES**- 10,000 HH are provided with farming tools kits.
- 2.6.3 **LWF**- 500 HH are provided with seed funds (seeds and tools).
- 2.6.4 **LWF**- 500 HH provided with seed Fund (seeds and tools).

Zimbabwe:

- 2.6.5 **CAID**- 2,250 HH receive vegetable seeds garden packs.
- 2.6.6 **CAID** – 1,125 HH receive field crop seeds packs.
- 2.6.7 **CAID** 450 HH receive goats.
- 2.6.8 **CAID** – 2,025 HH receive chicken.
- 2.6.9 **CAID**- 2,250 HH receive basic farm implements.
- 2.6.10 **CAID**- 2,250 HH receive training on livestock and crop husbandry.
- 2.6.11 **DCA**-2,000 HH receive nutrition seed packs (vegetable seeds).
- 2.6.12 **DCA**- 1,000 HH receive food crop seed packs.
- 2.6.13 **DCA**- 400 HH receive small livestock (goats).
- 2.6.14 **DCA**-1,800 HH receive small livestock (Chicken).
- 2.6.15 **DCA**- 2,000 HH receive basic farm implements.
- 2.6.16 **DCA**- Community members receive training on livestock and crop husbandry.

Malawi:

- 2.6.17 **ELDS**- At least 2,000 HH receive Sweet Potato Vines of 5 bundles each, hybrid maize 5 kg, bags of seeds (assorted), portable solar irrigation kits and training (8) on crop production.
- 2.6.18 **ELDS**- At least 2,000 HH receive 5 kg of hybrid maize seed.
- 2.6.19 **ELDS**- At least 2,000 HH receive assorted vegetable seed (assorted).
- 2.6.20 **ELDS**- 6 portable Solar irrigation kits are purchased.
- 2.6.21 **ELDS**- 16 sessions on crop production are conducted within the community.

Education:

Mozambique

- 2.7.1. **FCA**- 100 temporary learning spaces can be safely accessed by learners.
- 2.7.2 **FCA**- 4,500 children have returned to learning and have received learning materials.
- 2.7.3 **FCA**- 200 teachers have received teaching materials and orientation on their use. Teacher have received training on learner -centred methods and psycho social support.

Strengthening Capacities/ Emergency preparedness and resilience:

Mozambique:

- 2.8.1 **CEDES**- 12 DRRM & EWS groups set up in (TBD).
- 2.8.2. **CEDES**- 12 DRRM/EWS mechanism set up in community centres (TBC).
- 2.8.3 **CEDES**- 4 DRR and community preparedness units set up.
- 2.8.4 **CEDES**- 4 trainings on DRR.
- 2.8.5 **LWF**- 1,000 pcs of DRR climate change sensitization communication material distributed.

Zimbabwe

2.8.6 ELDS- Joint monitoring and evaluation at Regional level.

2.8.7 ELDS- ACT Technical Working Groups Sharing.

Malawi:

2.8.8 CARD- 16 sessions are held on Community based disaster risk management.

2.8.9 CARD- 8 sessions are held on CBDRM and early warning systems are strengthened.

2.8.10 ELDS- 4 sessions held on local partners and national members strengthening capacities.

ACT Local Partners/ National members strengthening:

Mozambique:

2.9.1 CEDES- 6 Kick-start workshop, one at every project sites, 6 mid review workshop evaluations.

2.9.2 CEDES- 6 meetings for faith leaders on DRR.

2.9.3 CEDES- One meeting to strengthen capacities on local partners and national members.

2.9.4 CEDES- Recruitment of local volunteers for six months for six months.

2.9.5 LWF- One meeting to local partners/ national members to strengthen capacities.

Zimbabwe:

2.9.6 HEKS- one inception workshop and 5 review meetings are held.

Malawi:

2.9.7 CARD- 1 session is conducted on ACT technical working group sharing.

2.9.8 CARD- Kick start workshop, mid-term review, visibility and staff trainings are held.

2.5. Preconditions / Assumptions

The project assumes that weather condition will remain stable. The project also assumes that political environment will remain good during the campaign and voting period from March to May. The economic environment (including goods and food prices) remains relatively stable in the same way markets will be functional markets to ensure the cash transfer and voucher recipients, can purchase goods/redeem in optimal quantities and quality. Another assumption is that community leaders including faith leaders and traditional leaders offering humanitarian support will be accepted by the communities. In the same vein, the local authorities will have political and resources will to support community DRR plans.

2.6. Risk Analysis

Political Risk: The Manicaland region in Zimbabwe has long been a political hotspot, with the opposition party gathering more seats. The crisis presents an opportunity for the ruling party to challenge civil society space and compromise project activities. The project will emphasise the need for neutrality and independence during inception meetings. Recent risks to Mozambique's economic growth include rising prices for key imports such as fuel and food and economic difficulties in South Africa, Mozambique's second largest export destination. Mozambique public debt is also in distress.

Economic Risk; Zimbabwe has off late been experiencing a deepening economic crisis, cash shortage, inflation, dual pricing among other indicators. Several economic shocks have punctuated the country, with the emergence of practices such as high tax rates and transaction costs. These will eventually erode the value of cash received and total goods purchased. For cash transfers, the project plans to transfer in USD rather than the local currency.

Social Risks: The disaster context sets in motion potentials for negative social impacts; gender-based violence, sexual abuse, and disease outbreaks of disproportional scales due to disrupted social fabrics. The projects will set up a functional complaints and reporting mechanism, while working with other state and non-state actors to ensure that social risks are minimized.

Environmental Risks: The cyclone is one such hazard, and cyclones have affected Chimanimani consecutively every 5 years. The appeal will capacitate communities to develop and implement disaster response committees. These will work with state agencies for support and advocacy for state responsiveness and information sharing.

Continuing Risk Assessments

Further risk analyses will be conducted in aid of appeal implementation, with support from the ACT Safety and Security Community of Practice (SSCP) especially where it links with issues of safety and security. A rapidly emerging health risk is the potential for cholera and malaria outbreaks in the affected areas, further exacerbating local conditions and threatening the well-being of affected communities and aid workers.

2.7. Sustainability / Exit strategy

Zimbabwe

In Zimbabwe, the appeal aims to strengthen the communities to be capable of self production and engaging with markets. The strengthened committees and communities will be strengthened to address structural issues pertaining their exposure to hazards. Having functional committee that periodically meet to discern potential hazards and frequency and meeting with state actors, sharing information will reduce the exposure. Similarly, actions that strengthen coping mechanisms will be part of the community's remit. The education and training offered in the project period strengthen the productive capacity of the communities making them engage in markets for increased incomes.

Working with beneficiary structures which include food distribution committees which will liaise with other local development structures such as Village Health Committees and Village Civil Protection Committees. This will ensure concerted effort for continued project monitoring of activities beyond the project time frame. The Appeal will also build the capacity of food distribution committees and sensitise the civil protection committee in leadership, nutrition and food utilisation which will enable project interventions to continue in a comprehensive manner after the implementation timeframe. Additionally, this will enable the appeal activities to be locally owned.

The appeal will be delivered principally through the existing government organisational structures and the already existing local development structures. This will help ensure sustainability and contribute to building capacity. It will be implemented in close collaboration with the line ministries with special reference to the Ministry of Agriculture, Ministry of Health and the Department of Disaster Management Affairs (DoDMA). The line ministries will provide technical services in backyard gardening, crop support services, nutrition education and capacity building on specific technical skills in all project components. The above ministries will also principally be responsible for monitoring effective beneficiary targeting and food distribution processes and management. These ministries will work through frontline extension workers and this will provide benchmark for sustainability.

Malawi

In Malawi, the Appeal has combined relief and early recovery and the project will be implemented in the Districts where CARD and ELDS are already implementing emergency response and other long-term food security and WASH interventions. For instance, in Nsanje, CARD is already implementing an emergency response with Dan Church Aid and Norwegian Church Aid focusing on food security

and Wash in selected camps and villages. This appeal will complement the existing response and ensure that more affected households are reached. The appeal will also be linked with long-term projects implemented by CARD and ELDS in Nsanje, Chikwawa and Phalombe, which will enable beneficiaries to effectively manage transition from relief assistance to recovery, and provide a good exit strategy for the beneficiary households.

Mozambique

Mozambique is a country which is especially prone to natural disaster, mainly droughts, floods and cyclones. CEDES has extensive experience of responding to these situations and in more recent years has given considerable attention to reducing risk and building and strengthening local level structures to prepare and manage disaster response. CEDES gives greater emphasis to long term sustainable development initiatives, as well as recognizing the need to maintain community capacity to respond to disasters when they occur. CEDES recognizes that proper and sustainable ways of managing the environment and natural resources are key and need to be considered and promotes good stewardship of the environment and these elements are incorporated into CEDES rural programs. CEDES is an organization which is undergoing a change process, changing from pure humanitarian response to an organization which promotes long term development initiatives and sustainable programs.

2.8. Building capacity of national members

Capacity building on the revised ACT appeal mechanism will be paramount during the appeal period for members of staff in order to enhance the ability to promptly respond to disasters through quick and accurate preparation of RRF and Appeal documents and other requirements. Capacity building in the areas of disaster risk management, preparedness and response planning (EPRP), quality and accountability (CHS and Sphere Standards) to equip members of staff will also be planned as part of the Appeal in the three countries.

3. PROJECT IMPLEMENTATION

Does the proposed response honour ACT's commitment to Child Safeguarding? Yes No

Members of the ACT Alliance have a commitment to prevent misconduct and to safeguard children. Staff of ACT members are personally and collectively responsible for upholding and promoting the highest ethical and professional standards in their work. All staff involved in the response are required to sign the ACT Code of Conduct, and requesting members will ensure communities are aware of the expected behaviour of staff.

Members of Act Malawi, Zimbabwe and Mozambique Forums have a zero-tolerance approach to abuse and exploitation of any kind – physical, verbal, emotional or sexual to children. Staff, partners, associates and volunteers working on the appeal will be oriented during inception phase on Child safeguarding commitments and child protection policy of ACT Alliance. This step will ensure a safe working environment for all those engaged in the appeal, for the safety and well-being of the children and communities they will come into contact with. Child safeguarding commitments will apply to all members employees, community volunteers, consultants, contractors and trustees. Compliance with Child Safeguarding commitments will be included in all contracts and will be read and signed by anyone joining the organisation.

CEDES has a child protection policy and has recently trained senior staff in 2018 October on child protection CEDES will disseminate this information to field sites workers. Senior staff had responsibility to ensure field workers are aware and have read and understood the CEDES child

protection policy. CEDES has plans to ensure that all staff sign against the child protection policy and that it is articulated. During recruitment CEDES ensures its expectations on child protection are well articulated during recruitment processes.

3.1. ACT Code of Conduct

ACT members are committed to guard against the abuse of power by those responsible for protection and assistance to vulnerable communities. Especially in humanitarian crises, the situation of affected populations presents a particular ethical responsibility and duty of care on the part of ACT members and other humanitarian actors. Therefore, ACT members have a responsibility to ensure that all staff and volunteers are aware of the code of conduct, sign it, and understand what it means in concrete behavioural terms. ACT members also ensure that there are proper mechanisms in place to prevent and respond to sexual exploitation and abuse. ACT member staff, volunteers, and visitors are expected to sign and adhere to the ACT Code of Conduct. During orientation, staff and volunteers receive the ACT Code of Conduct in English and local languages to review and sign, ensuring that all understand the code's contents and are aware of related expectations as a result of the code. In case any incident occurs, a complaints and response mechanism is in place to address beneficiary feedback, including addressing violations of the ACT Code of Conduct. Disciplinary measures are in place to address a staff member or volunteer who violates the Code of Conduct. ACT members will continue to ensure that the principles of the Code of Conduct are incorporated into planning and implementation of activities under the Appeal. Moreover, the ACT Code of Conduct will be communicated to the beneficiaries and that they will be made aware of the complaint mechanisms available for their use. Proper complaints and handling mechanisms will be put in place at community level, District and National level.

3.2. Implementation Approach

The approach of implementation in response to Cyclone Idai will be through a coordinated regional appeal for the three countries: Mozambique, Zimbabwe and Malawi. The idea of working through national forums is to better assist ACT members and make use of shared opportunities among requesting forum members. Opportunities for collaboration among the three forums will be identified to ensure coordination, shared accountability, and learning.

Each of the requesting members in Malawi, Zimbabwe and Mozambique will be responsible for implementing their respective proposed activities. The overall coordination of the Regional Appeal will be done through an Appeal Coordinator function, hosted by CEDES in Mozambique, working closely with Appeal leads in Malawi and Zimbabwe, with close support from the ACT Secretariat in Nairobi.

The primary mode of implementation will be through local partnerships. At community level, the appeal implementation will be centered on participatory approaches; to identify the beneficiaries, market systems development and implementation of major activities. This ensures ownership and sustainability of the activities after project closure.

A market led approach is envisaged in livelihoods provision and protection. Where markets are assessed to sustain developed system, and transfer of goods and commodities while promoting for diversification and observing the farming systems approach will be adopted. The international organisations will offer capacity building on major development themes such as Core Humanitarian Standard (CHS), finance and grant management. The communities are supposed to profit from stronger local organisations.

CEDES in Mozambique will have its Director General as responsible for overall coordination and management of SAF 191 24 months' project. On the ground, the Emergency Coordinator (EC) and Project Manager will be responsible for planning, implementation, management, monitoring and evaluation of the project, and the disseminating learning. The EC will be supported by Emergency response specialist with technical expertise and will provide support on ground. The CEDES finance officer at the provincial will play a leading role in Financial planning and management, including in processing, claims and producing monthly financial reports. Also, The Project Steering Committee that will be formed will oversee the project's progression. It will be comprising the Emergency Committee, Representative of Floods Emergency Response Committee, Provincial Directorate of INCG and Administrative Heads of the selected districts and other Government Departments. PSC will have a leading role in advising and ensuring proper implementation and monitoring of project activities. Furthermore, 20 emergency assistance will be deployed and will assist in distribution of food and other items to the people affected by the floods.

For its planned response in Mozambique, LWF recognises that the magnitude of the disaster is huge thus, it has affected existing response capacity. To ensure a quality and timely response is provided to the affected communities, LWF will deploy a team of experts from its headquarters and hubs to set up the first phase, and support existing partners on the ground. One international Team Leader who used to be a Country Representative in Mozambique has been deployed to assess the situation. He will be joined by a WASH expert, Finance manager and Emergency Coordinator. During the first six months, LWF will explore and ensure that proper partnerships are built, capacity of local partners is enhanced and smooth handover is assured for the longer-term rehabilitation phase. Tentatively, LWF is planning to have 3 operational sites to be determined. Initial assessments indicate that tentatively these sites will be located around Chimoyo, Dombe, Namatanda, Buzi and Beira vicinities.

In Malawi, CARD and ELDS will lead implementation of the appeal on the ground. The two implementing members will closely work with Technical Working Groups within Act Malawi Forum. Technical Working Groups in the areas of WASH, Food Security and Psychosocial will be highly involved at all levels. CARD and ELDS will greatly involve Civil Protection Committees at all levels during implementation as well as other development community structures facilitating a participatory approach in the implementation to ensure proper implementation of the humanitarian response and adequate management of the aid.

All other members involved in the Appeal, along with others still planning, will define their implementation plan and operational arrangements once on-going assessments are completed and scale-up funding is mobilized. These will all be captured in any further revisions, SitReps and 4W/5Ws under this response.

3.3. Project Stakeholders

The stakeholders in this action will include Religious leaders from churches affected by the floods Cyclone Idai. They will be involved in community's mobilization and provide volunteers who will be full time involved in emergency response. Most of this church are members of CCM. They will play role in raising awareness and educating people on hygiene and sanitation to prevent diseases caused by water borne and helping people to rebuild their lives. Further, the emergency response committees will be established with which they be working together with in communities affected by the flood and cyclone to deal with any eventuality and conflict might rise to jeopardize the emergency response. CEDES also collaborating with local NGOs that they are speaking with one voice and that interventions are not duplicated. On the government side,

CEDES will work closely with INGC for effective collaboration to ensure that the distribution of the emergency relief and aid is meeting the standards set by UN Charter and SPHERE. Much more, CEDES is a member of UN clusters in which regular meetings are held to discuss about for clear leadership and accountability in humanitarian response, updating and sharing of information of the progress made in regard to the response; Private sectors who have been involved in supplying the most needed commodities at a lower prices; the INGO who are providing expertise in the area of WASH, Shelter and psychosocial support.

Zimbabwe: The project stakeholders will be drawn from the social, Public, private and community sectors.

The communities (rights holders) will be the primary stakeholders in the selected districts. They will be composed of 70% women and 30% men. Mostly the beneficiaries will be from child headed, women headed and any vulnerable communities such as disabled members of families, and those living with HIV and AIDS.

The private sector will be banks (Steward, and Organisational Banks), cash transfer agencies such as CASSAVA, Econet Pvt Ltd. Transporting companies where NFIs will be distributed and security companies, local retailers and wholesalers- to ensure that NFIs, cash and agro-input suppliers are made available to those in need.

The public sector will be local authorities, Home affairs to ensure services such as roads are available, identification of the beneficiaries, provision and guarantee of security (police) during the distributions. Departments such as livestock development and Agritex will be important for training of communities in crop and livestock production. Local partners and the Civil society players will aid in implementation of the advocacy components and maintaining of repositories for the project. Their main role can be summed as facilitation of the humanitarian intervention.

Malawi: The targeted food distribution will be implemented in partnership with the Department of Disaster Management Affairs (DoDMA), as a coordinating agency and key player in relief and disaster mitigation in the district. CARD and ELDS will also collaborate with the District Executive Committee within the District Council and the District Civil Protection Committee (DCPC). While DEC is for sharing of information, the DCPC will be critical on providing protection services including the prevention of gender-based violence. At Traditional Authority level, key partners will be the Area Development Committees (ADCs) and Area Civil Protection Committees (ACPCs). For mobilization, selection of beneficiaries and monitoring of activities, community level key partners including Village Development Committees (VDCs), Village Civil Protection Committees (VCPCs) / Food Distribution Committees who will be critical.

3.4. Field Coordination

The project will establish synergies at district level and community level to address complementary needs of the community members. Mapping of other stakeholders and activities in the same communities to be selected will be conducted. This approach will be promoted so that appropriate package of interventions by different stakeholders impact the beneficiaries. The project will establish links with other interventions such as winter cropping, irrigation agriculture, livestock and village savings and loans. Additionally, strong coordination will be established with local authorities.

In the selected districts in Zimbabwe, the participating organisations will be part of the District Development Committees and the local NGO forums. These committees ensure transparency and avoid duplication of activities. At national level, DCA and Christian Aid will be part of coordination structures such as humanitarian, social protection and agriculture working groups. In these groups, information will be shared on what is happening where and how the organisations are

collaborating on the ground as well as learning and advocacy. At the project management level, a project management unit, chaired by the ACT coordinator, and supported by all participating organisations will periodically meet to discuss the project challenges and oversight. Information of milestones achievement will be shared as well.

At the national level, coordination will be with all relevant groups, working groups, agencies, government agencies and other NGOs. Agreements will be established and a mechanism of accountability developed through periodic meetings and sharing the results of the Appeal. There will be constant communication and systematic meetings with government authorities at all levels, ensuring synergy in the response.

In Mozambique, CEDES is a member of NGO forum LINK and involved in various cluster coordination mechanisms. So far CEDES has been involved in need assessment in the areas that were affected by floods. At the provincial level CEDES is has a field office in Beira and the Coordinator is representing CEDES in all sub clusters meeting at the provincial level as well as coordinating all emergency response in the districts affected by the floods. He is consolidating, and ensuring smooth implementation plans and operations and adherence to logistic, human resource, administration and security procedures at the provincial level.

3.5. Project Management

In Malawi ELDS and CARD as ACT requesting members will be supported by the Forum Coordination desk in the ACT Malawi forum. The Malawi Forum Coordinator and Humanitarian Officers from Malawi forum members are part of national humanitarian teams and attend meetings in collaboration with the UN, Government and other INGO's involved in emergency response activities.

ELDS has established offices in Phalombe and Chikwawa, and CARD has established offices in Nsanje with staff who are in touch with other partners. These staff are in close contact with the local groups and CBOs in the proposed areas. ELDS and CARD during implementation will involve the other local NGOs, local structures and community leaders in co-coordinating the relief intervention. The purpose will be to maintain transparency and harmony in the process of selection of beneficiaries, project implementation and project accountability to avoid any possible duplication. This programme will also be conducted with the approval and co-operation of district officials

In Zimbabwe, the coordination of the project will be done by the ACT coordinator, with assistance of the rotating Convenor. Each requesting member has the responsibility to keep the coordinator and convenor informed of progress within their activities, as well as submitting site-reps once every three months, an interim report (narrative and financial) after six months and a full report by the end of the project.

In Mozambique, CEDES will work closely with local churches and will play a coordination role with local churches to ensure activities are complementary and there is no duplication internally with other church actors and externally with other government or non government stakeholders. An Appeal Coordinator will be recruited to lead Appeal implementation and coordinate the collaboration, reporting and learning processes of all requesting members in Mozambique, and the three national ACT forums.

3.6. Implementing Partners

CARD and ELDS will implement this response. CARD will implement in Nsanje while ELDS will implement in Phalombe and Chikwawa Districts. CARD and ELDS already have running programmes

in the selected districts, and the appeal will take advantage of existing structures and systems to ensure effective complementarity with other long-term development initiatives.

Christian Aid, DCA and HEKS-EPER are the requesting organisations and will have partnership agreement with the following implementing partners in respective districts:

Medra: Buhera and Bikita

Silveira House: Chipinge lower valley

Africa Ahead: Chipinge (Tanganda)

FPC: Chimanimani (Rusitu, Kopa, Nyanyadzi)

FACHIG: Mutare Rural (Chakohwa, Nyanyadzi)

Christian Aid will have a partnership agreement with Africa Ahead and MeDRA, whereas DCA will have a respective agreement with FPC and FACHIG while HEKS-EPER will work with Silveira House. Each Partner will work in the above-mentioned areas.

CEDES operated locally through forming ecumenical committees composed of various denominations of church and Muslim representatives. Implementation of the project will be done through these committees to identify affected persons and provide support required in the local context. CEDES will coordinate with 24 local church partners to implement the project through out the project cycle in affected areas. Churches affiliated to CEDES include United Church of Mozambique, Anglican Church of Mozambique, Presbyterian Church of Mozambique, Church of the Nazarene, Methodist church of Wesleyan, Methodist church of Mozambique, United Church of Christ (American Board), Lutheran Church of Mozambique.

LWF and FCA will implement directly their respective projects. Additional details or adjustments of these approaches will be further guided by the results of on-going assessments conducted by both agencies.

3.7. Project Advocacy

The project will take humanitarian advocacy as a vehicle to uphold rights, including right to food, shelter and personal hygiene. This will ensure communities will develop local economies and reduce carbon footprint. Government can be urged to observe nutritional requirements of people in developing rural markets such as ensuring iodised salt or bio fortified foods are available in communities, and part of the import quota permits. The rights for women and other marginalised groups will be incorporated; issues to do with sexual and reproductive health rights, access to sanitary pads can be singled out as an important element to advocate for, as these are likely to fall out of the priority list of stocks.

Advocacy efforts will be towards ensuring that national, provincial and district civil protection Units are able to plan and respond to disasters as well as to support communities to act in times of disasters to save lives. Project implementation teams will facilitate community level advocacy for the rights holders to demand fulfilment of their rights and accountability from government and other duty bearers. Through continued consultation and assessments, members will identify specific needs for advocacy and plan accordingly.

3.8. Private/Public sector co-operation

The participation of the public and private sector is important. In this sense, the activities will involve some private sector entities such as companies of local people or supermarkets, who will provide quality inputs. In this way the project will contribute to the local development of markets. With respect to public sector cooperation, the project will involve local governments, community leaders, and indigenous governments in different stages of implementation.

3.9. Engaging faith leaders

Faith leaders can quickly access the grassroots levels of communities, keeping a pulse on the challenges experienced by local populations as well as the general mood of the community regarding socio-economic and political issues facing the community. ACT Alliance also works with faith leaders to disseminate critical protection information to communities and to mobilize community participation. Lastly, ACT Alliance will train faith leaders on community-based psychosocial support (CBPS) to ensure sustainable efforts in addressing issues of psychosocial wellbeing.

Faith leaders will be key players with other gatekeeper to mobilize communities for participation in the project. They will also be agents of change in tackling harmful cultural practices hindering women to effectively participate in the project. They will be entry points for dissemination of important project messages for the wider community.

Simplified Work Plan

	Relief Phase								Early Recovery Phase								Resettlement , DRR, Restoration of Livelihoods								
	2019-2020																2020-2021								
Activities	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Food Distribution																									
WASH																									
Safe Water Access																									
Water Points Rehabilitation:																									
Sanitation and Hygiene:																									
Psychosocial Support Activities.																									
Agriculture Activities:																									
Health and Nutrition Activities																									
Activities shelter:																									
Livelihoods support																									
Communication																									
CMDRR Activities:																									
Cash Transfer Activities:																									

4. PROJECT MONITORING

4.1. Project Monitoring

The emergency response project will run for the period of 18 months in Zimbabwe and Malawi and 24 months in Mozambique. The forums members adhere to strict monitoring and evaluation (M&E) methods. Members are committed to ensuring that all activities are implemented in a timely fashion as per the action plan and that beneficiaries receive quality assistance in a dignified and respectful manner. ACT members will develop data collection tools necessary for monitoring and reporting and continue to track and sort data, disaggregated by gender, nationality, and age group. With an M&E plan in place, members will track project performance and identify results and learnings. The M&E Plan will track the degree to which the project is implemented according to the agreed work plan, reaching the affected population according to the set criteria, and achieving the desired outcomes and be prepared to address potential delays at an early stage.

Staff hired for the program will be responsible for monitoring activities and reporting discrepancies, challenges, and successes. When appropriate, members will conduct random follow up with beneficiaries through home visits, phone calls, or interviews, to conduct qualitative beneficiary satisfaction surveys to solicit feedback. Moreover, project teams will participate in monthly performance meetings. During these discussions, project staff will identify the incremental and cumulative project results, discuss current challenges, adjust the project implementation timeline or activities when necessary, and identify effective strategies for achieving the project objectives.

In Zimbabwe, technical backstopping will be provided by Christian Aid, DCA and HEKS EPER, who will give support on a monthly basis to ensure quality and compliance. During the monthly visits, Programme Officers from INGOs will have the opportunity to collect data using a pre designed template that will ensure the collection of information from beneficiaries and analysis will be done and results shared during the scheduled monthly meetings. INGOs will lead in the monthly review meeting where POs and relevant stakeholders and communities will meet to discuss progress, identify gaps and check if objectives are being met. During these meetings updates on progress will be shared, stakeholders will be engaged and concerns of communities dealt with in order to ensure the smooth running of the project. The project team will make use of the log frame so as to keep track of the planned targets while monitoring process. Monthly review meetings will be conducted in order to share reports, critically analyse the progress made and difficulties encountered so as to come up with possible recommendations and way forward which will enable the project team to achieve desired results. Local implementing partners will be responsible for monitoring of field activities on a day to day basis, field vehicles will be available to ensure that project team is able to reach out to beneficiaries, and where roads are not accessible by cars, motor cycles will be provided to assist where necessary.

In Malawi the project will employ a monitoring and evaluation officer who will be fulltime in the field facilitating and coordinating monitoring activities in the three selected districts.

Regular data collection and consolidation will be conducted using participatory processes. The Food Distribution Committees and Civil Protection Committees will conduct household monitoring on consumption and use of food to promote increased dietary diversification. Data collection forms will be developed and will be used by these Civil protection committees. Challenges will be discussed with local leaders and local government extension staff. During each distribution, data will be extracted from the distribution registers and consolidated. The outcomes will be compared with project indicators. Data on nutrition indicators will be collected in collaboration with health centers and the HAS's, which will show if incidence of malnutrition in the communities goes down during the project, as well as number of referrals for moderate or severe malnutrition.

After the distribution process, CARD, Food Distribution Committees, AEC, and other developmental structures will keep track of the impact by conducting post-distribution monitoring (PDM). This will keep record of the households' use of food as well as any irregularities that take place after the distribution. Since the project seeks to save lives and protect livelihoods of the beneficiaries in emergencies, these stakeholders will have an opportunity to check if i) the required quantities and quality of food were distributed, ii) whether beneficiaries are satisfied with distribution process and quality and quantity of food distributed and iii) whether indeed the distributed food has been used for its intended use. Monitoring tools will be used to capture the relevant information. These tools will use personal interviews and even the focus group discussions. The post distribution monitoring exercise will be conducted every time after the distribution process. In this case, PDM reports will be submitted to Act alliance.

CEDES will develop various tools to monitor and capture the progress on weekly and monthly basis to ensure that the relief and aid is reaching the most vulnerable people affected by the floods. The Provincial Coordinator together with Emergency coordinator will be

supported by the Planning Monitoring and Evaluation Coordinator from HQ to design and test the monitoring tools on the ground. Once the tools pass the testing, the PC and EC will be responsible with data collection to and which will be measuring the progress of indicators towards the achievements of the project objectives. For example, the number of project beneficiaries, and the quality of services provided to the participants as well as the number of reached by success of awareness efforts. Monthly narrative and financial monitoring reports will be submitted to Tact Alliance and to the other donors support the emergency response

ACT Secretariat Support

The ACT Secretariat will provide additional support to various PMER requirements of the regional Appeal, recognizing the additional coordination and reporting requirements across the three national forums. The Secretariat will work closely with the Appeal Coordinator/Lead to be hosted by CEDES in Mozambique and the various coordinators and conveners in the 3 countries. A Joint Monitoring Visit is planned for donors and other members midway through the Appeal, as part of Alliance-wide coordination and learning.

4.2. Safety and Security plans

The security environment in the selected districts is moderately good. Politically the situation is stable only having a lot of community meetings due to the national tripartite elections in May. Reports confirmed that water was contaminated in other areas due to flooding posing great threat to the outbreak of water borne diseases. The floods also affected rural growth centres where most project staff are staying with their families. The project will partner with health sector to provide posters with education information on water treatment and hygiene practices. The posters will be given to project staff while others will be pasted on notice boards. Other areas are slippery and some roads have been cut making it difficult for staff to access certain project areas. The project will use four-wheel vehicles for CARD and ELDS to access hard to reach areas. Partnership will be sought with organisations managing boats in the selected districts for staff and commodities to reach to cut off areas for safe and effective transportation of staff and items.

ACT Alliance views staff safety and security as a serious concern for all its members and those that it interacts with. It is noted that due to the increasing hostile environment that humanitarian workers at times face as they carrying out their work, ACT will ensure that there is adequate safety and security measures put in place to ensure that everyone is protected. The ACT Coordinator will ensure that there is provision for necessary training and together with the selected INGOs with expertise on safety and security measures develop risk management tools in order to improve the safety and standards for all humanitarian workers.

Furthermore, ACT Alliance upholds the Do No Harm principle among other humanitarian principles and will ensure that all its project teams are well aware of what they entail. The ACT members will ensure that necessary trainings will be offered to all project implementers so that they observe all the humanitarian principles which are of great importance in order to work well among staff and with respective communities. Additional support will be provided by the ACT Safety and Security Community of Practice (SSCP) as necessary.

4.3. Knowledge Management

The ACT forum members intend to make use of the Monitoring and Evaluation expertise within respective organisations towards the production of quality data collection tools that will enable the project team to capture data, analyse and produce meaningful reports for the benefit of the project. The project team will also conduct monthly review meetings with relevant stakeholders, project implementers and representatives from the affected communities. These meetings will give a platform where there will be sharing of experiences, progress and discussion on possible way

forward where possible. The workshops will provide a learning space for project stakeholders as they will be sharing of experiences from different areas. The project officers will be responsible for day to day collection of vital project information which they will be sharing on a weekly basis to their respective thematic focal person. All reports will be compiled by the Implementing Partners while reviewing of the reports and finalisation will be done by the thematic focal persons within the respective INGOs who will then submit the finalised reports to the ACT Coordinator. Monitoring and Evaluation department will be available to give support at all times in instances which pertain to data collection and analysis. The lessons learnt during the course of the project will be used as a basis for future corrections in similar projects and will also be of beneficial as the project is being implemented. The project team will be responsible for collecting case studies, stories depicting good practices at least on a quarterly basis. The significant stories of change will be a basis for replication or upscaling of best practices within the project.

As mentioned in 4.1, the ACT Secretariat will provide additional PMER support to this appeal, the results of which will feed into the Alliance-wide mechanisms for knowledge management, learning and communications. The knowledge products will be turned into materials that can be used for providing updates to stakeholders (e.g. SitReps), continuing fundraising, communication to various audiences, and reporting to donors and constituents. An independent evaluation is also planned should the Appeal reach the required funding benchmarks.

5. PROJECT ACCOUNTABILITY

5.1. Mainstreaming Cross-Cutting Issues

Gender (gender sensitivity/gender equality) and Gender Based Violence: Given the high priority the requesting members attach to gender equality, and the organisations' intention to deliver on its commitments to end violence against women and girls, the current appeal endeavours to meet the specific needs of women, girls, boys and men across the response. In order to do so all projects have been developed with reference to requesting members' policy on Gender Sensitive Programming and minimum standards for inclusive programming.

Resilience: Local implementing partners are national NGOs with a strong background in sustainable livelihoods and human rights-based approach to development and will apply this knowledge where relevant and possible. Members continue to consult with the local communities throughout the project cycle to ensure sustainability and resilience. The inclusion of cash programming will be prioritized to meet essential needs whilst also supporting the necessary transition phase towards more durable rehabilitation. Direct support to communities and GBV survivors will have a sustained impact at personal and household level in terms of providing psychosocial, legal and practical support to women and girls in a highly traumatized setting, developing skills to improve communication, and self-confidence to integrate socially and economically.

Environmental protection: The members are committed to the protection of the environment by integrating environmental considerations into the planning and implementation of all development initiatives, regardless of their sector of focus. Contamination of the environment will be reduced through safe disposal of grey-water, garbage collection and safe hygiene behaviour. There are WASH officers in place and members will consult with local experts especially for WASH programs where extraction of water may deplete ground-water resources. For pollution resulting from improper disposal of human waste, solid waste management units shall be established especially in coordination UN agencies. It is expected that the project will have a positive impact on the environment through contribution to the enhancing local markets and livelihoods.

Participation: Members will enable and encourage affected populations to play an active role in the decision-making processes that affect them to ensure that the most marginalized and affected are represented and have influence.

Social inclusion: distribution teams will maximize their effort to deliver the services at the nearest point of the beneficiaries' residing place, and make sure that all beneficiaries are well informed about distribution space, date and time. Beneficiary selection criteria will also be communicated to the beneficiary population to avoid any conflict at community level.

Anti-terrorism/corruption: the requesting members strictly follow ACT and their own anti-corruption and anti-terrorism policies during the whole length of the implementation.

Quality and Accountability, and Humanitarian standards: Some requesting members (and the ACT Secretariat) are certified against the Core Humanitarian Standard (CHS) or members of the CHS Alliance. The CHS is anchored on 9 commitments that organisation and individuals involved in humanitarian response use to improve the quality and effectiveness of the assistance they provide. The single core standard has been devised to clarify the responsibilities of aid workers, make the implementation of humanitarian standards simpler and easier and contribute to better humanitarian response. This Appeal will be implemented with the lens of both the CHS and Sphere standards, and appropriate support will be lined up by members and the ACT Secretariat to ensure policies are in place and accountable engagement of communities is made paramount.

5.1.1. Gender Marker / GBV

ACT Alliance protocol for Gender in Emergencies will be adhered to; integrating gender in all stages of the project cycle and promoting practical involvement of women and vulnerable groups at all levels. START Network's gender sensitive and disability inclusion in Humanitarian action framework will be adopted by some requesting members e.g. Christian Aid. Gender and age disaggregated data will be used to clarify demographics and mitigate harm that could arise.

The needs assessments found women and children are primarily responsible for water collection. Provision of clean water will thus particularly benefit these groups. Similarly, water related diseases caused by poor WASH practices also mainly affected women as main care-givers in the communities. Safer WASH practices will thus particularly aim to meet women's needs. Partners will aim to maintain a protective environment at the community level so that adolescent girls and women are also not exposed to any kind of gender-based violence while undertaking their daily business.

Gender equity will also be observed, while implementing activities such as water supply provision to ensure different groups' needs are being addressed and supported accordingly. Attitude and behaviour change components, particularly for WASH will work through challenging patriarchy and negative masculinities in existence across project areas. All activities, including location of latrines and hygiene kit contents will be informed by community consultations.

<https://www.humanitarianresponse.info/en/topics/gender/page/iasc-gender-marker>

http://dgecho-partners-helpdesk.eu/action_proposal/fill_in_the_sf/section5

5.1.2. Resilience Marker

The Project will build communities capacity to prepare and respond to future disasters, shocks and stressors through establishment of community managed disaster risk reduction committees. This

will be buttressed by strong psychosocial support to enable communities to bounce back from the disaster.

5.1.3. Environmental Marker

The Project will maximize beneficiary' effective involvement in all stages of project implementation. Maximizing beneficiaries' participation will be enhanced by sensitisation meetings during inception phase which will clearly highlight their expected roles in the project. Additionally, the project will train beneficiaries in project different components which will allow their meaningful participation in both project implementation and monitoring. Ensuring community engagement and local participation is a pre-requisite in any intervention across Partner's work to ensure that actions are effective, sustainable and avoid inadvertent harm to beneficiary HHs. Due to their existing presence and ongoing work program staff have a good understanding about the local communities.

5.1.4. Participation

The Project will maximize beneficiary' effective involvement in all stages of project implementation. Maximizing beneficiaries' participation will be enhanced by sensitisation meetings during inception phase which will clearly highlight their expected roles in the project. Additionally, the project will train beneficiaries in project different components which will allow their meaningful participation in both project implementation and monitoring.

Ensuring community engagement and local participation is a pre-requisite in any intervention across Partner's work to ensure that actions are effective, sustainable and avoid inadvertent harm to beneficiary HHs. Due to their existing presence and ongoing work program staff have a good understanding about the local communities. Volunteers will be used to engage with beneficiaries during all stages of the project.

Beneficiaries are the core focus of the intervention and will be consulted through the project cycle:

1) Preparing this action: an in-depth and detailed consultation will be carried out in the communities. Discussions will be conducted with specific vulnerable groups to understand needs and requirements. This action is therefore fully based on the needs of affected HHs and reflects their aspirations and prioritized needs.

2) At the start of the action: Partners will organize meetings in project locations to brief beneficiaries about the action and agree on role allocation. Beneficiaries will be selected from each location to participate in planning. To ensure needs of vulnerable groups are met, each group will be consulted during the design and implementation phase of each result component through the HCs. Regular feedback on services will be sought.

In line with CHS benchmarks, in-country accountability framework and complaint mechanisms will be adapted at target locations on the ground for use by beneficiary HHs. Modalities for this may include: complaints desks at all main distribution sites; display of suggestion boxes at IDP camps/distribution points; staff mobile numbers in paper vouchers; and staff acting as complaint focal points.

5.1.5. Social inclusion / Target groups

The Project will maximize beneficiary' effective involvement in all stages of project implementation. Maximizing beneficiaries' participation will be enhanced by sensitisation meetings during inception phase which will clearly highlight their expected roles in the project. Additionally, the project will train beneficiaries in project different components which will allow their meaningful participation in both project implementation and monitoring. This ensures that communities are well informed and

actively engaged in decision-making, as well as design and monitoring of the project. This will also develop ownership over activities and results, which in turn, will help to make the project's achievements sustainable. Efforts will be made to ensure the inclusion of most marginalized engaged in project (pregnant and lactating women, girls and boys, people living with disabilities). A complaints mechanism will be set up and shared with the community

5.1.6. Anti-terrorism / Corruption

ACT Alliance has a robust policy on money laundering and anti diversion and fraud. Staff have also been trained in the relevant policies. Partners will sign a code of conduct that they will be held to account.

5.2. Conflict sensitivity / do no harm

As some of the influential/potential stakeholders, like local government representatives, community leaders, etc., will be involved with the project implementation, there will always be a risk of internal conflict. To minimize this risk, the project implementation team will carry out necessary checks and consulting referees during recruitment. Activities will be communicated to the community for their endorsement. They will be at liberty to reject those that are not in tandem with their rights. Quality checks of food and commodity standards will be prioritised through partnership with relevant bodies such as the Bureau of Standards and other quality-checking institutions or consumer rights organisations.

In line with CHS, potential security and safeguarding risks are mapped and the risk matrix will identify response mechanisms. The mechanisms will include mapping of the referral pathways for safeguarding of the vulnerable and tracing actions done on each reported case.

5.3. Complaints mechanism + feedback

The robust ACT Alliance complaints and response mechanism is also accessible to all ACT members and stakeholders including affected populations and people in need.

ACT Forums members take complaints seriously. The ACT members ensure that beneficiaries are aware of and know what constitutes a complaint, where the complaints can be lodged and the process of addressing the complaints. Through regular contact with the beneficiaries, complaints are addressed in a timely manner. ACT members commit to address all issues of sexual exploitation, abuse of power, corruption and breach of the ACT policies and standards.

Beneficiaries will be oriented in complaints and grievances reporting to enable them access justice in times of abuse. Proper complaints and handling mechanisms will be put in place at community level, District and National level. Happiness and Sadness boxes (suggestion boxes) will be used during food distribution to report abuse. Complaints handling staff will be available during relief implementation to immediately handle conflicts and record grievances for further action. Referral tools are developed for identifying the risks, response mechanisms and tracking of the cases reported. The program will have a dedicated mail, phone and suggestion boxes in the communities and offices. Communities, and staff are encouraged to feedback on any issue that affects their safety, and humanity. Further to the reporting systems, each district will have a complains desk to handle non sensitive/confidentiality requiring issues and complains; also the issues are recorded and tracked. Systems will be established to enable cases are handled confidentially and effectively with relevant stakeholders, with appropriate technical support to be provided by CHS-certified members and the ACT Secretariat.

5.4. Communication and visibility

The forums developed a communication strategy which will be the living document for carrying out communication of different kind during the implementation of the appeal. Project staff will be oriented in this strategy during induction. With this in implementing members will re-emphasise the need for effective communication with all its staff members in the field and ensure that mechanisms are in place to enable the field officers communicate accordingly to the main office. The field Humanitarian Officer will communicate with the Programme Managers, who will feed the information to all forum members, including the Forum Coordinators. Progress and other critical information (challenges and updates) on the appeal and progress thereof will be shared with the ACT secretariat through the forum Coordination desk and the members of the Forum Coordinating committee. Production of Information, Education and Communication (IEC) materials will bear the logo for implementing partners co-branded with ACT Alliance to promote its visibility. ACT Alliance has a Facebook page and the Coordinators will post updates on that site.

Members will work closely with churches and regularly attend relevant cluster meeting in their respective countries and keep constant communication with other stakeholders and make sure their work visible and co-branded with ACT.

Additional support will be provided by ACT Secretariat communication staff and requesting members' communication teams throughout the implementation of the Appeal.

6. PROJECT FINANCE

6.1. Consolidated Budget

	Appeal Budget USD
DIRECT COSTS	
1 PROGRAM STAFF	
Appeal Lead	116,859
Total international program staff	200,358
Total national program staff	883,230
TOTAL PROGRAM STAFF	1,200,447
2 PROGRAM ACTIVITIES	
2.1. Shelter and settlement / Non-food items	1,187,875
2.2. Food security	835,833
2.3. Water, sanitation & hygiene (WASH)	1,720,780
2.4. Health / Nutrition	66,162
2.5. Protection / Psychosocial support	24,994
2.6. Early recovery & livelihood restoration	623,441
2.7. Education	618,955
2.8. Emergency Preparedness / Resilience	109,660
2.9. Unconditional CASH grants	286,500
2.10. Camp Management	0
TOTAL PROGRAM ACTIVITIES	5,474,200
3 PROGRAM IMPLEMENTATION	
3.1. Local Partners	33,469

3.2.	Needs Assessment	2,851
3.3.	Rapid Support Team	7,813
3.4.	Baseline / endline Assessment	35,117
3.5.	Complaint mechanisms / information sharing	10,530
3.6.	Advocacy	4,688
3.7.	DRR / Climate change	5,688
3.8.	Resilience	9,882
3.9.	Monitoring & evaluation	168,481
3.10.	Audit	46,236
3.11	Independent Appeal Evaluation	50,000
TOTAL PROGRAM IMPLEMENTATION		374,754
4 PROGRAM LOGISTICS		
	Transport (of relief materials)	260,661
	Warehousing	53,049
	Handling	215,738
TOTAL PROGRAM LOGISTICS		529,447
5 PROGRAM ASSETS & EQUIPMENT		
TOTAL PROGRAM ASSETS & EQUIPMENT		102,344
6 OTHER PROGRAM COSTS		
6.1.	SECURITY	72,548
6.2.	FORUM COORDINATION	88,841
6.3.	STRENGTHENING CAPACITIES	31,054
6.4	ACT SECRETARIAT SURGE, PMER & Q&A SUPPORT	40,000
TOTAL DIRECT COST		7,913,635
INDIRECT COSTS: PERSONNEL, ADMINISTRATION & SUPPORT		
	Staff Salaries	433,201
	Office Operations	145,187
	Communications	33,333
	Other Indirect Costs	32,112
TOTAL INDIRECT COST: PERSONNEL, ADMIN. & SUPPORT		643,833
		8%
TOTAL EXPENDITURE exclusive International Coordination Fee		8,557,467
INTERNATIONAL COORDINATION FEE (ICF) - 3%		256,724.02
TOTAL EXPENDITURE inclusive International Coordination Fee		8,814,191

Note on the consolidated budget: The individual member budgets can be found in Annex 2, Budget Summary per member. Line items 3.11 and 6.4 (total \$90,000) will be directly administered by the ACT Secretariat to scale up coordination, PMER, quality and accountability, and capacity support especially for national members, and will be drawn from unallocated/unearmarked contributions.

Annex 1: Consolidated Logical Framework

Text Legend: **Green**- CARD/Malawi; **Blue**- CEDES/Mozambique; **Orange**- Christian Aid /Zimbabwe; **Purple**- DCA Mozambique/Zimbabwe; **Red**- ELDS Malawi; **Brown** -HEKS EPER Zimbabwe; **Gold**-LWF Mozambique; **Light Blue**- FCA /Mozambique.

Impact: To save lives, reduce vulnerability and alleviate suffering of Idai cyclone disaster affected populations in Mozambique, Malawi and Zimbabwe.			
Outcome(s)	Output(s)	Objectively verifiable indicators	Means of verification
<p>1.1 Shelter & NFIs:</p> <p>Cyclone IDAI households (men, women and youth) supported in meeting their basic needs through the provision of vouchers, basic non-food items and have improved shelter</p>	<p><u>Mozambique:</u></p> <p>1.1.1 CEDES 6 assessments in six locations to identify shelter beneficiaries.</p> <p>1.1.2 CEDES-500 urban based households receive shelter. cash/voucher worth (\$310 USD).</p> <p>1.1.3 CEDES- 5,000 HH receive an NFI kit³.</p> <p>1.1.4 LWF-3,000 HH receive emergency shelter/house construction material.</p> <p><u>Zimbabwe:</u></p>	<p><i>Outcome Indicator:</i></p> <p>% of beneficiary households satisfied with the shelter and non- food item assistance they receive(d).</p> <p><i>Output Indicator:</i></p> <p># of HHs receiving essential NFIs items.</p> <p>#of HH receiving shelter assistance (material/vouchers).</p>	<ul style="list-style-type: none"> • Signed Distribution lists/Agreements. • Post-distribution monitoring reports/ feedback surveys. • Procurement documents. • Beneficiary selection/HH visit documents. • Photo documentation. • Field visit reports. • End of project review.

³ NFI kit contains 1 Cooking Set, 2 (Two) Blankets), 2 (Two) Bed Mats, 2 Mosquitoe Nets, 2 (Two) plastic sheeting tarpaulin of 20m² 1 (one)nylon rope), of 30 meters length, 1 (One) Washing Basin of 60 cm Diameter, 1 (One) Bucket with Lid of 20L, 2 (Two) Jerry Cans of 20L, 5 Bar Soap, 120 Aqua tabs(Enough for 60 Days) and Sanitary Pads (2 packs for HH/month over 2 months).

SECRETARIAT: 150, route de Ferney, P.O. Box 2100, 1211 Geneva 2, Switzerland

TEL.: +4122 791 6434 – **FAX:** +4122 791 6506 – www.actalliance.org



	<p>1.1.5 CAID- 1,000 shelter voucher kits.</p> <p>1.1.6 CAID – 350 Reconstruction kits vouchers.</p> <p>1.1.7 DCA -1,200 shelter kits</p> <p>NFI</p> <p><u>Mozambique:</u></p> <p>1.1.8 CEDES- 5,000 HH receive NFI kits ⁴</p> <p>1.1.9. LWF- 1,500 HH receive NFI Household kits.</p>		
<p>1.2 Food Security:</p> <p>Improved accessibility to quality and timely food and nutrition support assistance through cash, vouchers, kits distribution and enhanced health and nutrition practices for affected persons.</p>	<p><u>Mozambique:</u></p> <p>1.2.1 CEDES-5000 HH are provided with food kits ⁵.</p> <p>1.2.2 LWF-500 HH with special needs receive Food Aid.</p> <p><u>Malawi:</u></p> <p>1.2.3. CARD- 800 HH receive 50 kg Maize for 4 months.</p> <p>1.2.4 CARD– 800 HH receive 10 kg for 4 months.</p> <p>1.2.5 CARD- 800 HH receive 2 litres Cooking oil for 4 months.</p> <p>1.2.6 CARD- 8 On-site post distribution monitoring.</p>	<p><i>Outcome Indicator:</i></p> <p>% of beneficiaries that report improved access to food and nutrition support.</p> <p><i>Output Indicator:</i></p> <p># of HHs receiving and consuming food and nutrition assistance.</p>	<ul style="list-style-type: none"> • Signed Distribution lists/Agreements. • Post-distribution monitoring/ feedback surveys. • Procurement documents. • Beneficiary selection/HH visit documents. • Photo documentation. • Post Food Distribution survey reports.

⁴ NFI Kit- Cooking set, 2 blankets, 2 (two) bed mats, 2 (two) mosquito nets, 2 (two) plastic sheeting tarpaulin, of 20m2, 1 (one) nylon rope of 20 metres length, 1 (one) washing basin of 60cm Diameter, 1 (one) bucket with lid of 20L, 1 (two) Jerry cans of 20L, 5 bar soap, 120 Aqua tables enough for 60 days, and sanitary pads 2 packs per HH/Month over 2 months.

⁵ Maize 100kg, per HH for 2 months, Beans, 20 Kg per HH for 2 months, Oil 2 LTS per HH for 2 months, Salt 1 kg per HH for 2 months, Sugar 4 kg per HH for 2 months.

	<p>1.2.7 CARD- 1,100 ration cards are printed.</p> <hr/>	<p># of people attending awareness sessions (M/F).</p> <p># On-site and post distribution monitoring reports.</p> <p># ration cards printed</p>	
<p>1.3 Water, Sanitation and Hygiene (WASH) Better access to safe water & sanitation facilities, and improved hygiene practices through the provision of WASH infrastructure, hygiene kits, trainings and sessions.</p>	<p><u>Mozambique:</u></p> <p>1.3.1 CEDES- 5,000 HH receive NFI kit which contains WASH items ¹.</p> <p>1.3.2 CEDES- 120 persons receive Training of Trainers (ToT) on hygiene and sanitation education.</p> <p>1.3.3 LWF- 3,000 HH receive WASH Kits.</p> <p>1.3.4 LWF- 467 HH receive water purification sachets</p> <p>1.3.5 LWF 200 water sources are rehabilitated or disinfected.</p> <p>1.3.6 LWF 50 water committees are established after water points are rehabilitated.</p> <p>1.3.7 LWF 50 latrines are rehabilitated and/or constructed.</p> <p>1.3.8 LWF 300 community health workers are trained.</p>	<p><i>Outcome Indicators:</i></p> <p>% of beneficiaries having increased access to water and sanitation facilities (M/F).</p> <p>% of beneficiaries with improved hygiene & sanitation practices (M/F).</p> <p><i>Output Indicator:</i></p> <p># of WASH kits distributed.</p> <p># of beneficiaries attending hygiene promotion sessions (M/F).</p> <p># of HH receiving Hygiene assistance (M/F).</p> <p># of people with access to enough and safe water for domestic use. (M/F).</p>	<p>Water, Sanitation and Hygiene (WASH)</p> <ul style="list-style-type: none"> • Signed distribution lists/agreements. • Session attendance lists. • Pre/Post-tests. • KAP/ Post-distribution monitoring/ feedback surveys/field visit evaluation reports. • Procurement documents/construction reports. • Beneficiary selection/HH visit documents. • Attendance sheets. • Focus Group Discussion minutes.

	<p>1.3.9 LWF 3 sensitization campaigns are held.</p> <p>1.3.10 LWF 3 radio messages are aired.</p> <p>1.3.11 LWF 3 communication material produced.</p> <p>1.3.12 LWF- 300 HH receive incentives for latrines construction.</p> <p>1.3.13 LWF- interactive health messages given.</p> <p>1.3.14 LWF- HH surveys conducted.</p> <p><u>Zimbabwe:</u></p> <p>1.3.15. CAID- 2,250 HH receive WASH kits⁶</p> <p>1.3.16. CAID- 25,200 HH will receive hygiene kits.</p> <p>1.3.17 HEKS EPER- 1,000 HH receive WASH kits.</p> <p>1.3.18 HEKS EPER 1,000 HH receive toilet construction vouchers.</p> <p>1.3.19 HEKS EPER 90 HH receive basic training on hygiene.</p>	<p># of latrines rehabilitated and/or constructed (M/F).</p> <p># of hygiene sensitization campaigns held.</p> <p># of communication material produced and radio messages aired on use of safe domestic water and proper hygiene practices.</p> <p># of interactive health messages given.</p> <p># of latrines constructed.</p> <p># HH surveys conducted.</p> <p># community health workers trained.</p> <p># of boreholes rehabilitated.</p>	
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⁶ WASH Kit contains soap, aqua tabs, buckets and Jerry cans.

	<p>1.3.20 HEKS EPER 4,600 HH receive IEC materials on hygiene education.</p> <p>1.3.21 HEKS EPER 30 HH receive builder tools for toilets.</p> <p>1.3.22 HEKS EPER 25 boreholes are rehabilitated.</p> <p><u>Malawi:</u></p> <p>1.3.23 CARD- Water Guard distributed to 800 HH (2 bottles/HH/month).</p> <p>1.3.24 CARD- 800HH are provided with buckets (20L with cover).</p> <p>1.3.25 CARD- 8 Awareness meetings held on WASH.</p> <p>1.3.26 CARD- 15 Water points are rehabilitated, and water point committees trained.</p> <p>1.3.27 CARD- 4 Hygiene and Sanitation hygiene campaigns are held.</p> <p>1.3.27 ELDS- 800 HH receive 2 bottles of water guard for 3 months.</p> <p>1.3.28 ELDS 800 Buckets are distributed to affected HH.</p>		
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	<p>1.3.29 ELDS 16 hygiene awareness campaigns are held among affected communities.</p> <p>1.3.30 ELDS 8 safe sanitation campaigns are held among affected community members.</p> <p>1.3.31 ELDS water points are rehabilitated and water point committees strengthened/established.</p>		
<p>1.4 Health and Nutrition:</p> <p>Improved access to food and nutrition requirements for especially for under five have reduced risk to malnutrition.</p>	<p><u>Malawi:</u></p> <p>1.4.1. CARD -600 HH with under five receive Corn Soya Blend at 10 kg per HH for 4 months.</p> <p>1.4.2. CARD – 800 HH receive edible cooking oil 2 L per HH for 4 months.</p> <p>1.4.3 CARD- 8 health and nutrition sensitization campaigns.</p> <p>1.4.4 CARD- 8 sessions held to sensitize affected communities on best nutrition services.</p> <p>1.4.5 ELDS- 1,600 HH receive 50 kg of Maize, 10 kg of pulses, 2 litres of cooking oil, for 4 months.</p> <p>1.4.6 ELDS- 1,600 HH receive 10kg per month of CSB for 4 months.</p> <p>1.4.7 ELDS- 1,600 HH receive edible cooking oil t 2 L per household per month for 4 months.</p>	<p><i>Outcome Indicator</i></p> <p><i>% of HHs report having improved access to nutrition services.</i></p> <p><i>% of beneficiaries with improved knowledge of health and nutrition risks.</i></p> <p><i>Output Indicator</i></p> <p># of HH who have received CSB, edible cooking oil (M/F)</p> <p>#of cases referred for further treatment(M/F).</p> <p># of people participate in nutrition sensitization campaigns (M/F).</p>	<p>Health and Nutrition:</p> <ul style="list-style-type: none"> • Procurement records. • Distribution lists and list of beneficiaries. • Referral records. • Medical reports. • Attendance lists for sessions. • Home visits and interviews. • Monitoring reports.

	<p>1.4.8 ELDS- 16 nutrition best practise sessions are held among affected communities.</p>	<p># of community nutrition sensitization sessions held.</p>	
<p>1.5. Protection/Psychosocial:</p> <p>Psychosocial wellbeing, of affected persons especially children traumatized by the storm/flood have been addressed.</p>	<p><u>Mozambique:</u></p> <p>1.5.1. CEDES receives Psychosocial surge support technical person.</p> <p>1.5.2 CEDES conduct 1 Training of trainers on community based psychosocial support.</p> <p>1.5.2 CEDES one assessment and coordination of psychosocial community needs.</p> <p><u>Zimbabwe:</u></p> <p>1.5.3. CAID- 23 faith leaders trained on psychosocial support.</p> <p>1.5.4. DCA- 20 sessions conducted to train faith leaders on psychosocial support.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><u>Malawi</u></p> <p>1.5.5. CARD- 8 awareness meetings on CBPS conducted.</p> <p>1.5.6 CARD- 2 sessions held on CBPS among local committees. 90 children and youth attend counselling sessions.</p> </div>	<p><i>Outcome indicators</i></p> <p>% of children and adults reporting improvement in their psychosocial wellbeing</p> <p><i>Output indicators</i></p> <p># of people attending sessions, courses, and/or trainings (M/F) (age) on psychosocial support.</p> <p># of assessments conducted on psychosocial support requirements. (M/F) (age).</p> <p># of Training of Trainers conducted on psychosocial support (M/F) (age).</p> <p># of people accessing counselling and support services (M/F) (age).</p> <p># of people who report that they are better able to cope with their trauma(M/F) (age).</p>	<p>Protection/Psychosocial:</p> <ul style="list-style-type: none"> • Session attendance lists. • Pre and Post-tests/ feedback surveys. • Training reports. • Beneficiary selection/HH visit reports. • Referral documents. • ToT reports. • Psychosocial community /faith leaders/awareness meeting/local communities training reports. •

	<p>1.5.7. CARD- Monitoring and Evaluation of CBPS.</p> <p>1.5.8 ELDS- 16 awareness meetings held in CBPS.</p> <p>1.5.9. ELDS- 4 training held for local committees on CBPS.</p> <p>1.5.10 ELDS- 2 monitoring and evaluation visits on CBPS.</p> <p>1.5.11 ELDS- 16 sessions held on strengthening early warning systems.</p>	<p># of people trained in CBP support.</p>	
<p>1.6. Early Recovery/Livelihoods: Increased access to engagement on agriculture activities. and livelihood opportunities for vulnerable individuals in affected communities.</p>	<p><u>Mozambique:</u></p> <p>1.6.1 CEDES- 10,000 HH are provided with seed kits ⁷.</p> <p>1.6.2 CEDES- 10,000 HH are provided with farming tools kits.</p> <p>1.6.3 LWF- 500 HH are provided with seed funds (seeds and tools).</p> <p>1.6.4 LWF- 500 HH provided with seed Fund (seeds and tools).</p> <p><u>Zimbabwe:</u></p> <p>1.6.5 CAID- 2,250 HH receive vegetable seeds garden packs.</p>	<p><i>Outcome Indicators</i></p> <p>% of households able to recover from food crisis shock.</p> <p>% of early warning structures trained with community contingency plans developed.</p> <p><i>Output Indicators</i></p> <p># of seeds packs distributed.</p>	<p>Early Recovery/Livelihoods:</p> <ul style="list-style-type: none"> • List of beneficiaries/post distribution reports. • Session attendance lists. • Pre/Post-tests/ feedback surveys. • Signed Distribution lists/Agreements. • Procurement documents. • Beneficiary selection/HH visit documents. • Field reports.

⁷ Vegetable seeds of tomato, onion, cabbage, carrot, lettuce, maize, cassava, millet and sorghum seeds.

	<p>1.6.6 CAID – 1,125 HH receive field crop seeds packs.</p> <p>1.6.7 CAID 450 HH receive goats.</p> <p>1.6.8 CAID – 2,025 HH receive chicken.</p> <p>1.6.9 CAID- 2,250 HH receive basic farm implements.</p> <p>1.6.10 CAID- 2,250 HH receive training on livestock and crop husbandry.</p> <p>1.6.11 DCA-2,000 HH receive nutrition seed packs (vegetable seeds).</p> <p>1.6.12 DCA- 1,000 HH receive food crop seed packs.</p> <p>1.6.13 DCA- 400 HH receive small livestock (goats).</p> <p>1.6.14 DCA-1,800 HH receive small livestock (Chicken).</p> <p>1.6.15 DCA- 2,000 HH receive basic farm implements.</p> <p>1.6.16 DCA- Community members receive training on livestock and crop husbandry.</p> <p><u>Malawi:</u></p> <p>1.6.17 ELDS- At least 2,000 HH receive Sweet Potato Vines of 5 bundles each, hybrid maize 5 kg, bags of seeds</p>	<p># Post distribution survey and analysis reports.</p> <p># of People participate in farming activities (M/F).</p> <p># farming households have received quality improved farm inputs and benefiting from solar kits.</p>	
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	<p>(assorted), portable solar irrigation kits and training (8) on crop production.</p> <p>1.6.18 ELDS- At least 2,000 HH receive 5 kg of hybrid maize seed.</p> <p>1.6.19 ELDS- At least 2,000 HH receive assorted vegetable seed (assorted).</p> <p>1.6.20 ELDS- 6 portable Solar irrigation kits are purchased.</p> <p>1.6.21 ELDS- 16 sessions on crop production are conducted within the community.</p>		
<p>1.7 Education: Disaster affected school aged children have are able to return to school through school reconstruction and teacher training.</p>	<p><u>Mozambique</u></p> <p>1.7.1. FCA- 100 temporary learning spaces can be safely accessed by learners.</p> <p>1.7.2 FCA- 4,500 children have returned to learning and have received learning materials.</p> <p>1.7.3 FCA- 200 teachers have received teaching materials and orientation on their use. Teacher have received training on learner-centred methods and psycho social support.</p>	<p>Outcome indicators</p> <p>% of temporary learning spaces constructed.</p> <p>% of school children attending school.</p> <p>% of teachers received training.</p> <p>Output indicators</p> <p># of school kits distributed (M/F).</p> <p># of teachers are using teaching material and have been trained on psychosocial support. (M/F).</p>	<ul style="list-style-type: none"> • Project report/ field visit reports/ photo documentation. • Distribution lists. • Training attendance lists/ Signed Distribution lists/Agreements.

		# of schools rehabilitated.	
<p>1.8 Strengthening Capacities/ Emergency preparedness and resilience Strengthen community awareness on DRR.</p>	<p><u>Mozambique:</u></p> <p>1.8.1 CEDES- 12 DRRM & EWS groups set up in (TBD).</p> <p>1.8.2. CEDES- 12 DRRM/EWS mechanism set up in community centres (TBC).</p> <p>1.8.3 CEDES- 4 DRR and community preparedness units set up.</p> <p>1.8.4 CEDES- 4 trainings on DRR.</p> <p>1.8.5 LWF- 1,000 pcs of DRR climate change sensitization communication material distributed.</p> <p><u>Zimbabwe</u></p> <p>1.8.6 ELDS- Joint monitoring and evaluation at Regional level.</p> <p>1.8.7 ELDS- ACT Technical Working Groups Sharing.</p> <p><u>Malawi:</u></p> <p>1.8.8 CARD- 16 sessions are held on Community based disaster risk management.</p> <p>1.8.9 CARD- 8 sessions are held on CBDRM and early warning systems are strengthened.</p>	<p><i>Outcome Indicators</i></p> <p>% of beneficiary organizations demonstrate an increase knowledge and skills in humanitarian program implementation and standards, emergency preparedness, resilience, and strengthening community awareness on DRR.</p> <p><i>Output Indicators</i></p> <p># of capacity building for faith leaders, community leaders, DRM focal points on emergency preparedness and resilience building.</p> <p># of capacity building workshops for community members, community leaders, board and staff conducted.</p> <p># of volunteers/workers trained on humanitarian principles and policies (M/F).</p>	<ul style="list-style-type: none"> • Evaluation and feedback of training sessions. • Workshop facilitator reports. • Pre-Post assessment of knowledge and skills.

	<p>1.8.10 ELDS- 4 sessions held on local partners and national members strengthening capacities.</p>		
<p>ACT Local Partners/ National members strengthening.</p> <p>Improve coordination and participation amongst SAF 191 Forum members.</p>	<p><u>Mozambique</u></p> <p>1.9.1 CEDES- 6 Kick-start workshops, one at every project site, 6 mid review workshop evaluations.</p> <p>1.9.2 CEDES- 6 meetings for faith leaders on DRR.</p> <p>1.9.3 CEDES- One meeting to strengthen capacities on local partners and national members.</p> <p>1.9.4 CEDES- Recruitment of local volunteers for six months for six months.</p> <p>1.9.5 LWF- One meeting to local partners/ national members to strengthen capacities.</p> <p><u>Zimbabwe:</u></p> <p>1.9.6 HEKS- one inception workshop and 5 review meetings are held.</p> <p><u>Malawi:</u></p> <p>1.9.7 CARD- 1 session is conducted on ACT technical working group sharing.</p>	<p>Outcome indicator</p> <p>% of national /local members report improved coordination and participation in forum initiatives.</p> <p><i>Output indicators</i></p> <p># of ACT Mozambique, Zimbabwe and Malawi members attending regular monthly meetings (M/F).</p> <p># of ACT Mozambique, Zimbabwe and Malawi members participating in SAF 191 regional meetings (M/F).</p> <p># of kick start/inception workshops/ mid and end review workshops held</p>	<ul style="list-style-type: none"> • Monthly meeting minutes. • Regional/national skype meeting minutes. • Reports from Mozambique, Zimbabwe, Malawi Forum Working Groups. • Evaluation/feedback of capacity building workshops.

	<p>1.9.8 CARD- Kick start workshop, midterm review, visibility and staff trainings are held.</p>		
<p>Assumptions</p> <ul style="list-style-type: none"> • Funds are available and released in a timely manner. • Quality and quantities required for food and NFIs are available. • Emergency response is not disrupted by extreme weather events or other political situations. • Local markets are functional and coordination with government, clusters and other stakeholders will be maintained. • Supply of relief materials by selected service providers is adequate and timely. • Economic situation remains stable in all three countries. No large currency fluctuations, markets are well stocked and functioning to carry out program implementation • Local stakeholders are supportive, responding and participating in the projects. • Beneficiaries are willing to participate in projects • Government relations with ministries and authorities are regularly maintained to obtain necessary project permissions and approvals and Governments grant project approvals/ necessary permissions in a timely manner. • Climatic Conditions remain stable (including for irrigation). • Education authorities approve construction permits on selected sites. • Construction materials are available and can be delivered timely. • Enough quantities for NFI kits and food packs are available. • Active support from (Instituto Nacional de Gestão de Calamidades) INGC and local church members and community leadership. • Project communities are accessible so distribution can take place. • Personnel can be recruited to fit advertised positions. • Coordination with INGC and cluster members are maximized and information on gaps are clear. 			

Annex 2 – Budget Summary per Member

Note: excluding Secretariat-managed budget, see 3.11 and 6.4 in Consolidated Budget

	Malawi			Mozambique				Zimbabwe				Appeal Total
	CARD	ELDS	SubTotal	CEDES	FCA	LWF	SubTotal	CA	DCA	HEKS	SubTotal	
Direct Costs	305,218	583,774	888,992	3,056,655	349,417	1,886,531	5,292,602	753,423	632,167	256,450	1,642,040	7,823,635
Program Staff	45,313	89,274	134,587	358,280	99,448	185,031	642,759	156,309	217,922	48,870	423,102	1,200,447
Appeal Lead	-	-	-	116,859	-	-	116,859	-	-	-	-	116,859
International Staff	3,894	7,788	11,681	-	68,440	49,050	117,490	5,001	60,515	5,670	71,187	200,358
National Staff	41,419	81,486	122,905	241,421	31,008	135,981	408,409	151,308	157,407	43,200	351,915	883,230
							-					-
Program Activities	197,973	395,946	593,919	2,145,125	132,922	1,552,750	3,830,797	522,489	363,295	163,700	1,049,484	5,474,200
Shelter and settlement / Non-food items	-	-	-	596,875	-	232,500	829,375	202,500	156,000	-	358,500	1,187,875
Food security	112,257	224,514	336,770	439,063	-	60,000	499,063	-	-	-	-	835,833
Water, sanitation & hygiene (WASH)	18,095	36,189	54,284	23,014	-	1,260,250	1,283,264	219,533	-	163,700	383,233	1,720,780
Health / Nutrition	22,054	44,108	66,162	-	-	-	-	-	-	-	-	66,162
Protection / Psychosocial support	3,784	7,568	11,351	11,953	-	-	11,953	894	795	-	1,689	24,994
Early recovery & livelihood restoration	38,459	76,919	115,378	330,000	-	-	330,000	99,563	78,500	-	178,063	623,441
Education	-	-	-	486,033	132,922	-	618,955	-	-	-	-	618,955
Emergency Preparedness / Resilience	3,324	6,649	9,973	99,688	-	-	99,688	-	-	-	-	109,660
Unconditional CASH grants	-	-	-	158,500	-	-	158,500	-	128,000	-	128,000	286,500
Camp Management	-	-	-	-	-	-	-	-	-	-	-	-
							-					-
Program Implementation	20,135	20,135	40,270	132,969	57,500	15,250	205,719	35,885	27,080	15,800	78,765	324,754
Local Partners	-	-	-	28,125	-	3,000	31,125	-	-	-	-	31,125
Needs Assessment	676	676	1,351	2,344	-	1,500	3,844	-	-	-	-	5,195
Rapid Support Team	-	-	-	7,813	-	-	7,813	-	-	-	-	7,813
Baseline / endline Assessment	2,027	2,027	4,054	7,813	-	2,250	10,063	15,000	6,000	-	21,000	35,117

Emergency Response to Cyclone Idai in Mozambique, Malawi and Zimbabwe - SAF191

Complaint mechanisms / information sharing	2,703	2,703	5,405	3,125		500	3,625	1,500	-	-	1,500	10,530
Advocacy	-	-	-	4,688		-	4,688	-	-	-	-	4,688
DRR / Climate change	-	-	-	4,688		1,000	5,688	-	-	-	-	5,688
Resilience	3,378	3,378	6,757	3,125		-	3,125	-	-	-	-	9,882
Monitoring & evaluation	8,108	8,108	16,216	52,500	52,500	2,000	107,000	16,385	18,080	10,800	45,265	168,481
Audit	3,243	3,243	6,486	18,750	5,000	5,000	28,750	3,000	3,000	5,000	11,000	46,236
Program Logistics	28,419	50,649	79,068	257,594	30,766	101,900	390,259	29,880	8,640	21,600	60,120	529,447
Transport	22,608	39,892	62,500	86,250	12,891	65,900	165,041	2,880	8,640	21,600	33,120	260,661
Warehousing	1,216	2,432	3,649	31,094	3,906	14,400	49,400	-	-	-	-	53,049
Handling	4,595	8,324	12,919	140,250	13,969	21,600	175,819	27,000	-	-	27,000	215,738
Program Assets & Equipment	8,378	16,757	25,135	38,438	13,047	15,800	67,284	5,124	-	4,800	9,924	102,344
Other Program Costs	5,000	11,014	16,014	124,250	15,734	15,800	155,784	3,735	15,230	1,680	20,645	192,443
SECURITY	-	1,014	1,014	41,125	12,609	8,800	62,534	-	9,000	-	9,000	72,548
FORUM COORDINATION	3,649	7,297	10,946	61,250	-	5,000	66,250	3,735	6,230	1,680	11,645	88,841
STRENGTHENING CAPACITIES	1,351	2,703	4,054	21,875	3,125	2,000	27,000	-	-	-	-	31,054
Indirect Costs	37,088	43,763	80,851	188,810	29,836	23,880	242,526	130,295	155,349	34,812	320,456	643,833
Staff salaries	26,034	31,169	57,202	106,779	0	15,400	122,179	105,765	121,203	26,851	253,820	433,201
Office Operations	7,865	2,973	10,838	58,125	21,094	3,200	82,419	19,544	26,226	6,161	51,930	145,187
Communications	486	973	1,459	16,875	6,398	2,480	25,753	3,600	720	1,800	6,120	33,333
Other Indirect Costs	2,703	8,649	11,351	7,031	2,344	2,800	12,175	1,386	7,200	0	8,586	32,112
Total Expenditure excl. ICF	342,306	627,537	969,843	3,245,465	379,253	1,910,411	5,535,128	883,717	787,517	291,262	1,962,496	8,467,467
International Coordination Fee	10,269	18,826	29,095	97,364	11,378	57,312	166,054	26,512	23,626	8,738	58,875	254,024
Total Expenditure inc. ICF	352,575	646,363	998,938	3,342,829	390,630	1,967,723	5,701,182	910,229	811,142	300,000	2,021,371	8,721,491