



Reporting Period: August 1-31 2022

# MOZAMBIQUE

## Humanitarian Situation Report No. 8

unicef   
for every child

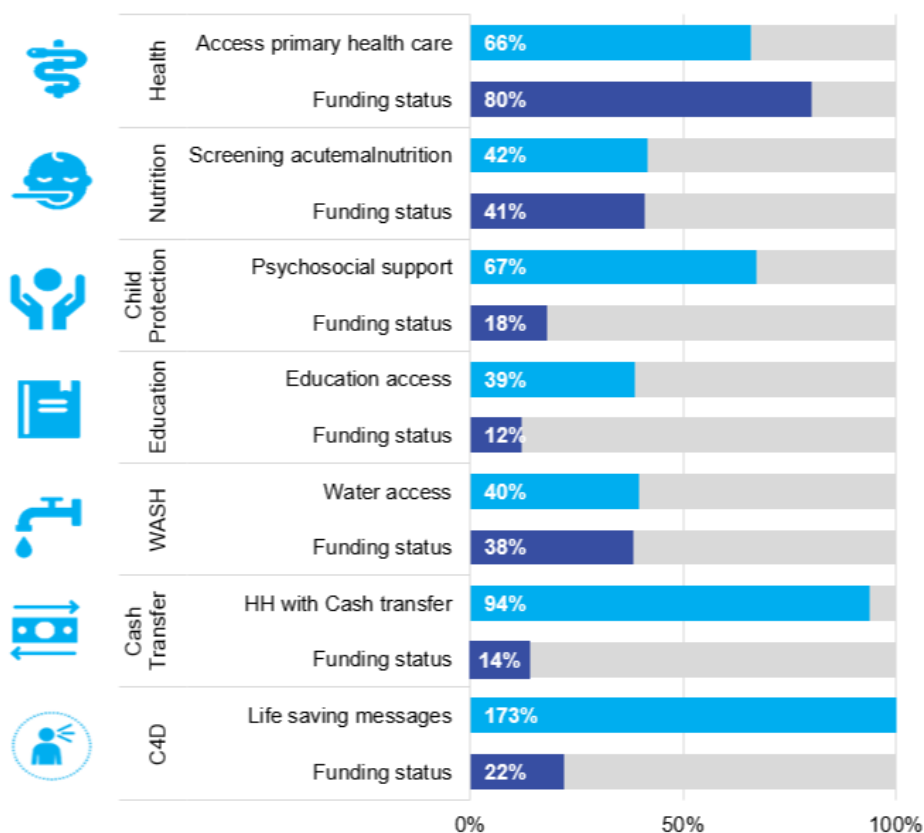
### Highlights

- 8.5 million children under 5 received poliovirus vaccinations during the fourth round of the nationwide campaign.
- UNICEF delivered emergency health and nutrition supplies to districts in emergency-affected areas of the north to respond to the needs of approximately 30,000 people.
- Three multi-purpose centres which will provide a space for activities for adolescents have been completed in Cabo Delgado
- Five temporary learning spaces will provide support education of 500 children, including 300 girls, returning to Quissanga District.
- Over 59,000 families received cash transfers
- Frontline works from 85 UNICEF partners and 16 civil society organizations received PSEA training in Nampula, Zambezia and Sofala provinces.

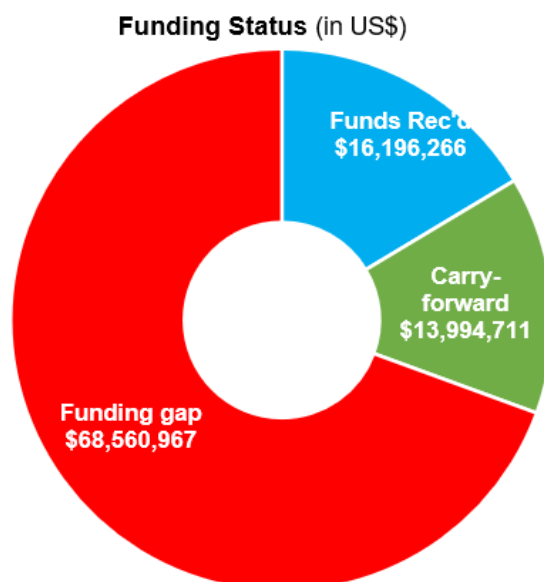
### Situation in Numbers



### UNICEF's Response and Funding Status



### UNICEF Appeal 2022 US\$ 98.8 million



## Funding Overview and Partnerships

UNICEF's 2022 Humanitarian Action for Children appeal seeks US\$98.8 million to sustain and expand the provision of life-saving services for women and children in Mozambique affected by conflict, Cyclone Gombé, and Tropical Storm Ana. UNICEF has received over \$16.1 million in 2022 including generous contributions from the GAVI Vaccine Alliance, in support of UNICEF Mozambique's humanitarian response to COVID-19, the United Kingdom, the Central Emergency Response Fund (CERF), the United States Agency for International Development (USAID) and the Republic of Korea, who provided support for UNICEF's response in the aftermath of Tropical Storms Ana and Gombé, and the World Bank, the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), and the Governments of Italy, Norway and USAID who provided support for UNICEF's conflict-related activities in northern Mozambique. The 2022 HAC has a funding gap of 69 per cent. UNICEF has also utilized core resources and nexus-related funding for response activities totaling \$11.7 million to meet urgent humanitarian needs and additional earmarked resources for the polio response. The remaining funding gap means UNICEF is unable to respond to existing needs, and planning for future displacements and storm, are not possible; especially in hard-to-reach areas.

## Situation Overview & Humanitarian Needs

The volatile security situation in Cabo Delgado continued to drive displacement and populational movements. Between 27 July and 30 August 2022, the International Organization for Migration counted a total of 29,387 persons moving within the province, most of which were related to conflict—either new displacements, relocations of internally displaced persons (IDPs), or spontaneous returns.<sup>1</sup> Of those on the move, approximately 57 per cent were children, 24 per cent were women, with 625 elderly, 110 pregnant women, and 36 people with disabilities. Among the registered IDP arrivals, most individuals originated from Ancuabe, highlighting the impact of the attacks by non-state armed groups (NSAG) in the district, particularly in June and July. At the end of August, renewed attacks and displacements were reported in Ancuabe District, before moving south into Chiure District and then to Erati and Memba Districts of Nampula Province in early September. Insecurity also continues to impact humanitarian access. As per the latest OCHA Access Snapshot for Cabo Delgado,<sup>2</sup> seven districts were classified as entirely or partially hard-to-reach, with approximately 302,000 IDPs estimated to be in hard-to-reach locations across the province.

The Famine Early Warning System Network (FEWSNET) in August indicated that food insecurity remains a challenge<sup>3</sup>, with IPC Phase 3—or Crisis level—outcomes in areas affected by shocks. The affected areas include drought-affected areas of the South, areas affected by floods and storms in Nampula, and conflict-affected areas in Cabo Delgado. Food insecurity is projected to increase, with a higher number of households facing Crisis level outcomes between the lean seasons (October and November) in the North and in Central/South Mozambique. Adding to the crisis, the annual inflation rate reached its highest level since August 2017, increasing from 10.8 per cent in June to 11.8 per cent in July. Price increases were particularly noticeable for transportation, food and non-alcoholic beverages, as well as housing and utilities, thus reducing the purchasing power of families, especially for poor households.

Since the first case of wild poliovirus was detected earlier this year in Mozambique, four additional cases have been confirmed, all in Tete Province. Additional cases of vaccine-derived poliovirus have also been detected. As such, polio campaigns have been stepped up nationally, and Mozambique is now preparing for the fifth round of nationwide polio vaccinations which will take place between 27-30 October targeting 8.5 million children below the age of five with the bivalent oral polio vaccine. During round four, records show that 8.5 million children were vaccinated with 84 per cent of the districts passing the lot quality assurance sampling processes.

## Summary Analysis of Programme Response

### Health

UNICEF's support for the polio vaccination campaign also continues with support on vaccine management, cold chain activities, set up of an Emergency Operations Centre in Tete Province, training of teams doing house-to-house visits, and social and behaviour change activities.

In August, UNICEF maintained the distribution of mosquito nets as a mitigation measure for the rising tide of malaria cases among IDPs and host communities in Cabo Delgado province. Two mosquito nets per family were delivered to 3,408 families of communities hosting IDPs in Pemba, Ibo, Montepuez, Namuno, Muidumbe, Mocimboa da Praia, and Mueda districts. The nets covered 17,040 people including 6,816 children under five years. Additionally, 6,349 children under five years were reached with health services in remote and access-constrained communities through integrated health and nutrition mobile brigades implemented by UNICEF partners AVSI, Action Against Hunger, and Helpo.

<sup>1</sup> Cumulative analysis based on data tracking management of the International Organization for Migration (IOM), August 2022. [Mozambique | DTM \(iom.int\)](https://www.iom.int/mozambique-dtm)

<sup>2</sup> [OCHA Mozambique, Access Snapshot – Cabo Delgado Province, July 2022.](#)

<sup>3</sup> [Mozambique | Famine Early Warning Systems Network \(fews.net\)](https://www.fews.net/)

UNICEF also delivered to various equipment to Quissanga District supporting the re-establishment of services in Quissanga Sede and Nacoba health centres and prepositioning for the expected reopening of the Bilibiza health centre. Among the materials delivered were four tents, 10 international emergency health kits, six acute watery diarrhea (AWD) kits as well as soap and buckets for hand washing.

In Zambezia province, UNICEF continues to support health authorities with the management of cholera in Quelimane District. As a result of UNICEF's support, the district observed a significant reduction in admissions; 23 in August against 171 in July. UNICEF delivered four AWD kits for the treatment of 400 people, 500 surgical masks, 300 medical gloves, and 200 soap bars to provincial health authorities. In addition, the UNICEF team conducted supervisory and technical support visits to Morrumbala District to ensure quality implementation of Cyclone Gombe and Tropical Storm Ana responses.

## Nutrition

Following increased attacks in UNICEF-supported sites of Ancuabe and Chiure, monthly mobile brigades were expanded in IDP sites, reaching around 9,925 children under five with nutrition screenings, identifying 287 children for severe acute malnutrition (SAM) for treatment, supplementation with vitamin A for 3,428 children aged 6 to 59 months and deworming of 2,020 children aged 12 to 59 months in seven districts in Cabo Delgado. Similarly, the community management of acute malnutrition pilot programme, providing a reduced dosage of ready-to-use therapeutic food (RUTF), named TDC, resulted in the screening of 1,226 children for acute malnutrition, of whom 21 were treated for SAM and 14 were treated for moderate acute malnutrition (MAM). The main results of the TDC pilot will be assessed in September to inform the expected scale-up as part of the 2023 Humanitarian Response Plan.



Seven districts of Cabo Delgado received UNICEF nutrition supplies including RUTF, F-75 and F-100 therapeutic milks, ReSoMal and anthropometric equipment which will support the treatment of acute malnutrition at the facility and community levels, and the treatment of an estimated 40 SAM cases with complications and 375 SAM cases with no complications in a one-month period. Moreover, UNICEF in partnership with Action Contre la Faim (ACF) reached conflict-affected children and caregivers in Muidumbe, Nangade and Mueda districts, with 7,206 under five children screened for acute malnutrition, and 4,411 caretakers of children 6-59 months receiving health and nutrition education sessions. Inpatient and outpatient SAM treatment services resumed in Quissanga sede and Nacoba health centre with UNICEF support, treating 30 children with SAM and eight with SAM with complications in the inpatient care. Through the partnership with Helipo, IDPs from Ancuabe benefited from lifesaving nutrition care, with a total of 3,614 children under five were screened for malnutrition, with 23 treated for SAM in Chiure and Mecufi districts.

## Child Protection

In Cabo Delgado, UNICEF and the government's social welfare department have completed the construction of three multipurpose centres (MPCs)—two in Ancuabe and one in Metuge. MPCs provide a space for adolescents and young caregivers and provide structured activities to support building resilience and providing a space for healing.

UNICEF and partners have seen an increase in the identification of unaccompanied and separated children (UASC) which is linked to the increased number of attacks and corresponding population movements. This month 128 UASC (72 girls) were identified and supported with tracing and reunification services. Forty-one per cent of the children have been reunified with family members through a tracing network, and there have been cases of community reunification for other children which have been verified. The remaining 59 per cent of UASC are being supported by informal foster carers. Increased training for foster families is required to ensure the correct support for UASC which includes cases of children who





have been associated with armed groups and who are in need of specific additional support. UNICEF will support the Child Protection Area of Responsibility (CPAoR) to run a workshop on alternative care services in October while will engender a standardized package of care for these families and children.

In response to the prevention of the six grave violations of child rights, UNICEF with the Ministry of Defence (MoD) and the Dallaire Institute conducted a training of Child Protection Focal Points from the Mozambican Defence Forces (14 female). These focal points will be part of a larger Child Protection Unit that the MoD is building with support from UNICEF and the Dallaire Institute. The Unit will be responsible to support a system of preventing, monitoring and responding to violations of children's rights when encountered—including children associated with armed groups. In the training, UNICEF and the Dallaire Institute presented comprehensive modules on the non-occupation of schools, conflict-related sexual violence, prevention of recruitment and rescue and release of children from armed forces which links to the handover of these children to civilian services.

## Education

UNICEF established five additional temporary learning spaces (TLS) in Quissanga District, Cabo Delgado. These schools provide safe learning opportunities for 500 children (300 girls) for families returning to the district after years of displacement. In late August, classes on Matemo island resumed after a five-month disruption of classes following attacks on the island by NSAG. Schools on the island are also still under rehabilitation from damage due to Cyclone Kenneth in 2019, and one school has been occupied by the military since the March attacks. UNICEF also provided learner's kits to children in Cabo Delgado including 2,917 (1,750 girls) in Balama, 2,810 (1,686 girls) in Montepuez and 2,810 (1,686 girls) in Namuno Districts. Approximately 200 out-of-school adolescents and young adults from four settlement sites in Metuge district are engaging in a non-formal education initiative—funded by UNICEF—that will help them develop competencies in numeracy, literacy, life skills, and vocational activities.

The International Network on Education in Emergencies materials for the Teaching in Crisis Contexts (TiCC) training have been translated and contextualized. This, and the completion of the training of master trainers, will allow the rollout of training for 500 teachers most affected by the conflict. The overall initiative on TiCC is a result of a joint effort of different members of the Education Cluster in Cabo Delgado.

In Nampula, UNICEF and partner Plan International, completed the distribution of learner's kits for 5,220 girls and 4,317 boys, in the cyclone-affected communities of Mucupassa, Imputo Velho, Mulapane, and Eduardo Mondlane. Construction of 15 TLS with gender-sensitive sanitation facilities are being finalized in Meconta District and will benefit both IDPs and host communities.

## WASH

As part of the cholera response in Zambezia Province UNICEF is working with the Red Cross of Mozambique to provide messaging and hygiene items to households in affected areas, reaching 6,500 people in August. Emergency activities are ongoing for relocation and new displacements in Cabo Delgado and Nampula, including dispatching supplies for emergency latrines for 10,000 individuals. UNICEF is also launching a borehole campaign for 70 new water points for locations in Cabo Delgado serving IDPs and host communities.

## Social Protection and Cash-Based Programming

As part of the government's response to the economic impact of COVID-19, UNICEF continues to provide unconditional cash transfers to poor and vulnerable households to help increase food security and build resilience to shocks. To date, 59,033 households have received mobile money payments of 9,000 meticals (approximately \$163) with UNICEF support. In August, 5,533 households received payments in Quelimane City and Quelimane District, including households on longe and Idugo Islands, where people are recovering from COVID-19 and Cyclone Gombé.

## Protection from Sexual Exploitation and Abuse (PSEA)

Aiming at strengthening the PSEA community-based complaint mechanisms, 85 implementing partners' frontline workers from 16 civil society organizations (CSO) in Nampula, Sofala, and Zambézia received training on PSEA, including basic concepts, expected conducted from humanitarian and affiliated staff, prohibited behaviours, how to receive a complaint and how to refer survivors to assistance aligned with the UN Victims' Assistance Protocol. In preparation for the social protection cash-based programming, technicians from the Instituto Nacional de Ação Social in Maputo and Nampula were trained on how to incorporate mitigation measures during registration and distribution activities through community awareness, personnel training, development of reporting mechanisms, and use of the UNICEF Checklist of Safe Distributions and Registrations. Additionally, 24 government and 49 CSO partner staff in Cabo Delgado received a session on PSEA basic concepts and reporting.

## Social and Behaviour Change (SBC) and Accountability to Affected Populations

In response to the latest cholera outbreak in Quelimane district, Zambezia, UNICEF supported the dissemination of key awareness-raising messages through community theatre performances implemented by Grupo de Teatro Retratista, as well as mobile brigades and multimedia mobile units, in partnership with Instituto de Comunicação Social (ICS). A total of 10,182 people were reached by these activities during the reporting period.

In Sofala, the focus was on reinforcing the capacity of health committees on routine supplementation and polio vaccination. In the provinces of Cabo Delgado and Nampula, UNICEF continued to facilitate the dissemination of life-saving messages to IDPs and host communities via social mobilization activities.



## Humanitarian Leadership, Coordination, and Strategy

UNICEF leads the WASH, Education in Emergencies, and Nutrition Clusters, and the Child Protection Area of Responsibility (CPAoR) at both national and sub-national levels. UNICEF continues to support the government with WASH Cluster coordination in multiple provinces and at the national level. Planning for the Humanitarian Needs Overview and Humanitarian Response Plan (HRP) has begun with a Multi-Sectoral Needs Assessment (MSNA) designed to determine the nature and scale of the crisis in the northern provinces through the collection of primary data which will support evidence-based planning and decision-making during the HRP process.

The nutrition cluster, which is co-led by the Ministry of Health, held coordination meetings and the nutrition partner's forum in August with updates on the humanitarian response. In 2022, the nutrition cluster partners have reached 48 per cent of people targeted, with \$9.7 million mobilized out of the \$19.4 million requested in the 2022 Humanitarian Response Plan (HRP). Education Cluster meetings in August prioritized the response to news displacements triggered by violence in Ancuabe (Cabo Delgado) and Erati (Nampula) Districts. The Education Cluster in Mozambique is discussing ways to get additional support from the Global Education Cluster for capacity building and advocacy.

WASH Cluster meetings continue at the sub-national level on a biweekly basis and monthly at the district level in Cabo Delgado. To date in 2022, 31 per cent of people in need targeted by the cluster were reached with WASH humanitarian support, with \$6.4 million mobilized out of the \$28.5M required. The CPAoR with Protection and GBV clusters conducted intention surveys in Nanona, Ancuabe to ensure the views of IDPs are considered in relocation processes to ensure all movements are conducted in a safe and dignified manner. The CPAoR participated in a protection deep dive with the HCT, discussing priority needs, gaps, and support required by the HCT, including capacity building on family tracing and reunification, reintegration of children associated with armed forces and armed groups (CAAFAG), and support for the HCT protection strategy. The CPAoR will be focusing on the next steps in the CAAFAG toolkit pilot, an alternative care workshop, and building a monthly situational analysis as part of a global pilot on CP information management.

## Human Interest Stories and External Media

- [Cash Transfer Facebook Post](#)
- [Malaria Prevention Tweet](#)
- [Training of Ministry of Defense on Child Rights](#)
- [Education in Nampula and Cabo Delgado Press Release](#)

Next SitRep: 20 October 2022

UNICEF Mozambique Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/mozambique>  
UNICEF Mozambique: <https://www.unicef.org/mozambique/>

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## Annex A: Summary of Programme Results: Northern Mozambique 2022

		UNICEF and IPs Response			Cluster/sector Response		
Sector/Indicator	Total needs	2022 target	Total results	+/- since last report (Aug)	2022 target	Total results	+/- since last report (Aug)
Health							
# children under 15 years receiving measles rubella vaccine	596,000	156,300	1,707	-			
# children under 5 years received mosquito nets	225,150	130,900	26,518	6,868			
# of sick children under 5 provided with consultations	112,560	96,400	40,641	7,313			
# children and women accessing UNICEF-supported primary health care	405,750	318,500	168,679	-			
Nutrition							
# of primary caregivers of children 0-23 months reached with IYCF messages	169,274	61,533	33,298	2,119	147,174	69,496	6,920
# of children 6-59 months receiving routine vitamin A supplementation	522,272	271,478	154,874	5,100	396,875	164,739	7,930
# of children 6-59 months screened for acute malnutrition (MUAC)	522,272	432,170	164,472	5,635	522,826	183,887	14,482
# of children 6-59 months admitted for treatment of SAM	27,266	27,400	8,115	656	27,456	8,115	656
Child Protection							
# of girls & boys in humanitarian contexts who have received case mgmt	15,000	11,886	19,115	989	15,000	26,060	1,431
# of people provided with community-based MHPSS	776,811	99,855	71,189	7,418	315,000	80,224	7,482
# of women/girls/boys accessing GBV risk prev/resp interventions		96,855	38,658	5,569		39,302	5,569
# of children/adults w/access to safe/accessible channels for SEA		96,855	17,305	-		17,375	53
Education							
# of children with access to safe/clean TLS, learning materials, personal hygiene and MHM kits.	382,404	172,969	190,052	18,574	340,387	197,582	18,574
# of children accessing formal or non-formal education, incl. early learning	382,404	172,969	91,889	-	340,387	114,031	-
# children/adolescents accessing skills development programmes		2,500	200	-		315	-
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	735,000	649,225	225,935	-	700,000	255,355	3,920
# of people using safe and appropriate sanitation facilities	1,000,000	649,225	67,435	2,000	700,000	105,120	16,775
# of people reached with hand-washing behaviour-change progs	1,000,000	927,464	287,515	2,300	1,000,000	442,375	49,120
# of people reached with critical WASH supplies	703,000	649,225	123,660	13,720	700,000	206,110	33,445
Social Protection							
# households reached with unconditional cash transfers		51,000	0	-			
C4D/Accountability mechanisms							
# of people reached with SBCC	970,000	420,000	765,862	508,421			
# of people receiving information on PSEA and response	970,000	336,000	659,000	-			
# of adol/young people participating in SBC engagement actions	186,000	15,000	19,366	-			
# of people with access to estab. accountability mechanisms	500,000	480,000	-	-			

Annex B: Summary of Programme Results: **Mozambique 2022**

		UNICEF and IPs Response			Cluster/sector Response		
Sector/Indicator	Total needs	2022 target	Total results	Change since last report	2022 target	Total results	Change since last report
Health							
# children under 15 years receiving measles rubella vaccine	596,000	178,900	1,726	-			
# children under 5 years received mosquito nets	225,150	150,000	27,068	6,868			
# of sick children under 5 provided with consultations	112,560	110,500	41,105	7,313			
# children and women accessing primary health care in UNICEF-supported facilities	405,750	365,000	240,969	-			
Nutrition							
# of primary caregivers of children 0-23 months reached with messages on IYCF	157,842	79,000	36,409	2,119	147,174	71,389	6,920
# of children 6-59 months receiving routine vitamin A supplementation	545,085	283,160	172,319	6,856	545,085	180,984	9,686
# of children 6-59 months screened for acute malnutrition (MUAC)	545,085	443,850	185,034	9,899	545,085	202,401	16,698
# of children 6-59 months admitted for treatment of SAM	69,762	34,880	13,034	1,179	34,880	13,034	1,179
Child Protection							
# of UNICEF girls and boys in humanitarian contexts who have received individual case management	15,000	12,592	19,115	989	15,000	26,060	1,431
# of UNICEF children, adolescents, parents and caregivers provided with community based MHPSS	776,811	105,613	71,189	7,418	440,190	83,385	7,482
# of women, girls and boys accessing GBV risk mitigation, prevention or response interventions		102,600	38,658	5,569		39,302	5,569
# of children & adults with access to safe and accessible channels to report SEA		102,610	17,305	-		17,375	53
Education							
# of children with access to safe/clean TLS, schools, basic learning materials, personal hygiene and MHM kits.	521,740	262,740	196,281	18,574	340,387	277,123	32,017
# of children accessing formal or non-formal education, including early learning <sup>4</sup>	521,740	262,740	101,580	-	340,387	110,176	-
# of out of school youth trained in practical skills through non-formal and formal professional training		2,500	200	-		315	-
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	950,000	700,000	278,320	1,885	850,000	297,355	6,755
# of people using safe and appropriate sanitation facilities	1,000,000	700,000	83,525	7,820	900,000	152,730	38,965
# of people reached with hand-washing behaviour-change programmes	1,260,000	1,000,000	381,330	38,800	1,100,000	533,610	74,270
# of people reached with critical WASH supplies	860,000	700,000	192,400	69,650	850,000	296,765	103,745
Social Protection							
# households reached with unconditional cash transfers		63,000	59,033	5,553			
C4D/Accountability mechanisms							
# of people reached with SBCC	970,000	467,000	806,431	537,443			
# of people receiving information on PSEA and response	970,000	373,600	988,000	-			
# of adolescents and young people participating in SBC engagement actions	186,000	39,000	19,366	-			
# of people with access to established accountability mechanisms	500,000	500,000	-	-			

## Annex C: Funding Status

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	7,327,163	4,555,623	1,334,072	1,437,468	20%
Nutrition	7,771,410	2,147,982	1,031,304	4,592,124	59%
Child Protection	19,061,650	2,292,996	1,181,915	15,586,739	82%
Education	16,593,907	1,498,821	488,848	14,606,238	88%
WASH	30,952,152	4,103,880	7,773,634	19,074,638	62%
Social Protection	13,065,862	0	1,781,797	11,284,065	86%
Social Behaviour Change, AAP	3,979,800	481,357	403,141	3,095,302	78%
Programme/Operational Effectiveness		1,115,607			
<b>Total</b>	<b>98,751,944</b>	<b>16,196,266</b>	<b>13,994,711</b>	<b>69,676,572</b>	<b>69%</b>