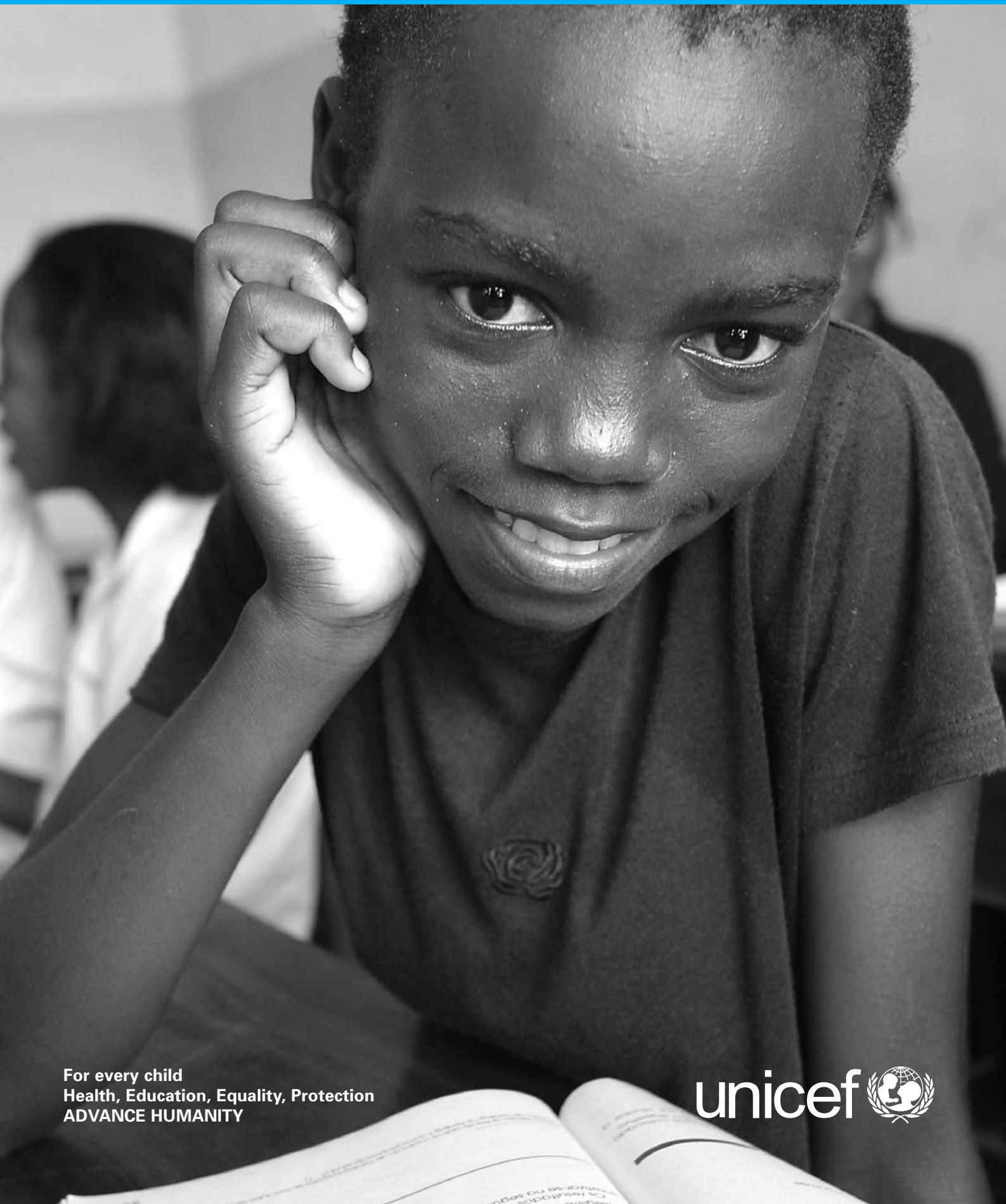


CONSOLIDATED DONOR REPORT 2005

MOZAMBIQUE



For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY



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February 2006

UNICEF MOZAMBIQUE
1440, Ave do Zimbabwe
P.O. Box 4713
Maputo, Mozambique

Telephone: (258) 21 481-100
Email: maputo@unicef.org
Web: www.unicef.org/mozambique

CONSOLIDATED DONOR REPORT 2005

MOZAMBIQUE

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FOREWORD

The year 2005 marked the fourth year of the 2002-2006 Country Programme of Cooperation in Mozambique, during which the Government of Mozambique, UNICEF and partners continued to work in support of the Millennium Development Goals (MDGs) and the three Country Programme priorities of Child Survival and Development, Girls' Education and HIV/AIDS.

This consolidated donor report outlines the main achievements of the Country Programme in 2005, which included the immunisation of over 8.1 million children against measles as part of a nation-wide immunisation campaign, the provision of life skills education to 160,000 children and young people through the scaling up of HIV prevention activities in schools and the provision of access to safe water for 93,000 people, corresponding to an annual contribution of 13 per cent towards attainment of MDG 7 by 2015. In addition, support to the development of the country's second Poverty Reduction Strategy (PARPA II) resulted in the development of a national child-friendly strategic framework for the period 2006 to 2009.

The year 2005 also saw the development of the new United Nations Development Assistance Framework (UNDAF), as well as the Government of Mozambique / UNICEF Country Programme of Cooperation for the period 2007 to 2009, which will continue to support national efforts to reduce absolute poverty and will be fully aligned with the PARPA II. Particular focus under the new Country Programme will be placed on accelerating activities to support children infected or affected by HIV/AIDS, and on the piloting of integrated initiatives on child-friendly schools and support to orphaned and vulnerable children, aimed at providing sustainable models for national scale-up.

I hope you will find this report useful and relevant. I would like to take the opportunity to thank you for your generous support and look forward to our continued close collaboration in 2006.

Sincerely,

Leila Gharagozloo-Pakkala
UNICEF Representative

THE YEAR IN REVIEW

In recent years, Mozambique has **made great strides** towards the realisation of children's and women's rights. The country made considerable progress between 1997 and 2003 against a number of indicators of child well-being. The under-five mortality rate decreased by about 18 per cent, from 219 to 178 per 1,000 live births, the infant mortality rate dropped by 15 per cent, from 147 to 124 per 1,000 live births, and the maternal mortality ratio was reduced to 408 per 100,000 live births. Major progress was also made in 2005 in increasing measles immunisation coverage, with over 94 per cent coverage achieved among children aged between nine months and 14 years through a nation-wide immunisation campaign. The most recent School Survey also indicated that access to education increased significantly over the last year, with net enrolment ratio (NER) in lower primary level education (EP1) rising from 76 per cent in 2004 to 83 per cent in 2005.

These development gains, however, continue to be undermined by high levels of poverty and the **triple threat of HIV/AIDS, food insecurity and weakened capacity**. Fifty-four per cent of the population lives below the **poverty** line, and glaring disparities exist in terms of gender, area of residence (urban/rural), province and household well-being level. Furthermore, the 2002-2003 *Household Income and Expenditure Survey* indicated that children were more affected by poverty than adults (58 per cent and 49 per cent were living below the poverty line, respectively). In spite of strong economic growth averaging 7.7 per cent, Mozambique remains one of the poorest countries in the world, ranking 168 out of 177 in the 2005 Human Development Index, with a gross national income in 2004 of US\$250 per capita - less than half that of the average for Sub-Saharan Africa. Dependence on external aid therefore continues to be high, accounting for almost half (47 per cent) of the total resources and 13.6 per cent of the gross domestic product in 2005.

The **AIDS** pandemic is eroding the economic and social progress achieved over the past decade and is rapidly emerging as a major cause of child mortality. The 2005 HIV epidemiological surveillance report showed that seroprevalence among 15-49 year olds had increased from

2002-2006 COUNTRY PROGRAMME

Goals

- Improve maternal health and reduce maternal mortality
- Reduce infant, young child and maternal malnutrition
- Prevent HIV infections and care for those infected and affected
- Strengthen capacities to respect, protect and fulfil children's right to education and expand their opportunities to ensure they reach their full potential
- Provide children with the skills, knowledge and confidence to make informed life choices and to fully participate in Mozambique's development
- Strengthen the capacities of families, communities and government institutions to reduce vulnerability and ensure that children at risk have access to protection and care
- Avert widespread humanitarian crises through improved preparedness and ability to respond rapidly

13.6 per cent in 2002 to 16.2 per cent in 2004, with the highest rates in the central and southern regions of the country, particularly in the province of Sofala, where prevalence was 26.5 per cent. Among adolescents, gender disparity continued, with an estimated three times as many girls as boys aged 15 to 19 living with HIV/AIDS in 2005. Last year, it was also estimated that 91,000 children under the age of 15 were living with HIV/AIDS, and over 80 per cent of these were below the age of five. There were about 1.6 million orphans in Mozambique in 2005, of which over 20 per cent were directly due to AIDS.

The protracted **drought** in the country continues to be a threat to the survival and healthy development of children. The multi-sectoral assessments conducted by the Vulnerability Assessment Committee in May and October 2005 found a total of 801,653 people (4.4 percent of the population) in a situation of immediate food and nutritional insecurity, with the highest proportions in the provinces of Tete and Gaza. A *Nutrition Survey* conducted in October 2005 indicated pockets of high malnutrition among children, particularly in Zambezia province, with a wasting prevalence of seven per cent among children aged 6-59 months. The lack of safe water, due to a shortage of rain, the drying up of water sources and the breakdown of water facilities, was identified as a critical issue, which was reflected in high levels of cholera in the most drought-affected districts of Zambezia and Sofala.

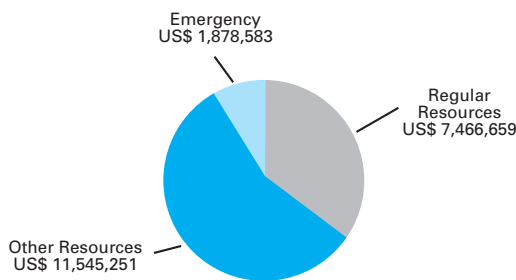
A number of positive developments took place in 2005 towards the establishment of an **enabling national policy and legislative framework** to prioritise child development concerns. The elaboration of the country's second Poverty Reduction Strategy, known as the *National Action Plan for the Reduction of Absolute Poverty (PARPA II)*, was developed through a participatory process, resulting in a child-friendly document that set several targets to reach the Millennium Development Goals. The year 2005 also brought the finalisation of a *National Action Plan for Support to Orphaned and Vulnerable Children (2005-2007)*, the adoption of a *National Action Plan for Disabled People (2005-2010)*, progress towards the adoption of a *Statute on Children in Conflict with the Law*, and the drafting of a comprehensive *Children's Act*. These instruments will address some of the legislative gaps in

terms of child rights identified in a comprehensive review of legislation supported by UNICEF. Comprehensive revisions of a number of sectoral plans were also undertaken in 2005, including the *Health Sector Strategic Plan* and the *National Water Policy*, both of which placed increased emphasis on the reduction of disparity in terms of access to basic services.

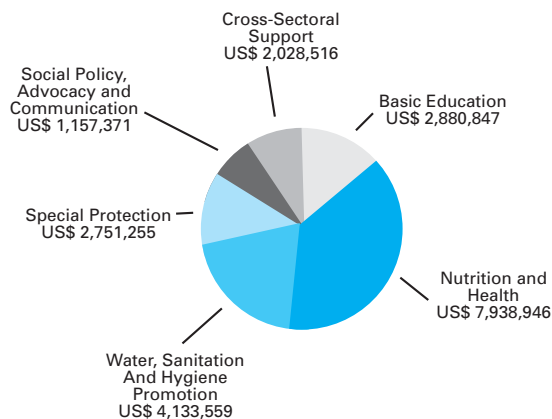
In addition, the Government of Mozambique, with the support of UN partners, produced its second **MDG Progress Report** which provides a realistic assessment of the situation in the country. The report indicated that, unless development efforts were significantly accelerated, only five of the 18 MDG targets would be achieved by 2015 – those related to halving extreme poverty, reducing under-five mortality, reducing maternal mortality, halving malaria and other diseases and developing an open, non-discriminatory trading and financial system. The process of developing the country's second periodic report to the **Committee on the Rights of the Child** began in 2005, and is scheduled for completion in June 2006.

PROGRAMME FUNDING IN 2005

Programme funds utilised by source US\$ 20,890,493



Resources utilised by programmes US\$ 20,890,493



PRIORITIES IN 2005

The priorities and strategies that guided UNICEF interventions remained consistent with those of previous years. Efforts of all programme sections – Basic Education; Nutrition and Health; Water, Sanitation and Hygiene Promotion; Special Protection; and Social Policy, Advocacy and Communication – were geared towards the achievement of three overarching priorities, which were identified at the beginning of the Country Programme.

- 1. Child Survival and Development** to give young children the best possible start in life
- 2. Girls' Education**, in order to strengthen girls' roles in society and to lay the ground for improving the quality of life of their future families
- 3. The Fight against HIV/AIDS**, which is the single largest threat to the survival and development of children and women in the country

BASIC EDUCATION

The Basic Education programme aims at supporting and strengthening national capacities to ensure universal access to quality primary education, with an emphasis on the reduction of gender disparities in enrolment, retention and school performance. It also works to equip adolescents with life skills so that they can make informed and healthy choices regarding their sexuality and reproductive life, including HIV prevention. The Programme has three projects: Policy and Planning, Access to Quality Basic Education, and Life Skills Education for children and young people.

Key Results in 2005

- Improved learning environment for 210,000 children
- 3,064 teachers improved their participatory and child-centred teaching techniques
- 4,541 School Council members increased their management skills and became more sensitive towards gender issues
- 161,724 adolescents (45 per cent girls) and 12,269 teachers enhanced their knowledge on HIV/AIDS and life skills
- The national education policy framework reflects education and gender MDGs

ACHIEVEMENTS

Policy and Planning

UNICEF actively participated in the development of the second *National Action Plan for the Reduction of Absolute Poverty* (PARPA II) and *Education Sector Strategic Plan II* (ESSP II) to ensure that they both reflect education and gender MDGs, Education for All and *World Fit for Children* goals. The *Barriers to Girls' Education* study was completed and disseminated to partners and its recommendations were included in the ESSP II. UNICEF provided technical assistance to the Ministry of Education and Culture, Ministry of Women and Social Action, and the World Bank to develop a pilot project to support orphaned and vulnerable children (OVC) under the Direct Support to Schools programme.

Access to Quality Basic Education

Support was provided to the training of directors and deputy directors, teachers and members of the School Councils, leading to an improved learning environment for 210,000 children. More than 4,500 School Council members benefited from the 'School Council Organisation and Functioning' training, which also included gender sensitisation and HIV/AIDS information. The 'Child Centered and Participative Teaching-learning Methods' training improved the teaching techniques of more than 3,000 teachers, and 742 school directors and

deputy directors enhanced their management skills through 'Participative School Organisation and Management' training. This led to wider participation of learners, parents and community members in decision-making processes. In addition, the Ministry of Education and Culture's *School Council Manual* was finalised in 2005 and more than 21,000 copies will be distributed in 2006 to reinforce the skills acquired during the training.

Life Skills Education

The Life Skills programme, comprising the 'My Future is My Choice' project implemented by the Ministry of Youth and Sports, the Scouts and the Youth Association Acoord, oriented to provide life skills education to adolescents and young people out of school, and the 'School Awareness Programme' implemented in primary schools by People Living with HIV/AIDS (PLWHA) Associations in eight provinces, increased the knowledge of over 161,000 adolescents (45 per cent girls) regarding HIV/AIDS and equipped them with the necessary information to make healthy choices regarding their sexual and reproductive health.

In addition, 366 teacher trainees (192 men and 174 women) in two teacher training institutions in Zambezia, gained adequate knowledge to tackle HIV/AIDS issues using the 'Stepping Stones' methodology, which enables trainees to reflect on their own attitudes and behaviour and reduce their vulnerability and that of their partners. Support was provided to the National Teachers' Union to train 197 activists in the provinces of Manica, Inhambane, Gaza, Maputo, Nampula, Cabo Delgado and Niassa, which resulted in 12,269 teachers with increased knowledge on HIV/AIDS prevention and teachers' rights in relation to HIV/AIDS.

LIFE SKILLS

UNICEF supports the promotion of an integrated response to the HIV/AIDS epidemic, involving young people as crucial actors in the area of prevention. As the most sexually active reproductive group, young people have a key role to play in preventing new infections.

Under the Life Skills programme, UNICEF supports the Ministry of Youth and Sports and civil society organisations, such as PLWHA Associations and youth groups, to convey HIV/AIDS prevention information to, and build the skills of, both in and out-of-school youth. The programme has succeeded in reaching over 161,000 young people with correct messages and information about HIV prevention.

The results show that the young people who participated in the programme increased their knowledge on HIV prevention and contributed to breaking the stigma and discrimination surrounding HIV/AIDS. In an effort to harmonise support to prevention activities, all UN agencies will support the development of a comprehensive HIV/AIDS prevention strategy in 2006. UNICEF will take the lead on HIV/AIDS prevention for children (10-14 years old) in schools.

SCHOOLS FOR AFRICA

The 'Schools for Africa' programme provides a multi-sectoral, coordinated approach to achieve good quality basic education. The aim of the programme is to build, rehabilitate and equip schools and provide students with basic health screening and hygiene education. The programme also ensures that the skills of the teachers, directors and School Council members are enhanced to create a learner centered, gender responsive teaching and learning environment. The focus is on providing a basic quality education to the poorest, most vulnerable children, with special emphasis on girls and orphans, especially those made vulnerable by HIV/AIDS. The programme will be implemented in Maganja da Costa district, in Zambezia province.

All programme sectors in UNICEF will work in support of the government counterparts to implement the programme. The Ministry of Education considers this initiative ground-breaking, with immediate and long-lasting benefits for children. Expectations are high for the impact the initiative can have in contributing to the expansion and improvement of education services in Mozambique.

The 'Schools for Africa' campaign was launched by Nelson Mandela, UNICEF and the Hamburg Society for the Promotion of Democracy in 2004 in six African countries: Angola, Malawi, Mozambique, Rwanda, South Africa and Zimbabwe.

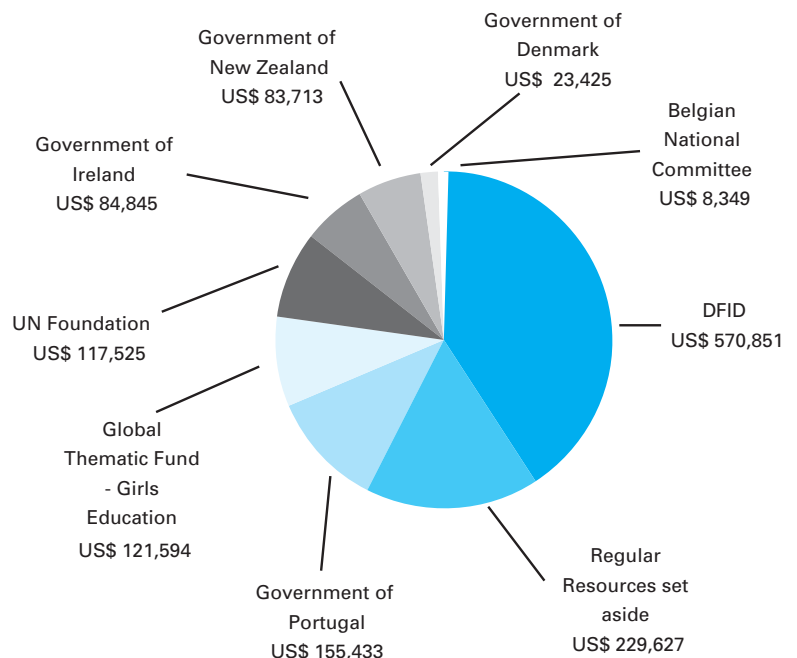
FUNDING FOR THE BASIC EDUCATION PROGRAMME IN 2005

Breakdown of funds by source, 2005

Regular Resources	US\$ 1,485,485
Other Resources	US\$ 1,303,300
Other Resources - Emergency	US\$ 92,062
Total Amount Utilised	US\$ 2,880,847

Breakdown of funds by donor:

Other Resources (including Emergency)





THE WAY FORWARD

In 2006, the Basic Education programme will continue to support the implementation of two major pilot initiatives, both intended to provide evidence-based sustainable models for scaling up nationally. The first is the 'Schools for Africa' initiative which will pilot a multi-sectoral integrated package of support to schools in seven districts aiming to improve the quality of the learning environment and teaching-learning processes, providing materials and raising the learning outcomes for children in targeted schools. The second is a pilot project developed by the Ministry of Education and Culture, the Ministry of Women and Social Action, the Ministry of Justice and the World Bank to test the most effective and sustainable approach to increasing enrolment and retention among children, particularly orphaned and vulnerable children.

In addition, UNICEF will continue its active participation in Sector Wide Approach processes, focusing on quality basic education, HIV/AIDS prevention for children in partnership with UNESCO, UNFPA and UNAIDS and the education of orphaned and vulnerable children, gender issues, girls' education, civil society participation in ESSPs, advocacy (particularly on girls' education) and highlighting well documented, field-based lessons learned in SWAp fora.

NUTRITION AND HEALTH

The overall objective of the Nutrition and Health programme is to promote sustainable improvements in the nutrition, health and well-being of children, adolescents and women through increased coverage and quality of essential health services as well as the promotion of positive practices for better nutrition and health. The Programme has three projects: Health Policy and Systems Development; Young Child Nutrition, Health and Development; and Adolescent and Women's Health.

Key Results in 2005

- 8.1 million children were immunised against measles
- 4.3 million children were vaccinated against polio
- 3.4 million children received vitamin A supplements
- 400,000 children under five in the provinces of Manica and Sofala received Long Lasting Insecticide Nets (LLIN)
- 135,600 insecticide-treated nets distributed in 48 districts
- 26,423 young people attended clinical consultations at Youth Friendly Health Services
- 55,069 pregnant women received counseling at Prevention of Mother-to-Child Transmission centres
- 2,240 HIV-positive mothers and 2,371 HIV exposed children received prophylaxis with Nevirapine

ACHIEVEMENTS

Health Policy and Systems Development

The UN coordination in the health sector was improved through the implementation of the UN Reform agenda and the harmonisation of the technical contributions of the UN family to the Health SWAp and the agreement on a UN common position on four key themes: child health, sexual and reproductive health, nutrition and malaria. UNICEF supported the development of *PARPA II* and the *National Health Policy*, ensuring that both are child-friendly. It also provided support in the preparation of the *Annual Operational Health Plan 2006* and the 2005 joint-review of the sector.

Following many years of advocacy and technical support, the Mozambican *Code of Marketing of Breastmilk Substitutes* was approved by the Ministry of Health and the Ministry of Industry and Commerce. An updated policy on *Infant and Young Child Feeding* in the context of HIV/AIDS was also finalised in 2005.

The Ministry of Health accelerated efforts for the treatment of children living with HIV/AIDS, which led to the nomination of a National Coordinator for paediatric treatment, the creation of a Paediatric Treatment Working Group, the inclusion of paediatric anti-retroviral treatment in the Ministry's procurement plan and the initiation of the process of developing a detailed scale-up plan.

Young Child Nutrition, Health and Development

With support from the World Health Organisation and UNICEF, the Ministry of Health implemented a nation-wide immunisation campaign which reached over 8.1 million children with measles vaccines, 4.4 million with polio vaccines and 3.4 million with vitamin A supplements. The campaign achieved over 94 per cent national measles immunisation coverage among children aged 9 months to 14 years old. UNICEF also provided technical support to the Canadian Red Cross to plan and distribute Long Lasting Insecticide Nets (LLIN) to 400,000 children under five in the provinces of Manica and Sofala. In addition, 135,600 insecticide-treated nets (ITN) were distributed in 48 districts. With ITNs distributed in previous years, ITN coverage reached 59 per cent among the target population in these 48 districts.

With UNICEF assistance, the Ministry of Health trained 600 health workers in 10 provinces on the updated protocol for treatment of severe malnutrition and provided anthropometric equipment, supplies and PlumpyNut. Eighty-six salt producers were trained on salt production and iodisation to ensure further compliance with the iodised salt legislation.

Adolescent and Women's Health

UNICEF provided support to 30 Prevention of Mother-to-Child Transmission (PMTCT) sites, leading to HIV counselling for more than 55,000 pregnant women, of whom 62 per cent accepted to be tested and 21 per cent were found to be HIV-positive. The opening of seven new Youth Friendly Health Services (YFHS), brought the total number of sites supported by UNICEF throughout the country to 40, which provided 98,147 peer counselling sessions in 2005 (54 per cent of the users of this service were young girls/women).

NATION-WIDE IMMUNISATION CAMPAIGN

President Armando Guebuza of Mozambique launched a nation-wide immunisation campaign in 2005. Thousands of activists throughout the country were mobilised to make sure that every child, particularly those in the most remote areas, would be reached by the vaccination teams. The campaign was organised in three rounds covering the north, the centre and the south of the country. Around 8.1 million children were immunised against measles, more than 4,300,000 children under five were vaccinated against polio, and vitamin A supplements were provided to over 3,400,000 children between 6 and 59 months. The country-wide vaccination campaign successfully ended on 14 October 2005 in the southern provinces of the country.

The commitment and the participation of a wide range of partners, including Government, UN agencies and civil society organisations, teachers, community and religious leaders, political parties and thousands of young people and children contributed to the success of the campaign. Private sector companies provided transport and storage facilities.

The total cost of the campaign amounted to US\$ 8.5 million. UNICEF provided measles vaccines and diluents, Vitamin A, auto-disable syringes, cold boxes for transportation and storage, vaccine carriers and other materials such as safety boxes for disposal of injection material.

Malaria Prevention

As part of the nation-wide immunisation campaign, UNICEF provided technical support to the Canadian Red Cross to distribute long lasting insecticide nets (LLIN) to 400,000 children under five in the provinces of Manica and Sofala.

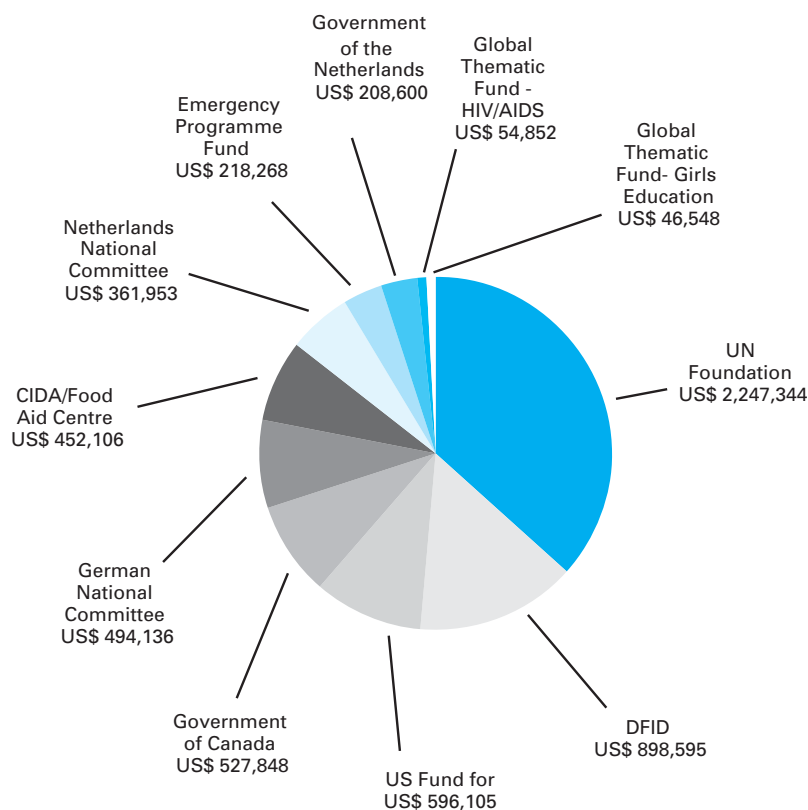
Long-lasting insecticidal nets have been developed in response to the low re-treatment rates of conventional insecticide-treated nets, especially in Africa. A long-lasting net is a ready-to-use, pre-treated mosquito net, which requires no further treatment during its expected life span. This is the preferred choice of mosquito net for UNICEF-supported programmes and the long lasting insecticide net is seen as offering African countries the best chance in malaria prevention.

FUNDING FOR THE NUTRITION AND HEALTH PROGRAMME IN 2005

Breakdown of funds by source, 2005

Regular Resources	US\$ 1,831,661
Other Resources	US\$ 5,065,769
Other Resources - Emergency	US\$ 1,041,516
Total Amount Utilised	US\$ 7,938,946

Breakdown of funds by donor: Other Resources (including Emergency)



THE WAY FORWARD

At the policy level, UNICEF will support the development and dissemination of six policies and two strategies related to children's, adolescents' and women's health and nutrition as well as a comprehensive child health policy and will continue to participate actively in Health SWAp processes and related fora.

In 2006, together with WHO, UNICEF will provide technical assistance to the Ministry of Health to carry out two rounds of supplementary immunisation against maternal and neo-natal tetanus for more than 1,000,000 women of child-bearing age in 15 high-risk districts, in five provinces; increase Vitamin A supplementation coverage from 30 per cent to 50 per cent; and distribute an additional 250,000 ITN or LLIN to children under five and pregnant women.

Care, treatment and nutrition services for children living with HIV/AIDS will be strengthened and expanded in the existing 23 supported sites, and expanded to an additional eight sites as part of the national paediatric treatment scale-up plan.

UNICEF will continue to provide technical support to improve the quality of PMTCT and YFHS services and will expand voluntary counselling and testing from eight to twelve sites.

In the context of emergency response, UNICEF and WFP will support supplementary feeding interventions in the areas most affected by the chronic drought.

Code of Marketing of Breast Milk Substitutes

The Code of Marketing of Breast Milk Substitutes came into law in November 2005. The Code, jointly approved by the Ministers of Health and Industry and Commerce, is a result of many years of advocacy efforts which included UNICEF support to the Government in drafting the document. In order to effectively protect and promote breastfeeding, the new code regulates essential aspects regarding the marketing of breast milk substitutes and strongly recommends that they only be used when absolutely necessary.

Breast milk alone is the ideal nourishment for infants during the first six months of life as it contains all the nutrients, antibodies, hormones, immune factors and antioxidants an infant needs to thrive. It protects babies from diarrhoea and acute respiratory infections and stimulates their immune systems.

The risk of mother-to-child transmission of HIV/AIDS through breastfeeding is a major challenge in countries like Mozambique, with high HIV/AIDS prevalence rates. However, once accompanied by the provision of necessary testing and counselling, the promotion of exclusive breastfeeding during the first six months of life is crucial for the healthy growth and development of infants.

WATER, SANITATION AND HYGIENE PROMOTION

Key Results in 2005

- 93,000 people gained access to safe drinking water and 38,000 people gained access to adequate household sanitation facilities in rural and peri-urban areas of Zambezia, Gaza, Maputo and Sofala
- 27,000 primary school children gained access to child-friendly sanitation and hygiene facilities
- 177 new water points provide access to safe drinking water
- A holistic New National Water Policy was prepared addressing sanitation, HIV/AIDS, hygiene and sustainability issues

The objectives of the Water, Sanitation and Hygiene Promotion programme are to reduce morbidity and mortality due to diseases associated with inadequate water supply and sanitation and poor hygiene practices as well as to promote girls' education by reducing the time and energy spent by girls and women in activities related to water collection. The Programme has three projects: Policy and Integrated Planning, Access to Rural Water, Sanitation and Hygiene Promotion, and Access to Urban and Peri-Urban Water, Sanitation and Hygiene Promotion.

ACHIEVEMENTS

Policy and Integrated Planning

The National Water Directorate, Provincial Directorates for Public Works and Housing and Municipal Councils were supported to create an enabling policy environment for the water sector. UNICEF helped to strengthen national policies and strategic planning through the development of numerous policies and documents, such as the review of the *National Water Policy*, the *Strategic Plan for Water and Sanitation*, the *Procurement Guidelines and Contract Standards*, the first draft of the *Zambezia Rural Water and Sanitation Master Plan*, and through the training of 53 provincial, municipal and NGO staff (water and sanitation, health, and education) in monitoring and evaluation and the Human Rights-Based Approach to Programming.

Access to Rural, Peri-urban and Urban Water, Sanitation and Hygiene Promotion

WaterAid, AMURT and other partners constructed 177 new water points and rehabilitated bore holes and wells with hand pumps ensuring access to safe drinking water for 15,000 school children. The installation of child-friendly facilities (separate latrines, hand washing stands and urinals) in 34 primary schools improved sanitation facilities for 12,000 school children. The promotion of self-help construction of household latrines in over 150 communities provided adequate sanitation facilities for 6,297 households with 38,000 people. The establishment of 19 sanitation clubs with

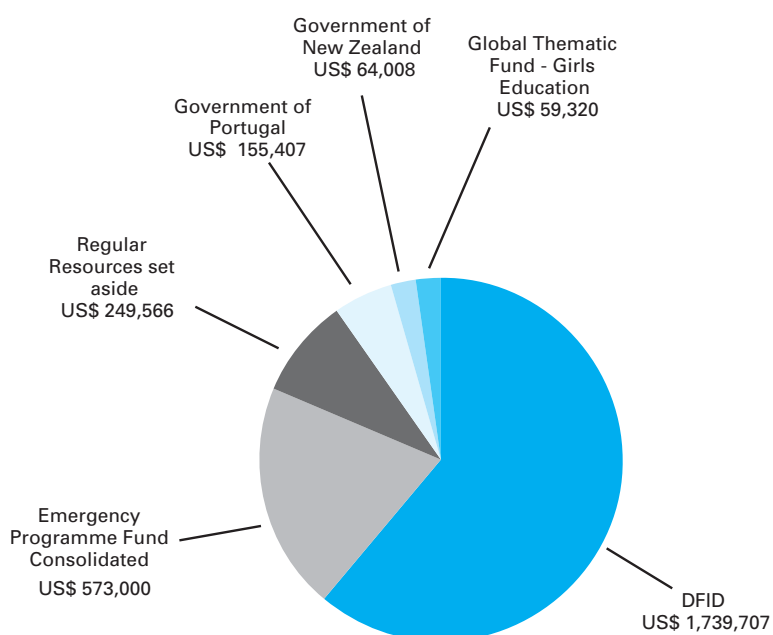
the direct involvement of 285 school children and the training of 244 community activists resulted in better hygiene behaviour in schools and in communities.

FUNDING FOR WATER, SANITATION AND HYGIENE PROMOTION IN 2005

Breakdown of funds by source, 2005

Regular Resources	US\$ 1,292,551
Other Resources	US\$ 2,204,000
Other Resources - Emergency	US\$ 637,008
Total Amount Utilised	US\$ 4,133,559

Breakdown of funds by donor: Other Resources (including Emergency)



Zambezia Rural Water and Sanitation Project

The Zambezia Rural Water and Sanitation project, funded by the UK Department for International Development (DFID) and implemented with UNICEF support, aims at strengthening the capacity in Zambezia province to plan and deliver an equitable and sustainable rural water, sanitation and hygiene programme to enhance the well-being of the population. The project has a decentralised implementation approach and involves communities in the planning and implementation process in line with the National Water Policy guidelines. During 2005, Lugela and Inhassunge districts saw a significant increase in drinking water coverage and reached the target set by the MDG of halving the number of people without access to safe drinking water. These results show that with a coherent investment framework using decentralised planning and implementation, combined with capacity development, it is possible to attain the MDG target 7 for Zambezia province by 2015. The development and testing of the Provincial Master Plan for rural water and sanitation will complement this ongoing strategic approach and efforts will be taken to replicate this project in other provinces.

Child-to-Child Sanitation Committees

In collaboration with local partners, UNICEF supports child-centered hygiene education programmes in schools through establishing Child-to-Child Sanitation Committees. Since 2002, Sanitation Committees have been introduced in 285 schools. The programme aims to develop life skills and raise demands for safe water and adequate sanitation facilities. Students are both beneficiaries and agents of behavioural change with their families and communities.

An evaluation of the programme in 2004 indicated that Child-to-Child Sanitation Committees are one of the most effective interventions to promote hygiene behaviour, not only among children but in entire communities. In order to further improve, standardise and scale up this initiative, a country-wide study led by the Ministry of Public Works and Housing and supported by UNICEF was carried out in 2005. The finalisation of the study is currently underway, and the sector expects that it will bring renewed attention to school sanitation and hygiene education initiatives.

THE WAY FORWARD

In 2006, UNICEF and partners such as WaterAid, AMURT, Care and Save the Children Fund will support the National Water Directorate, the Provincial Directorates for Public Works and Housing and the Municipal Councils to construct 110 new water points and ensure the completion of 140 water points currently under construction, improving access to safe drinking water for 125,000 people. In collaboration with partners, the construction of water and sanitation facilities in 25 health centres and 158 schools reaching 55,300 school children will also be supported.

At the policy level, UNICEF will assist in the finalisation of the *Zambezia Rural Water Supply and Sanitation Master Plan*, with a focus on sustainability and institutional development at the district and municipal levels, and will support the strengthening of monitoring and evaluation systems.

In order to respond effectively to possible emergencies, the programme will continue to mitigate the impact of the drought and cholera outbreaks and support coordination and implementation efforts at national and provincial levels in critical areas such as Maputo, Gaza, Inhambane, Manica, Sofala, Tete and Zambezia.



SPECIAL PROTECTION

The Special Protection programme aims to strengthen the capacities of duty bearers and rights holders to ensure the protection and care of vulnerable children. At national level, it aims to create a protective environment through policy, legal and regulatory frameworks. At sub-national level, it seeks to strengthen the capacities of the Government, civil society organisations and communities to find local solutions for the care and protection of orphaned and vulnerable children (OVC). The Programme has two projects: Legal Reform and Policy Development, and Capacity Development for the Protection and Care of OVC.

Key Results in 2005

- 67,000 orphaned and vulnerable children were supported to gain access to social services
- 165,000 children received birth certificates
- 84 centres of victim assistance registered 20,000 cases, of which 5,900 were supported with restorative services such as medical help, placement in transit centres and counselling
- A comprehensive *Children's Act* in line with the Convention of the Rights of the Child was finalised
- Strengthened partnerships with umbrella organisations, such as Help-Age, Douleur sans Frontieres, HIV Alliance and RenSIDA to better protect orphaned and vulnerable children and ensure their access to basic social services, and fight stigma and discrimination surrounding HIV/AIDS

ACHIEVEMENTS

Legal Reform and Policy Development

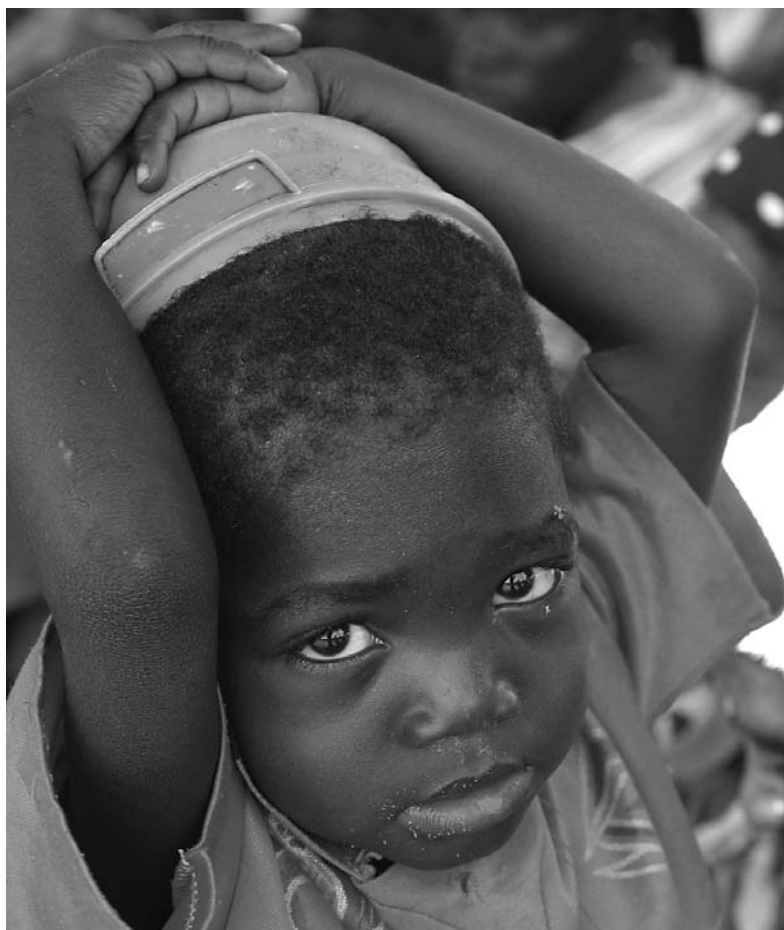
With UNICEF support, the Ministry of Women and Social Action (MMAS) further established an enabling policy and legal environment through the drafting and approval of key documents and strengthening of essential coordination mechanisms. A draft comprehensive *Children's Act* and an *HIV/AIDS Plan* specifically tailored to the social protection sector were developed. MMAS led the efforts to create improved coordination mechanisms at the national and provincial levels, and with the participation of bi-laterals and key line Ministries ensured that key issues for the protection of children were integrated into the PARPA II.

Capacity Development for the Protection and Care of OVC

Multi-sectoral co-ordination bodies on OVC were established in all 11 provincial capitals. UNICEF was instrumental in supporting MMAS to successfully leverage US\$2.5 million for implementing the OVC National Plan of Action. MMAS and the Ministry of Education and Culture were also supported in developing a model, under the 'Direct Support to Schools' programme (ADE), which aims to demonstrate the added value of providing additional elements of support, such as birth registration, psycho-social and material support as part of the ADE package. The

Ministry of Justice, in collaboration with the Government of the Netherlands, developed a sustainable model to register children at birth. The model draws on mobile brigades, registration agents from various social sectors and community-based groups.

UNICEF provided support to MMAS and non-governmental organisations to provide basic services, including health, education, psycho-social support, water and sanitation, nutritional support, legal protection and financial subsidies for 67,000 orphaned and vulnerable children. UNICEF also supported the Ministry of Interior to run 84 centres in all provinces providing assistance to victims of violence and abuse. The centres registered 20,000 cases, of which 5,900 were supported further through referrals to medical facilities, placement in transit shelters and the provision of counselling. In collaboration with the World Food Programme, a joint project to prevent sexual exploitation began the training of 11 theatre groups and 6 focal points from 6 provinces for broad community sensitisation.



Living Together

Through UNICEF's technical and financial support, Help Age International is implementing the 'Living Together' programme in 52 communities in 4 districts in Tete province and 8 communities in 1 district in Gaza province. The purpose of the project is to reduce the impact of HIV/AIDS on children and their caretakers – especially in the case of orphans cared for by elderly people – by raising the awareness of communities on HIV/AIDS and strengthening community, family and individual coping mechanisms.

This integrated approach addresses the educational and health needs of orphaned and vulnerable children. It also provides economic resources to care takers and it builds relationships across communities with similar problems for information sharing.

The 'Living Together' programme is an initiative that can be further strengthened, scaled up and replicated in other parts of Mozambique. It utilises the existing community structures and supports communities in finding their own solutions to the problems they face. Furthermore, it helps vulnerable groups to become a vital and valuable part of their communities.

Colegio Infantil

UNICEF supports Colegio Infantil to protect abused or abandoned children until they are reunited with their families or placed in the care of foster families. The shelter cares for around 140 children from birth to two years of age.

Support is provided to all key activities undertaken by the centre, including the reintegration of children with their families; providing food, clothes, school materials; disseminating essential information on nutrition, prevention of malaria and HIV/AIDS to families; and capacity building for the staff at the centre to better address the needs of these vulnerable children.

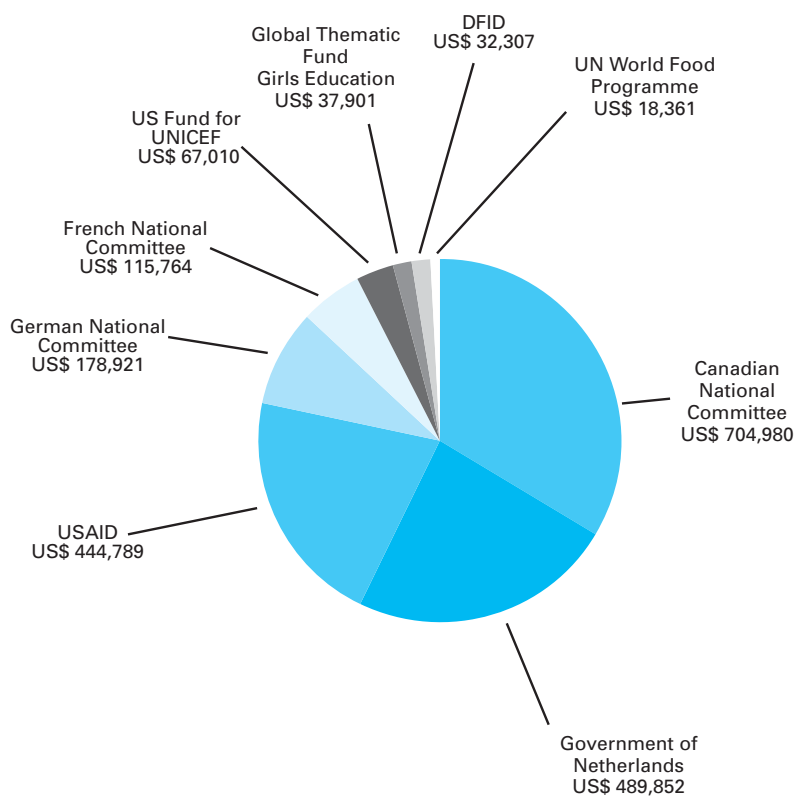
In addition, technical support is provided to guide programme interventions and to ensure the appropriate use of resources through regular monitoring and mentoring visits to the centre.

FUNDING FOR THE SPECIAL PROTECTION PROGRAMME IN 2005

Breakdown of funds by source, 2005

Regular Resources	US\$ 661,437
Other Resources	US\$ 2,057,447
Other Resources - Emergency	US\$ 32,371
Total Amount Utilised	US\$ 2,751,255

Breakdown of funds by donor: Other Resources (including Emergency)





THE WAY FORWARD

In 2006, UNICEF will continue to support the strengthening of institutional capacity of key line ministries, particularly at the sub-national levels. It will provide additional support to implement the *National Plan of Action on Birth Registration* in order to reach 1,200,000 children with birth registration. It will also test a model for the registration of children at birth which will be taken to scale in subsequent years.

The operationalisation of the *National Action Plan on Orphans and Vulnerable Children (OVC)* in the provinces of Zambezia, Sofala, Tete, Manica, Nampula and Gaza, will be accelerated in order to ensure that at least 60,000 additional OVC have access to and make use of at least three basic services. UNICEF will provide technical support to MMAS through the OVC Technical Working Group for the implementation of an Integrated Care and Support package for OVC in Tete and Sofala, which aims to standardise home visits to vulnerable families and strengthen linkages with Home-Based Care programmes. Judicial and public service institutions, as well as community based structures, will be reinforced for the protection and care of women and children from abuse, violence and exploitation.

SOCIAL POLICY, ADVOCACY AND COMMUNICATION

Key Results in 2005

- A child friendly Poverty Reduction Strategy was developed
- Over 150 provincial staff of line Ministries across nine provinces received training in the use of the national Demographic and Socio-Economic Database, which includes key indicators to monitor progress against national and international development goals (PARPA, PEN II, MDG, UNGASS HIV/AIDS)
- Over 260,000 people across 30 districts in three provinces were reached by the mobile unit community social mobilisation activities, providing education on life skills, HIV/AIDS and sexual and reproductive health
- Over 7,000 children participated in child-to-child media programmes, with 252 children/adolescents participating as producers and presenters in radio and TV programmes
- A nationwide social mobilisation campaign was instrumental in the success of the national immunisation campaign

The Social Policy, Advocacy and Communication programme supports the Country Programme to ensure that national development policies reflect child rights; to improve the availability, quality and use of data on children for effective planning and monitoring; and to empower young people to make informed decisions and claim their rights. The Programme has three projects: Social Policy and Advocacy, Monitoring and Evaluation and Programme Communication.

ACHIEVEMENTS

Social Policy and Advocacy

UNICEF inputs to the Poverty Reduction Strategy (PARPA II) development process and active participation of the Programme in various PARPA Working Groups contributed to the development of a child-friendly Poverty Reduction Strategy. Support was also provided to ensure the participation of young people in four provincial Poverty Observatories, which met to consolidate provincial inputs to the PARPA document.

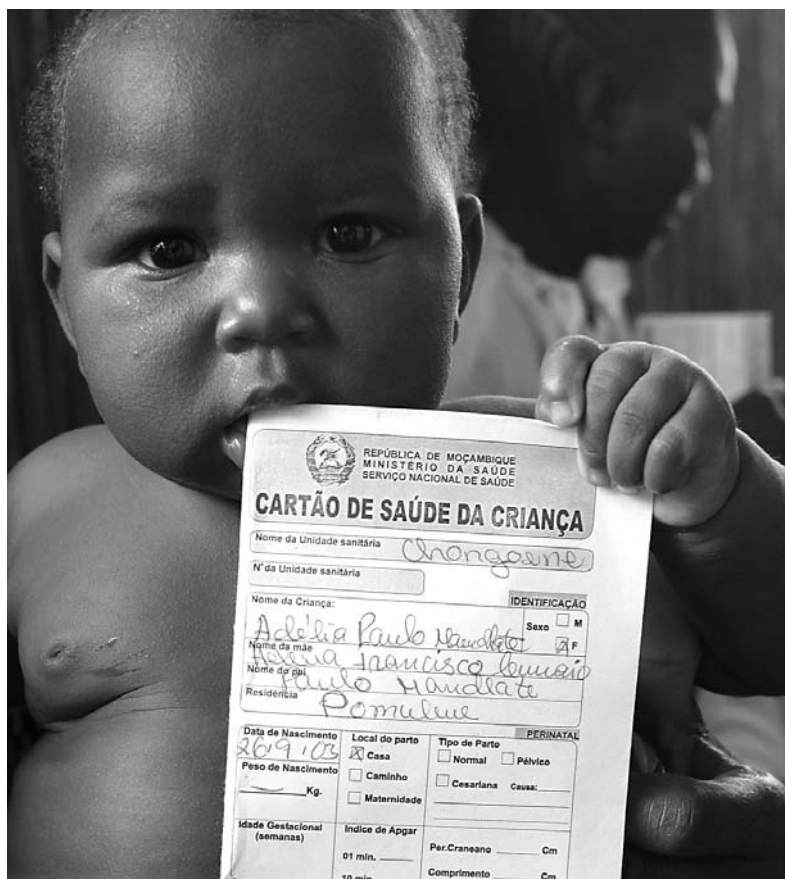
Monitoring and Evaluation

UNICEF provided technical support to the National Institute of Statistics (INE) to improve the availability of strategic information for planning and monitoring. More than 150 provincial staff members of line Ministries in nine provinces were trained in the use of the national Demographic and Socio-Economic Database (ESDEM) to monitor and update key socio-economic indicators. The INE received further support to produce three Geographical Atlases mapping social service infrastructure and population density in all districts in three provinces, and to begin the cartography exercise in preparation for the 2007 population census. In order to monitor the implementation of the National Strategic Plan to Combat HIV/AIDS, UNICEF provided technical and financial assistance to the National AIDS Council and National Institute of Statistics for greater availability of baseline data.

Programme Communication

The development and implementation of a comprehensive communication and social mobilisation strategy, together with the Ministry of Health and WHO, achieved massive response from communities to the national immunisation campaign. Support to the campaign included the production and broadcasting of nine television and radio spots in Portuguese and local languages; the implementation of children's sports festivals in all provinces; and the production and distribution of materials for the campaign which included 9 million vaccination cards, 50,000 posters, 57,000 leaflets and 19,000 brochures for teachers, health workers and the media as well as 49,000 T-shirts.

Children and communities were empowered to mitigate the impact of HIV/AIDS through community mobilisation activities, 261 theatre sessions and nationwide child-to-child radio programmes. An estimated 280,000 people were reached by these activities and over 7,000 children actively participated in child-to-child media programmes.



Child-to-Child Radio

Child-to-child radio programmes represent the voice of Mozambican children in the local media. The radio programmes provide young people with the opportunity to confront issues as varied as HIV/AIDS, gender inequality, child rights, girls' education, violence, abuse and exploitation. As young people and children develop, produce and present these programmes on the air, they are learning critical thinking skills and increasing their self confidence while informing an audience of several hundred thousand other children about issues that affect them.

UNICEF has been supporting child-to-child radio programmes through a partnership with Radio Mozambique since 2000. Twenty four radio programmes are broadcast in 16 national languages and Portuguese in all 11 provinces throughout the country and involve more than 200 children and young people. A similar child-to-child initiative, also funded by UNICEF, was developed in partnership with the Mozambican Television.

Unite for Children. Unite against AIDS

Unite for Children. Unite against AIDS is a five-year campaign aimed at putting children at the centre of the national response to HIV/AIDS. The campaign is an urgent call for action to raise awareness about the devastating impact of the pandemic on children and to scale up all prevention, treatment, care and support programmes for children. The campaign focuses on four key result areas known as the 'Four Ps': Prevention of new infections among young people, Prevention of mother-to-child transmission, Paediatric treatment of AIDS and Protection of orphaned and vulnerable children.

Partnerships are the foundation of the campaign. The campaign was launched by the First Lady of Mozambique, Maria da Luz Dai Guebuza, who is the patroness of the campaign calling upon every part of the Mozambican society to join in order to meet the challenge posed by the AIDS pandemic, including government institutions, the UN system, non-governmental organisations, community groups, educational institutions, the business sector, the media, religious leaders and young people themselves.

In 2005, campaign activities included a series of paintings visualising the impact of HIV/AIDS produced by the young students of the School of Visual Art under the guidance of the great Mozambican artist Malangatana. Another activity

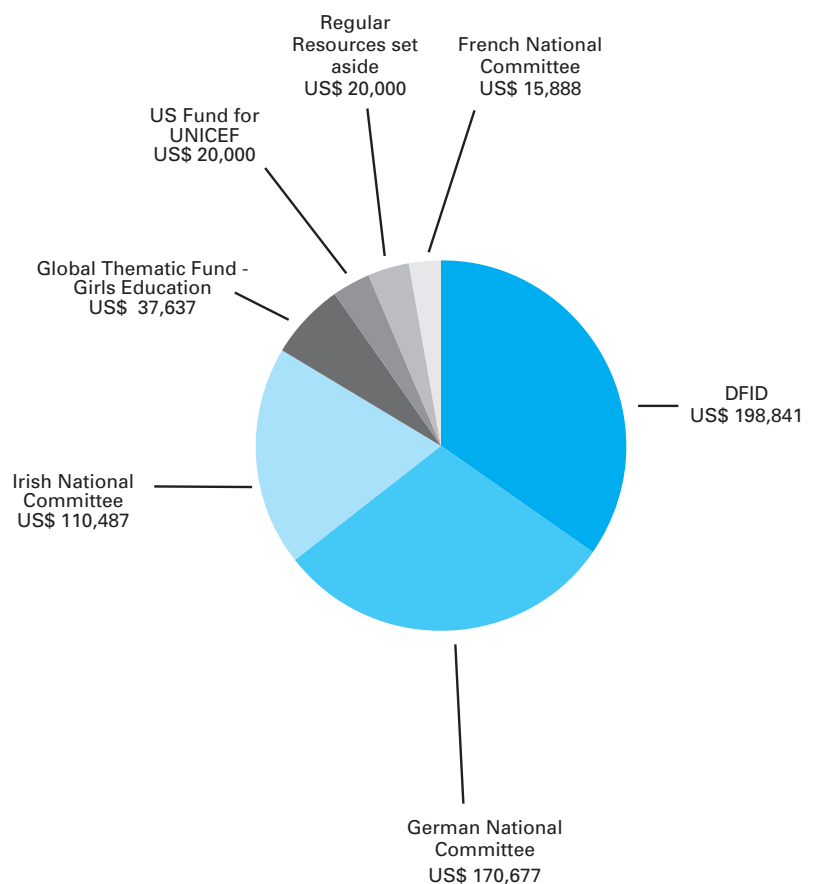
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FUNDING FOR THE SOCIAL POLICY, ADVOCACY AND COMMUNICATION PROGRAMME IN 2005

Breakdown of funds by source, 2005

Regular Resources	US\$ 583,840
Other Resources	US\$ 505,704
Other Resources - Emergency	US\$ 67,826
Total Amount Utilised	US\$ 1,157,370

Breakdown of funds by donor: Other Resources (including Emergency)



THE WAY FORWARD

In 2006, the programme will support The Ministry for Women and Social Action (MMAS) to finalise the second Country Report on the implementation of the Convention of the Rights of the Child. As part of the 'Unite for Children. Unite against AIDS' campaign launched in 2005, MMAS, European Parliamentarians for Africa and the National Assembly will be provided technical assistance to host a conference for parliamentarians from Lusophone countries to discuss the role of parliamentarians in accelerating the response to OVC. Support will be provided to the National Institute of Statistics to produce and disseminate the updated version of ESDEM (v.04), a national Child Labour Survey and a report on gender disparities in Mozambique. With UNICEF technical assistance, the Ministry of Planning and Development will finalise and disseminate the *Situation Analysis of Children* and gradually address its key findings in national and provincial instruments.

Continued assistance will be provided to the National AIDS Council Secretariat to monitor the national response to the AIDS pandemic and implement the national Communication Strategy on HIV/AIDS. The programme will support the development and implementation of national communication strategies on basic education, birth registration, sexual exploitation, malaria prevention, and the expanded programme on immunisation. Further, it will coordinate the implementation of the 'Unite for Children. Unite against AIDS' campaign and continue to expand the community communication channels such as the multimedia mobile units, community theatre and community radio activities. Youth Associations will be supported in order to increase their involvement in HIV/AIDS prevention programmes and their participation in decision-making fora.

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developed for the campaign was a musical called "Window of Hope", which was prepared by the National Dance and Song Company with the support of UNICEF, National AIDS Council and active participation of children from Arco Iris, a local support group. The musical includes messages for both young people and adults, with the aim of raising awareness of the impact of HIV/AIDS on children, in addition to disseminating prevention messages.

Unite for Children. Unite against AIDS is part of a global campaign which was launched at the United Nations in New York on 25 October 2005 with Secretary-General Kofi Annan, UNICEF Executive Director Ann M. Veneman and UNAIDS Executive Director Peter Piot. It is the largest campaign ever mounted to bring the world's attention to the global impact of HIV/AIDS on children and young people.

EMERGENCIES

Key Results in 2005

- 81,000 people reached with safe water in Maputo, Gaza, Inhambane, Manica, Sofala, Zambézia and Tete provinces through 162 new water points in drought/cholera affected areas
- 658 families gained access to adequate household latrines and 36,720 school children (108 schools) gained access to latrines and safe sanitation in Maputo and Quelimane municipalities and Gaza province
- The Ministry of Health supported to recruit forty additional health staff at cholera treatment centres (CTCs) to strengthen the capacity for the prevention and treatment of cholera in areas with frequent outbreaks such as Zambezia and Sofala
- Improved data on food and nutrition insecurity, through financial and technical support to multi-sectoral vulnerability assessments and nutrition survey in drought-affected areas
- Emergency supplies pre-positioned in strategic locations establishing standing capacity within UNICEF to respond to the immediate relief needs of up to 10,000 people at any time

Due to its geographic location, Mozambique is particularly vulnerable to climatic hazards, most notably floods, droughts and cyclones. The successive years of poor rains have led to protracted drought in the southern regions of the country. Children face high and rising malnutrition rates in the arid, not easily accessible and poorly serviced areas affected by the drought. The situation is exacerbated by increasing HIV/AIDS prevalence and limited capacity to provide urgent relief to communities threatened by disrupted water supplies and disease. Increasing cholera cases have been recorded as a result of lack of water, poor hygiene and poor sanitation facilities.

ACHIEVEMENTS

UNICEF strengthened its emergency preparedness and planning mechanisms to ensure that the organisation is able to respond to the immediate relief needs of up to 10,000 people at any time, including its emergency contingency plan focusing on cholera outbreaks, drought and flooding. In order to improve data on food and nutrition insecurity, financial and technical support was provided to the Technical Secretariat for Food Security and Nutrition and the Ministry of Health to conduct multi-sectoral vulnerability assessments and a nutrition survey in drought-affected areas.

Support was also provided to provincial health directorates to strengthen their capacity to prevent and treat cholera through the recruitment of forty additional staff, the procurement of 110 tents for cholera treatment centres in Zambezia and Sofala, and the procurement of emergency water, sanitation and hygiene supplies to mitigate cholera outbreaks. UNICEF assisted the Ministry of Health to develop a social mobilisation campaign and communication plan for cholera prevention. Access to safe water and sanitation in drought and cholera affected areas was increased through the rehabilitation of 145 and ongoing construction of 17 water points reaching 81,000 people in Maputo, Gaza, Inhambane, Manica, Sofala, Zambezia and Tete provinces. The construction of 658 family latrines and 108 school latrines was also supported, reaching 36,720 school children in Maputo and

Quelimane municipalities and Gaza province as well as the ongoing trucking of water reaching 50,000 people in the most affected communities in Maputo, Gaza, Inhambane, Tete and Nampula provinces.

FUNDING FOR THE EMERGENCY PREPAREDNESS AND RESPONSE PROGRAMME IN 2005

Despite fundraising efforts, the UN was unsuccessful in raising the additional resources needed to bring life-saving support to communities and families in greatest need. In the absence of sufficient emergency funding, UNICEF re-programmed over US\$1.5 million of its programme funds for drought mitigation activities in affected districts, including the provision of safe water and a targeted integrated health and nutrition programme. In addition, UNICEF requested an urgent advance of US\$ 800,000 Emergency Programme Funds from Headquarters, which it received in November 2005.

THE WAY FORWARD

In 2006, a targeted and integrated nutrition and health programme will be initiated by the Ministry of Health, with support from UNICEF, WFP and local NGOs in order to screen and treat up to 10,000 malnourished children in 18 drought-affected districts in the provinces of Tete, Manica, Sofala, Gaza and Maputo.

In close collaboration with WHO, UNICEF will continue to work with the Ministry of Health to monitor the availability of oral-rehydration salts (ORS) and to support the provision and pre-positioning of ORS, other equipment and drugs to respond to cholera outbreaks. The comprehensive malaria prevention programme will continue with the subsidized sale of ITNs to vulnerable groups.

UNICEF will continue to support the provision of safe water supply and sanitation facilities to communities, primary schools and health centres in drought-affected areas. Institutional support for proper storage and

management of emergency supplies will be also pursued, in addition to strengthening community capacities to maintain their water points and support long-term sustainability through training of Community Water Management Committees and School Management Committees. Participatory hygiene promotion campaigns will be expanded to promote safe hygiene practices and reduce the incidence of diarrhoeal diseases.

2007-2009 COUNTRY PROGRAMME

In 2005, the Government of Mozambique and UNICEF began the process of developing a new Country Programme, which will cover a three-year period from 2007 to 2009. The Country Programme, developed in consultation with children, civil society, donors and other development partners, will contribute directly to the priorities outlined in the country's second national Poverty Reduction Strategy (PARPA II), the new United Nations Development Assistance Framework (UNDAF), the Millennium Development Goals and the new UNICEF Medium Term Strategic Plan (2006-2009).

Under the new Country Programme, UNICEF will build upon the strengths of the current Country Programme to support national efforts in the priority areas of Young Child Survival and Development, Basic Education and HIV/AIDS. Two other areas, Child Protection from Violence, Exploitation and Abuse and Policy Advocacy and Partnerships for Children's Rights, will also form the core of the new Country Programme. Particular focus will be given to accelerating activities to support children infected or affected by HIV/AIDS, and also to the piloting of integrated initiatives on child-friendly schools and support to orphaned and vulnerable children, aimed at providing sustainable models for national scale-up. The new Country Programme will be implemented by government line ministries at the national and sub-national levels, in partnership with multi-lateral and bi-lateral partners, NGOs and communities, in order to reduce existing disparities and ensure that the most vulnerable and marginalised children are reached.



Table 1: Progress made by Mozambique towards the Millennium Development Goals, 1997 to 2003

SELECTED INDICATORS	1997						2003			2015	
	Total	Urban	Rural	Men	Women	Total	Urban	Rural	Men	Women	Target
MDG Target Indicator											
1. Population living below the national poverty line (%)	63.4	62.0	71.3	-	-	54.1	51.5	55.3	-	-	44.0
2. Underweight children (under-five, %)	36.0 ^a	14.8 ^a	30.7 ^a	28.5 ^a	25.6 ^a	23.7 ^a	15.2	27.1	24.7	22.6	17.0
3. Primary completion rate (%)	22.0	n/a	n/a	n/a	n/a	36.7	n/a	n/a	n/a	35.4	100.0
4. Ratio of girls to boys in EPI	0.71	n/a	n/a	-	-	0.82	n/a	n/a	-	-	1.00
5. Under-five mortality rate (per 1,000 live births)	219	150	237	224	212	176	143	192	181	176	106
6. Maternal mortality rate (per 100,000 live births)	1,000 ^b	n/a	n/a	-	-	406	n/a	n/a	-	-	350
7. HIV/AIDS prevalence among adults (15-49 year olds, %)	8.2 ^c	n/a	n/a	n/a	n/a	16.2 ^c	n/a	n/a	n/a	n/a	n/a
8. Prevalence and death rates associated with malaria (%)	7.0 ^d	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	3.6
9. Land area covered by forest (%)	21.0 ^e	n/a	n/a	-	-	n/a	n/a	n/a	-	-	n/a
10. Population with access to an improved water source (%)	37.1 ^f	66.8 ^f	26.1 ^f	-	-	35.7	57.7	26.4	-	-	70.0
11. Household with access to secure tenure (%)	n/a	n/a	n/a	-	-	n/a	n/a	n/a	-	-	n/a
Other Indicators											
Population size (million)	16.1	4.6	11.5	7.7	8.4	16.6	5.6	12.9	8.9	9.6	-
GDP per capita (USD)	217	-	-	-	-	262	-	-	-	-	-
Gini coefficient (income inequality)	0.40	n/a	n/a	-	-	0.42	n/a	n/a	-	-	-
Life expectancy at birth (average years)	42.3	48.8	40.2	40.6	44.0	46.3	50.1	44.9	44.4	48.2	-
Adult literacy (15 years and above, %)	33.6	67.0	27.8	55.4	25.9	46.4	69.7	34.3	63.3	51.2	n/a
Net enrolment rate in EPI (%)	44.0	n/a	n/a	49.0	39.0	63.4	n/a	n/a	72.4	66.4	100.0
Children immunized against measles (1 year old, %)	57.6	83.0	47.1	57.8	57.1	76.1	90.8	70.8	77.4	76.0	36.0
Population with access to improved sanitation (%)	41.1 ^g	74.7 ^g	26.7 ^g	-	-	44.6	71.7	33.4	-	-	60.0
Births attended by skilled health personnel (%)	44.2	81.4	33.9	-	-	47.7	80.7	34.2	-	-	n/a

(a) data for 2001; (b) estimate for early 1990s; (c) data for 1998; (d) data for 2004; (e) data for 2004; (f) not available and (g) not applicable

Table 2: Distribution of Resources utilised by donor and programme component, 2005

Donor	Contribution
Regular Resources	7,466,659.00
Department for International Development (United Kingdom)	3,519,894.82
UN Foundation	2,496,355.44
German National Committee	863,081.85
Emergency Programme Fund Consolidated	799,068.27
Canadian National Committee	768,522.45
US Fund for UNICEF	746,220.15
Government of The Netherlands	714,914.28
Government of Canada	533,152.04
Regular Resources set aside	499,193.55
Canadian International Development Agency / Food Aid Centre	452,106.47
United States Agency for International Development	444,789.20
Netherlands National Committee	361,953.29
Global Thematic Fund - Girls' Education	321,577.71
Government of Portugal	310,839.91
Government of New Zealand	147,720.20
French National Committee	137,088.55
Irish National Committee	116,662.31
Government of Ireland	84,844.77
Global Thematic Fund - HIV/AIDS	54,852.32
Government of Denmark	23,425.10
UN World Food Programme	18,360.71
Belgian National Committee	8,349.00
Total	20,889,631.39

LIST OF ACRONYMS

ADE	Direct Support to Schools Programme
AIDS	acquired immune deficiency syndrome
ARV	anti-retroviral treatment
CP	Country Programme
CRC	Convention on the Rights of the Child
EP1	primary education lower level (grades 1-5)
EPI	expanded programme on immunisation
ESDEM	Demographic and Socio-Economic Database (Mozambican adaptation of DevInfo)
ESSP	Education Sector Strategy Plan
HIV/AIDS	human immune-deficiency virus/acquired immune deficiency syndrome
INE	National Institute of Statistics
ITNs	insecticide-treated nets
MEC	Ministry of Education and Culture
MDGs	Millennium Development Goals
MJD	Ministry of Youth and Sports
MMAS	Ministry for Women and Social Action
MoH	Ministry of Health
NER	net enrolment ratio
NGO	non-governmental organisation
ORS	oral-rehydration salt
OVC	orphaned and vulnerable children
PARPA	Absolute Poverty Reduction Action Plan
PEN II	National Strategic Plan to Combat HIV/AIDS
PLWHA	People Living With HIV or AIDS
PMTCT	prevention of mother-to-child transmission
SWAp	sector wide approach to programming
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session
WB	World Bank
WFP	World Food Programme
WHO	World Health Organisation
WSHP	water, sanitation and hygiene promotion
YFHS	Youth Friendly Health Services

**Photography and design:
Giacomo Pirozzi**

