Situation Overview

Since the confirmation of the first case of COVID-19 in Mozambique (22 March 2020), the country has 472 confirmed cases as of 11 June 2020. This represents an increase in cases of about 51% since the last report and according to Ministry of Health (MoH). Since the onset of the outbreak in March 2020, the country recorded the highest number of tests performed in the month of May 2020. It is important to note that 47% of cases (07 June) are asymptomatic and 43% presents light symptoms. As of 10 June, MoH reported that three out of 331 current active cases are hospitalized with the remaining in home isolation.

On 6 June 2020, the Minister of Health declared Nampula province as the 1st geographical location with community transmission of COVID-19 due to rapid spread of the disease and the epidemiological profile of the cases. The other geographical location reporting significant rise in cases is Maputo city and province with total of 128 cases now confirmed. The MoH will establish testing capacity of COVID-19 in Nampula province which is expected to commence on 25 June. The MoH is particularly concerned with Nampula province due to quick rise of confirmed cases, high positivity rates in people tested (8 times higher the national average) and high transmission intensity that can result in severe cases and deaths.

Key Facts and Actions

- Approximately 47% of confirmed COVID-19 cases are asymptomatic and 43% have light symptoms.
- Nampula province in northern Mozambique declared as the 1st geographical location with community transmission of COVID-19.
- Over 2,500,000 children reached with key COVID and child rights related messages on 1st June celebrations.
- Developed hygiene protocols for school reopening and standard kit contents for schools.
- Ongoing deliveries of WASH IPC materials to provinces for isolation wards and health facilities.
- UNICEF is supporting 10 multimedia mobile units in 6 provinces to continue promoting preventive behaviors of COVID-19.

Situation in Numbers

472 Confirmed cases
331 Active cases
2 Deaths
15,544 Tested
2,075 Active monitoring
138 Recovered

The current strategy of the MoH to control the outbreak is based on active finding of suspected cases, and contact testing, quarantine and isolation in order to break the transmission chain of COVID-19. Epidemiological surveillance will be reinforced by establishing additional surveillance posts.

As informed in the last report (28 May), the Government of Mozambique extended the state of Emergency till 29 June and during this extension the Government stressed the full adherence of preventive measures including the mandatory use of social masks in public spaces and in public transport, frequent hand washing with soup, maintain physical distance of at least 1.5 meter and restricted movement of people. The government continues to maintain school closures, which have impacted 8.5 million students at all levels, with 14,667 pre-primary, primary and secondary schools currently closed.

The MoH also established treatment and isolation centers and Rapid Response Teams in all provinces. The MoH developed a Preparedness and Response Plan with actions in the following areas: coordination, disease surveillance and point of entry, laboratory, case management, supplies and logistic, human resources, infection prevention and control (IPC) and communication and social mobilization. Other Ministries also developed sectoral plans to respond to the secondary impacts of the pandemic.

**Coordination**

The Ministry of Health (MoH) established an Emergency Commission within the ministry to ensure effective coordination of COVID-19 prevention and response through the efforts of nine Technical Working Groups co-led by staff of the MoH and development partners. Internally, the Commission meets daily, and twice weekly in a broader group with the participation of key departments of the ministry, line ministries and development partners.

There are also ongoing coordination efforts targeted at mitigating the secondary impacts that may emerge as a result of the outbreak. To this end, the government disaster agency (INGC) and the Ministry of Economy and Finance (MEF) are currently working with line ministries to identify the needs and priority measures to be taken. Aligned with this, the Humanitarian Country Team (HCT), led by the Resident Coordinator and composed of UN agencies, NGOs, Red Cross, and donor representatives, is developing a Response Plan to COVID-19, focusing on sector specific impacts of COVID-19.

**UNICEF Response (during reporting period)**

**Health**

- Trained 27 Supervisors of community Health workers (CHW) on COVID19-related themes of which 12 in Cabo Delgado and 15 supervisors in Nampula and trained 119 CHW in Nampula.
- Support being provided to establish allocation criteria and distribution mechanism of PPEs. During this period 4,000 coverall procured by UNICEF have been distributed to Cabo Delgado to protect health staff performing sample collection and those working in treatment centers.
- Oxygen supply system for 177 beds was installed at the Pemba COVID 19 treatment center.
- Community response strategy to COVID-19 and continuity of health services was approved by the Ministry of Health;
- Supported development of Nampula and Cabo Delgado Response plan to COVID-19;

**Nutrition**

- Nutrition Response plan to COVID-19 approved and validated by Ministry of Health and partners.
- Integrated Mobile Brigade plan for Cabo Delgado outlined to cope with prevention and safety measures to attend increasing number of IDP's in the province.
- Nutrition contingency stock replenished in anticipation of increased demand due to a deterioration on nutrition security due to COVID-19 pandemic effect.
WASH
- Developing technical assistance plan for increasing supply of water to Pemba City water supply system (UNICEF/FIPAG) to address influx of IDPs and extend service levels.
- Developed hygiene protocols for school reopening recommendations and standard kit contents for schools as part of the Ministry of Education overall school reopening guidance.
- First round of WASH IPC supplies arrived in Zambezia, Nampula, Cabo Delgado, and Tete and are being dispatched to the health facilities and isolation wards.

Communication for Development (C4D), Community Engagement & Accountability
- According to final report of IVR phone survey only 39.3% know symptoms and what to do in case of symptoms, 81% know the three main preventive practices, and only 60% self-reported to practice the three main preventive practices.
- Almost 10,000 people reached with COVID-19 preventive measures and daily updates on COVID-19 cases in-country via SMS BIZ/U-Report.
- Ongoing support to 111 community radios in the entire country.
- Over 2,500,000 children reached with key COVID and child rights related messages on 1st June children’s day celebrations through child-to-child TV and Radio programmes
- Online child-to-child Radio and TV programme on child rights and COVID prevention and infection replicated in 10 provincial delegation.
- Ongoing support to 10 multimedia mobile units in 6 provinces to continue promoting preventive behaviors of COVID-19 especially in remote and hard to reach districts and communities.

Education
- Ongoing support to the Ministry of Education for the preparation of the reopening of school strategy.
- Transfer of the GPE-COVID grant to MINEDH, serving as Grant Agent (US$13 million of US$15 million).
- Finalization of the recording and transmission of Radio Escola programme to 64 Social Communication Institute (ICS) radios and 57 private radios.

Child Protection
- Psycho-social support delivery to Idai and Kenneth affected areas adapted to COVID-19 with 5,701 children and 66 families receiving support on an individual basis.
- Child Help line (LFC) and Radio Mozambique two-hour live call raising visibility on violence against children and providing essential advice to parents and children on how to report and prevent domestic violence and other forms of child abuse during COVID 19.
- Mapping of children released from prison done, undergoing advocacy for these children to be included in social protection programs.
- Police Department of Family, Children and Response to Domestic Violence received funds and started implementation of mitigation and safety measures to ensure essential service provision during pandemic to children, women, elderly and other vulnerable groups.
- Key organizations for people living with disabilities being supported to adjust programs to COVID-19, supported increased awareness of the needs of people living with disability through telenovela Ouro Negro.

PSEA
- Conducted service mapping of PSEA Network partners in Sofala to inform coordination of Covid-19 related activities.
- PSEA messaging included the regular messaging COVID.
- Agreement established with WFP for the contribution of the cost of Linha Verde and the Inter–agency PSEA coordinator.

Social Protection and Cash-Based Assistance
• UNICEF is working with WFP to sign UN to UN agreement as well as Data Sharing Agreement to jointly support cash transfer implementations in selected districts, in close coordination with the government.
• National Institute for Social Action (INAS) increased the targets for the SP response plan in the urban areas by removing some duplications of beneficiaries, following the partners advice. This allows expansion of the coverage in some key urban areas (Nampula City, Quelimane City, Matola).
• Preparation of behavioral messaging for the SP beneficiaries, focusing on nutrition, gender, disability and child protection. SMSs and voice messages are to be used as main communication tools.

Supply and logistics
• Supporting the coordination body to get MoH approval on the updated and prioritized Supply plan.
• The RC approved the proposal related to the key agency roles for the implementation of the new International COVID-19 Supply Chain platform in Mozambique. Together with WHO, UNICEF will introduce and open the platform to all relevant partners and plan for its official launch.

Human Interest Stories and External Media
• UNICEF and European Union hand-over essential protective gear for Mozambican frontline health workers who fight COVID-19
  ➢ Video: https://youtu.be/LHe-YGCHNkY
  - # of people reached on COVID-19 on social media: 2.6 million
  - # of messages replied on COVID-19 on Messenger: 90

Funding Overview and Partnerships
In support of the country efforts to prevent and contain the COVID-19 as well as address its impact, UNICEF has developed a 9-month preparedness and response plan with preliminary funding requirements of $16 million USD. As of end-May, the office has received ~$5,928,910 USD for COVID-19 response thanks to the generous contributions from Education Cannot Wait, European Union, GPE, Japan, Netherlands and USAID. In addition, UNICEF received $15 million from GPE as Grant Agent for the Government’s COVID Education response.

Challenges
• Increased complexity in the COVID-19 transmission chain with the increase of cases and spread throughout the country.
• Limited testing capacity at decentralized level.
• Delays in receiving clearance to import supplies for the response.
• High demand globally for key supplies limit the ability of the authorities and partners to act timely – long lead time for arrival of ordered supplies in country.
• Continued civil unrest and displacement in north of country.

UNICEF Mozambique: http://www.unicef.org.mz/
UNICEF Mozambique: http://www.facebook.com/unicef.mozambique
UNICEF Mozambique: http://www.youtube.com/UnicefMozambique
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## Annex A: Summary of Programme Results

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target to 31 Dec 2020</th>
<th>Results as of 10 June 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RCCE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>15,000,000</td>
<td>12,000,000</td>
</tr>
<tr>
<td># of people engaged on COVID-19 through RCCE actions</td>
<td>2,500</td>
<td>0</td>
</tr>
<tr>
<td># of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms</td>
<td>13,500</td>
<td>390</td>
</tr>
<tr>
<td><strong>IPC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached with critical WASH supplies (including hygiene items) and services.</td>
<td>112,000</td>
<td>0</td>
</tr>
<tr>
<td># of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)</td>
<td>2,500</td>
<td>280</td>
</tr>
<tr>
<td><strong>CONTINUITY OF HEALTH CARE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.</td>
<td>2,500</td>
<td>449</td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>100,000</td>
<td>0</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)</td>
<td>19,000</td>
<td>4,218</td>
</tr>
<tr>
<td><strong>ACCESS TO CONTINUOUS EDUCATION, CHILD PROTECTION AND GBV SERVICES INDICATOR</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children supported with distance/home-based learning.</td>
<td>1,112,137</td>
<td>261,100</td>
</tr>
<tr>
<td># of children without parental or family care provided with appropriate alternative care arrangements</td>
<td>400</td>
<td>3,102</td>
</tr>
<tr>
<td># of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>10,000</td>
<td>3,962</td>
</tr>
<tr>
<td># of UNICEF personnel &amp; partners that have completed training on GBV risk mitigation &amp; referrals for survivors, including for PSEA</td>
<td>326</td>
<td>149</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households (economically affected by COVID-19) in urban and peri-urban areas receiving cash transfers for basic needs</td>
<td>200,000</td>
<td>0</td>
</tr>
</tbody>
</table>

1 Target revised to 15,000,000