



UNICEF/UN0654145/Mendes Pedro

Reporting Period: January-June 2022

MOZAMBIQUE

Humanitarian Situation Report No. 6

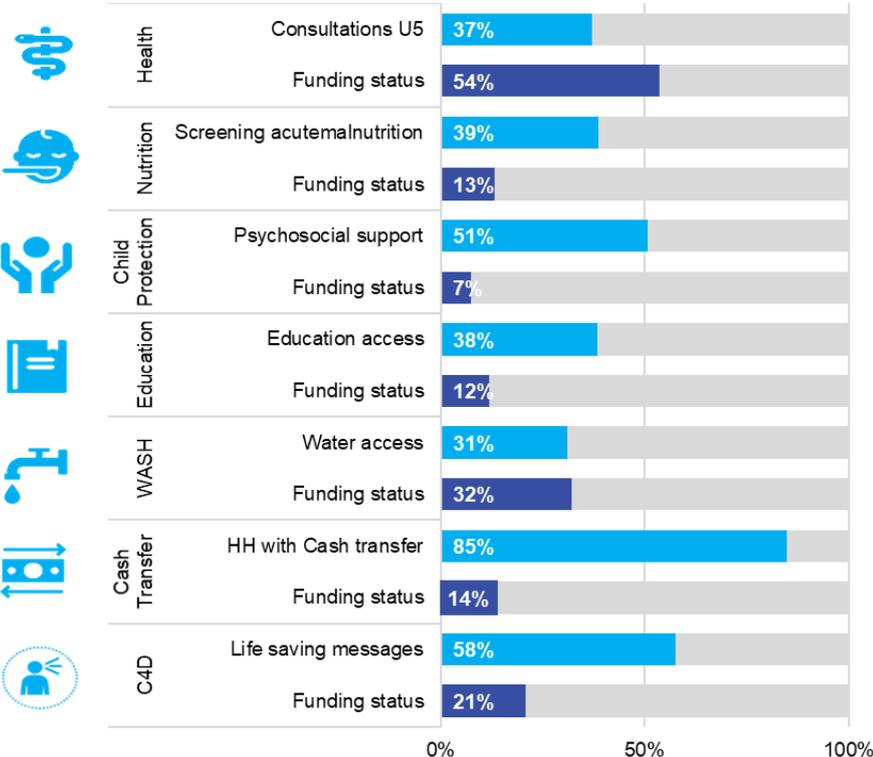
Highlights

- The insecurity and humanitarian situation in conflict-affected areas deteriorated significantly with over 90,000 people displaced in June alone
- Nearly 970,000 people were affected by four tropical storms between January and March increasing already significant humanitarian needs
- UNICEF supported the establishment/rehabilitation of 91 water points/systems benefiting over 109,000 people with safe water
- UNICEF provided 648 community health kits to benefit 162,000 people and delivered supplies to 16 hospitals for the inpatient treatment of nearly 5,900 children with severe acute malnutrition
- More than 300,000 people were reached each month during the first half of the year with lifesaving messages.
- UNICEF trained 600 partners' staff on PSEA

Situation in Numbers

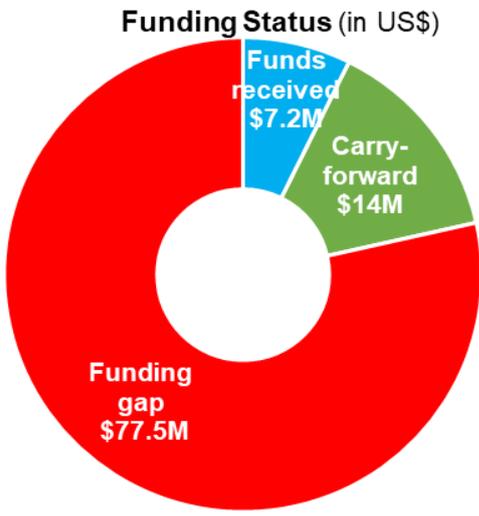
- 520,579** children displaced in need of humanitarian assistance (IOM June 2022)
- 1,500,000** people in need (OCHA March 2022)
- 946,508** Internally displaced people (IOM June 2022)
- 80,000** People in hard-to-reach areas (OCHA March 2022)

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 the provision of life-saving services for women and children in Mozambique affected by multiple shocks. Additional needs arose following Cyclone Gombe and Tropical Storm Ana during the first quarter of 2022. UNICEF has received 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), and the Republic of Korea, who provided support for UNICEF's response in the aftermath of Tropical Storms Ana and Gombe, and the World Bank, the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), and the Governments of Italy and Norway who provided support for UNICEF's conflict-related activities in northern Mozambique. The 2022 HAC, primarily focused on the conflict in the north, has a funding gap of 79 per cent. The lack of funding is causing UNICEF to prioritize the needs of some children over others—an untenable position. Additional funding is required for the remainder of the year to meet the increasing humanitarian needs, particularly in the conflict-affected north where displacement and insecurity continue.

Situation Overview & Humanitarian Needs

The first half of 2022 was complex and challenging for Mozambique with increasing humanitarian needs caused by climate-related shocks, conflict and health emergencies. Between January and April, the country was hit by four tropical systems, of which one developed into Cyclone Gombe affecting nearly 970,000 people, killing 115 people, destroying 3,873 classrooms, affecting over 69 health facilities, extensive road and bridge damage and temporarily displaced approximately 40,800 people mainly in Nampula and Zambézia provinces¹.

After relative calm for six months in the north, the security situation deteriorated significantly in June 2022 with Non-State Armed Groups (NSAGs) carrying out attacks in Ancuabe and Chiure districts of southern Cabo Delgado (CD) resulting in a large influx of internal displaced people (IDPs). Similarly, in June, Nampula suffered its first attack since the start of the conflict when insurgents attacked the village of Lúrio in Memba district^{2,3}. These last incidents led to the displacement of over 69,000 people mainly from Ancuabe district, of whom 55 percent were children, moving to Pemba, Chiure, Metuge, Montepuez among other areas of the province. In addition, there was the temporary displacement of nearly 23,600 people from Ancuabe, Chiure and Mecufi to Erati district in Nampula province, of whom approximately 5,000 still remain, while others return to CD. This was the largest displacement recorded in single month in 2022 and between 05 and 23 June it was observed an average daily individual movement of 2,150 people in CD. From January to June, nearly 115,550 IDPs of whom 51 percent were children, moved within CD seeking safer areas and livelihood opportunities⁴. As per the June 2022 Data Tracking Matrix baseline, there are now 946,508 IDPs as a result of the conflict in Cabo Delgado, of whom 55 per cent are children, representing a 21 per cent increase compared to February 2022. As a result of insecurity, access to affected areas became more challenging with new restrictions on travel to/in Ancuabe and some areas of Chiure and Metuge including the restriction of UN staff movements on the main highway in Cabo Delgado, the N1, for over a week.

The country has also been affected by health emergencies in 2022. Two polio outbreaks were detected in the country—both circulating Vaccine-Derived Polio Virus (cVDPV2) type 2 confirmed in February, with total of 6 cases distributed in Nampula, Cabo Delgado and Manica, and 1 confirmed case of Wild polio virus type 1 (WPV1), confirmed in Tete Province and linked with the case identified in Malawi. In response to these outbreaks, the Ministry of Health (MoH) declared a national public health emergency on 21 February and committed to implement supplementary immunization activities, intensified surveillance measures to improve detection of Acute Flaccid Paralysis and poliovirus covering the entire country. Additionally, in the first half of 2022, a cholera outbreak was confirmed with a cumulative total of over 3,100 cases and 15 deaths in Sofala and Zambézia provinces. COVID-19 is still active in the country although the cases, hospitalizations and deaths have been decreasing since January 2022 with only a slight increase in June. As of 30 June, there were 389 active cases of COVID-19 while 14.5 million people were completely immunized representing 95.5 percent of the defined target⁵.

Summary Analysis of Programme Response

Health

During the first half of 2022, UNICEF supported the Ministry of Health's response to the above-mentioned events, with technical and financial support, as well as the provision of various health materials and supplies. Response plans and interventions were completed in coordination with provincial health authorities and non-governmental partners in respective provinces, including members of the health cluster. To assure accessibility and timely reach to affected

¹ National Institute for Disaster Risk Reduction and Management (INGD, April 2022)

² <https://www.cabodelgado.com/reports/cabo-ligado-weekly-6-12-june-2022>

³ <https://www.cabodelgado.com/reports/cabo-ligado-weekly-13-19-june-2022>

⁴ UNICEF estimation based on IOM Emergency Tracking Tool reports (January-June 2022) - <https://dtm.iom.int/mozambique?page=0>

⁵ <https://covid19.ins.gov.mz/wp-content/uploads/2022/06/Comunicado-de-Imprensa-COVID-19-30.06.2022-VF.pdf>

populations, especially those in most remote areas and with accessibility constraints, UNICEF—with funding from the CERF, the Swedish International Development Cooperation Agency, Foreign, Commonwealth and Development Office (FCDO) of the UK, the United States Agency for International Development⁶ and ECHO, supported the expansion of Integrated Mobile Brigades (IMBs) and the distribution of medical supplies, tents, and equipment as described below.

A total of 214 IMB deployments were implemented in Cabo Delgado as part of the conflict response, while 48 and 146 were deployed in Sofala and Zambézia provinces respectively following Tropical Storm Ana and Cyclone Gombe. As result of the IMBs 62,241 children below five years, 60,015 women and 6,282 adolescent girls were provided with health assistance including consultations, immunization, antenatal consultations and HIV-related interventions. In addition, a total of 648 CHW kits were distributed to government CHWs in CD, Sofala, Zambézia and Nampula provinces which will benefit approximately 162,000 people including 27,703 children under five years old.



UNICEF also distributed mosquito nets to 2,400 households with children under five years in CD and delivered 101 tents and other medical kits including 80 interagency emergency health kits, 43 community drug kits and 22 acute watery diarrhea kits to provincial health authorities in Zambézia, Nampula, Sofala and Tete, serving approximately 246,000 people including 42,100 children under five years. Overall, while the progress towards meeting the targets defined in the HAC was low for measles vaccination 1 percent which is expected to improve in October with the planned campaign, on access to primary health care the reach was 57 percent of the target.

In response to the outbreak of circulating vaccine-derived poliovirus, and the wild poliovirus case, the Government of Mozambique has been implementing immunization campaigns throughout the country. The first round of bOPV vaccinated 4.8 million children in March. The second round provided bOPV in five provinces and nOPV in two provinces (due to the vaccine-derived polio cases in those provinces), reaching 5.5 million children in May 2022. The key challenges of the polio vaccination rounds are logistics and reaching every child, especially in large cities, conflict-affected areas and hard-to-reach areas. The Global Polio Eradication Initiative—a consortium of UNICEF, the World Health Organization, the U.S. Center for Disease Control and Prevention, the Rotary Club, and the Bill and Melinda Gates Foundation—supports vaccine management ensuring that the cold chain keeps vaccines at the appropriate temperature from shipment to Mozambique until it is administered. As part of the nationwide campaign, UNICEF supported social behaviour change activities making sure that parents were aware of the campaign and take the vaccine when being offered as well as strategies for vaccination teams to engage with families at the household level. Funding and timely disbursement of funds at the service delivery point remain a key factor in ensuring that every child under five is reached.

UNICEF's support to COVID-19 vaccination in Cabo Delgado resulted in 274,167 people being completely immunized. In addition to immunizations, various protective equipment was delivered to health authorities including 288 soap bars, 1,900 medical gloves, 3,200 face masks and 400 protective goggles.

Nutrition

Due to the various underlying risk factors for malnutrition in the emergency-prone districts, and a busy cyclone season in 2022, the nutrition situation remained quite fragile in the first half of the year. In CD, the results of the 2022 SMART survey showed a high prevalence of long-term malnutrition or stunting (44.5% (39.3-49.8, 95% CI), with one in every two children too short for their age. This is compounded by the simultaneous presence of wasting, with a prevalence range from 0.9% (0.2-3.9, 95% CI) to 4.5% (2.5-7.9, 95% CI) in the survey domains, resulting in a double burden of malnutrition. This situation reflects a deterioration in the nutrition of children in the CD associated with the aggravating factors including limited coverage of health and WASH services and high levels of food insecurity which increases the nutritional vulnerability of children of this age.

To respond to the increased nutritional needs of children and women affected by conflict, UNICEF and partners implemented IMBs, community management of acute malnutrition (CMAM) and an integrated nutrition package (PIN) in 10 districts of Cabo Delgado and Nampula, reaching 13,147 children under five with lifesaving nutrition screenings, treating 1,901 severe wasting cases, while also supplementing 7,622 children 6 to 59 months with vitamin A. UNICEF also delivered supplies to 16 hospitals providing inpatient treatment for severe acute malnutrition (SAM). These drugs

⁶ Funds from Swedish cooperation and FCDO were received in 2021 and carried over to 2022



and therapeutic nutrition supplies will support the treatment of 5,877 SAM cases at the health facility and community level. Similarly, through CMAM and PIN activities, 50,609 caregivers of children 0-23 months were reached with messages on Infant and Young Child Feeding (IYCF) sessions and cooking demonstrations. Additionally, UNICEF is providing services in the hard-to-reach Palma District, including ready-to-use therapeutic and supplementary foods, refresher training for government staff, and supplies to key partners including Médecins Sans Frontières (MSF). Similar approaches are being discussed to improve reach into Mocimboa da Praia and Muidumbe, also hard to reach.

In cyclone- and storm-affected districts of Tete, Nampula, Sofala, and Zambézia, UNICEF supported the joint multisector needs assessments and rapid response team deployment as well as cluster coordination. Furthermore, UNICEF led the quick set up of tents for health and nutrition services delivery in temporary accommodation sites, while also ensuring delivery of nutrition supplies to support resumption of health and nutrition services in affected health facilities. Through emergency funding from the FCDO, and CERF, IMBs and expansion of wasting treatment with CMAM and facility-based nutrition services screened 39,303 children and treated 6,355 children for severe wasting in the last six months in cyclone affected areas. The overall progress on the nutrition response against the targets defined varies from 30 percent (SAM treatment) to 57 percent (vitamin A supplementation).

Child Protection

UNICEF continued to increase child protection services for children affected by conflict in Cabo Delgado and Nampula provinces as well as responding to storms and cyclones affecting Tete, Nampula and Zambézia.

In CD, UNICEF has increased the coverage and scope of the response through six partners across Montepuez, Ibo, Pemba, Metuge, Ancuabe, Chiure, Mueda districts and will be starting activities in Quissanga, Palma, Meluco, Balama and Mocimboa da Praia in the second half of the year. UNICEF has focused on increasing access to mental health and psychosocial support (MHPSS) services for adolescents, girls and boys, and parents through community-based programmes. In addition, six multipurpose centres have been built in conjunction with Provincial Services for Social Affairs (SPAS) in Ancuabe, Montepuez, Mueda and Metuge linking the MHPSS programme to case management responses for vulnerable children and families. A focus on increasing capacity and systems to respond to unaccompanied and separated children and referral of tracing services has seen 65 vulnerable children supported during the June Ancuabe displacements. In response to children affected by armed conflict (CAAC), UNICEF developed a model of reintegration that has been shared with SPAS to provide support services for children who are at risk or who have escaped armed groups. UNICEF led the children associated with armed forces/armed groups task force, developing a capacity building plan and is in the process of conducting a situational analysis of CAAC to increase the effectiveness of the response programme. The Red Hand Day event, to raise awareness of the needs of children experiencing armed conflict, was held in April, where CAAC needs were publicly discussed between the Government, UN, and civil society organizations. The overall progress on child protection response against the targets defined varies from 16 percent (access to safe channels for SEA) to over 100 percent (case management).

Education

The education response in the first half of 2022 was based on providing supplies to respond to the needs of children affected by emergencies and severe economic deprivations and building the capacity of the educational staff at both centralised and decentralised levels. From January to June, UNICEF reached 169,000 beneficiaries (83,000 female).

In June, the UNICEF education response was focused in CD (12,000) and Nampula (43,326) where a total of 53,326 children benefited from temporary learning spaces (TLS) and distribution of learning materials. In Manica, an additional 20 TLS benefiting 2,071 children (1,040 boys and 1,031 girls) were sent to the province in response to the rainy season flooding. In Sofala, the completed school reconstruction will provide safe learning spaces for 1,460 children (653 girls).

From the target of 320,000 children reached through education programming defined in the Humanitarian Response Plan for 2022, cluster members have reached 245,000 children (130,000 girls) with educational materials enabling school attendance. Training of teachers and education staff reached around 6,700 beneficiaries (3,383 women). Overall, a total of 66,351 beneficiaries (30,356 girls) received support from cluster partners with the distribution of learner kits, establishment of TLS, accelerated learning programmes, and training on gender-based violence, violence against children and prevention of sexual exploitation and abuse (PSEA). The challenges for cluster partners include the lack

of funds and the deteriorating security environment in the north. The overall progress on education response against the targets defined was 64 percent (access to learning materials/supplies) while no progress was achieved in vocational training given the activities only started in July.

WASH

The WASH response is ongoing in multiple provinces, responding to Cyclones Gombe and Ana and residual needs from Cyclone Eloise (2021) in Nampula, Tete, Sofala, and Zambézia Provinces, the cholera outbreaks in Zambézia, Tete, and Sofala Provinces, COVID-19-related water needs, and the conflict displacement in Cabo Delgado, Niassa, and Nampula Provinces.

WASH cluster partners are aiming to reach appropriate standards in both existing resettlement sites and temporary



accommodation sites that have been extended, while at the same time aiming to reach newly displaced populations. UNICEF reached 144,000 people with access to water through various modalities including: a) installation of 41 new boreholes with handpumps for 21,500 people; b) rehabilitation and extension of piped systems for 21,970 people; c) rehabilitation of 17 handpumps for 8,000 people; d) provision of water treatment chemicals for systems serving 67,340 people; and e) water trucking to distribution points for 25,575 people. 40,185 individuals also now have access to sanitation facilities as a result of emergency

communal latrine construction and household-level latrine support. To date, 120,720 people were reached with hygiene items and 135,170 people were reached with hygiene messaging. From January to June 2022, hygiene items were also distributed to 14,450 people through a joint response program with the International Organization for Migration and World Food Programme to provide life-saving support to newly displaced households in Niassa and Cabo Delgado Provinces.

UNICEF is responding to the ongoing cholera outbreak through localized hygiene promotion programs and support to water points through the distribution of water disinfectant to cover the affected areas reaching 28,000 people in Zambézia. Sanitation programs reached 11,500 individuals impacted by Cyclone Eloise while 13,200 people were reached with access to safe water supply in Tete Province through rehabilitation, construction, and/or extension of water points and systems. In Tete and Zambézia 7,500 people impacted by Cyclone Gombe and Ana received WASH supplies.

In Nampula Province which has received an influx of displaced populations and suffered the largest impact of Cyclone Gombe, UNICEF is working in host communities and resettlement sites to provide WASH services for vulnerable populations. This includes the provision of hygiene items to 73,460 individuals; installation of emergency latrines for 12,440 individuals and provision of safe water to 118,580 individuals through 1) construction of 33 new wells with handpumps for 16,500 individuals, 2) provision of water treatment chemicals for 73,990 individuals, and rehabilitation and extension of piped networks for 28,090 individuals. The overall progress of WASH response varies from 9 percent (sanitation) to 31 percent (safe water) of the targets defined for 2022.



Social Protection and Cash-Based Programming

UNICEF provided financial and technical support for the implementation of cash transfers as part of the Government's response to COVID-19 in Zambézia and Tete Provinces. The programme is implemented jointly with the World Food Programme and combines mobile cash transfers and social behaviour change communication to build resilience among vulnerable populations. Since January, 53,500 beneficiary households (85% of target) in Zambézia have received at least one of the two payment tranches (~US\$70) through Vodacom's M-Pesa. During the registration process and at payment points, households received messages on nutrition practices, PSEA, and GBV mitigation and response by community committees and group discussions. Throughout the reporting period, partners faced several challenges causing delays to registration and payments, including limited access to targeted districts due to the cyclone. The programme is expected to finish in July 2022.

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

UNICEF response in CD focused on engaging the effective community and communication platforms—provincial and community radios, multimedia mobile units, religious and community leaders as well as deployment of social mobilizers among IDPs resettlement areas—to promote the adoption of life-saving messages in the area of health and nutrition, hygiene and water and sanitation, and child protection. More than 300,000 people were reached every month through various platforms. Specific interventions were designed to respond to Tropical Storm Ana and Cyclone Gombé where engagement of community leaders and adolescents, as well as ad-hoc deployment of multimedia mobile units reached more than 300,000 affected people directly or indirectly.

In Zambézia province, affected by cholera outbreaks in 2022, UNICEF supported the Provincial Health Directorate (DPS) in promoting preventive practices and health-seeking behaviours. Community theatre groups, multimedia mobile units and engagement of community leaders were effective in reaching approximately 18,000 people and contributing to the interruption of cholera transmission.

UNICEF continued to provide support to increase the demand for COVID-19 vaccines and the adoption of preventive measures. As co-chair of the risk communication and community engagement working group, UNICEF supported evidence generation and strategy design, produced and disseminated 12 TV and radio spots, and trained and engaged approximately 2,000 religious and community leaders. Those activities contributed to reaching 90% of the government's target for COVID-19 vaccinations.

Since March, 16,000 social mobilizers have been trained to reach every family in the country for polio vaccination through door-to-door visits. Community meetings were held, media and journalists have been engaged, and TV and radio spots were disseminated together with printed materials. As a result, the vaccination campaigns have reached over seven million children under five thus far with an extremely low refusal rate (less than 1 per cent). The overall progress of SBC response varies from 50 percent (participation in SBC) to over 100 percent (information on PSEA) of the defined targets.

Protection from Sexual Exploitation and Abuse (PSEA)

One of main priorities of the PSEA team in 2022 is to raise community awareness on their rights, the conduct expected from humanitarian and development workers, and how to report via correct channels. To support this goal, interagency PSEA posters and cards were distributed to UNICEF staff, offices and partners. Sensitization was conducted by: a) disseminating key PSEA messages prior to and during regular activities such as distributions, community engagement and social mobilization activities reaching approximately 176,800 people; b) inclusion of PSEA sessions as part of the response to Cyclone Gombé and Tropical Storm Ana needs assessments and provision of sessions in transit centres reaching 7,800 people; c) PSEA radio spots reaching an estimated 1.7 million people in CD, Sofala, Nampula and Zambézia; d) collective listening centres reaching 21,000 people in/near resettlement centres; and e) multimedia vehicles reaching 3,300 people.

The efforts to strengthen the PSEA capacity of partners, suppliers and related personnel are continuous. In the first half of the year, 130 CSO personnel, 240 government personnel, and 230 suppliers—all partners of UNICEF—received PSEA training. Frontline community workers were also targeted for training, not only to improve their knowledge on SEA and expected conduct, but also to strengthen community-based complaint mechanisms. As a result, 37,500 people who were part of the polio vaccination campaign were trained. The PSEA Minimum Emergency Package, a new tool developed by UNICEF that includes guidance on how to conduct sensitizations, the HCT PSEA contingency plan and the Guidance on Safe Distribution, Selection and Registration of Beneficiaries are being rolled out to partners and HCT members. To date, over 95 per cent of UNICEF field-based staff have been trained on PSEA, and two sessions for Maputo-based staff have taken place, with other four planned for July-September.

As part of the interagency network, UNICEF provided continuous support to improve the Linha Verde toll-free hotline and the Linha Fala Criança helpline services through trainings and technical revision of procedures. All operators in Maputo, Manica and Cabo Delgado received trainings on PSEA, trauma-sensitive approaches, listening skills, and stress management. UNICEF also supported the revision of the Linha Verde protocol, incorporating the Victims' Assistance Protocol and Trauma Sensitive Approach to improve the quality of services provided and align activities with international standards. UNICEF also supported the National PSEA Network on the rollout of the UN Victims Assistance Protocol through trainings for members of the national and sub-national PSEA networks.

Humanitarian Leadership, Coordination, and Strategy

UNICEF leads the WASH, Education in Emergencies, and Nutrition Clusters, and the Child Protection Area of Responsibility 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 and is co-leading the nutrition cluster with Ministry of Health. WASH Cluster members have developed a specific cyclone and flood damage assessment tool, which were utilised for the first time in Zambézia and Nampula provinces, which were affected by Cyclone Gombe.

As co-lead of the case management task force, UNICEF is supporting the harmonization and standardization of the inter-agency alternative care training package. The CP AoR is participating in two global pilots this year; role out of the CAAFAG toolkit, a global level tool piloted by three participating countries (Mozambique, Nigeria, Colombia), and monthly situation analysis of children in CD to enrich information related to adolescents and boys and girls. An information manager has joined the team to support the accuracy of information on child protection needs and response.

UNICEF continues to lead the Education Cluster responsibilities at the national level. A stand-by partner request will be submitted to the Global Cluster Group in July to support activities during the development of 2023 plans and tools, and preparation for the 2022-2023 rainy season.

Human Interest Stories and External Media

- [Social Protection programme in response to COVID-19 is changing the lives of vulnerable families](#)
- [Social protection response during COVID-19 helps 86-year-old regain her livelihood](#)
- [Building Back Better the schools affected by emergencies](#)
- [Cash Transfer Activities in Cabo Delgado](#)
- [Cholera Response Activities in Zambézia](#)
- [School reconstruction in Sofala](#)
- [Press Release: UNICEF and EU support rehabilitation and reconstruction of schools in Cabo Delgado](#)
- https://twitter.com/UNICEF_Moz/status/1523991487419138054
- https://twitter.com/UNICEF_Moz/status/1537116435906011136

Next SitRep: 20 August 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

Sector/Indicator	Total needs	UNICEF and IPs Response			Cluster/sector Response		
		2022 target	Total results	+/- since last report (June)	2022 target	Total results	+/- since last report (June)
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	3,521	-			
# of sick children under 5 provided with consultations	112,560	96,400	33,328	3,044			
# children and women accessing primary health care in UNICEF-supported facilities	405,750	318,500	149,442	13,582			
Nutrition							
# of primary caregivers of children 0-23 months reached with messages on IYCF	169,274	61,533	26,623	3,949	147,174	56,833	8,117
# of children 6-59 months receiving routine vitamin A supplementation	522,272	271,478	147,564	5,212	396,875	152,385	7,880
# of children 6-59 months screened for acute malnutrition (MUAC)	522,272	432,170	156,627	5,212	522,826	161,005	7,880
# of children 6-59 months admitted for treatment of SAM	27,266	27,400	6,707	1,096	27,456	6,707	1,096
Child Protection							
# of girls & boys in humanitarian contexts who have received individual case management	15,000	11,886	12,789	1,264	15,000	19,198	1,264
# of ppl provided with community-based MHPSS	776,811	99,855	53,625	6,823	315,000	56,697	6,823
# of women/girls/boys accessing GBV risk prev/resp interventions		96,855	22,284	3,409		22,284	3,409
# of children/adults w/access to safe/accessible channels for SEA		96,855	16,320	6,746		16,337	6,763
Education							
# of children with access to safe/clean TLS, learning materials, personal hygiene and MHM kits.	382,404	172,969	163,238	55,326	340,387	184,139	60,967
# of children accessing formal or non-formal education, including early learning	382,404	172,969	91,249	0	340,387	110,176	0
# children/adolescents accessing skills development programmes		2,500	0	0		0	0
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	735,000	649,225	213,185	155,710	700,000	238,685	159,555
# of people using safe and appropriate sanitation facilities	1,000,000	649,225	46,630	2,925	700,000	74,950	2,925
# of people reached with hand-washing behaviour-change progs	1,000,000	927,464	141,615	15,045	1,000,000	243,210	29,515
# of people reached with critical WASH supplies	703,000	649,225	96,340	1,720	700,000	158,355	26,740
Social Protection							
# households reached with unconditional cash transfers		51,000	0	-			
C4D/ accountability mechanisms							
# of people reached with SBCC	970,000	420,000	257,441	8,400			
# 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

Sector/Indicator	Total needs	UNICEF and IPs Response			Cluster/sector Response		
		2022 target	Total results	Change since last report (June)	2022 target	Total results	Change since last report (June)
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	4,800	-			
# of sick children under 5 provided with consultations	112,560	110,500	41,105	3,044			
# children and women accessing primary health care in UNICEF-supported facilities	405,750	365,000	221,732	79,182			
Nutrition							
# of primary caregivers of children 0-23 months reached with messages on IYCF	157,842	79,000	29,734	3,949	147,174	58,726	8,117
# of children 6-59 months receiving routine vitamin A supplementation	545,085	283,160	161,072	13,587	545,085	164,693	16,255
# of children 6-59 months screened for acute malnutrition (MUAC)	545,085	443,850	171,245	13,587	545,085	175,623	16,255
# of children 6-59 months admitted for treatment of SAM	69,762	34,880	10,428	1,727	34,880	10,428	1,727
Child Protection							
# of UNICEF girls and boys in humanitarian contexts who have received individual case management	15,000	12,592	12,789	1,264	15,000	19,198	1,264
# of UNICEF children, adolescents, parents and caregivers provided with community based MHPSS	776,811	105,613	53,625	6,823	440,190	66,681	6,823
# of women, girls and boys accessing GBV risk mitigation, prevention or response interventions		102,600	22,284	3,409		22,284	3,409
# of children & adults with access to safe and accessible channels to report SEA		102,610	16,320	6,746		16,337	6,763
Education							
# of children with access to safe/clean TLS, schools, basic learning materials, personal hygiene and MHM kits.	521,740	262,740	169,467	59,626	340,387	245,106	60,967
# of children accessing formal or non-formal education, including early learning ⁷	521,740	262,740	100,940	0	340,387	110,176	0
# of out of school youth trained in practical skills through non-formal and formal professional training		2,500	0	0		0	0
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	950,000	700,000	216,685	159,210	850,000	260,535	177,560
# of people using safe and appropriate sanitation facilities	1,000,000	700,000	62,375	12,925	900,000	95,515	16,745
# of people reached with hand-washing behaviour-change programmes	1,260,000	1,000,000	156,480	28,245	1,100,000	251,370	33,920
# of people reached with critical WASH supplies	860,000	700,000	109,150	5,055	850,000	172,980	38,365
Social Protection							
# households reached with unconditional cash transfers		63,000.0	53,500	35,534			
C4D/ accountability mechanisms							
# of people reached with SBCC	970,000	467,000	268,988	14,000			
# 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	2,598,277	1,334,072	3,394,813	46%
Nutrition	7,771,410	-	1,031,304	6,740,106	87%
Child Protection	19,061,650	228,493	1,181,915	17,651,242	93%
Education	16,593,907	1,498,821	488,848	14,606,238	88%
WASH	30,952,152	2,140,997	7,773,634	21,037,521	68%
Social Protection	13,065,862	0	1,781,797	11,284,065	86%
Social Behaviour Change, AAP	3,979,800	420,000	403,141	3,156,659	79%
Total	98,751,944	7,221,013	13,994,711	77,536,219	79%

⁷ Indicator was merged with one on supplies in previous reports, now corrected.