

Reporting Period: January - December 2022

MOZAMBIQUE

Humanitarian Situation Report No. 12

unicef
for every child

Highlights

- In 2022, Mozambique faced multiple crisis resulting in nearly 2 million people in need of humanitarian assistance, including over 1 million internally displaced
- UNICEF provided medical supplies sufficient to cover the needs of 1.3 million people in cyclone- and conflict-affected areas
- With UNICEF support, over 270,000 children aged 6 to 50 months were screened and over 19,000 treated for severe acute malnutrition
- The construction of 409 temporary learning spaces and the rehabilitation of 610 classrooms benefiting 156,899 students and 3,246 teachers was completed with UNICEF support
- UNICEF also supported six rounds of nationwide polio vaccination campaigns which resulted in more than 11 million children vaccinated
- UNICEF provided access to safe and appropriate water for drinking and household use to 443,625 people

Situation in Numbers

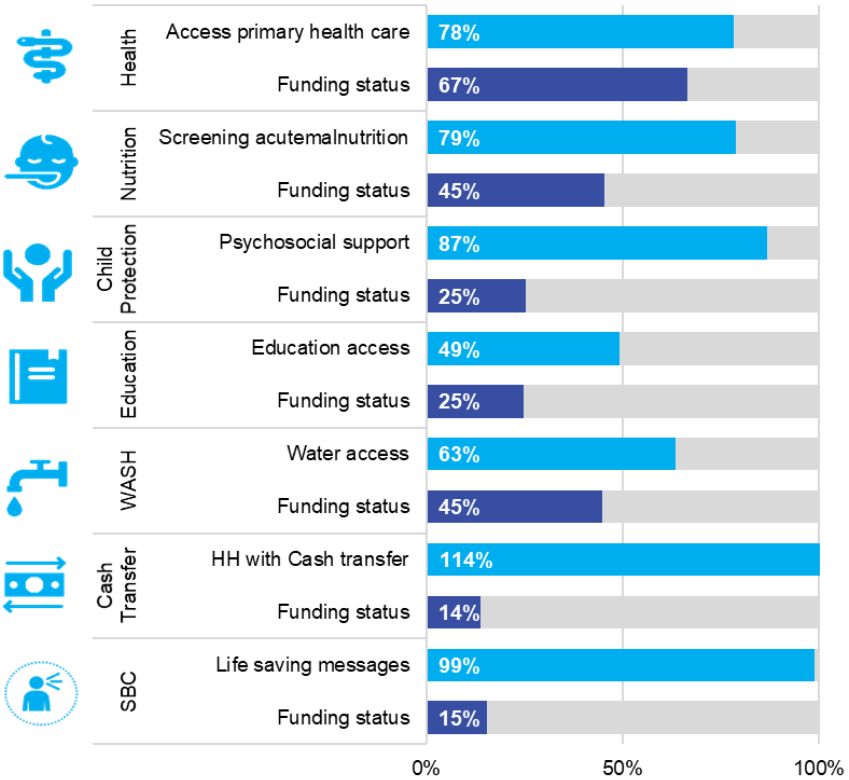
524,659
children displaced in need of humanitarian assistance (IOM November 2022)

1,500,000
people in need in the north (OCHA June 2022)

1,028,743
Internally displaced people (IOM November 2022)

302,000
People in hard-to-reach areas (OCHA November 2022)

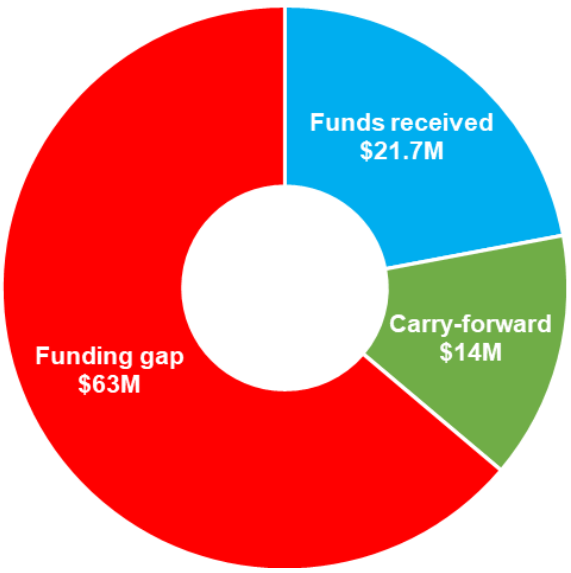
UNICEF's Response and Funding Status*



UNICEF Appeal 2022

US$ 98.8 million

Funding Status (in US$)



*UNICEF utilized non-humanitarian resources and humanitarian-development nexus resources to bridge some of the critical gaps in fundraising.

Funding Overview and Partnerships

UNICEF's 2022 Humanitarian Action for Children appeal sought US$98.8 million to sustain and expand the provision of life-saving services for women and children in Mozambique affected by conflict, Cyclone Gombe, and Tropical Storm Ana. UNICEF received about $21.7M in 2022 including generous contributions from the GAVI Vaccine Alliance, and Germany in support of UNICEF's humanitarian response to COVID-19, and the United Kingdom, the Central Emergency Response Fund (CERF), the United States Agency for International Development (USAID), Japan Committee for UNICEF, the Republic of Korea, the World Bank, the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), and the Governments of Italy, Germany, Netherlands, Norway, Canada, Ireland who provided support for UNICEF's conflict-related activities in northern Mozambique and response to damage as a result of Tropical Storm Ana and Cyclone Gombe. The 2022 HAC had a funding gap of 64 per cent. To bridge the gap and ensure lifesaving services throughout the year, UNICEF utilized $11.7 million in core resources and humanitarian-development nexus funding to meet urgent humanitarian needs. Additional earmarked resources for the polio response have been received and are in use. The lack of funds resulted in a struggle for UNICEF to support the identified children and their caregivers with humanitarian needs in 2022.

Situation Overview & Humanitarian Needs

In 2022, the humanitarian situation in Mozambique challenging with increased needs resulting from the deteriorating security situation in the north, occurrence of climate-related shocks and disease outbreaks including cholera and poliovirus affecting nearly 2 million people[1] .

Areas of the northern Cabo Delgado province that had previously been harder to reach due to conflict with Non-State Armed Groups (NSAG), became more accessible due to reinforced military presence. At the same time, some areas previously considered secure and stable in the province's south and west (Ancuabe and Chiure districts) were subject to attacks, making travel and programme implementation complicated. In Nampula – Erati and Memba Districts – new fighting displaced more than 98,000 people between July and November 2022, with over 70 per cent moving between September and November.

According to the November 2022 Data Tracking Matrix of the International Organization for Migration, the number of IDPs due to insecurity in northern Mozambique passed to 1,028,000 of which 51 percent are children, a 40% increase compared to November 2021. About 29 percent of IDPs are living in 92 displacement sites with just five districts hosting 50 percent of the IDPs. Over 90 per cent of IDPs are in Cabo Delgado and the majority of the remaining are in Nampula (nine percent) and Niassa Provinces. The top needs identified by IDPs include food, access to documents, shelter and livelihoods. An estimated 352,437 people, 45 percent children, returned to their places of origin as of November 2022. The number of returnees increased by 146 percent from June to November 2022[2].

Between January and April, the country was hit by four tropical storm systems, including Cyclone Gombe affecting nearly 970,000 people, killing 115 people, destroying 3,873 classrooms, affecting over 69 health facilities, and causing extensive road and bridge damage. Cyclone Gombe temporarily displaced approximately 40,800 people mainly in Nampula and Zambézia provinces[3]. Most of these infrastructures have not yet been repaired which poses an increased vulnerability to the affected population.

The country has also been affected by health emergencies in 2022. Two polio outbreaks were detected in the country; circulating Vaccine-Derived Polio Virus type 1 (cVDPV1) and type 2 (cVDPV2) were confirmed in February, with a total of 26 cases in Nampula, Cabo Delgado, Manica, Zambézia and eight confirmed case of wild poliovirus type 1 (WPV1), confirmed in Tete Province. In response to these outbreaks, the Ministry of Health (MoH) declared a national public health emergency on 21 February and committed to implementing supplementary immunization activities, and intensified surveillance measures to improve the detection of acute flaccid paralysis and poliovirus nationwide. Additionally, cholera outbreaks were confirmed with a total of over 3,700 cases and 21 deaths in Niassa, Sofala, Nampula and Zambézia provinces[4] in 2022.

Summary Analysis of Programme Response

Health

During 2022, UNICEF supported the response to several emerging health needs of children and women resulting from the conflict in the north, tropical storm Ana, Cyclone Gombe, polio and cholera outbreaks, and malaria. UNICEF reached approximately 10,000,000 children and women through a variety of interventions including consultations and vaccination campaigns.

[1] UNICEF estimate based on total number of IDP reported by IOM and number of people affected by cyclone Gombe reported by INGD
[2] https://dtm.iom.int/reports/mozambique-%E2%80%94-mobility-tracking-assessment-report-17-november-2022
[3] National Institute for Disaster Risk Reduction and Management (INGD, April 2022)
[4] Health cluster update as of 29 November 2022

In Cabo Delgado, to expand the coverage and access of health and nutrition services in remote and access-constrained areas, UNICEF partnered with NGOs Doctors with Africa (CUAMM), AVSI, Helpo, Action Against Hunger to support the implementation of integrated mobile brigades (IMBs) and supported the government health authorities with 650 community health worker kits to serve people in remote communities, 50 interagency emergency health kits (IEHK), 61 acute watery diarrhea (AWD) kits to benefit about 500,000 people. Through Joint Aid Management and Médecins Sans Frontières, UNICEF distributed 45,000 mosquito nets for 112,500 people as part of malaria prevention activities. During the year, UNICEF participated in joint missions to assess the health needs of IDPs, provided technical support, and conducted supportive monitoring visits for quality assurance of services. In 2022, through a partnership with Mothers 2 Mothers, UNICEF supported 2079 young girls and 1855 boys with peer support, 14,852 adolescent girls with prevention services and 1,197 adolescent girls and young women with HIV and prevention of mother-to-child transmission services.

UNICEF supported responses to Tropical Storm Ana and Cyclone Gombe in Tete, Zambezia, Nampula and Sofala Provinces where health facilities were partially or severely damaged. UNICEF supported the rehabilitation of 13 of these health facilities re-establishing access to health care services to approximately 254,000 people. UNICEF also deployed staff to support response planning and coordination, funding to provincial health directorates, medical supplies, and other commodities to support response implementation. The supplies included 150 tents, 80 IEHK kits, 30 AWD kits, various materials for hygiene and protection measures, all of which will benefit about 800,000 people.

In response of the various poliovirus cases detected, the Government of Mozambique with UNICEF support carried out six rounds of immunization campaigns using the bOPV and nOPV2 vaccines, vaccinating children under 5 years of age and expanding to children under 15 years in the last round. A total of 9,729,231 children under 15 years old were vaccinated of which 3,197,626 were children 5-14 years old.

Nutrition

Although Mozambique has one of the continent's highest acute malnutrition caseloads, the nutrition action coverage remains below 20 percent for the prevention and treatment of acute malnutrition. This is mainly due to compounded vulnerabilities linked to climate disasters and conflict that have disrupted the ability of many poor households to access food, as they depend on subsistence agriculture for survival. Nutrition service delivery was constrained due to limited access and availability of health facilities coupled with frequent stock-outs of therapeutic nutrition supplies driven by a 67 per cent funding gap and low humanitarian presence in hard-to-reach areas. Prices of essential nutrition commodities increased 18-20 percent as a direct effect of the economic crises and the war in Ukraine.



UNICEF partnered with provincial health authorities and NGO partners to scale up humanitarian response in emergency settings resulting in 273,564 children aged 6 to 59 months screened and 19,079 treated for Severe Acute Malnutrition (SAM) in districts affected by conflict and cyclones. The treatment of acute malnutrition by community health workers (CHWs) was successfully rolled out in seven districts in Cabo Delgado and four in Nampula, reaching a total of 43,172 children under five with nutrition screenings, of these 1,311 diagnosed and treated for Moderate Acute Malnutrition (MAM) and 334 for SAM. The overall quality of the treatment of acute malnutrition was sustained, and performance indicators are aligned with recommended international guidelines, with a 75 per cent cure rate, one per cent death rate and seven per cent default rate. UNICEF co-funded a SMART survey in Cabo Delgado, indicating a double burden of malnutrition, and in June the Integrated Phase Classification (IPC) estimated an acute malnutrition caseload of 40,000 children with SAM and about 7,900 pregnant and breastfeeding women in need of lifesaving treatment for acute malnutrition in 8 out of 17 districts of Cabo Delgado.

In 2022 UNICEF expanded lifesaving nutrition services to 10 of the 17 districts of Cabo Delgado thanks to four NGO partnerships including CUAMM, Action Against Hunger (ACF), AVSI Foundation and Helpo. Through integrated mobile brigades (IMBs), CMAM and the nutrition intevention package (PIN), over 44,030 caregivers of children 6 to 23 months were counselled and supported to adopt appropriate infant and young child feeding (IYCF) practices and 209,324 children 6 to 59 months were supplemented with vitamin A. In Sofala, 35 communities in Caia District were reached with 51 IMB visits benefiting 7,794 children under 5 years of age, 421 primary caregivers of children 0-23 months were reached with messages on IYCF, 159 children 6-59 months received vitamin A supplementation, 251 children 6-59 months were screened for acute malnutrition and three children were referred for SAM treatment. In Nampula, 200 community health workers were trained in emergency response, including malnutrition and integrated childhood disease management in cyclone-affected districts.

Child Protection

In 2022, UNICEF scaled up its response to the conflict in the north by providing child protection support in 12 districts across Cabo Delgado and Nampula. UNICEF and partners provided 91,655 children (40,684 girls), corresponding to 79 per cent of the HAC target, through community-based mental health and psychosocial support (MHPSS)

programming including structured MHPSS layer-3 support, in a combination of activities conducted in open spaces and in the multi-purpose centres. A partnership with Capoeira for the Future was established to respond to the needs of vulnerable children who have witnessed or experienced violence, including children separated from their families and children formerly associated with armed groups using capoeira as an art as part of the healing process, and to ensure their emotional, cognitive, moral, intellectual, and social development.

Identified through MHPSS activities by trained community-based social workers, UNICEF and partners identified 13,205 children (6,065 girls and 840 CWD) in need of case management support, including survivors of violence, CAAFAG reintegration and support to unaccompanied and separated children (UASC). UNICEF and its partners identified and registered 3,935 UASC (2,034 girls) who were provided with alternative care support through informal foster families, kinship care, and supervised independent living. In coordination with different humanitarian agencies and Child Protection Community Committees, 15 per cent of UASC (591) were reunified and 85 per cent of the UASC remain in alternative care. As part of UNICEF's effort to prevent and respond to gender-based violence, 51,180 people (44,480 children, including 30,292 girls) were reached with prevention of GBV interventions including safety audits and dialogue/ sessions on early pregnancy and child marriage. These activities targeted mainly adolescent girls with the participation of boys and caregivers. Sensitization and awareness-raising campaigns on the prevention of sexual exploitation and abuse (PSEA)-related issues reached 32,037 people (20,102 children, including 9,044 girls). This includes the distribution of posters and fliers with PSEA messages and PSEA sensitization before any activity involving communities.


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In response to the increased identification of children associated with armed forces and armed groups (CAAFAG), UNICEF built the capacity of UNICEF partners to harmonize approaches on CAAFAG and alternative care through three workshops in 2022. UNICEF led a situational analysis of the situation of CAAFAG that supported response planning and strategic approaches to the prevention of and response to grave violations against children's rights. Additionally, in partnership with the Ministry of Defence and Dallaire Institute, UNICEF conducted a training of trainers of military personnel on the prevention of the six grave violations against children, as well as a training of 34 child protection focal points to establish a child protection unit within the Mozambican forces. Lastly UNICEF supported Red Hand Day with the Ministry of Defence to promote the prevention and recruitment and use of children by armed forces.

Education

In 2022 UNICEF ensured that over 175,000 affected boys and girls (3-18 years old) benefitted from a variety of learning materials including 114,837 learner kits, 480 recreation kits, 13,500 hygiene kits, 320 chalkboards, 21 school tents and 150 school disaster-risk reduction kits. In addition, Accelerated Learning Programmes (ALPs) reached 42,743 children and youth (21,488 female). The vocational training (TVET) course reached 200 displaced adolescents and youth (90 female) who completed activities to support employment in carpentry, cooking and sewing. Through offering ALP and TVET opportunities to young people, UNICEF has worked to prevent youth recruitment by armed groups through providing alternative learning opportunities. In addition, nearly 2,000 out-of-school children joined various learning activities.

Trainings strengthened the capacity of 1,465 teachers (642 female) on Teachers in Crisis Contexts (TiCC), 500 teachers (260 female) on Inclusive Education, and 4,770 (2,032 female) teachers and school coordinators on the prevention of violence against children, GBV and MHPSS. In addition, 4,500 students, teachers and community members, of which 2,208 are female, were trained on disaster risk reduction and school-based emergency preparedness and response planning. From this, 304 school-based DRR school committees were established.


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A total of 156,899 students (71,468 girls) and 3,246 teachers (1,593 female) benefited from the construction of 409 temporary learning spaces (TLS) and the rehabilitation of 610 classrooms (129 schools), including 264 gender-sensitive sanitation blocks. All reconstructed classrooms are resilient to climate events such as tropical storms and have ramps and rails to be accessible to children with disabilities.

WASH

In 2022, UNICEF and its partners responded to all emergencies affecting the country. Access to appropriate drinking water was provided to 443,625 people of which 31 per cent received durable water supply solutions. 118,580 people gained appropriate sanitation services, 72 per cent of which were durable approaches. In addition, a total of 255,675

people received critical WASH supplies. These results were achieved despite a funding gap of more than 60 per cent of the UNICEF's WASH funding requirement.

Of the above, the Cabo Delgado-specific results include appropriate drinking water to 252,815 people (24 per cent with durable solutions). Water trucking was used to supply water to over 160,000 IDPs living in temporary or resettlements sites where durable solutions were not feasible or not yet constructed. In terms of sanitation, 99,018 people were reached with sanitation/hygiene services (72 per cent of which with durable solutions) and 482,275 received hygiene promotion messages. Temporary solutions were used in temporary/transit sites where at least 30 communal latrines were built and regularly desludged by service providers who ensured proper collection, transport, and disposal. In resettlement sites and host communities, UNICEF promoted the emergency context adapted community-led total sanitation (CLTS) approach, which, for the more vulnerable households UNICEF also provided latrine slabs. Disability was mainstreamed with add-on products procured through UNICEF Supply Division. Through the Joint Response Programme with the World Food Programme and International Organization for Migration, UNICEF conducted 13 rapid response distributions reaching 186,935 people with critical WASH supplies in 2022.

In response to damage caused by Tropical Storm Ana and Cyclone Gombe in Nampula, Zambezia, and Tete Provinces, UNICEF organized the rehabilitation of 95 boreholes equipped with handpumps, four water supply systems (three solar-powered) benefiting 52,079 people, as well as critical WASH supplies including hygiene kits and water purification items for 65,740 people.

Cholera outbreaks were reported in 2022 in four districts of Sofala, Zambezia, and Niassa Provinces. UNICEF partnered with NGOs and provincial authorities to contain these outbreaks using the case area targeted intervention (CATI) approach. Transmission-reducing interventions included case-finding, referral to cholera treatment centers, and household-level WASH measures. In response to the wild poliovirus case confirmed in Tete province, UNICEF quickly deployed a team to use the same CATI approach, and as a result, seven boreholes were rehabilitated and the affected community was certified as Open-Defecation Free (ODF).

Social Protection and Cash-Based Programming

In 2022, UNICEF and WFP supported the Institute of Social Action (INAS) to implement the COVID-19 cash response reaching 71,980 households in three districts of Zambezia Province (Milange, Quelimane City and Quelimane District). However, of the total beneficiaries reached, 263 have complained about not receiving funds. UNICEF and WFP are working to assist these families. The programme has successfully paid 99.6 per cent of the planned beneficiaries through mobile payments as all received phones and SIM cards as part of the registration process. During cash transfer activities, civil society partners delivered gender-sensitive communications including PSEA. Additionally, in 2022 an evaluation of the COVID-19 response was completed.


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In the last quarter of 2022, the Government of Mozambique launched the expansion of the child grant programme to support parents of children under two. The first phase will be reaching 250,000 children in Nampula, Zambezia and Cabo-Delgado Provinces. UNICEF is working very closely with INAS Delegations to initiate activities via a gradual programme in the volatile context of Cabo Delgado. Of the seven districts selected by the Government, Macomia and Mueda Districts will roll out payments first, and if conditions allow the districts of Muidume, Nangade, Palma, Mocimboa da Praia and Quissanga will be added.

Social and Behaviour Change and Accountability to Affected Populations

In 2022, UNICEF focused principally on COVID-19 vaccinations, polio outbreak communications, Cyclone Gombe response and empowering adolescents in Cabo Delgado. UNICEF supported the Ministry of Health (MoH) in the design and implementation of a multi-pronged Risk Communication and Community Engagement (RCCE) strategy to promote the COVID-19 vaccine and mobilize parents and adolescents (12-17 years old) to seek vaccination. At the national level, two TV and radio spots were produced and aired on key TV stations, Radio Moçambique and also via community radios in local languages. Social media was also utilized as a platform to disseminate key messages to adolescents and parents with support from 14 social media influencers. At the community level, UNICEF provided support to implementing partners using community mobilizers and multimedia mobile units to reach hard-to-reach communities. As a result of the campaigns, the government managed to fully vaccinate 98.4% of targeted adolescents, and 100.4% with at least one dose done.

To strengthen the poliovirus outbreak response, UNICEF supported the implementation of six rounds of consecutive polio vaccination campaigns in which more than 11 million children were vaccinated in all provinces. The last round of vaccination conducted in December 2022 was extended to children and adolescents under the age of 15 in Tete and Zambezia Provinces, of which over 3.2 million received the first dose of the poliovirus vaccine. UNICEF provided resources and technical assistance for the implementation of a multi-channel strategy combining different structures and channels of trust communication via local and religious leaders, community radio, social media, mobile units, and



social mobilizers to reach parents and caregivers in the community. More than 60,500 community members were recruited and trained on poliovirus to support community vaccination interventions. During the six vaccination rounds, approximately 16 million people including parents and caregivers of children under 15 years old were reached with information through community meetings and door-to-door visits. More than 27,000 religious leaders were engaged and supported in disseminating information in nearly 9,500 religious institutions and places of worship. As a result, religious leaders were recalled by parents and caregivers as the main sources of information during campaigns according to quality assurance data. More than 200 journalists have been engaged at the local level to reinforce polio messages, including 46 adolescents and young people trained in December to support the promotion of vaccination for the under-15 age group. Overall, the acceptance of vaccination in Mozambique was high and campaign evaluation reports indicated that more than 90 per cent of parents and caregivers had prior knowledge of the campaign and refusals were below one per cent.

Additionally, UNICEF continued providing key lifesaving messages on different issues including AWD, cholera, malaria, COVID-19, malnutrition, appropriate sanitation and hygiene practices, and GBV to IDPs and host communities in Cabo Delgado and Nampula, and the promotion, identification, and certification of model families in Sofala and Zambézia Provinces.

Protection from Sexual Exploitation and Abuse (PSEA)

UNICEF maintained solid engagement for the prevention and protection against sexual exploitation and abuse in its humanitarian interventions throughout the year. Capacity building of implementing partners and frontline workers was a crucial component of this effort, ensuring that all personnel in direct contact with beneficiaries were aware of PSEA standards of conduct and were capable of disseminating PSEA messages to communities. Such efforts resulted in approximately 38,000 workers trained, including social behavior change and health staff involved in the polio vaccination campaign, UNICEF staff, UNICEF construction contractors, teachers, health workers, enumerators, operators of the anti-violence toll free hotline “Linha Fala Criança”, staff from the National Institute of Statistics engaged in the cash transfers initiative, community leaders; staff and volunteers of implementing partners and civil society organizations. Staff were trained on community-based complaints mechanisms to ensure access for all population groups to reliable reporting channels.

UNICEF also launched the Mozambique PSEA Minimum Emergency Package to enhance safe distributions, selection and registration of beneficiaries, improve PSEA inclusion in contingency planning, and sensitize the public during emergencies.

Throughout the year, more than 26,000 people were informed on PSEA, standards of conduct for humanitarian workers, safe and confidential reporting channels, and reassured that SEA-related complaints would not affect humanitarian assistance. Children were also informed, with adapted messages, of their rights and the available assistance in case of need. Through the use of radios, an estimated 988,000 people were reached with messages on PSEA as part of a national information campaign.

Humanitarian Leadership, Coordination, and Strategy

The cluster performance monitoring exercises (CCPM) for all four of UNICEF’s clusters and area of responsibility were completed in 2022. Results are being presented in quarter 1 and key areas of improvement will be incorporated into cluster workplans for 2023. All clusters are also wrking to finalize the interagency Humanitarian Needs Overview and Response Plan for 2023.

During 2022, the Education Cluster prepared a MHPSS manual for teachers that was endorsed by the Ministry of Education. The manual is now part of the regular Education in Emergency preparedness and response programme. The Education Cluster is currently preparing the bi-annual workplan which will be finalized in the first quarter of 2023.

UNICEF, with the Ministry of Health and provincial health service (SPS), co-led the Nutrition Cluster coordination meetings and activities in 2022. Cluster partners have reached 48 per cent of people targeted, with $9.7 million mobilized out of the $19.4 million requested in the 2022 Humanitarian Response Plan (HRP) and a funding gap of 50 per cent. Several advocacy meetings with main donors were held, and a *Call to Action* was released calling for $29 million to scale up lifesaving nutrition actions in Mozambique for 400,000 children at risk of/affected by acute malnutrition in conflict and climate shock settings. Capacity building on emergency preparedness, response and protection mainstreaming in the HRP was facilitated with intersectoral collaboration with WASH, Food Security, Health and Protection Clusters and active engagement of the Global Nutrition Cluster team.

The Child Protection Area of Responsibility (CPAoR) interventions reached 110,831 children, adolescents, parents, and caregivers and provided with community-based MHPSS to 95,707children including 46,400 girls, in Cabo Delgado,

Nampula, Niassa and Zambezia Provinces, which is approximately 25 per cent of the planned target. In Cabo Delgado 76, 500 children, adolescents, parents, and caregivers provided with community-based MHPSS were reached—69 per cent of the response—mostly in Chiure, Metuge, Pemba City, Ancuabe, Ibo and Mueda Districts. Additionally, 31,049 children including 15,099 girls were registered for case management support while 516,720 persons accessed GBV risk mitigation, prevention, or response activities. A total of 5,105 disabled children, all girls, were assisted in Montepuez (72%), Mueda, Ibo, and Metuge Districts during 2022. In December, the CPAoR provided training to 112 caregivers on family-based care for childre, 234 protection focal points were trained in protection mainstreaming and disaster management, and 2,342 people were trained on GBV response, prevention, and risk mitigation.

Human Interest Stories and External Media

- Social Media: Education support in Build Back Better schools in Manica
- Social Media: WASH support in LIFECA and Model Families in Zambezia
- Social Media: Solar Water Supply System in Zambezia
- Social Media: Child Grant expansion in Nampula
- Video: Community Radios help promote nutrition in remote communities in Zambezia

Next SitRep: 20 February 2023

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: **All Mozambique** 2022

Sector/Indicator	Total needs	UNICEF and IPs Response			Cluster/sector Response		
		2022 target	Total results	+/- since last report (Dec)	2022 target	Total results	+/- since last report (Dec)
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	36,106	4,635			
# of sick children under 5 provided with consultations	112,560	110,500	50,346	601			
# children and women accessing primary health care in UNICEF-supported facilities	405,750	365,000	285,949	-			
Nutrition							
# of primary caregivers of children 0-23 months reached with messages on IYCF	157,842	79,000	53,541	6,393	147,174	109,737	-
# of children 6-59 months receiving routine vitamin A supplementation	545,085	283,160	336,024	75,175	545,085	265,764	-
# of children 6-59 months screened for acute malnutrition (MUAC)	545,085	443,850	348,739	75,175	545,085	322,635	-
# of children 6-59 months admitted for treatment of SAM	69,762	34,881	19,085	1,711	34,881	19,079	1,711
Child Protection							
# of UNICEF girls and boys who have received individual case management		12,592	22,410	630	15,000	31,049	1,409
# of UNICEF children, adolescents, parents and caregivers provided w/CBMHPSS	440,200	105,613	91,655	2,728	440,190	110,831	7,783
# of women, girls and boys accessing GBV risk mitigation, prevention or response int.		102,600	52,002	1,951		52,806	2,111
# of children & adults with access to safe and accessible channels to report SEA		102,610	32,037	-		32,107	-
Education							
# of children with access to safe/clean TLS, schools, learning kits, hygiene/MHM kits.	521,740	262,740	241,153	6,624	340,387	284,575	-
# of children accessing formal or non-formal education, including early learning	521,740	262,740	129,169	6,624	340,387	110,176	-
# of OOS youth trained in practical skills		2,500	290	0	2,500	10,917	-
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	950,000	700,000	443,625	143,560	850,000	525,450	171,545
# of people using safe and appropriate sanitation facilities	1,000,000	700,000	118,580	2,030	900,000	248,370	3,320
# of people reached with hand-washing behaviour-change programmes	1,260,000	1,000,000	576,090	31,880	1,100,000	1,002,355	95,750
# of people reached w/critical WASH supplies	860,000	700,000	255,675	2,190	850,000	392,160	2,605
Social Protection							
# households reached with unconditional cash transfers		63,000	71,717	34			
C4D/Accountability mechanisms							
# of people reached with SBCC[5]	970,000	467,000	461,931	132			
# of people receiving information on PSEA and response	970,000	373,600	1,594,401	-			
# of adolescents and young people participating in SBC engagement actions	186,000	39,000	56,810	-			
# of people with access to established accountability mechanisms	500,000	500,000	-	-			

[5] Reflects in-person sessions only and not those reached through community radios/tv

Annex B: 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 (Dec)	2022 target	Total results	+/- since last report (Dec)
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	35,556	4,635			
# of sick children under 5 provided with consultations	112,560	96,400	42,569	601			
# children and women accessing primary health care in UNICEF-supported facilities	405,750	318,500	213,659	-			
Nutrition							
# of primary caregivers of children 0-23 months reached with messages on IYCF	169,274	61,533	50,430	6,393	147,174	114,648	6,804
# of children 6-59 months receiving routine vitamin A supplementation	522,272	271,478	253,971	44,647	396,875	261,458	46,019
# of children 6-59 months screened for acute malnutrition (MUAC)	522,272	432,170	263,569	44,647	522,826	317,675	47,634
# of children 6-59 months admitted for treatment of SAM	27,266	27,400	12,011	1,103	27,456	12,005	1,103
Child Protection							
# of girls & boys who have received individual case management	15,000	11,886	22,410	630	15,000	31,049	1,409
# of ppl provided w/CBMHPSS	776,811	99,855	91,655	2,728	315,000	107,670	7,783
# of women/girls/boys accessing GBV risk prev/resp interventions		96,855	52,002	1,951		52,806	2,111
# of children/adults w/access to safe/accessible channels for SEA		96,855	32,037	-		32,107	-
Education							
# of children with access to safe/clean TLS, schools, learning kits, hygiene/MHM kits.	382,404	172,969	232,802	6,624	340,387	284,575	-
# of children accessing formal or non-formal education, including early learning	382,404	172,969	111,375	6,624	340,387	114,031	-
# of OOS youth trained in practical skills		2,500	200	-		10,917	-
WATER, SANITATION & HYGIENE							
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	735,000	649,225	392,125	143,560	700,000	464,950	171,545
# of people using safe and appropriate sanitation facilities	1,000,000	649,225	99,018	1,113	700,000	214,365	3,320
# of people reached with hand-washing behaviour-change progs	1,000,000	927,464	482,275	31,880	1,000,000	901,120	95,750
# of ppl reached w/critical WASH supplies	703,000	649,225	186,935	2,190	700,000	301,610	2,605
Social Protection							
# households reached with unconditional cash transfers		51,000	0	-			
C4D/ accountability mechanisms							
# of people reached with SBCC[6]	970,000	420,000	429,699	132			
# of people receiving information on PSEA and response	970,000	336,000	659,000	-			
# of adolescents and young people participating in SBC engagement actions	186,000	15,000	56,810	-			
# of people with access to established accountability mechanisms	500,000	480,000	-	-			

[6] Reflects in-person sessions only and not those reached through community radios/tv

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	3,541,069	1,334,072	2,452,022	33%
Nutrition	7,771,410	2,495,454	1,031,304	4,244,652	55%
Child Protection	19,061,650	3,650,022	1,181,915	14,229,713	75%
Education	16,593,907	3,607,386	488,848	12,497,673	75%
WASH	30,952,152	6,083,441	7,773,634	17,095,077	55%
Social Protection	13,065,862	-	1,781,797	11,284,065	86%
Social Behaviour Change, AAP	3,979,800	211,982	403,141	3,364,677	85%
Prog/Op Effectiveness		2,147,016	-		
Total	**98,751,944**	**21,736,370**	**13,994,711**	**63,020,863**	**64%**