The humanitarian situation in Mozambique has deteriorated with the intensification of conflict in Cabo Delgado province. Some 425,000 people are displaced, and basic services have been severely disrupted. Over 135,000 people are food insecure and nearly 28,000 children are acutely malnourished.

Conflict-related violence has intensified in Cabo Delgado, with reports of killings, maimings, abductions and sexual violence against civilians, including children. The rapidly evolving conflict dynamics call for robust approaches to secure humanitarian access, as it is becoming challenging to reach affected populations in some districts.

UNICEF will provide immediate and multi-sector life-saving assistance to internally displaced persons, host families and affected populations, including by providing critical supplies; strengthening health, nutrition, education, child protection and water, sanitation and hygiene (WASH) services; supporting awareness raising, behaviour change and capacity building; and prioritizing the prevention of sexual exploitation and abuse.

UNICEF is requesting US$52.8 million to meet the humanitarian needs of affected children, women and adolescents in Mozambique, contain the spread of COVID-19 and respond to food and nutrition insecurity and flooding in 2021.

**HIGHLIGHTS**

- The humanitarian situation in Mozambique has deteriorated with the intensification of conflict in Cabo Delgado province. Some 425,000 people are displaced, and basic services have been severely disrupted. Over 135,000 people are food insecure and nearly 28,000 children are acutely malnourished.

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**KEY PLANNED TARGETS**

- **8,000** children admitted for treatment for severe acute malnutrition

- **179,899** children accessing educational services

- **400,000** people reached with critical water, sanitation and hygiene supplies and services

- **1.4 million** people reached with messages on access to services

**IN NEED**

- **1.8 million** people

- **954,000** children

**TO BE REACHED**

- **933,000** people

- **695,000** children

**FUNDING REQUIREMENTS**

- **US$ 52.8 million**
HUMANITARIAN SITUATION AND NEEDS

In Mozambique, nearly half of the population (48 per cent) is living below the poverty line; nearly half of Mozambicans (49 per cent) lack access to safe water; and more than three quarters are not using improved sanitation facilities. In addition, 43 per cent of children under five years are severely or moderately stunted and the country is facing a severe shortage of health workers (4.5 workers per 10,000 people).

On top of these existing vulnerabilities, Mozambique is also facing complex humanitarian challenges. COVID-19 has spread throughout the country, with over 14,000 cases reported as of November, and 8 of 11 provinces at high risk. The number of COVID-19 cases is expected to reach 800,000 by June 2021. The pandemic has had an unprecedented impact on education, with school closures affecting 8.5 million students.

Mozambique is also facing recurring cholera outbreaks, with nearly 3,300 cases and 31 deaths reported in 2020. Measles and rubella outbreaks have also been reported, with over 1,100 suspected cases nationwide and new cases reported in Cabo Delgado. In addition, over 135,000 people are food insecure and need assistance, and nearly 28,000 children aged 6 to 59 months are acutely malnourished and require treatment.

The conflict in Cabo Delgado has displaced 425,000 people, including 191,000 children, the majority of whom are living in host communities. Basic services have been severely disrupted, with 138 schools and nearly 62,000 students affected; 175,800 people impacted by non-operational water systems; and 25 per cent of health facilities not functioning. Security incidents reported in central Mozambique have displaced over 5,500 people. Affected populations are in urgent need of shelter, food, protection and access to health care and safe drinking water, and the COVID-19-related economic slowdown has exacerbated these needs.

Child rights violations continue in Mozambique, with reports of killings, abductions and abuse of girls and women. Gender-based violence cases also continue to rise. Access to services remains limited, particularly for persons with disabilities who lack accessible facilities, services and assistive devices. Appropriate case management, violence prevention and response services and psychosocial support are badly needed.

SECTOR NEEDS

<table>
<thead>
<tr>
<th>Sector</th>
<th>Need</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td></td>
<td>16,000</td>
</tr>
<tr>
<td>Health</td>
<td></td>
<td>459,000</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td></td>
<td>920,000</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td></td>
<td>74,000</td>
</tr>
</tbody>
</table>

STORY FROM THE FIELD

Mossa and his family are finally safe with a host family in Metuge.

It was an exhausting and dangerous journey for Mossa, 38, his wife and their four children. Escaping violent attacks in northern Cabo Delgado, the family first sought refuge on Quirimba Island, but when the insurgents made it to the Island, the family had to flee again on a barge.

The escape has left its traces and today Mossa is taking his four children to the centre where UNICEF-supported integrated mobile health brigades diagnosed his youngest daughter Nalia, 1, with moderate acute malnutrition.

Read more about this story here.

A UNICEF-supported health brigade in Cabo Delgado has diagnosed moderate acute malnutrition in Nelia, 1. Mossa, 38, receives therapeutic food to treat his daughter.
HUMANITARIAN STRATEGY

To meet the existing and projected humanitarian needs in Mozambique, UNICEF will provide immediate and multi-sector life-saving assistance to affected children and women.25 With the conflict continuing to undermine livelihoods and employment opportunities, UNICEF will support gender-responsive and child-sensitive social protection mechanisms to help displaced people, primarily female-headed households, and host families access food and basic services. This will ensure more dignity and choice and contribute to increasing the use and coordination of cash-based programming, in line with the Grand Bargain commitments.26 UNICEF will prioritize community-based approaches in areas affected by insecurity and communities hosting displaced people to ensure that humanitarian support is inclusive and addresses the needs of both displaced people and host families to prevent potential tensions. The Rapid Response Mechanism will be explored as an approach to ensuring timely assistance to sudden displacements, including to assist displaced people in hard-to-reach areas.

In contexts characterized by insecurity and COVID-19 containment measures, UNICEF will adapt its operations to ensure the implementation of COVID-19 prevention measures, and establish partnerships with government counterparts and organizations with the capacity to operate in hard-to-reach areas. UNICEF will provide inclusive water, sanitation and hygiene (WASH) services in resettlement sites and temporary accommodation centres and target interventions in host areas. Planning for these interventions will incorporate gender-sensitive approaches and adapted facilities for individuals living with disabilities. Inclusive child-friendly spaces will be established with UNICEF support in resettlement sites, where case management and gender-based violence prevention and response services will be available and disability inclusion will be supported through capacity building. Child rights violations will be documented to strengthen the capacities of national and local actors to address them and to inform necessary interventions.

UNICEF will support access to disease prevention, strengthen referral systems and establish mobile health teams to deliver essential services and facilitate access to quality treatment for acute malnutrition and appropriate infant and young child feeding services and counselling for women and children. UNICEF will also support inclusive youth-friendly spaces to enable affected young people, including those with disabilities, to congregate and safely access programmes and services and equip them as agents of positive change. The prevention of sexual exploitation and abuse will be prioritized across all programmes. UNICEF will coordinate these interventions with the Government and through the cluster mechanism, and lead the WASH, education and nutrition clusters and the child protection area of responsibility. Capacity-building initiatives and efforts to strengthen service delivery will contribute to enhancing the linkages between humanitarian action and development programmes.

Progress against the 2020 programme targets is available in the humanitarian situation reports:

https://www.unicef.org/appeals/mozambique/situation-reports

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
UNICEF is requesting US$52.8 million to meet the humanitarian needs of over 933,000 children, adolescents and women affected by COVID-19, cholera, measles, food and nutrition insecurity, and the ongoing conflict in Cabo Delgado province – which is now affecting the neighbouring provinces of Nampula, Niassa and Zambezia. Funding requirements increased compared with 2020 given the deterioration of the security situation, displacement in Cabo Delgado and COVID-19; and have decreased compared with 2019 given that the scale and geographical scope of the crises affecting Mozambique were greater in 2019 due to the two cyclones that struck the country. In 2021, UNICEF will focus its response on the provision of child protection, WASH, health, education, social protection and nutrition services. Without adequate and timely funding, UNICEF and its partners will be unable to provide critical support to vulnerable children, adolescents and women living in dire conditions and highly vulnerable to COVID-19 in Mozambique, particularly in the country’s central and northern regions.

### 2021 Requirements

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>4,980,528</td>
</tr>
<tr>
<td>Health</td>
<td>10,845,022</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>11,024,813</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td>6,285,963²</td>
</tr>
<tr>
<td>Education</td>
<td>9,716,881³</td>
</tr>
<tr>
<td>Social protection and cash transfers</td>
<td>7,786,886</td>
</tr>
<tr>
<td>C4D, community engagement and AAP</td>
<td>2,157,840</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>52,797,933</strong></td>
</tr>
</tbody>
</table>

*This includes costs from other sectors/interventions: Nutrition (9.4%), C4D, community engagement and AAP (4.1%).

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the COVID-19 pandemic. Cost drivers considered in the education funding requirements include human resources, supplies and trainings.

include human resources, supplies and agreements with partners for implementation.

abuse interventions. Child protection interventions are costly as they require continuous follow up, especially for psychosocial support and case management activities. Cost drivers

target includes mass media outreach.

violence against children and prevention of sexual exploitation and abuse. The population targeted is higher than the total number of people/children to be reached because

Malnutrition. Humanitarian nutrition efforts related to severe acute malnutrition (SAM) treatment and other nutrition services are delivered by supporting and increasing the capacity of

people in need and improving the effectiveness and efficiency of humanitarian action.

This is a UNICEF estimate based on data from the National Institute for Disaster Management, Inter Cluster Coordination Group Cabo Delgado Response Plan and Health Coordination Group.

Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse);

This targets children displaced due to armed conflict and children affected by COVID-19.

In Mozambique, the sole provider of treatment services for acute malnutrition is the Mozambican Ministry of Health through the Integrated Program for Management of Acute

Humanitarian nutrition efforts related to severe acute malnutrition (SAM) treatment and other nutrition services are delivered by supporting and increasing the capacity of the

This target represents 73 per cent of the total number of children in need and it is expected that the remaining needs will be covered by the Government and other humanitarian

Note that this appeal is informed by a response plan with detailed targeting per province and sector which was used to calculate the number of people to be reached to avoid double counting and maximize coverage. UNICEF expects that the remaining needs will be covered by the Government and other humanitarian agencies/organizations operating in the country.

This figure was calculated using the highest coverage programme targets for children under 15 years to be reached with measles and oral cholera vaccination in two provinces (434,716); people to be reached with cash transfers in one province (117,500); people to be reached with critical WASH supplies and services in response to COVID-19 in six provinces (306,000); and children under 5 years to be screened for acute malnutrition in two provinces (75,000). The total figure includes 447,944 men/boys, 485,272 women/girls and 93,321 people with disabilities. Note that this appeal is informed by a response plan with detailed targeting per province and sector which was used to calculate the number of people to be reached to avoid double counting and maximize coverage. UNICEF expects that the remaining needs will be covered by the Government and other humanitarian agencies/organizations operating in the country.

This figure was calculated using the highest coverage programme targets for children under 15 years to be reached with measles and oral cholera vaccination in two provinces (434,716); children to be reached with critical WASH supplies and services in response to COVID-19 in four provinces (129,850); and children under 5 years to be screened for acute malnutrition and reached with supplementation in four provinces (130,000). The total figure includes 333,392 boys, 361,174 girls and 69,457 children with disabilities. Note that this appeal is informed by a response plan with detailed targeting per province and sector which was used to calculate the number of people to be reached to avoid double counting and maximize coverage. The UNICEF target represents 73 per cent of the total number of children in need and it is expected that the remaining needs will be covered by the Government and other humanitarian agencies/organizations operating in the country.


9. 'Mozambique Multidimensional Poverty Analysis: Status and trends'.


15. 'Mozambique - Cabo Delgado, Nampula and Niassa Provinces: Results of the baseline assessment round 6 - September 2020'. The IOM Displacement Tracking Matrix round 7 is pending release/validation. Preliminary findings suggest an increase in the number of internally displaced persons (likely numbering over 500,000).


20. This is a UNICEF estimate based on the number of children who are displaced, in host families and at risk.

21. This is a UNICEF estimate based on data from the National Institute for Disaster Management, Inter Cluster Coordination Group Cabo Delgado Response Plan and Health Coordination Group.

22. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).

23. This is a UNICEF estimate based on the number of children displaced by the conflict in northern region.


25. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.

26. The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.

27. In Mozambique, the sole provider of treatment services for acute malnutrition is the Mozambican Ministry of Health through the Integrated Program for Management of Acute Malnutrition. Humanitarian nutrition efforts related to severe acute malnutrition (SAM) treatment and other nutrition services are delivered by supporting and increasing the capacity of the Integrated Program for Management of Acute Malnutrition to reach at least 50 per cent of the estimated population of children with SAM in intervention areas. The current coverage rate is 30-35 per cent of the estimated caseload.

28. This targets children displaced due to armed conflict and children affected by COVID-19.

29. This targets children aged 6 to 15 years accessing formal education through temporary learning solutions.

30. This covers 127,500 people.

31. This covers people to be reached with key messages on health, nutrition, safe and appropriate sanitation, hygiene practices, HIV prevention and treatment, prevention of violence against children and prevention of sexual exploitation and abuse. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.

32. This includes US$5,867,963 for child protection interventions; US$250,000 for gender-based violence interventions; and US$168,000 for prevention of sexual exploitation and abuse interventions. Child protection interventions are costly as they require continuous follow up, especially for psychosocial support and case management activities. Cost drivers include human resources, supplies and agreements with partners for implementation.

33. The cost of materials, transportation, etc. are extremely high in Mozambique due to the global demand for the same materials in emergencies, and heightened demand during the COVID-19 pandemic. Cost drivers considered in the education funding requirements include human resources, supplies and trainings.