



REPÚBLICA DE MOÇAMBIQUE
MINISTÉRIO DA PLANIFICAÇÃO E DESENVOLVIMENTO

Summary report

Multidimensional Child Poverty in Mozambique (2014/15–2022)

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Preface

This study presents the evolution of Multidimensional and Monetary Child Poverty in Mozambique from 2014/15 to 2022, based on data from the Household Budget Surveys conducted in 2014/15, 2019/20, and 2022.

It is the result of close collaboration between the Ministry of Planning and Development (MPD), through the National Directorate of Economic Policies and Development (DNPED), the UNICEF Country Office in Mozambique (MCO), the World Institute of Development Economics Research (UNU-WIDER), and the Development Economics Research Group at the University of Copenhagen (UCPH-DERG).

The analysis and preparation of the report also benefited from the contributions of a multisectoral reference group, comprising representatives from various government bodies and international institutions — including the Planning and Studies Department of the Ministry of the Interior (MINT-DPED), the National Institute for Disaster Risk Management and Reduction (INGD), the Ministry of Education and Culture (MINEC), the Ministry of Health (MISAU), the Ministry of Labour, Gender and Social Action (MTGAS), the World Health Organization (WHO), and civil society representatives (ROSC).

The study offers a comprehensive analysis of the situation of children in Mozambique in relation to poverty and deprivation. Drawing on the most recent nationally representative data and robust analytical methods, the report identifies disparities across regions, gender, and age groups. This evidence forms a strong foundation for assessing progress towards the child-related Sustainable Development Goals (SDGs).

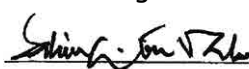
The findings show that a significant number of children and adolescents in Mozambique continue to live in monetary poverty or face multiple deprivations. One in three children is simultaneously affected by both monetary and multidimensional poverty. While public policies implemented by the Government between 2014/15 and 2022 have contributed to a reduction in multidimensional poverty, the pace of progress has been slower than hoped. This is due to a range of challenges the country has faced over the past decade, including social and political tensions, unexpected economic shocks, public health crises such as the COVID-19 pandemic, and recurring natural disasters.

We believe that accurate and up-to-date information and analysis, such as those presented in this report, are a crucial step toward the success of any poverty reduction strategy. The findings provide a critical overview of areas that require immediate and decisive action by the Government and its development partners, and should inspire greater efforts to improve the lives of Mozambique's children — an investment in the country's future.

We hope the evidence and insights contained in this report will galvanize renewed commitment and concrete action by all stakeholders to improve the well-being of every child in Mozambique.

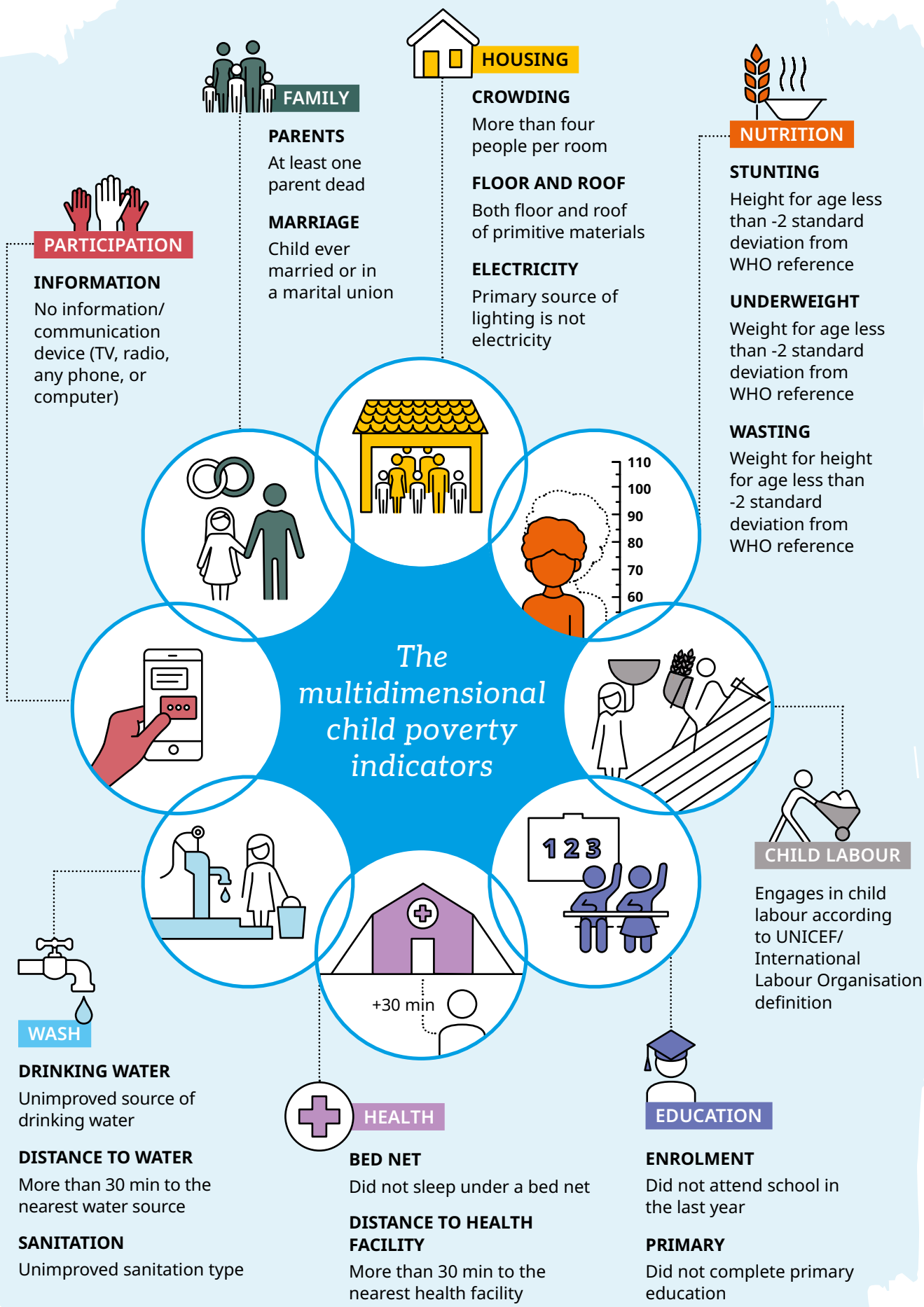
Maputo, May 20, 2025

Minister of Planning and Development



Salim Cripton Valá





Key findings

High child poverty rates in Mozambique

Out of **16.4 million children**, nearly **13 million (77 %)** live in poverty in one form or another, either monetary, multidimensional, or both.

Slow progress on reducing multidimensional poverty

Multidimensional child poverty in Mozambique has seen only slight improvements from 2014/15 to 2022.

Approximately **6.8 million children (41.3 %)** are in multidimensional poverty, meaning their basic rights are not fully met.

Geographical disparities in multidimensional poverty

Deprivation rates show significant regional disparities, with **rural poverty** being about **three times** higher than **urban poverty**.

The **northern** and **central** regions have higher poverty rates compared to the **southern region**.

Children in the poorest provinces (Niassa, Cabo Delgado, Nampula, and Zambézia) are significantly more likely to experience poverty (around 50%) than those in the richest province, Maputo City (approximately one %).

Marked increase in child monetary poverty

Majority of the children (**70.3%**) live **below the poverty line** (61.3 meticaïs per person per day).

Children are more likely to experience monetary poverty than adults, with the youngest children (0-12 years old) being particularly vulnerable.

Simultaneous poverty

Around **one-third (33 %)** of children experience **both monetary and multidimensional poverty**, being deprived in multiple dimensions while also facing consumption poverty.

Impact of multiple shocks

Systemic shocks, such as the **hidden debt crisis** and the **COVID-19 pandemic**, contributed to a **spike** in child monetary poverty, with rural children more affected by the debt crisis and urban children by the pandemic.

Climate shocks resulted in higher child labour, increased deprivations in housing and participation, and an overall rise in child monetary poverty.

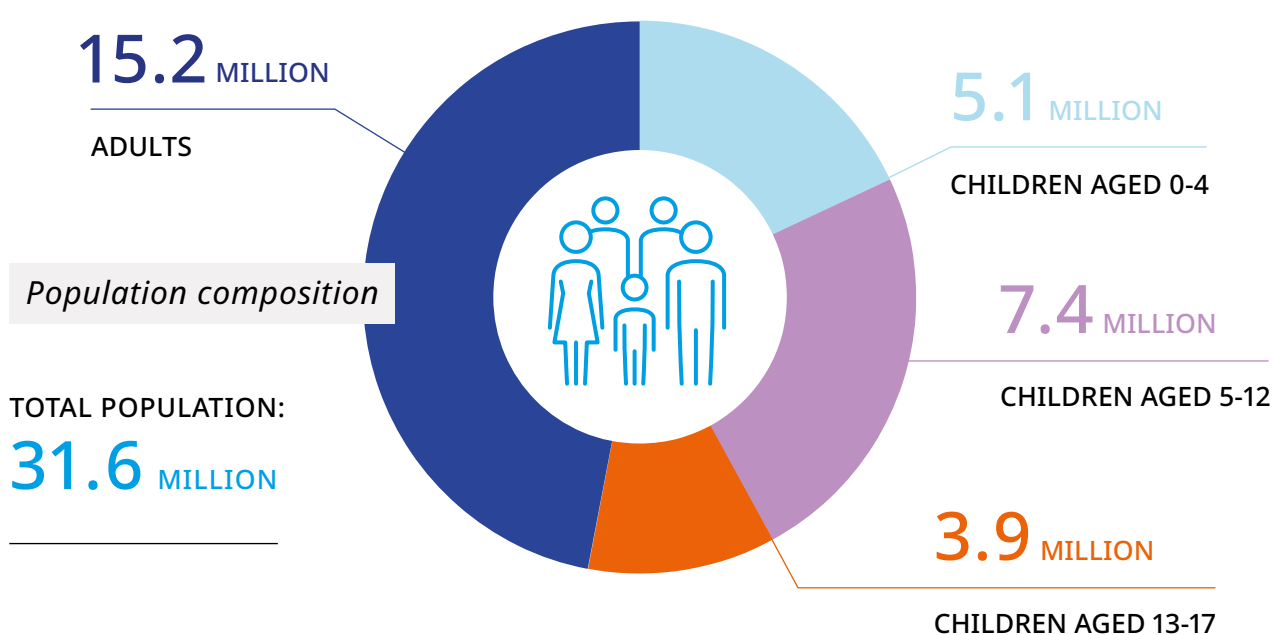
Conflict shocks have had devastating impacts on children, particularly affecting family stability, nutrition, education, health, housing, and monetary poverty.

Motivation

After a long period of growth that came to an end around 2015, Mozambique has faced a series of socio-economic, natural and health shocks that compounded the challenges of an already uneven growth pattern. These crises have led to a marked economic slowdown, rising poverty rates and relatively high levels of economic inequality. There are indications that these have had serious implications for all Mozambicans. It is likely that the most affected were children, who represent more than half of the.

Children are likely to experience poverty and deprivation in a different way when compared to the rest of the population. Indeed, some of the dimensions of children's well-being require a long time to improve and are directly related to public goods provided by the state, such as health and education. Children are also dependent on others for their well-being and have little control over resources, which might make them more vulnerable. The Government of Mozambique is committed to ensuring "all opportunities and facilities in order to facilitate the child's physical, mental, moral, spiritual and social development, in conditions of freedom and dignity" (Law n. 7/2008, of 9 July, on the Promotion and Protection of the Rights of the Child). Mozambique is also at the forefront of the effort to meet Sustainable Development Goal 1 of the 2030 Agenda, which states the commitment to reduce child poverty by half by the end of 2030.

This report aims to provide updated and comprehensive evidence of multidimensional child poverty and deprivation in Mozambique, using the latest two waves of IOF data, collected in 2019/20 and 2022. In addition, this analysis aims to discuss the impact of shocks on children's well-being that occurred from 2014/15 to 2022, including macroeconomic and fiscal challenges, the COVID-19 pandemic, climate shocks, and conflicts.



Source: 2022 Population Projections
based on the 2017 Population Census, INE

Data and Methodology

In this study, the Multidimensional Poverty Index (MPI), based on the methodology of Alkire and Foster, serves as the basis for estimating multidimensional child poverty. This approach was developed by the Oxford Poverty Human Development Initiative (OPHI), and allows for global and regional comparisons within the framework of the Sustainable Development Goals (SDGs). To complement the MPI, we use the Multiple Overlapping Deprivations Analysis (MODA) approach, developed by UNICEF, which is based on the international framework of children's rights to build dimensions of child wellbeing.

MODA offers a comprehensive understanding of child poverty by exploring overlapping deprivations in multiple dimensions.

In addition, the study also analyses the overlaps between multidimensional and monetary child poverty.

Dependent of the type of shock and available data, simulation, quasi-experimental and non-experimental regression analysis is used to assess the impacts of shocks on multidimensional and monetary child poverty.

BOX 1

Monetary Poverty

Monetary or consumption poverty is assessed using the Cost of Basic Needs (CNB) methodology adopted in all National Poverty Assessments.

In them, household consumption is assessed on the basis of daily expenditure, self-consumption, monthly and annual expenditure, etc., including both food and non-food items.

The consumption aggregate is then compared with the poverty lines calculated in each survey.

They measure the cost of acquiring a basic basket that includes both food (capable of providing approximately 2150 kcal/person/day) and non-food items.

If a family has consumption levels above the poverty line, it is not considered poor; if it has lower consumption levels, it is considered poor.

If a family's consumption is below the poverty line, all family members, including children, are considered poor.



BOX 2

Multidimensional Poverty

This study uses both MPI and MODA approaches. Consistent with the previous Multidimensional Child Poverty Report, adopts 17 indicators grouped into eight dimensions of child poverty and deprivation (see page 1).

Both MPI and MODA use the same method of calculating the indicators and the same indicators between age groups, so in terms of indicators, the two methodologies produce identical results.

The indicators are specific to each age group, reflecting the different needs of children at different stages of growth.

MPI This approach applies the Alkire-Foster (AF) methodology. It determines multidimensional poverty by calculating the weighted deprivation for each child and comparing it to a predefined poverty cut-off point, in this case $k=1/3$.

It then aggregates the individual results into a single index. The incidence of poverty (H), is the percentage of children who are identified as multidimensionally poor, i.e. with a weighted deprivation greater than $k=1/3$.

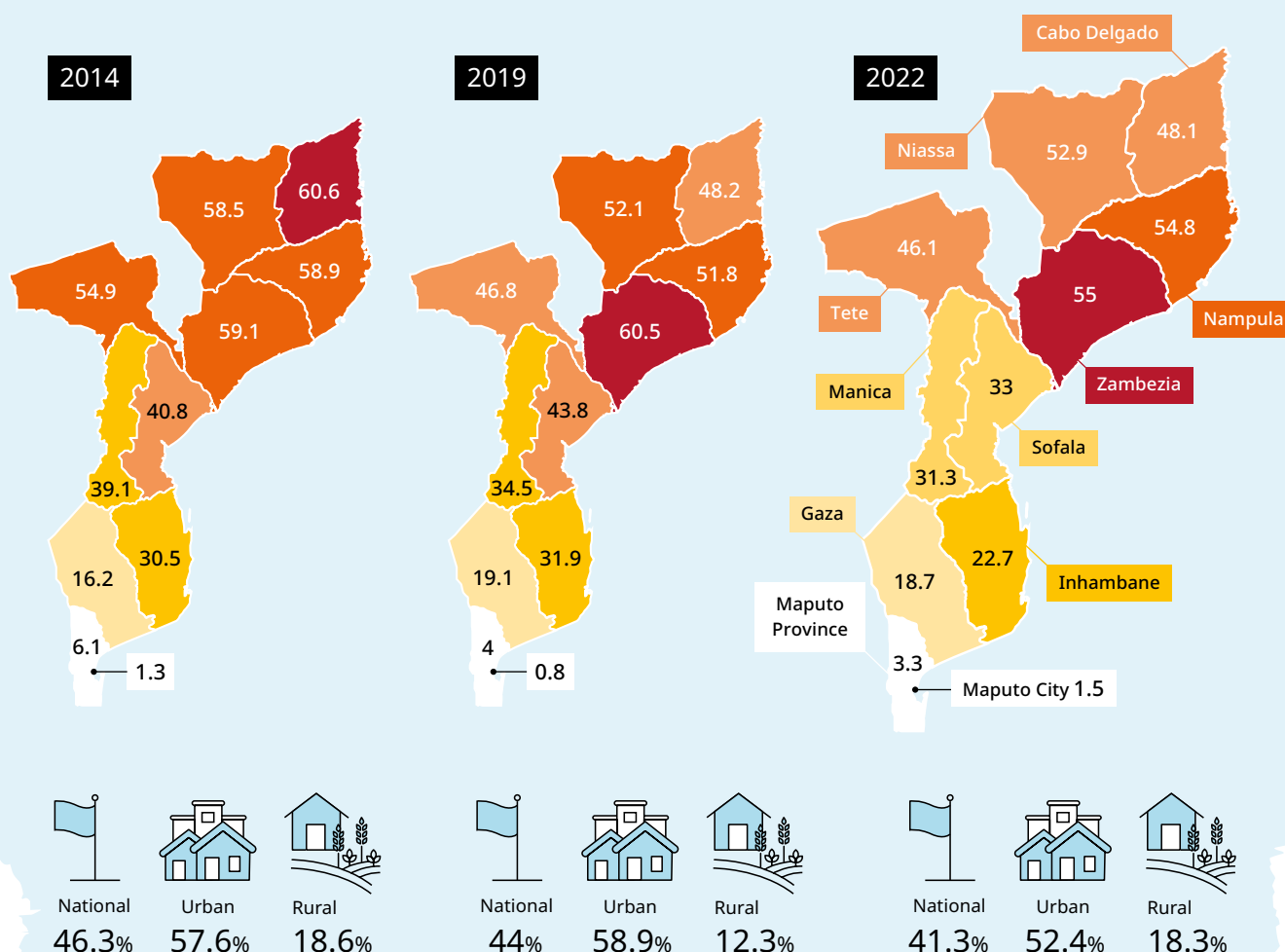
MODA In MODA analysis, indicators are aggregated into dimensions using the union approach (i.e. a child is considered deprived in a dimension if they are deprived in any of the indicators in that dimension).

The MODA methodology is particularly useful for decomposition analyses and group comparisons.



Results

Multidimensional poverty index by province, 2014/15-2022



Source: Authors' calculation based on IOF 2014/15, IOF 2019/20 and IOF 2022 data.

There is a clear uneven distribution of child poverty across Mozambique. In 2014/15, the provinces of Niassa, Cabo Delgado, Nampula, and Zambezia all reported high poverty rates of around 60 %. By 2019/20, Zambezia recorded the highest incidence at 60.5 %, while Niassa, Cabo Delgado and Nampula showed lower rates at around 50 %. In contrast, Maputo City consistently maintained the lowest poverty rate, at about one % across all three survey years. By 2022, Niassa, Nampula and Zambezia continued to have high incidence rates, surpassing 50 %¹

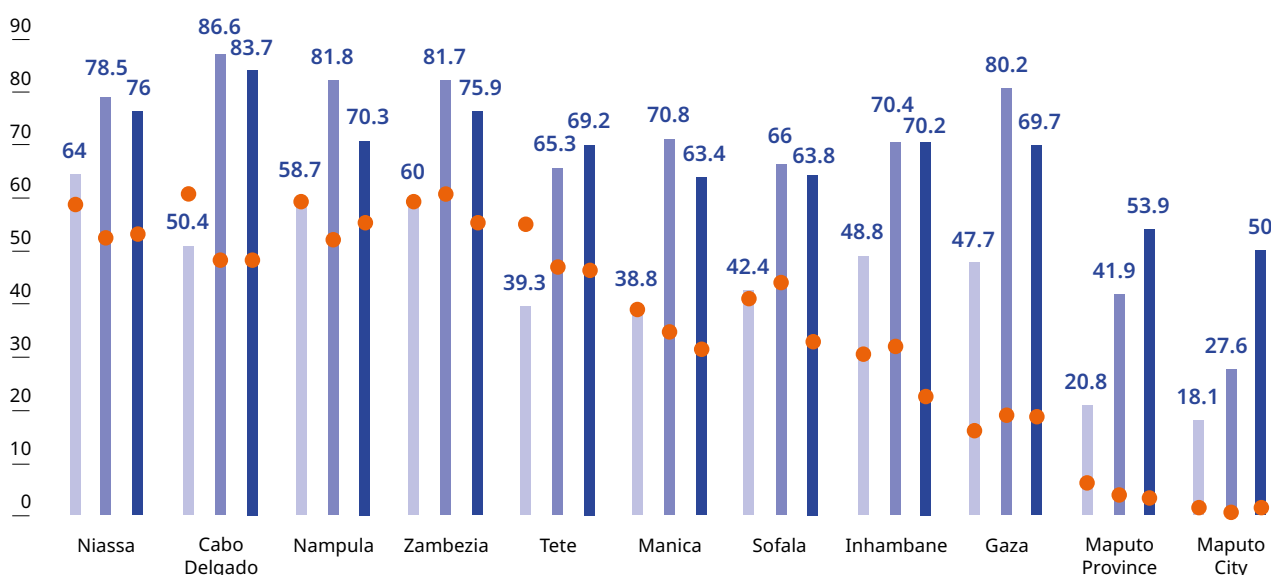
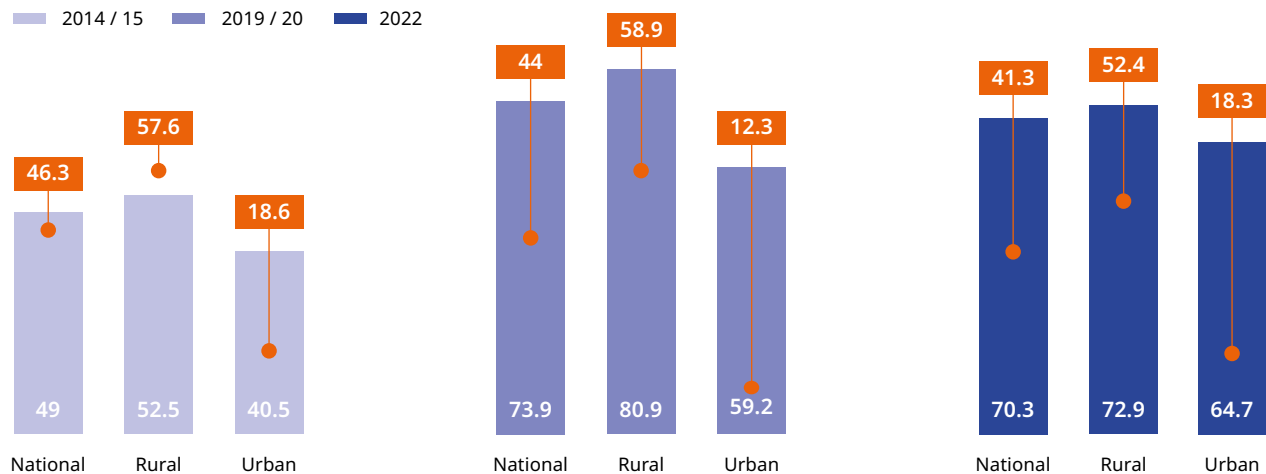
¹ Note: It should be noted that for Cabo Delgado, after 2017, households in the conflict-affected districts could not be surveyed due to security concerns. This implies that multidimensional child poverty is likely to have been underestimated for the province in 2019/20 and 2022. See Appendix A for a complete list of included districts in the Northern regions, Cabo Delgado, Niassa and Nampula, for 2019/20 and 2022.

Multidimensional and monetary child poverty (%)

Consumption

Multidimensional

2014 / 15 2019 / 20 2022

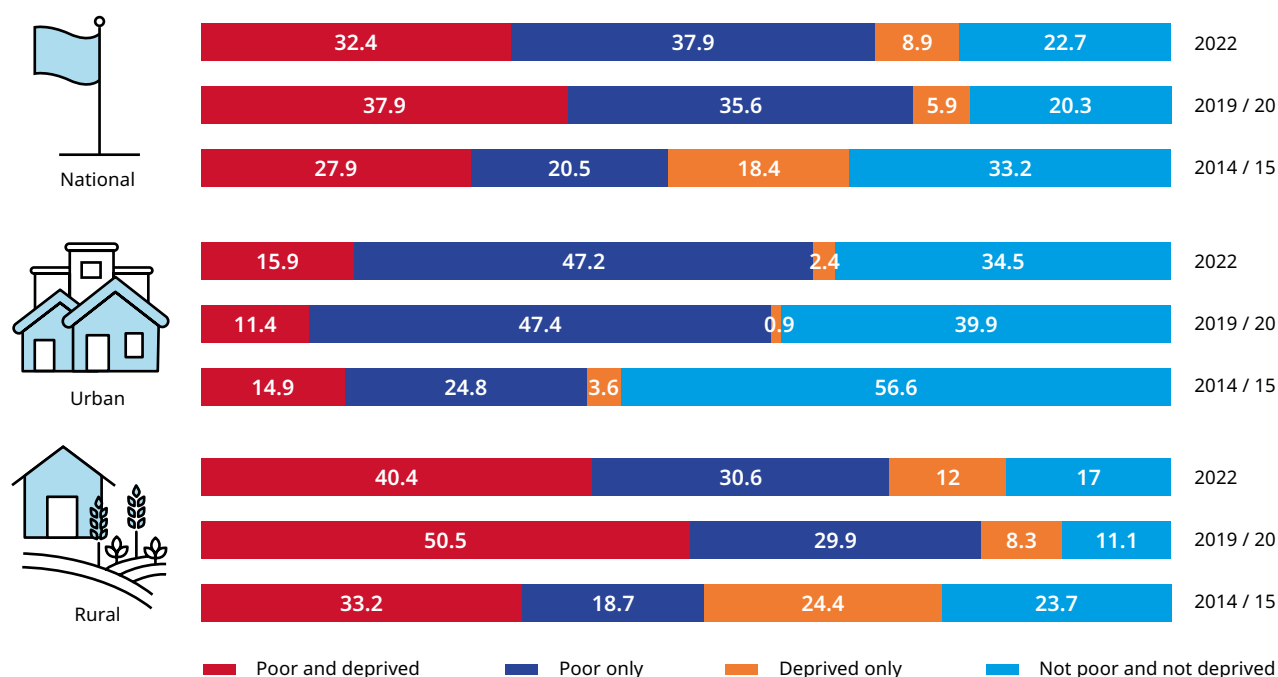


Source: Authors' calculation based on IOF 2014/15, IOF 2019/20 and IOF 2022 data.

Child multidimensional poverty has slightly decreased from 2014/15 to 2022 at the national level. In rural areas, it increased slightly from 2014/15 to 2019/20 to then decrease to 52.4 % in 2022. Still, more than half of the children in rural areas are multidimensionally poor in 2022. In urban areas the decrease is more marked from 2014/15 to 2019/20, reaching 12.3 %, but so is the subsequent increase to 18.3% in 2022, reverting to levels close to those observed for 2014/15.

The share of children living in monetary poverty is much higher across years and geographical regions and shows a marked increase in 2019/20. In 2022, it decreases slightly at the national level (from 73.9 % in 2019/20 to 70.3 % in 2022) and more so in rural areas (from 80.9 % to 72.9 %), while there is an increase of 5.5 percentage points in urban areas (from 59.2 % to 64.7 %).

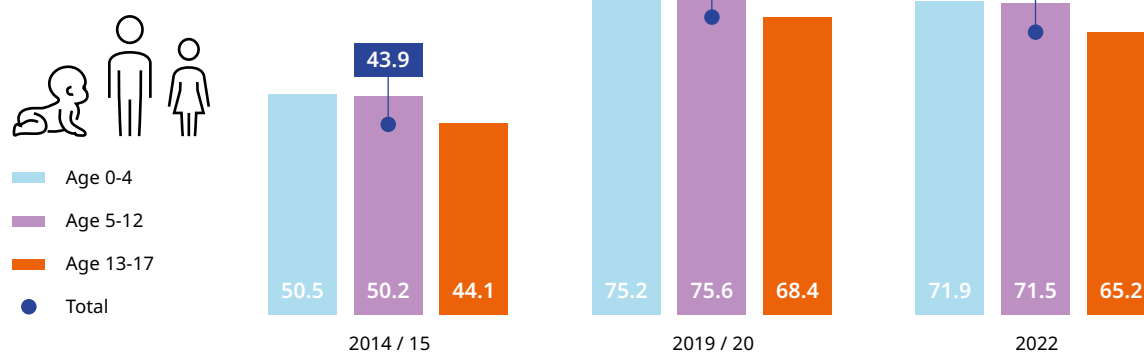
Overlap between monetary and multidimensional poverty (MPI criteria) (%) by area of residence and year



Source: Authors' calculation based on IOF 2022 data.

Close to one in three children were multidimensionally deprived and monetarily poor in 2022, worsening the situation found in 2014/15. The worsening of the prevalence of joint multidimensional and monetary child poverty was higher in rural areas, but also visible in urban areas.

Monetary poverty rates for children and adults (%)

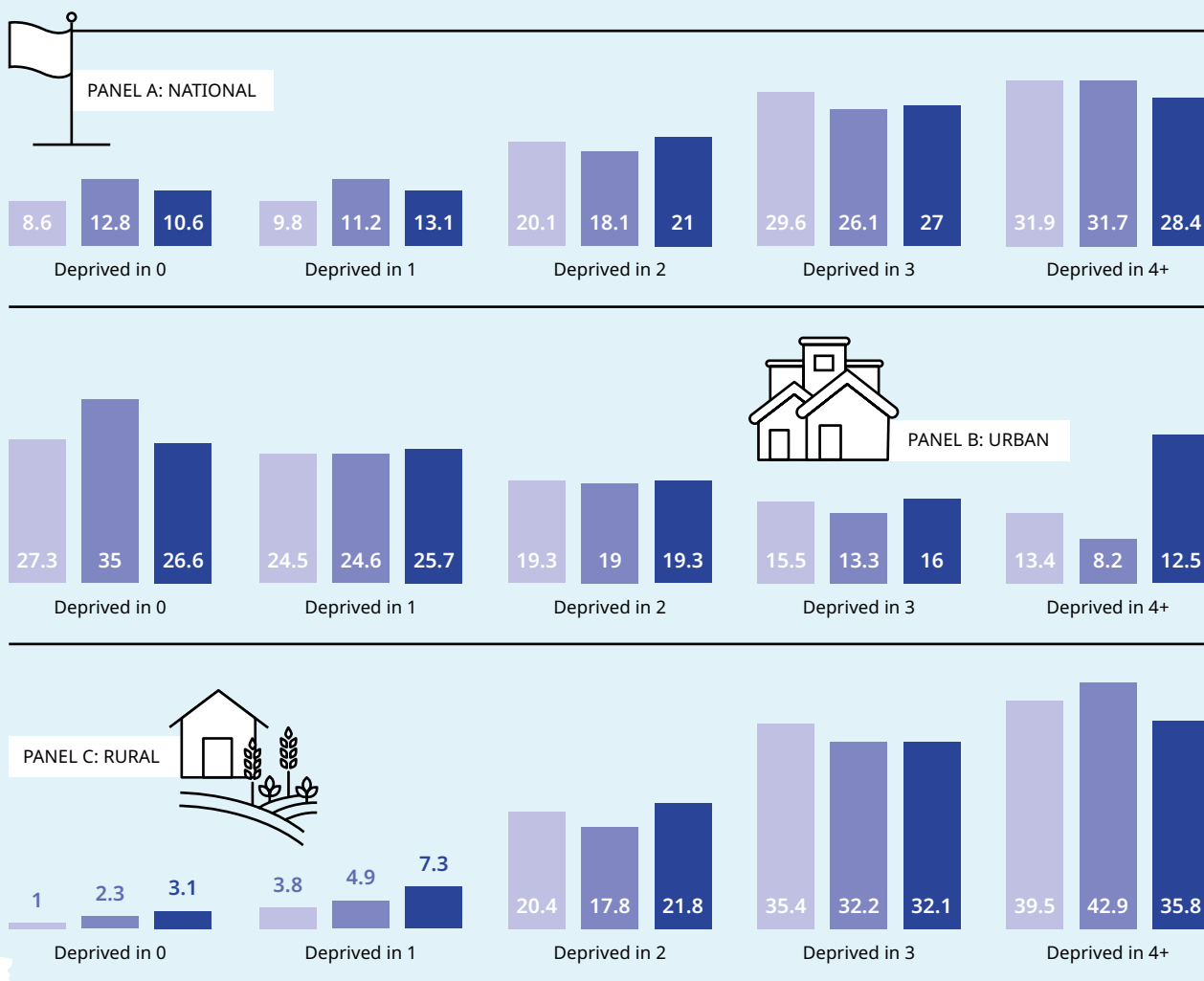


Source: Authors' calculation based on IOF 2022 data.

Monetary poverty affects higher percentages of children, of all age groups, than the average population. Children age 0-4, at the crucial stages of early development, are the ones more likely to live in monetary poverty, with almost three in four of them living below the poverty line (equivalent to 61.3 meticaís per person per day).

Proportion of deprived children per number of deprivations and location

2014 / 15 2019 / 20 2022



In 2014/15, most Mozambican children (81.6 %), or about 4 in 5 children at the national level, were deprived in more than one dimension simultaneously. The IOF 2019/20 and 2022 data confirm that to this day, more than 3 out of 4 of children in Mozambique continue to suffer deprivation in more than one dimension.

In both 2019/20 and 2022, more than one-quarter of children suffered from three simultaneous deprivations, while approximately 1 in 3 children faced four or more deprivations.

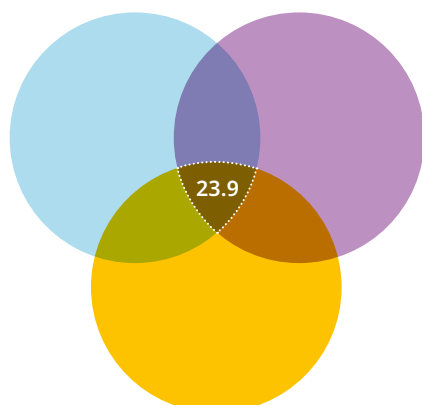
From 2014/15 to 2022, around 90% of rural children are deprived in two or more dimensions. This figure stands at 40.5 % in 2019/20 and 47.7 % in 2022 for children living in urban areas. In addition, the share of children suffering from four or more deprivations has decreased from 39.5 % in 2014/15 to 35.8 % in 2022 in rural areas. This share has seen less than 1% decrease in urban areas.

Overlapping deprivations

ALL CHILDREN

Overlap of
WASH, Health
and Housing

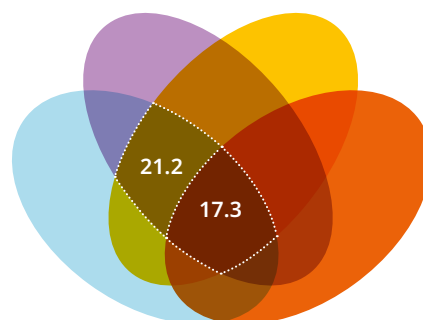
14.2%
Not deprived
in any



CHILDREN 0-4

Overlap of
WASH, Health,
Housing,
and Nutrition

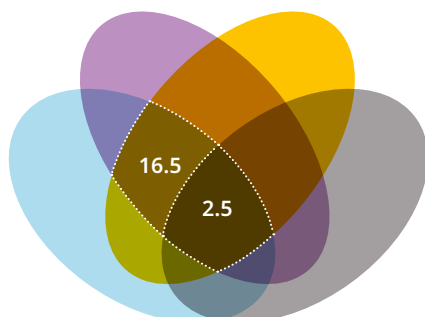
7.9%
Not deprived
in any



CHILDREN 5-12

Overlap of
WASH, Health,
Housing,
and Labour

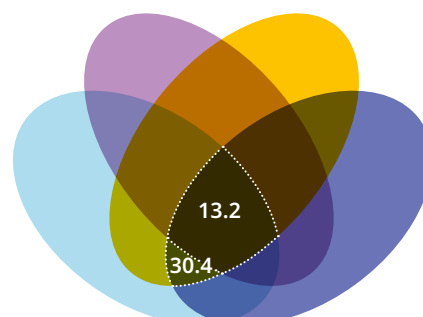
14.2%
Not deprived
in any



CHILDREN 13-17

Overlap of
WASH, Health,
Housing,
and Education

15%
Not deprived
in any



Source: Authors' calculation based on IOF 2022 data.

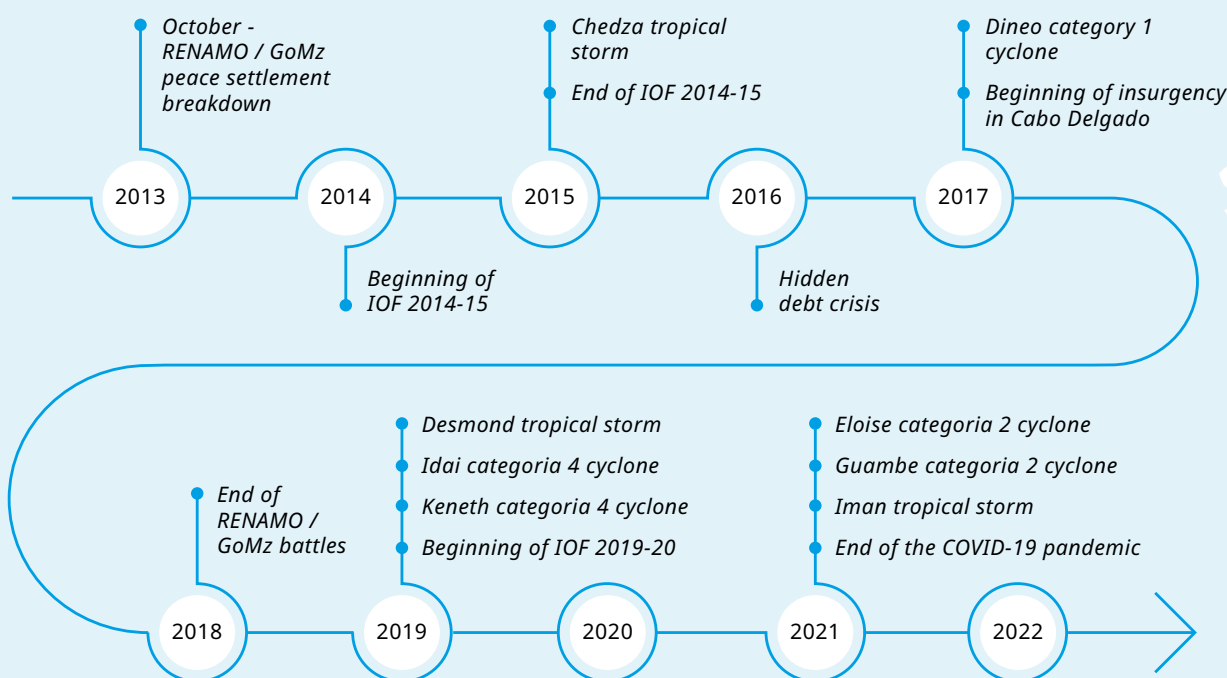
The overlap between WASH, Health and Housing deprivations recurs frequently for all children regardless of their age group, with about 24 % of all children experiencing these three deprivations at the same time.

Among children aged 0 to 4, about 17 % of children are simultaneously deprived in WASH, Health, Housing and Nutrition. A bigger group, representing 21.2 % of children in early infancy, while not deprived in Nutrition, still are jointly deprived in WASH, Health and Housing. Only about 8% of children in this age group are not deprived in any of these dimensions.

Among children aged 5 to 12, reports that 16.5 % of the children are deprived in the WASH, Health and Housing dimensions. Another subgroup, representing 2.5 % of all children in this age group experience an added deprivation and are also engaging in Child Labour.

About 13 % of the children in the oldest age group are simultaneously deprived in WASH, Health, Housing and Education. A bigger group, representing 30.4 % of all children aged 13-17, while not deprived in Health, are simultaneously deprived in WASH, Housing and Education.

Multiple shocks experienced by Mozambique, 2013 to 2022



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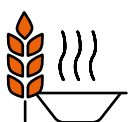
According to the literature and the results of this study, it was possible to identify different levels of child vulnerability associated with exposure to shocks recorded between 2014 and 2022.



Housing is significantly vulnerable to **climate shocks**, particularly cyclones, and **conflict situations**.



In regard to **child health**, a direct link has been found between exposure to conflict and worsening health deprivations, particularly due to limited access to health services.



In terms of **nutrition**, it was observed that **exposed households resorted to survival strategies**, such as reducing harvests, food consumption and access to food. However, there was no statistically significant association between exposure to shocks and a direct increase in nutritional deprivation.



In **education**, a higher prevalence of deprivation was observed among children exposed to conflicts. No statistically significant impact was identified from other types of shock, which may be related to the timing of data collection and limitations of the indicators in capturing effects, such as those of the pandemic.



Child labour has increased with exposure to **climate shocks**, particularly affecting children in families experiencing income loss.



Household deprivations increased in correlation with exposure to conflict and climate shocks, while **participation-related** deprivations were associated with extreme weather events.



In **WASH**, although the literature points to an increase in deprivation in shock contexts, **no statistically significant impact was observed** in this study, possibly due to the action of rapid mitigation interventions.



Monetary child poverty was found to be sensitive to all types of shocks analysed — **macroeconomic, climate, health and conflict** — with **increases of between five and 20 percentage points**. Macroeconomic shocks hit rural areas the hardest, while the effects of the pandemic were more pronounced in urban areas.

Deprivation rates by indicators and dimensions, 2022 (%)

Dimension	Indicador	Age	National	Rural	Urban	North	Centre	South
Family	Parents	0-12	8.5	8.4	8.9	7.8	9.0	8.7
	Marriage	13-17	6.8	8.6	3.9	8.9	7.3	3.0
Nutrition	Stunting	0-4	35.1	38.3	26.6	41.3	35.6	18.4
	Underweight		14.4	16.1	9.9	17.7	14.9	4.7
	Wasting		6.0	6.4	5.0	7.5	5.5	4.1
Education	Enrolment	5-12	22.7	26.7	14.1	34.9	19.7	4.7
	Primary Education	13-17	60.3	73.8	38.2	77.3	63.9	29.9
Child Labour	Child Labour	5-17	11.6	15.4	4.0	10.1	14.6	7.6
Health	Bed net	0-4	35.5	40.9	21.1	40.7	32.8	30.8
	Health facility	0-17	29.4	28.6	31.2	30.3	30.5	25.0
WASH	Water	0-17	40.5	51.2	17.5	48.8	44.8	12.4
	Water distance		7.1	9.0	3.1	11.3	4.7	4.4
	Sanitation		69.6	82.2	42.6	80.1	74.4	35.9
Participation	Information	0-17	34.1	41.6	17.8	44.4	36.2	8.1
Housing	Crowding	0-17	7.6	8.9	4.8	5.4	8.9	8.8
	Floor/roof		52.4	66.0	23.2	69.8	55.6	8.3
	Electricity		60.5	77.7	23.5	64.4	69.8	29.3

Deprivation rates by indicator and survey year, and changes over the period 2014/15–2022

Dimension	Indicador	IOF 2014 / 15	IOF 2019 / 20	IOF 2022	Overall change IOF 2014/15 to IOF2022
Family	Parents	9.6	8.7	8.5	-1.1
	Marriage	6.3	6.5	6.8	0.3
Nutrition	Stunting	42.4	37.5	35.1	-7.3
	Underweight	15.7	14.8	14.4	-1.3
	Wasting	4.4	3.9	6.0	1.6
Education	Enrolment	25.9	12.9	22.7	-3.2
	Primary Education	68.1	63.9	60.3	-7.8
Child Labour	Child Labour	11.5	15.0	11.6	0.1
Health	Bed net	38.6	30.6	35.5	-3.1
	Health facility	32.8	31.2	29.4	-3.4
WASH	Water	42.5	45.6	40.5	-2.0
	Water distance	9.0	8.7	7.1	1.9
	Sanitation	73.5	70.1	69.6	-3.9
Participation	Information	24.9	29.5	34.1	9.2
Housing	Crowding	16.2	9.5	7.6	-8.6
	Floor/roof	57.2	54.2	52.4	-4.8
	Electricity	73.6	65.0	60.5	-13.1

*Recommended
Policy Actions*

Address hotspots of high child poverty prevalence

More efforts are needed to bring children from rural and the poorest provinces, such as Niassa, Nampula and Zambezia, out of poverty.

Structural policies with integrated focus on Housing, Water and Sanitation, Education (especially barriers to primary school completion), and access to Health, (particularly access to health facilities) may have a higher potential to reduce monetary and multidimensional child poverty in these hotspots.

Act in areas with increasing child poverty

Child poverty has an increasing tendency in urban areas and the provinces of Cabo Delgado, Nampula (to a lesser degree, also Gaza and Maputo Cidade). In urban areas, policies aiming to reduce child poverty increase should target Health (access to health facilities) and Education (particularly enrolment rates).

Adopt integrated child development approaches along the life of the child

Os pilares do Desenvolvimento da Primeira Infância são, também, dimensões do bem-estar com elevada sobreposição de privações: ASH, Habitação, Saúde, Nutrição e Educação. Tais pilares continuam a ser importantes para além das primeiras idades e ao longo de toda a infância (0-17 anos) e exigem uma abordagem coordenada por vários intervenientes, envolvendo, especialmente, os sectores sociais.

Increase shock resistance capacity

Addressing child monetary poverty and deprivations such as housing, participation, child labour and health is essential to increasing family resilience. The literature shows that cash transfers have a positive impact on multiple dimensions of child well-being and help to mitigate the effects of shocks.

Although this finding does not follow directly from the findings of this poverty assessment, it is widely recognised that stable, predictable and expanding public service provision represents a more effective policy strategy than ad hoc, project-based interventions. Nevertheless, such interventions are complementary to—not substitutes for—responses to shocks.

Strengthen evidence generation to help better address child poverty

Generating robust and continuous evidence on child poverty in Mozambique, including its drivers, manifestations, and geographic disparities, is crucial for developing effective strategies to reduce child poverty. Reliable, up-to-date data is essential for informed decision-making, ensuring policies and interventions effectively address the needs of vulnerable children. Considering child poverty in policy planning, monitoring, and evaluation enhances public service delivery, supports targeted interventions, and optimizes resource allocation. Although the report did not analyse it in depth due to data limitations, addressing the challenges experienced by internally displaced people is vital to fully reduce child poverty.

Address child poverty under fiscal and institutional capacity constraints

The findings in report reveal that nearly 13 million of the 16.4 million children experienced multidimensional or monetary poverty in 2022, highlighting the need to address numerous interlinked issues. Despite some progress in reducing multi-dimensional deprivation, child poverty remains a significant burden, impacting welfare and opportunities for building human capital. While the report did not address the broader macroeconomic, fiscal and institutional constraints, we need to emphasize the importance of carefully considering fiscal constraints and funding availability in national, regional, provincial, and local actions. Careful project design, implementation monitoring, and fund mobilization are essential, in alignment with the 2025-2044 National Development Strategy (ENDE).



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