

Mozambique

National Drinking Water Profile



Key figures on access to drinking water supplies in Mozambique

	Total population of Mozambique in 2024 (INE 2022)	33.2 million		National level of reliance on surface water	3.4 million 10.2%
	Number of children under the age of 5 in 2024 (INE 2022)	5.4 million 16.1%		National level of reliance on surface water in urban areas	Urban 0.3 million 2.6%
	Multi-dimensional child poverty (UNICEF 2020)	46.3%		National level of reliance on surface water in rural areas	Rural 3.1 million 14.1%
	Chronic Malnutrition (INE 2021)	38.0%		National level of reliance on unimproved drinking water sources	10.4 million 31.3%

Advancing towards SDG 6.1 in Mozambique

Mozambique has committed to achieve the UN Sustainable Development Goal (SDG) 6.1 which says, “By 2030, achieve universal and equitable access to safe and affordable drinking water for all.” To accelerate results towards this goal, the Government of Mozambique has adopted the Water Sector Action Plan (2015-2030) which aims at “achieving universal access to basic drinking water services”, “halve the proportion of the population without household access to safely managed drinking water services” and “progressively end access inequity” (DNAAS 2018).

Breaking the Cycle: Advancing to basic drinking water sources

The importance of having access to improved and nearby drinking water sources

- **Health:** In Mozambique, unsafe Water, Sanitation and Hygiene (WASH) leads to the death of almost 8,000 individuals each year, mostly children. Unsafe drinking water is a major driver behind diarrhoeal diseases, accounting for 35% of diarrhoeal deaths and making inadequate WASH a leading cause of illness and death (WHO 2019).
- **Healthy Environment:** Surface water and unimproved water sources are inadequately protected against environmental contamination. On average, in Mozambique, unimproved sources are six times more likely to be contaminated with faecal matter compared to improved sources (DHS 2022-23). Access to safe drinking water is crucial for safeguarding children's health.
- **Gender:** In rural areas, 80% of the population uses a source that is not located on premises (DHS 2022-23). Women and girls bear the burden of collecting water in over 90% of households (DHS 2022-23), limiting their time for education, work, and other opportunities.
- **Barriers to Education and Economic Growth:** Diseases from unsafe drinking water undermine education and limit economic opportunities, trapping families in a cycle of poverty.

JMP Water Service Ladders

The updated and expanded WHO/UNICEF Joint Monitoring Programme (JMP) service ladders enhance global monitoring of drinking water, sanitation, and hygiene. Household drinking water access is assessed using a five-rung service ladder, ranging from surface water to safely managed drinking water. In Mozambique, significant improvements in health and dignity can be achieved if millions of people shift away from using surface water and unimproved sources.

While many countries lack data on drinking water quality—which is essential to assess safely managed drinking water services— Mozambique has made significant strides through its most recent demographic household survey (DHS 2024).

Service Level & Definition

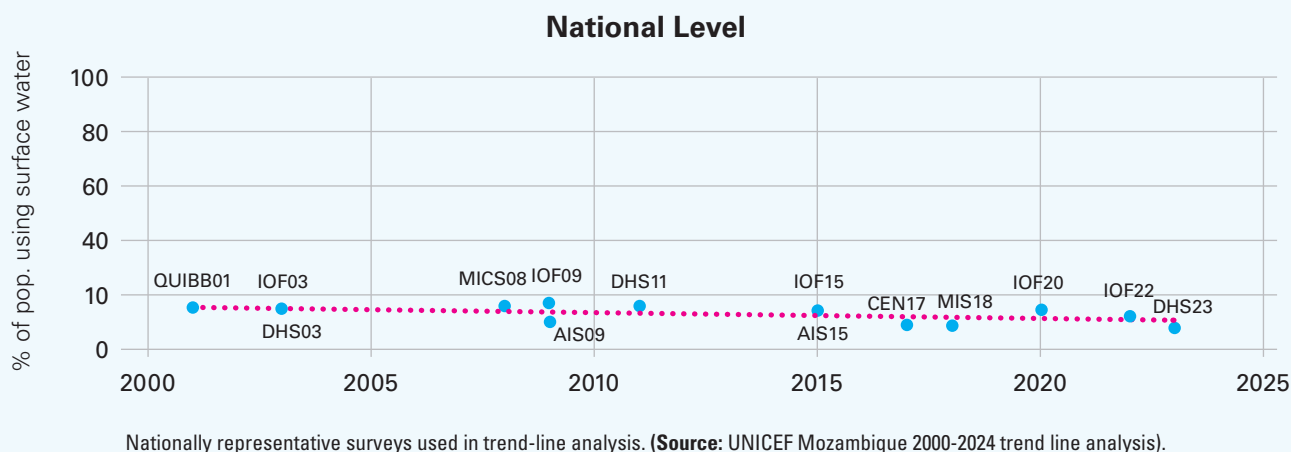
- **SAFELY MANAGED** - Drinking water from an improved source that is located on premises, available when needed and free from faecal and priority chemical contamination.
- **BASIC** - Drinking water from an improved source, provided collection time is not more than 30 minutes for a round trip, including queuing.
- **LIMITED** - Drinking water from an improved source for which collection time exceeds 30 minutes for a round trip, including queuing.
- **UNIMPROVED** - Drinking water from an unprotected dug well or unprotected spring.
- **SURFACE WATER** - Drinking water directly from a river, dam, lake, pond, stream, canal or irrigation canal.

JMP drinking water ladder (Source: UNICEF/WHO 2023)

Note: this document uses the Mozambique definitions of improved drinking water sources. That means that rainwater and protected wells which are not equipped with a handpump are classified as an unimproved drinking water source.

Method

The estimates for the lower rungs of the drinking water ladder are not based on a single survey but are the result of a trend-line analysis using data from representative surveys conducted since 2000, including the most recent IOF 2022 (INE 2023) and DHS 2022-23 surveys. As shown in the image below, the trend line indicates that, despite minor fluctuations in data from closely timed surveys, overall progress has remained consistent. The estimates for 2024 presented in this document were projected by extrapolating this trend. Small discrepancies between the findings of the latest DHS survey and the trend-line analysis may occur.

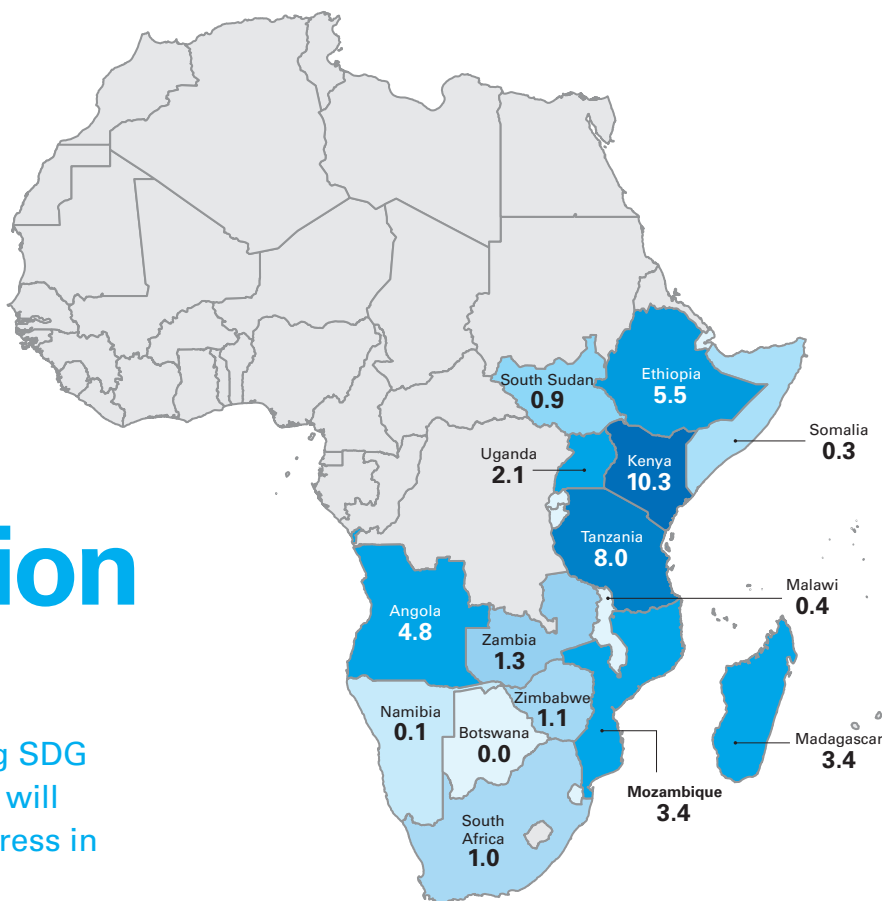


Regional Picture

Mozambique hugely relies on surface water compared to other countries in the Eastern and Southern African Region.

3.4 million people

rely on surface water in Mozambique. Achieving SDG 6.1 at the regional level will require significant progress in Mozambique.

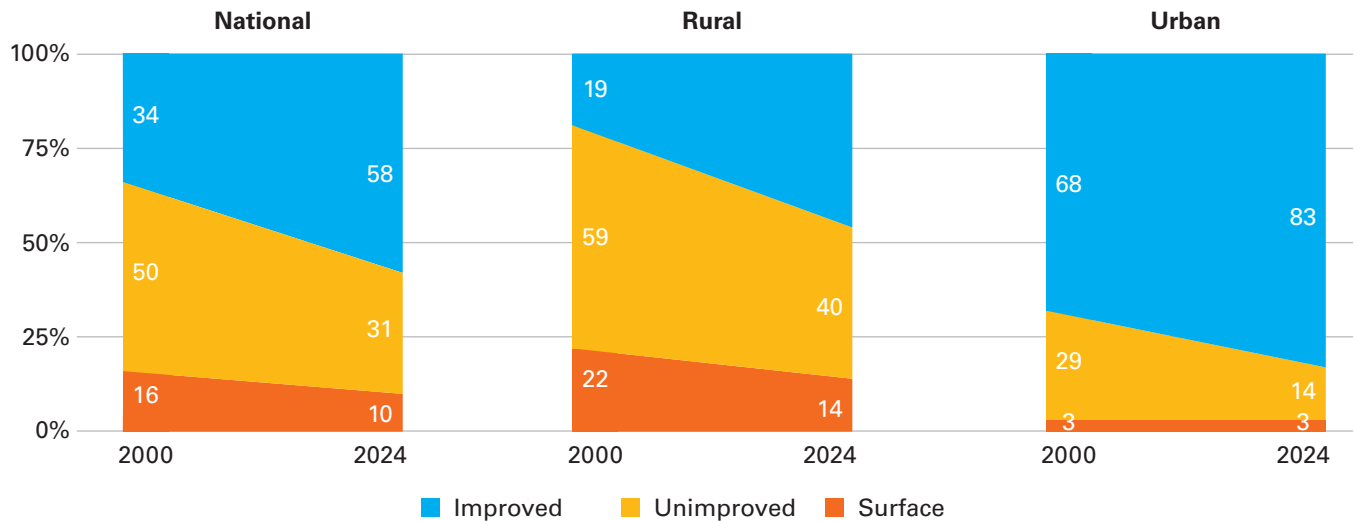


Number of people (millions) relying on surface water in Eastern and Southern Africa.
(Source: UNICEF/WHO 2023, UNICEF Mozambique 2000-2024 trend line analysis).

The Situation Today

In Mozambique, 10% of the population relies on surface water, translating into 3.4 million people. The disparities between rural and urban areas are significant, with 2.6 % of the urban population depending on surface water, equating to 0.3 million people, compared to 14 % in rural areas, representing 3.1 million individuals.

A significant portion of Mozambique's population (41%) depends on unimproved water sources or surface water, with this figure rising to 54% in rural areas.



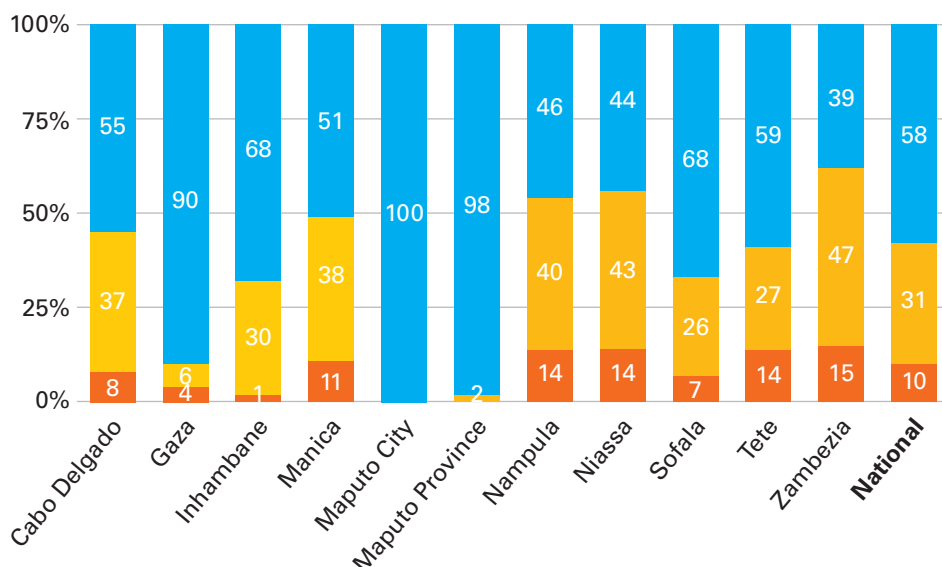
(Source: UNICEF Mozambique 2000-2024 trend line analysis).

The Challenge of Reducing Reliance on Surface Water

From 2000 to 2024, Mozambique has made only modest progress in reducing the proportion of its population reliant on surface water, decreasing from 16% to 10%. While there has been more significant progress in reducing reliance on unimproved water sources, the rate remains alarmingly high, particularly in rural areas (40%). To accelerate progress and support the most disadvantaged communities in gaining access to improved water services, it is crucial to reassess current strategies and align them with the objectives of the Water Sector Action Plan, which prioritizes achieving at least basic drinking water service.

Reliance on unimproved water sources or surface water remains a critical challenge across most provinces in Mozambique. In three provinces—Nampula, Niassa, and Zambezia—over half the population depends on these sources, while in eight provinces, the figure exceeds 30%.

In 8 out of 11 provinces, over 30% of the population relies on either unimproved sources or surface water.



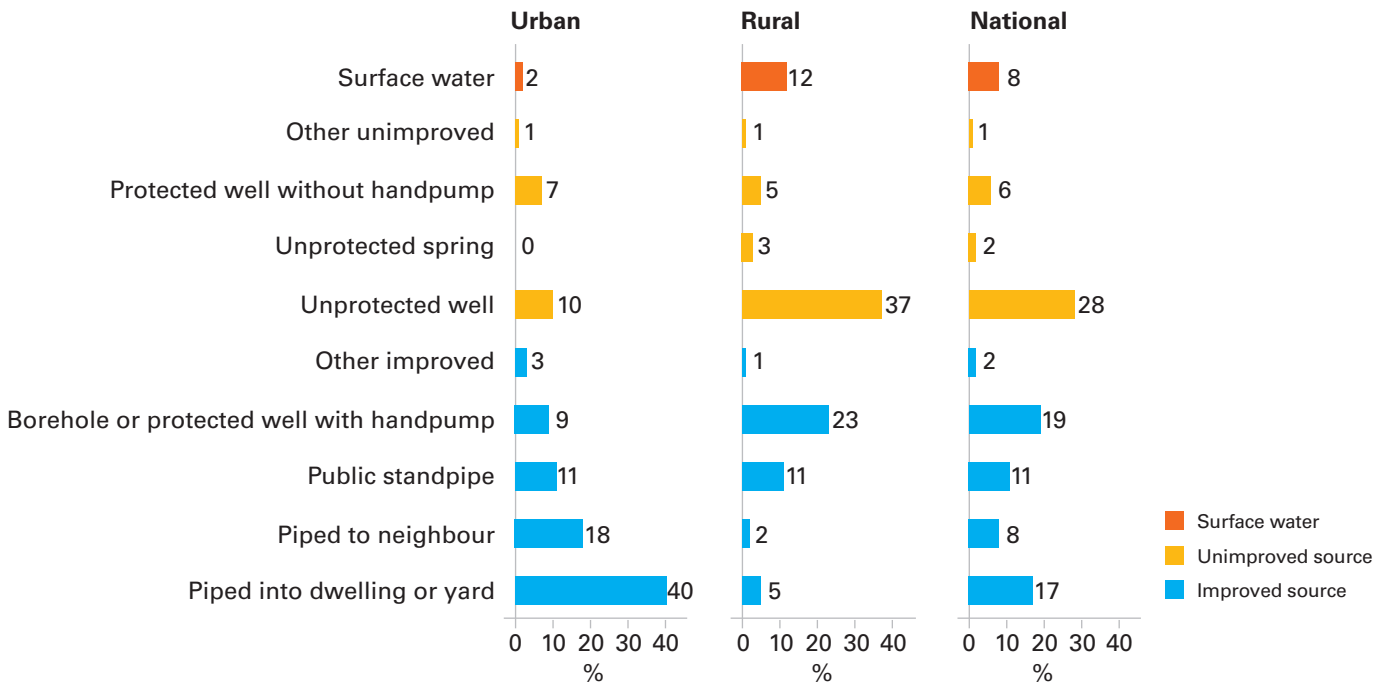
While use of surface water may be relatively low in provinces like and Sofala (7%) and Cabo Delgado (8%), the reliance on unimproved drinking water sources in these provinces remains significant, 26% to 37% respectively.

Mozambique's population distribution by type of drinking water source, shown at the national level and for each province.
(Source: UNICEF Mozambique 2000-2024 trend line analysis)

Type of drinking water sources

Access to water sources differs significantly between rural and urban areas in Mozambique. Only 5% of the rural population has piped water on their premises (in their dwelling or yard), compared to 40% in urban areas. Meanwhile, 37% of rural residents rely on unimproved wells, compared to 10% in urban areas. Additionally, 23% of the rural population depends on boreholes or protected wells with hand pumps, compared to just 9% in urban areas.

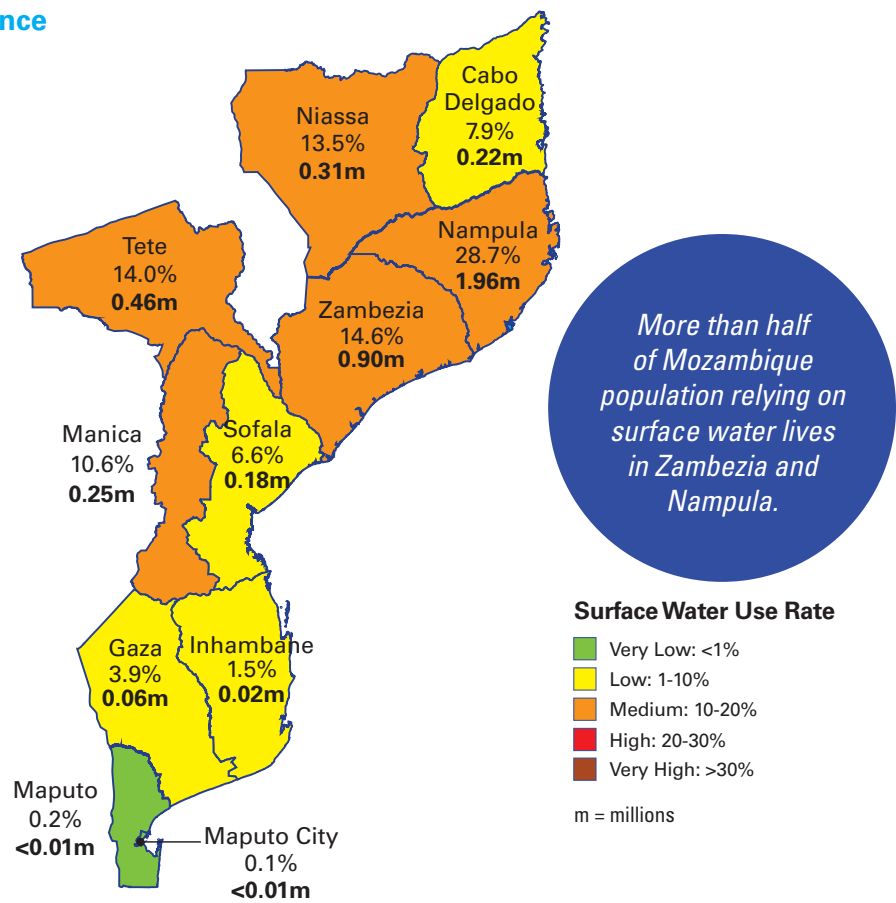
37% of the rural population uses an unprotected well as their main drinking water source.



Distribution of population by type of improved water source, in rural and urban areas. (Source: DHS 2022-23)

Reliance on surface water by Province

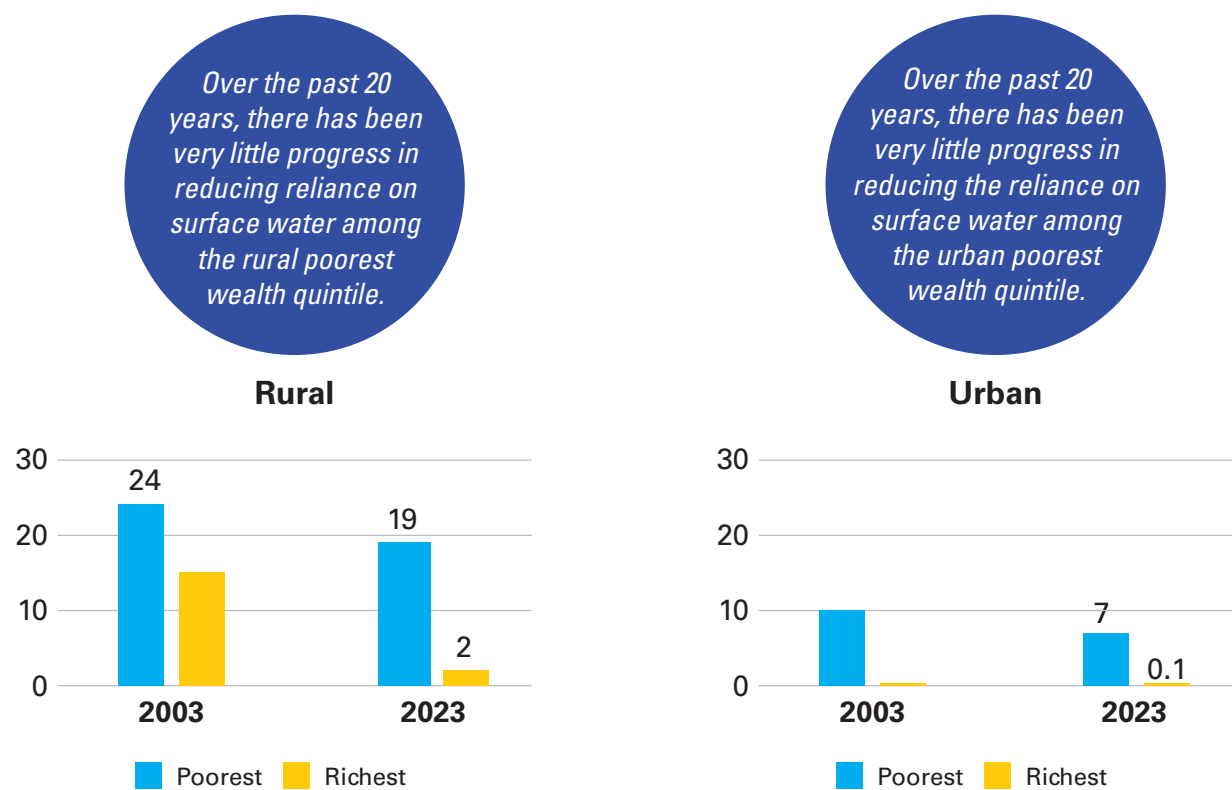
78%
of the population relying on surface water is concentrated in four provinces—Zambezia, Nampula, Tete, and Niassa—with 55% located in Zambezia and Nampula alone, highlighting the need to focus efforts in these provinces.



The percentage and number of people using surface water as the main source of drinking water by province, in 2024. (Source: DHS 2022-23)

Inequalities

Over the past 20 years, the gap in access to basic drinking water services between the wealthiest and poorest in Mozambique has remained stark. While surface water use among the wealthiest is now minimal, many of the poorest still rely on it—19% of rural households in the lowest income quintile compared to about 7% in urban areas. The National Water Action Plan aims to reduce these inequalities by 2030, but the data highlights an urgent need for targeted interventions and policies to address disparities in drinking water access across social classes.



Changes in Population Share for the Richest and Poorest Quintiles in Rural and Urban Areas (2003-2023). (Source: DHS 2003 & DHS 2022-23)

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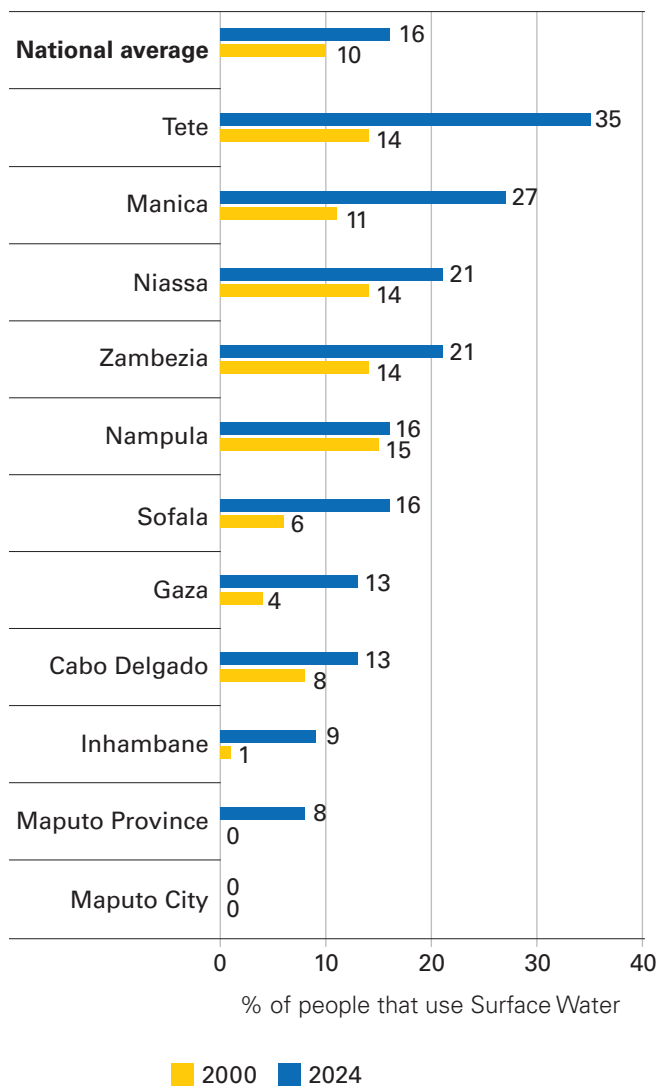
19%
of the **rural households**
compared to
about **7%** of the
urban households
rely on **surface water**.



Progress

The National Water Action Plan seeks to achieve universal access to a basic water source, and as such eliminate surface water use by 2030. Since 2000, Mozambique has made remarkable progress, cutting the rates of surface water use by more than half in the provinces of Tete, Manica, Sofala and Gaza. However, in certain provinces, such as Niassa and Zambezia, progress is slow, with even near stagnation in Nampula. This trend jeopardizes the achievement of the National Water Action Plan objectives by 2030.

Between 2000 and 2024, the reduction in the use of surface water has been considerable across most provinces.

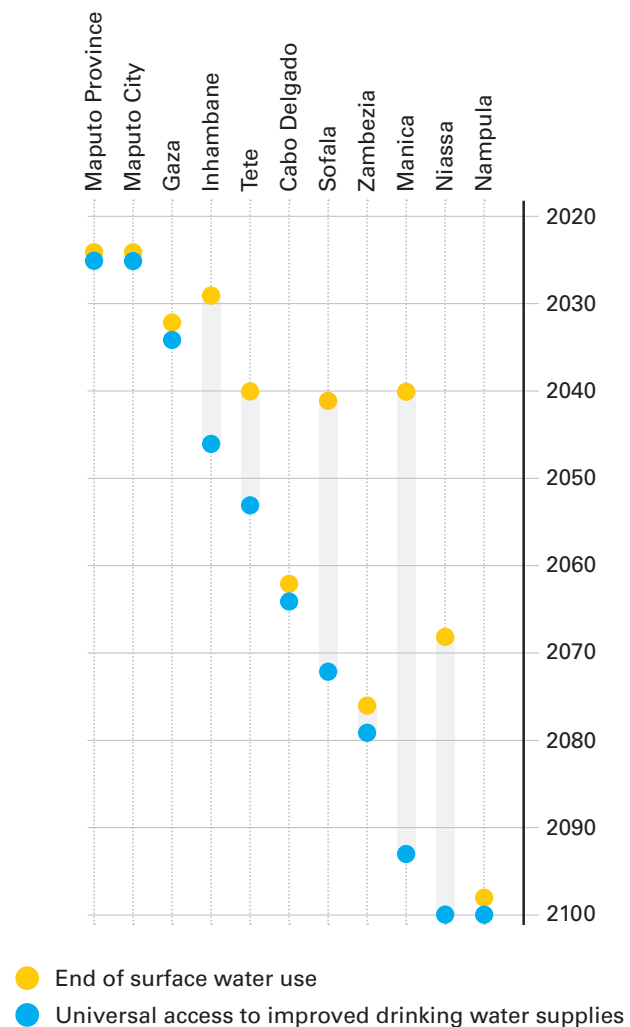


Surface water use across provinces: Population percentages from 2000 to 2024. (Source: UNICEF Mozambique 2000-2024 trend line analysis)

Based on current trends, Nampula, Niassa, and Zambezia are projected to be the last provinces to eliminate surface water reliance, with estimates extending beyond 2065. Progress in these provinces has been slow.

At the same time, the uptake of improved water sources is very slow in multiple provinces. The goal of universal access to improved drinking water sources may be reached before 2030 in Maputo Province & Maputo City, but half of the provinces are not projected to attain that goal before 2060.

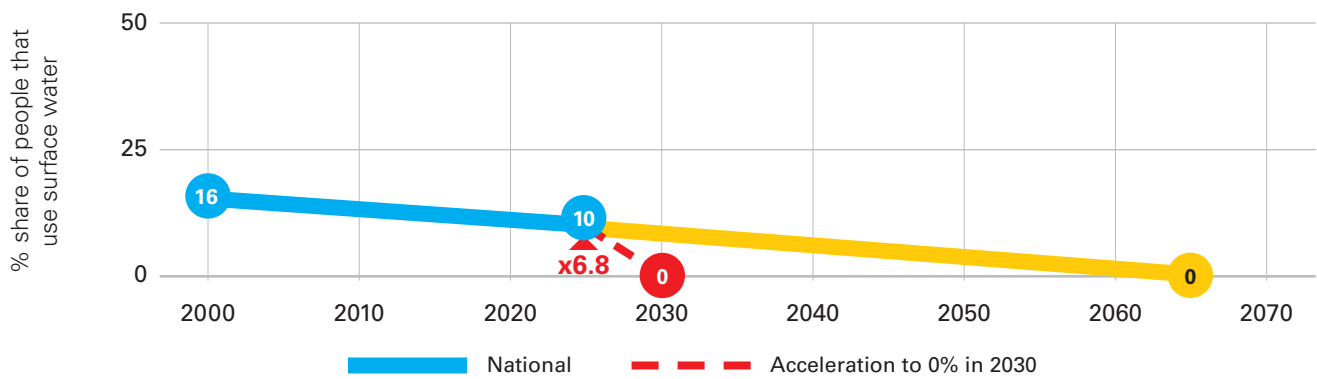
Under the current trend, half of the provinces are not projected to attain universal access to improved drinking water sources before 2060.



Projected timeline for each province to eliminate surface water reliance and achieve universal access to improved drinking water sources (Source: UNICEF Mozambique 2000-2024 trend line analysis)

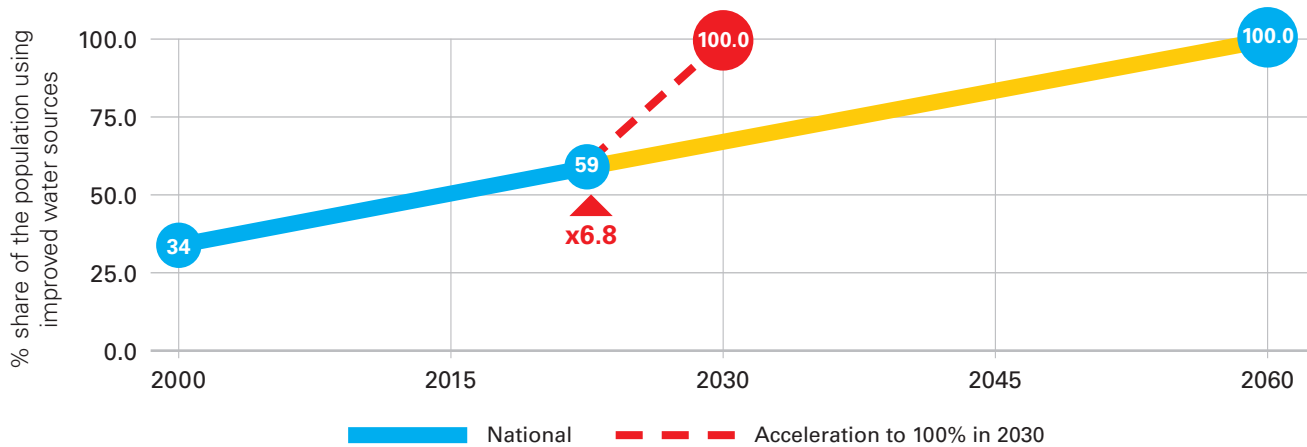
Acceleration

 As a national average, the country needs to **increase efforts by 6.8 times** to eliminate reliance on surface water by 2030.



Projected Trend Line and Required Acceleration to Eliminate Reliance on Surface Water by 2030. (Source: UNICEF Mozambique 2000-2024 trend line analysis)

 While rates of progress vary wildly across provinces, as a national average, the country needs to **increase efforts by 6.8 times** to reach universal access to improved drinking water supplies by 2030.



Projected Trend Line and Required Acceleration to Achieve Universal Access to Improved Drinking Water Supplies by 2030. (Source: UNICEF Mozambique 2000-2024 trend line analysis)

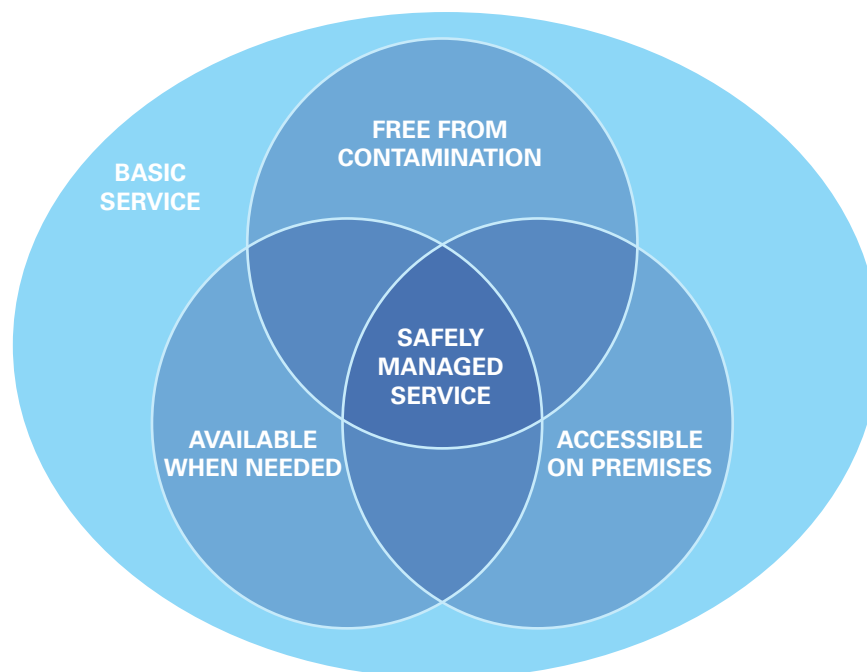
NOTE: These graphs present national averages. In some provinces much larger efforts are required than the national average.

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Safely managed drinking water, where is Mozambique at?

Global monitoring of the Sustainable Development Goals (SDGs) defines a safely managed drinking water service as the highest level on the water ladder. To qualify as safely managed, a water service must meet the criteria of a basic water service—namely, being an improved and nearby source—and also be free from contamination, reliably available when needed, and accessible on premises. The 2022–23 DHS survey is the first in Mozambique to provide data for all these parameters, offering a comprehensive understanding of the country's drinking water ladder.

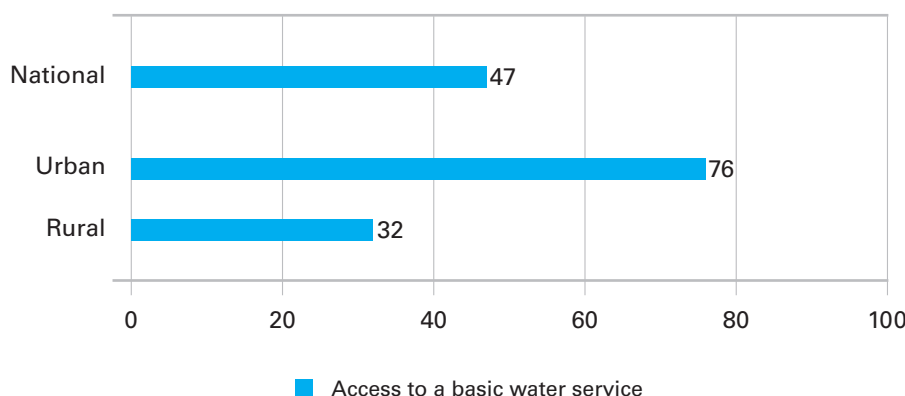


The 4 elements of safely managed drinking water services. (Source: UNICEF/WHO 2023)

Basic service

A basic water service is defined as the use of an improved source, provided the total collection time, including queuing, does not exceed 30 minutes for a round trip. **In Mozambique, there is a significant disparity between urban and rural areas: 76% of the urban population has access to basic water services, compared to only 32% in rural areas.**

In rural areas, access to basic water service is more than twice as low as in urban areas.



The share of the population with access to basic water service, in rural and urban areas. (Source: DHS 2022-23)

Free from Contamination

For the first time, data on the quality of drinking water in Mozambique was collected through the DHS 2022-23 survey. As part of the survey, a household's water source was tested (at the point of water collection and point of consumption) for the presence of *E. coli*, a proxy-indicator used to determine the level of faecal contamination. For global monitoring, testing for faecal contamination takes absolute priority as drinking water needs to be free from faecal contamination to be considered safe. According to WHO standards, drinking water should contain zero *E. coli* per 100ml sample. To help interpretation of testing results, WHO has established health risk categories that correspond to varying levels of contamination.

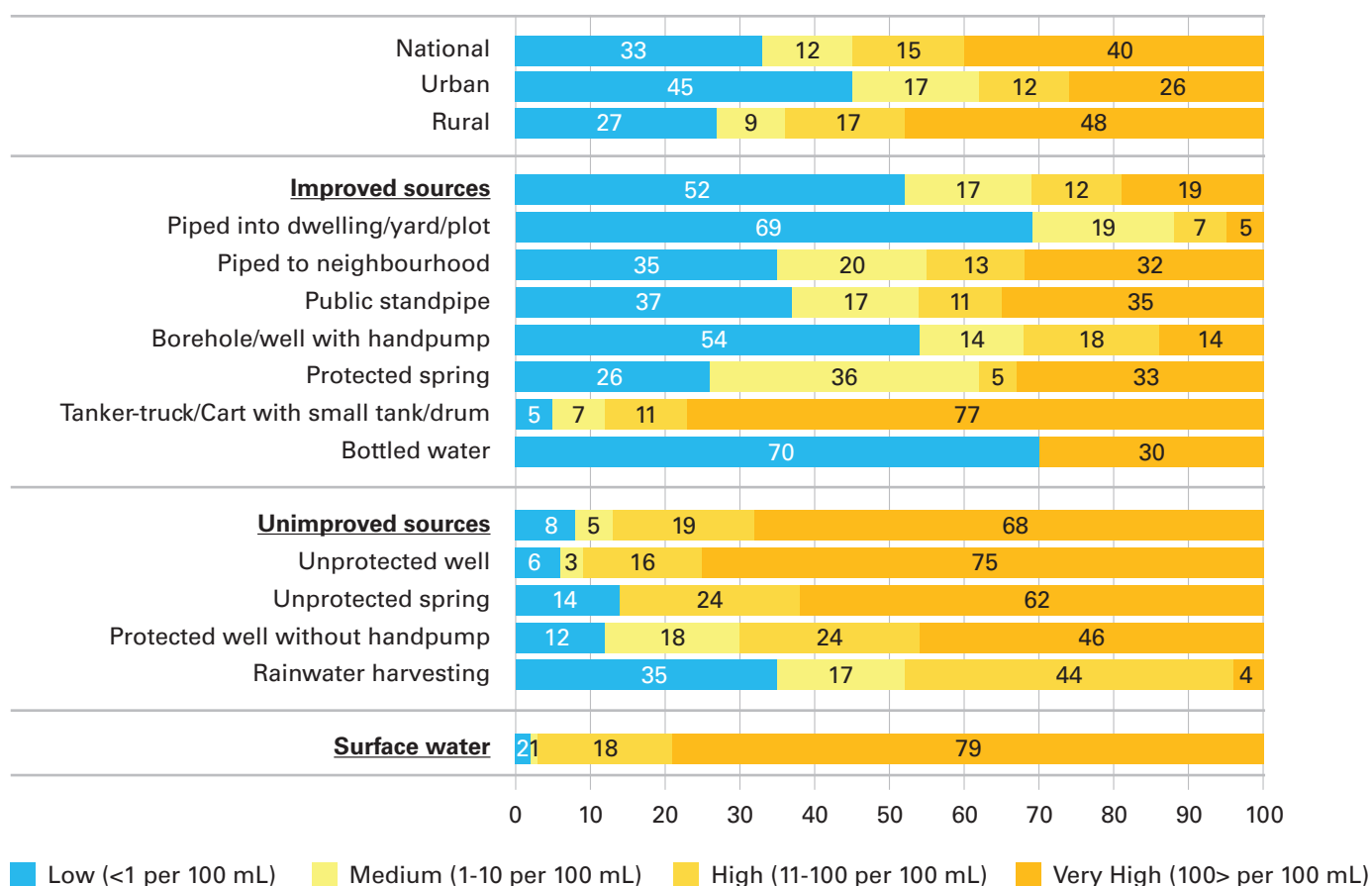
<i>E. coli</i> per 100 mL of water	WGO risk level
<1	LOW RISK
1-10	MEDIUM RISK
11-100	HIGH RISK
>100	VERY HIGH RISK

WHO risk levels for faecal contamination of drinking
(Source: UNICEF & WHO 2020)

Only 33% of Mozambique's population has access to water free from faecal contamination—a striking statistic that falls to 27% in rural areas. Even more alarming, the majority rely on water sources contaminated with high to very high levels of faecal matter: 55% nationwide, 38% in urban areas, and a staggering 65% in rural areas.

Moreover, among the population using improved water sources, only 52% receives water that is free from faecal contamination.

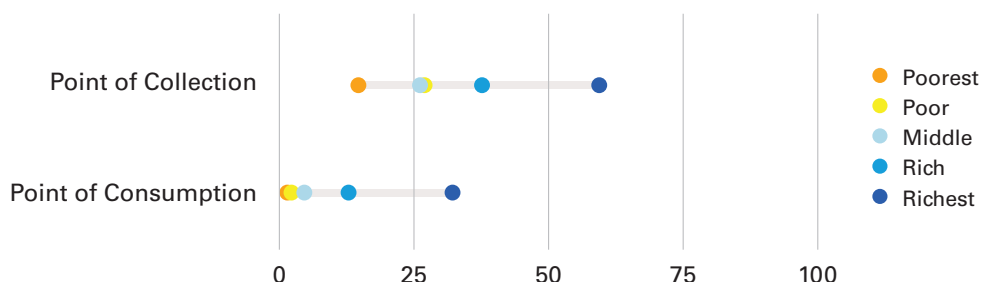
**In rural areas
only 27% of the
population uses
a source that is
free from faecal
contamination.**



Population Distribution by the level of faecal contamination of the main source of drinking water and at national, urban and rural areas (Source: DHS 2022-23).

On average, water quality deteriorates further between the source and the point of consumption due to poor transport, storage, and handling practices. This phenomenon exists across all 5 wealth quintiles. Among the three lowest wealth quintiles, less than 5% consumes water that is free from fecal contamination. This underscores the serious health risks posed by the poor quality of drinking water in Mozambique, particularly for young children.

The water quality deteriorates considerably between the point of collection and the point of consumption, across all wealth quintiles.

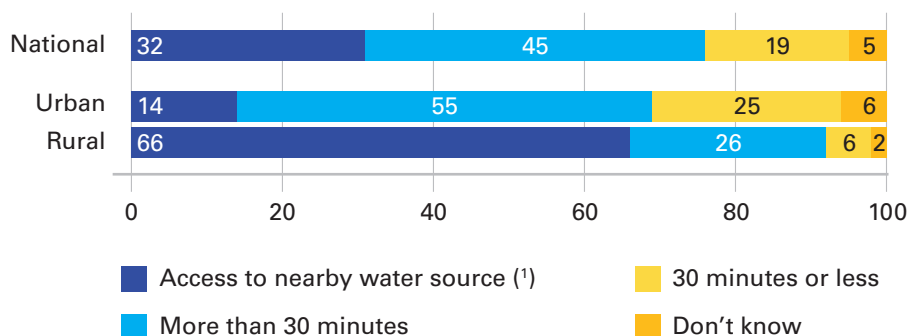


Proportion of population having access to water free from fecal contamination, at the point of collection and the point of consumption, by wealth quintile. (Source: DHS 2022-23).

Accessible on premises

The DHS 2022-23 survey reveals a stark urban-rural divide in access to nearby water sources in Mozambique. While 66% of the urban population has access to water sources classified as “nearby,” only 14% of rural residents share this convenience. “Nearby sources,” as defined by DHS, include piped water from a neighbor’s house and cases where households reported a round-trip collection time of zero minutes. When water sources are not nearby, the burden of water collection falls predominantly on women and girls, who are responsible in over 90% of households.

Only 14% of the rural population has access to drinking water sources located on premises.

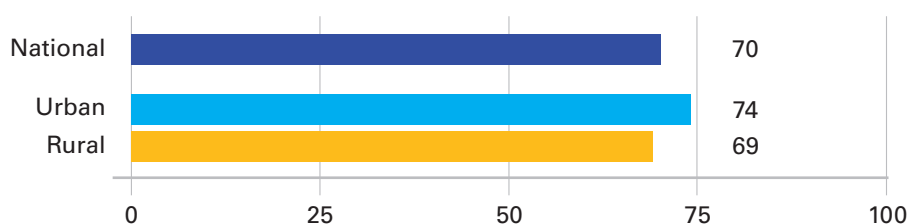


1) Includes piped water from the neighbour's house and those who reported a round-trip time to obtain water of zero minutes.

Population distribution by the distance to the main source of drinking water (in minutes) (Source: DHS 2022-23).

Almost 70% of households consistently had sufficient drinking water over the past month, with similar outcomes in both urban and rural areas. However, 30% of respondents reported experiencing shortages. Among those facing shortages, the most common cause—cited in 50% of cases—was a lack of water at the source.

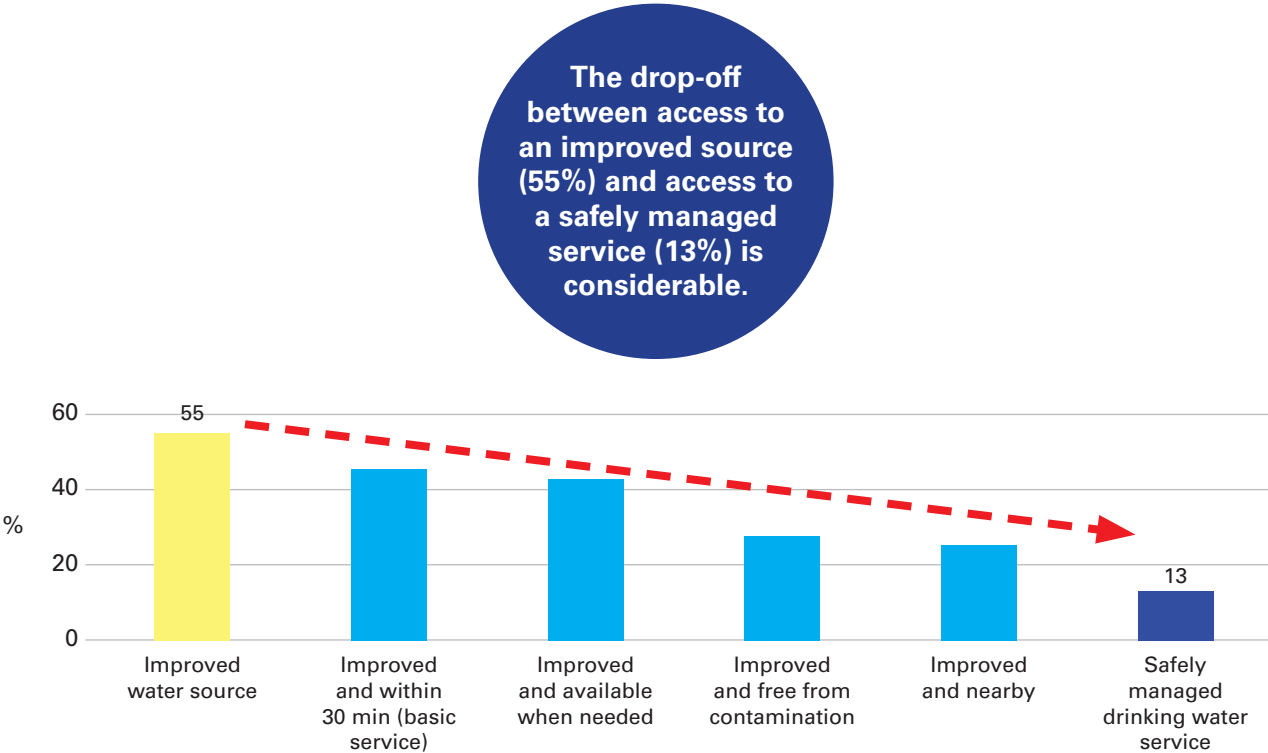
30% of the population reports facing insufficient access to drinking water.



Population with Access to Sufficient Drinking Water (Source: DHS 2022-23).

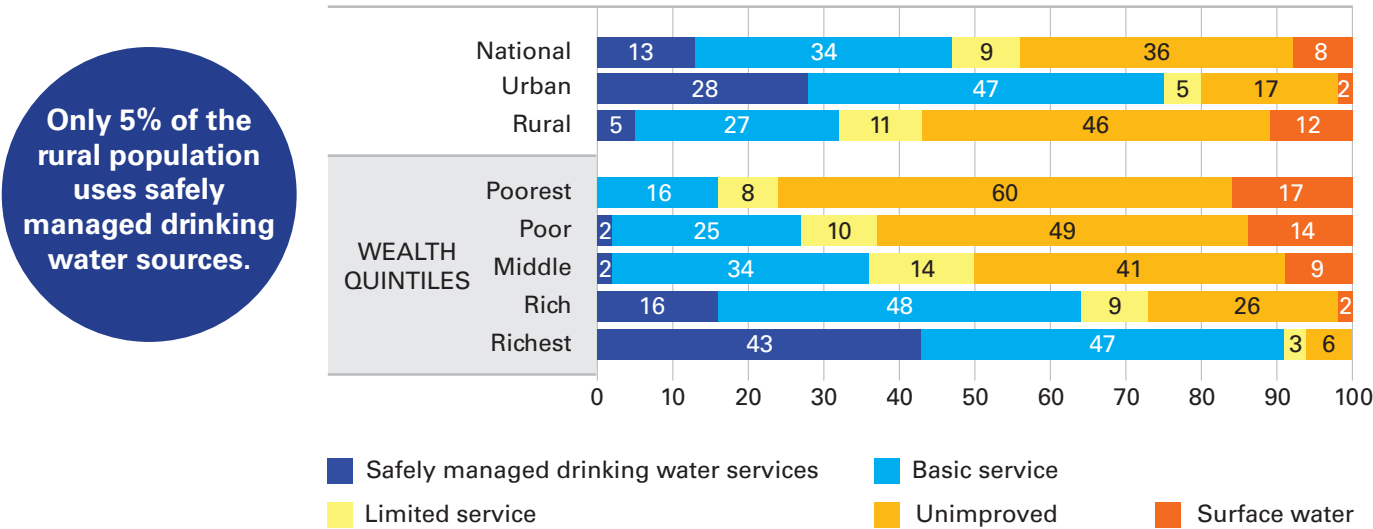
Generating a comprehensive water service ladder for SDG 6.1 based on DHS 2022-23 data

The data comprised in DHS 2022-23 can be leveraged to generate a comprehensive service ladder for monitoring progress on SDG 6.1. Safely managed drinking water incorporates four key parameters, making it a highly ambitious target. In Mozambique, only an estimated 13% of the population currently has access to a safely managed water service; water quality and the location of the source are the major bottlenecks.



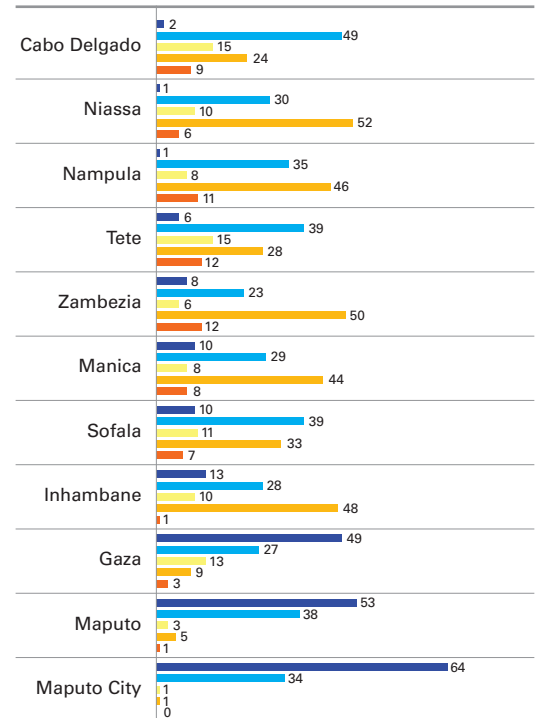
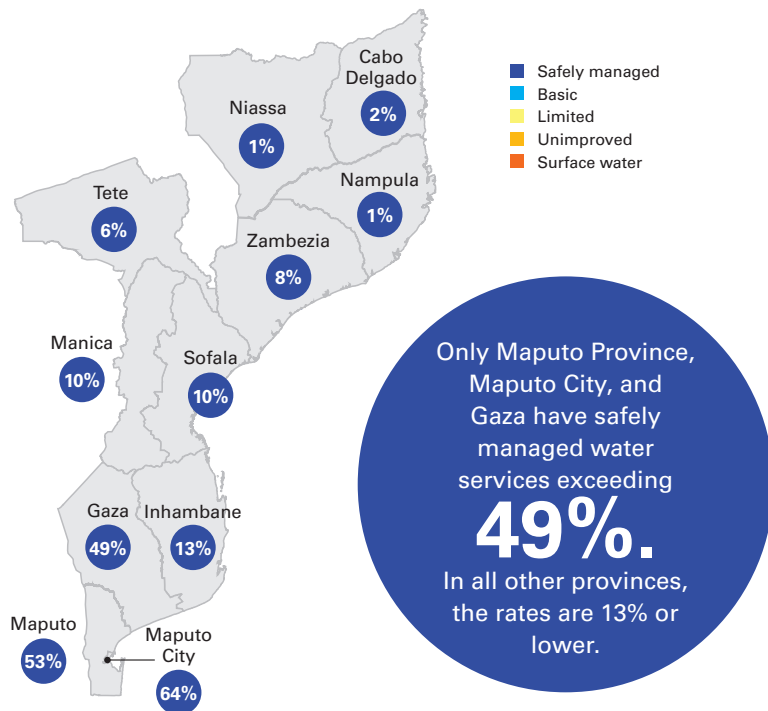
The drop-off from improved sources to safely managed drinking water services in Mozambique (Source: based on DHS 2022-23).

In rural areas, only about 5% of the population has access to safely managed drinking water services. Among the three lowest wealth quintiles, this figure drops to less than 2%.



Population Distribution According to the JMP Drinking Water Ladder (Source: DHS 2022-23).²

2) Note that this chart is based on the DHS 2022-23 data. There are minor differences with the chart on unimproved sources presented in the beginning of the document, explained by the fact that the latter one is based on a trendline analysis between 2000 and 2024.



Estimation of Population Distribution by Drinking Water Service Level for each province (**Source:** Based on DHS 2022-23)

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Call to Action



Achieving the National Water Action Plan goals by 2030 would bring substantial improvements to the health and dignity of Mozambique's population. However, significant acceleration is needed to reduce reliance on surface water and expand access to improved sources. Most provinces must increase their progress by 5 to 21 times to achieve universal access to improved water sources by 2030. Reaching universal basic services—defined as access to an improved source within a 30-minute round trip—requires even greater effort. Without such acceleration, it is unlikely that any provinces other than Maputo Province and Maputo City will meet the 2030 targets.

The DHS 2022-23 survey provided groundbreaking data that can enhance estimates of safely managed water services, particularly because of the introduction of water quality testing. The findings reveal that drinking water quality remains a critical challenge in Mozambique, particularly for the poorest populations, both at the source and at the point of consumption.

Although a reference data point for 2015 for safely managed water services in Mozambique is lacking, the DHS 2022-23 data reveals that only 13% of the population has access to safely managed drinking water. This underscores the immense challenge—and likely impracticality—of achieving the goal of halving the proportion of the population without household access to safely managed drinking water services, given the current level of sector investment. At the same time, this highlights the need for targeted interventions and increased efforts in provinces with low coverage and slow progress to ensure universal access to improved water sources is achieved in a timely manner. Partnerships and collaborations with stakeholders, both public and private, are essential to mobilize resources.

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