Key Facts and Actions

- About 88% of COVID-19 active cases are in Maputo city;
- 88% per cent of the people previously infected with COVID-19 has fully recovered;
- UNICEF supported the training of 405 community health care on infection prevention and control for COVID-19 and continuity of services in all districts of Sofala province;
- Approximately one million people, including IDPs reached by multimedia mobile unit activities in five provinces;
- Persons with disabilities that received sewing machines and kits from UNICEF were able to sell 9,980 masks;
- UNICEF continues supporting the COVID-19 treatment centers set up with five facilities completed, nine still ongoing;
- UNICEF supported the preparation of radio and TV lessons that reached about 900,000 children.

Situation Overview

As of 25 November, 84.5 per cent of total districts in the country reported (136 districts) at least one case of COVID-19. Concentration of the cases continue to be Maputo city the capital of the country with total of 1,514 active cases and 98 deaths. The health authorities reported a cumulative of 15,302 confirmed cases (23.2 per cent increase since the last report) of COVID-19 (14,995 are from local transmission), 128 deaths and 595 hospitalizations which 37 are still in isolation centers under treatment (as of 25 November) and other health facilities.

Cabo Delgado province is the second location after Maputo city with higher active cases of covid-19 followed by Sofala

In terms of deaths, the Ministry of Health (MoH) reported that 76.6 per cent of the deaths occurred in Maputo city and the age groups with major cases are 20-29 and 30-39 years old.

The country continues scaling up its testing capacity having done so far 225,762 (an increase of 21.5% since last report) tests since the declaration of the pandemic. The public sector beds for COVID-19 in the country is of 948 and the total cumulative admissions to date led to the occupation of 579 bed (61%). Current bed occupancy rate is still manageable due to high proportion of mild and asymptomatic cases and Maputo city is at 27% occupancy rate. Provinces with higher occupancy capacity are Cabo Delgado and Zambézia.

The MoH has reported that 88% per cent (9 per cent increase since last report) of the people previously infected with COVID-19 has fully recovered. As part of its strategy to increase knowledge on how the epidemic is unfolding in Mozambique, the National Institute of Health (INS) continue conducting sero-epidemiological surveys in main capital cities. Recently a survey was conducted in Chimoio city, capital of Manica province and preliminary results indicate that security forces and shop workers are the most exposed to covid-19. and in terms of age group all are exposed to COVID-19 but the young and youth are the most exposed. These results will help the authorities to make informed...
decisions and target the priority groups and locations in its response. Overall the positivity rate in this city is relatively lower when compared to all other cities that the surveys have conducted.

**Coordination**

The Ministry of Health (MoH) established an Emergency Commission within the ministry to ensure effective coordination of COVID-19 prevention and response through the efforts of nine Technical Working Groups co-led by staff of the MoH and development partners. Internally, the Commission meets regularly as well as with the broader group with the participation of key departments of the ministry, line ministries and development partners.

There are also ongoing coordination efforts targeted at mitigating the secondary impacts that may emerge as a result of the outbreak. To this end, the government disaster agency (INGC) and the Ministry of Economy and Finance (MEF) worked with line ministries to identify the needs and priority measures to be taken. Aligned with this, the Humanitarian Country Team (HCT), led by the Resident Coordinator and composed by UN agencies, NGOs, Red Cross, and donor representatives, developed a flash appeal to help mobilize funds for COVID-19 response, focusing on sector specific impacts of COVID-19.

**UNICEF Response**

**Health**

- Supported readiness assessment for COVID-19 in 23 health facilities of Sofala covering districts of Dondo, Nhamatanda and Buzi.
- Supported training of 405 APE on risk communication, infection prevention and control for COVID-19, and continuity of services in all districts of Sofala.
- Supported procurement and distribution of home made face masks and distributed to 405 APEs in Sofala.
- Conducted supervision visits to support APEs on continuity of services in context of COVID-19 and insecurity in Cabo Delgado, in Montepuez district, covering areas with increased number of IDPs in Namanhumibir and Mapupulo.

**Nutrition**

- As part of nutrition response, in Manica province, supervision visits on 36 APEs implementing Integrated Nutrition Programme (PIN) and 4 Health centres were held to access and provide technical support on compliance with COVID-19 preventive measures. Two hundred APEs and Volunteers in PIN received 200 masks and 200 alcohol gels. In Sofala province, 172 APEs in PIN and their communities received about 364 buckets with taps.

**WASH**

- Works continue on the health facilities designated for COVID-19 treatment throughout the country with five facilities completed, nine facilities ongoing and five additional facilities planned.
- In Cabo Delgado the rehabilitation of the Mecufi Sede water supply system is near completion for support to an estimated 7,000 people in addition to ongoing messaging for 57,000 people. Training for IPC measures for health workers is ongoing in Niassa and Inhambane Provinces.
Communication for Development (C4D), Community Engagement & Accountability

- 12 million people reached by Radio Mozambique and 111 community radios through the active support to weekly radio programmes: Ouro Negro, Saude e Vida and daily radio spots (preventive measures and secondary impact).
- Radio theater broadcasted through community radios in Zambezia and Nampula provinces.
- TV spots on COVID-19 prevention, risk mitigation at water points, demand health services, breastfeeding and signs and symptoms of COVID-19 broadcasting in prime time in the TV channels with highest coverage in Mozambique.
- Approximately one million people, including IDPs reached by multimedia mobile unit activities sharing COVID-19 key preventive measures and secondary messages in Sofala, Zambezia, Nampula and Cabo Delgado provinces. In Cabo Delgado 72,200 people were reached by community engagement session through Caritas. and ICS mobile unit and 480 radios debates
- Training of community actors in selected districts of Cabo Delgado concluded.

Protection from Sexual Exploitation and Abuse

With support to Linha Verde, Linha Fala Crianca and police, a total of 22,227 (18671 Male & 3,556 Female), including 1,778 children) were able to have access to reporting mechanisms on SEA.

UNICEF as the PSEA Co-chair is technically supporting the establishment of PSEA Network in Cabo Delgado, that will strengthen the coordination of efforts by different UN Agencies, NGOs and government. The Co-chairs for the Cabo Delgado PSEA Network are UNHCR & Save the Children.

Education

- To date according to ICS, a total of 13,076 lessons for community radios produced for primary, secondary, adult and technical/vocational education of which 58% (7,594) for primary schools in Portuguese and local languages. UNICEF supported 25 trainers and 62 teachers in preparing these radio and TV lessons.
- An estimated 900,000 primary and secondary school children (grade 1 to 7 and grade 8-12) and 8,305 students in teacher training and 235,000 persons involved in adult education/literacy had access to learning through the broadcasting of approximately 3,458 television classes and 13,076 radio classes. TdH reports first numbers on participation in distance education in Nampula as 23,832 students till date.

Child Protection

- Child Helpline is continuing to provide psychosocial support and now expanded its physical presence to the central region of the country with negotiations starting on expanding to the northern region of the country.
- Two cooperation agreement have recently been signed with REPSSI (Regional Psychosocial Support Initiative) and FDC (Fundação para Desenvolvimento da Comunidade) to:
  o strengthen the capacity of social workers across the country to provide remote psychosocial support to children and caregivers during COVID-19 and armed conflict (in Cabo Delgado)
  o strengthen the capacity of Ministry of Health, Mental Health Department, to also provide remote PSS (through a Ministry of Health established help line – the “Alô Vida”),
  o provide specialized mental health services to children and adolescents (including those in isolation and hospitalization due to COVID) and further refer cases to social workers for follow up at local level.
- As with regards to radio spots on parenting and PSS (how to remain psychosocially fit during the pandemic and how to access psychosocial and specialized mental health services), the broadcasting is continuing nationwide, following a massive development and testing processes, including translation to local languages.
Furthermore, UNICEF has recently contracted a consultant to update the PSS teachers training manual (to reflect COVID impact, prevention and response measures), integrate VAC and GBV modules and referral protocols. While the approach may imply some delays in the roll out of the training, it is a more sustained one as it is anchored on the existing structure within Ministry of Education and will make use of the existing materials that will be revised and updated.

Disability inclusion

- More than 20,000 people with and without disabilities have been sensitized about COVID-19.
- 6 sign language interpreters trained to support health units with interpretation when deaf patients show up at the health units
- Radio debates have been performed on different themes: community-based rehabilitation, COVID-19 & HIV/AIDS, supporting the education of children with disabilities in times of COVID-19, healthy nutrition
- 23 health technicians from 8 health units from 3 districts (Beira, Gorongosa and Buzi) were trained on how to make their approach inclusive for persons with disabilities
- Purchasing of 9,980 masks produced by person with disabilities that received sewing machines and kits
- Dignity Kits were distributed to 474 beneficiaries from Nhamatanda and Gorongosa and 44 from Dondo
- 163 facilitators of inclusion self-help groups were trained on COVID-19 in Manica

Social Protection and Cash-Based Assistance

- UNICEF, INAS and WFP completed enrolments of 17,119 new beneficiaries in Moatize (Tete) and expect to complete enrolments of 68,307 new beneficiaries in Quelimane and 9,000 beneficiaries in Milange (Zambezia) by December 9th. In these areas, UNICEF and WFP will be analyzing rates of mobile phone ownership among enrolled beneficiaries to propose a combination of digital and other forms (cards/bank accounts) of payments that will assure payments are done as soon as possible.
- UNICEF and WFP have engaged the network of women’s associations of Zambezia (NAFEZA) as main implementing partner and trained all actors (CSO partners, Government and 130 community leaders/workers) in prevention of sexual exploitation and abuse (PSEA). NAFEZA was also trained in key communication for development (C4D) messages related to promotion of positive nutritional practices, promotion of gender equality, prevention of gender-based violence and others.
- UNICEF continues to co-chair the Technical Advisory Group (TAG) of the social protection response to COVID-19. Through this platform, regular communication with Government and partners enables to monitor progress of the response and support as required. To date, INAS has reported the completion of enrolments of new beneficiaries into Phase 1 (fully funded), amounting to 291,315 households in Cabo Delgado, Gaza, Manica, Maputo, Nampula, Tete and Zambezia. Enrolments of new beneficiaries for Phase 2 (partially funded) is ongoing.
- Lack of mobile phones and inadequate coverage by mobile network operators has proven to be a big challenge to move forward with digital payments. To date, no payment has been done to new beneficiaries in urban and peri-urban areas. Through TAG, UNICEF has advocated for prioritizing payments of at least 50% of new beneficiaries by the end of 2020 with alternative payment methods, including INAS ‘cash in hand’ regular modality with improvements in transparency and monitoring.
- Top-ups (equivalent to 3 months of regular payments) to existing INAS beneficiaries are almost completed in all delegations. The challenge persists, though, because regular payments of INAS programs (PSSB) are delayed in many provinces, reducing the impact of any additional payments. UNICEF is supporting high-level advocacy to assure PSSB payments are regularized.

Supply and Logistics

- Orders against the $800k received from WB/PEF in process after discussion with the MoH. We are yet to receive the $9MM funding from the IDB to continue procurement of PPEs and laboratory supplies and equipment through PS in SD. MoU finally signed by MoH, therefore updating the Cost Estimates with PS in order to get them approved, and start procurements as soon as the funding reaches our account in CPH.
- Internal and external coordination to enhance our support to the MoH in regard to the COVAX facility is ongoing. Weekly meetings with WHO to enhance planning and segregation of duties among agencies
proceeds. TA plan submitted to GAVI and the RO, review ongoing. Partners working on the vaccine application to be submitted the soonest possible.

- The Global Supply portal is fully operational. Global shipping support from WFP came to an end, we will follow-up on possible continuation throughout 2021 as needs are confirmed.

**Funding Overview and Partnerships**

In support of the country efforts to prevent and contain the COVID-19 as well as address its impact, UNICEF has developed a 9-month preparedness and response plan with revised funding requirement of $25 million USD. As of end-November, the office has received $12,464,315 USD for COVID-19 response thanks to the generous contributions from Education Cannot Wait, Global Partnership for Education (GPE), Japan, Netherlands, Swiss, France, USAID, World Bank and Norway. About $1,759,957 USD from existing projects funded by European Union, FCDO, Canada, Norway and KOICA were reprogramed for COVID-19 response and UNICEF is managing $15 million from GPE as Grant Agent for the Government’s COVID Education response.

**UNICEF Mozambique**: [http://www.youtube.com/UnicefMozambique](http://www.youtube.com/UnicefMozambique)


Who to contact for further information:

**Maria Luisa Fornara**
Representative, Mozambique
Tel: (258) 21481104
Email: mlfornara@unicef.org

**Katarina Johansson**
Deputy Representative, Mozambique
Tel: (258) 21481104
Mobile: (258) 845215618
Email: kjohansson@unicef.org

**Claudio Julaia**
Emergency/DRR Specialist, Mozambique
Tel: +258 21 481 150
Mobile: +258 82 333 9250
Email: cjulaia@unicef.org
## Annex A: Summary of Programme Results

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target to 31 Dec 2020</th>
<th>Results as of 21 Oct 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RCCE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>12 000,000</td>
<td>12,000,000</td>
</tr>
<tr>
<td># of people engaged on COVID-19 through RCCE actions</td>
<td>60,000 (^1)</td>
<td>35,868</td>
</tr>
<tr>
<td># of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms</td>
<td>45,000 (^1)</td>
<td>13,474</td>
</tr>
<tr>
<td><strong>IPC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached with critical WASH supplies (including hygiene items) and services.</td>
<td>112,000</td>
<td>701,940</td>
</tr>
<tr>
<td># of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)</td>
<td>2,500</td>
<td>3,856</td>
</tr>
<tr>
<td><strong>CONTINUITY OF HEALTH CARE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.</td>
<td>2,500</td>
<td>3,581</td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>100,000</td>
<td>89,301</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)</td>
<td>19,000</td>
<td>17,882</td>
</tr>
<tr>
<td><strong>ACCESS TO CONTINUOUS EDUCATION, CHILD PROTECTION AND GBV SERVICES INDICATOR</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children supported with distance/home-based learning.</td>
<td>1,112,137</td>
<td>261,000</td>
</tr>
<tr>
<td># of children without parental or family care provided with appropriate alternative care arrangements</td>
<td>400</td>
<td>8,318</td>
</tr>
<tr>
<td># of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>10,000</td>
<td>14,254</td>
</tr>
<tr>
<td># of UNICEF personnel &amp; partners that have completed training on GBV risk mitigation &amp; referrals for survivors, including for PSEA</td>
<td>326</td>
<td>149</td>
</tr>
<tr>
<td># of children and adults that have access to a safe and accessible channel to report SEA</td>
<td>164,488</td>
<td>121,302</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households (economically affected by COVID-19) in urban and peri-urban areas receiving cash transfers for basic needs</td>
<td>200,000</td>
<td>0</td>
</tr>
</tbody>
</table>

\(^1\) Monthly target