

Ensuring rights and choices for all.



## **MESSAGE FROM THE REPRESENTATIVE**

This 2017 Annual Report reflects UNFPA Mozambique's continued commitment to our core mission of "delivering a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled." The report amplifies the voices of women and youth and the stories of change behind their quest for inclusive and socioeconomic development. Under the notion of "leaving no one behind." UNFPA continues to champion the cause of those who have not been able to claim their rights and those left furthest behind in Mozambique, especially young people.

In order to harness a dividend from the country's predominantly youthful demographic, we need to ensure that young people's sexual and reproductive health and rights (SRHR) are fulfilled. The ability of girls and women to control their own fertility is fundamental to their empowerment and equality and is at the core of Mozambique's inclusive and socioeconomic development. When a girl or a woman can plan her family, she has a strong foundation on which to plan the rest of her life. Protecting and promoting her reproductive rights - including the right to decide the number, timing and spacing of her children - is essential to ensuring her freedom to participate more fully and equally in society, and it's economic development.

Therefore, it is worth highlighting the promising progress achieved in Mozambique's Contraceptive Prevalence Rate (CPR) in recent years. The use of modern methods has increased from 25.3% in 2015 to 31% in 2017. When hundreds of girls like Milda (14) testify that family

planning helps them take control of their lives, pursue their dreams, and prevent pregnancy while still children the UNFPAsupported districts, we can confirm that we are on the right track.

Going forward, the Mozambique Country Office in collaboration with the Government, UN sister agencies and our implementing partners are committed to ending the unmet need for family planning, ending preventable maternal deaths, and ending harmful practices against girls and women. We will continue to generate accurate and evidencebased population data to influence national planning and policies, UNFPA programming, and also to document where progress is made and where renewed efforts are needed to save the lives of mothers, whatever their age, ensure pregnancy by choice, and empower and harness the potential of Mozambique's next generation.



Andrea Wojnar, UNFPA Representative

We are committed to ending the unmet need for family planning, ending preventable maternal deaths and ending harmful practices against girls and women.

## **COUNTRY CONTEXT**

Mozambique has experienced unprecedented population growth in recent years from 16 million in 1997 to approximately 29 million in 2017 estimated to reach 46 million by 2040 (INE, Census 2007). Mozambique's population is strikingly young with 65% below 25 years, and 46% below 15 years. Current debates focus on how the country can maximize the opportunities to capture the demographic dividend and the valuable resource that make up the youth bulge.

The country has one of the most dynamic economies in Africa; growing at an impressive pace since the end of a 16 year civil war in 1992. However, it has not brought about significant reductions in inequalities, the 2016 Human Development Index, ranks Mozambique 181th of 188 countries.

Mozambique is marked by sharp gender disparities, including entrenched gender discrimination, harmful practices such as child marriage with one out of two girls being married before 18 years. Widespread gender-based violence, feminization of the HIV epidemic with its prevalence 3 times as high among girls and young women aged 15-24 years than boys and young men; and high rates of adolescent pregnancy with 46% of adolescent girls between 15-19 years being pregnant or mothers are deepening the gender disparities. Limited control over their sexual and reproductive lives hampers the possibility for girls and young women to develop to their full potential.

The maternal mortality ratio is currently at 408 per 100,000 live births, with only 13% of women with obstetric complications having access to emergency obstetric care.

However, the country has experienced a significant increase in the Contraceptive Prevalence Rate for modern methods (mCPR) from 11.3% in 2011 (DHS 2011) to 25.3% in 2015 (IMASIDA 2015), and to 31% in 2017 (Track2020) in Mozambique modern methods.

#### Where We Work



## **UNFPA IN MOZAMBIQUE**

UNFPA is currently implementing its 9th Country Programme 2017-20 (CPD) with a focus on sexual and reproductive health, adolescents and vouth. gender, and population dynamics. With the objective of "ensuring rights and choices for all," UNFPA's work in Mozambique is aligned with the United Nations Development Assistance Framework (UNDAF) 2017-2020. which combines the efforts of 21 UN agencies active in the country in

line with the principle of "Delivering as One" and Global Partnership for Effective Cooperation, The CPD reflects national and international development instruments, notably the Government's Five Year Programme, 2015-19. UNFPA's Strategic Plan 2018-21, the International Conference on Population and Development (ICPD) and the Sustainable Development Goals (Agenda 2015-2030).









#### **Priorities**

- Increase demand for sexual and reproductive health (SRH) services, including family planning
- Strengthen the health system: data, financing, midwifery, and commodities
- SRHR and empowerment of adolescent girls
- Prevention and response to gender-based violence (GBV)
- Building institutional capacity, including for generation and analysis of data and resilience in humanitarian contexts

## 2017 HIGHLIGHTS

- \$17,085,433 mobilized in total funding.
- The General Population and Housing Census 2017 was successfully completed covering all areas of the country, with UNFPA in a leading role with funding from the United Kingdom Department for International Development (DfID), Norway and Italy.
- A decrease in child marriage and teenage pregnancy in UNFPA-targeted provinces
  with funding from Sweden, in collaboration with the United Nations Children's Fund
  (UNICEF), the The United Nations Educational, Scientific and Cultural Organization
  (UNESCO), and The United Nations Entity for Gender Equality and the Empowerment of
  Women (UN Women).
- Increase in the Contraceptive Prevalence Rate for modern methods (mCPR) from 11.3% in 2011 (DHS 2011) to 31% in 2017 (Track2020).
- UNFPA has successfully implemented the rights- and community-based family planning program (KIMCHI) in collaboration with the World Health Organization (WHO) and the Ministry of Health and funding from South Korea.
- First comprehensive obstetric fistula program, led by the Ministry of Health in collaboration with UNFPA with funds from the Government of Canada.
- 3 fully operational GBV integrated assistance regional centers using multisectoral coordination mechanisms.

#### STANDING UP FOR HER RIGHTS

#### A young woman's story of change

"Now I am an empowered young woman. I know how to protect myself and to stand up for my rights which I didn't know I had before." shares Marcia (19 years). "I hadn't heard of contraceptives before I met the mentor in my community and became part of Rapariga Biz", explains Marcia. She was 17 years old, out-of-school and in the 4th month of her pregnancy when she joined Rapariga Biz. She was in a forced marriage,

with consent from her mother, and often forced to have sex with her husband against her will. She felt alone, with no one to turn to

"My mentor is my everything. She was there for me during difficult situations. She accompanied me to the youth-friendly services (SAAJ) to consult a nurse on the use of contraceptives. She also encouraged



me to return to school and to go after my dreams", shares Marcia. The mentor also convinced Marcia's mother to allow her daughter to live with her again.

Many girls like Marcia grow significantly from the sessions on life skills: "the mentor taught us to stand up for ourselves and to make healthy decisions. Now I know how to say no and that using contraceptives is my right", says Marcia. Now she is sharing what she learned in the safe space with other girls in her community - especially about young women standing up for themselves and taking a firm stance against men.

Marcia dreams about working in a bank to be able to sustain herself and her daughter.

Her mentor Jorgina is proud to see her transformation from suffering in her

marriage to an empowered young woman attending school and points to how Marcia is an inspiration to other adolescent girls in her community.



Now I am an empowered young woman. I know how to protect myself and to stand up for my rights which I didn't know I had before.

Marcia Felizanda Marcelino (19 years),



Being cured of obstetric fistula brought me new hope. My traumatic childbirth experience has motivated me to help prevent teenage pregnancy in my community

Vanda Antonio Maulena (24 years)

## **ENSURING REPRODUCTIVE** RIGHTS FOR ALL

Affordable, high-quality reproductive health services save lives. The Government of Mozambique is committed to addressing sexual and reproductive health needs, which is reflected in the Health Sector Strategic Plan (2014-19), that has as its first priority to "accelerate progress in reducing maternal and neonatal mortality, including the reduction of global fertility rates".

In line with the Every Woman Every Child Global Strategy and Sustainable Development Goal (SDG) 3 "ensure healthy lives and promote well-being for all at all

ages", UNFPA provides significant support to the Government in these efforts, including high-level advocacy and technical assistance towards a comprehensive national midwifery training program; contraceptive commodity security and essential maternal and reproductive health life-saving medicines, community-based family planning; fistula prevention and treatment; Maternal and Perinatal Death Surveillance and Response (MPDSR); as well as Emergency Obstetric and Newborn Care (EmONC).

Maternal Mortality Ratio: 408 per 100,000 live births (DHS, 2011)	408		100.000
Maternal Mortality Ratio among 15-24 years: 450 per 100,000 live births (DHS, 2011)	450		100.000
Women with obstetric complications having access to emergency obstetric care: 13% (IMASIDA, 2015)	13%	100%	
Contraceptive Prevalence Rate: 25% among adolescent girls and women between 15-49 years (IMASIDA, 2015)	25%	100%	
Unmet need for family planning: 23% among adolescent girls and women between 15-49 years (IMASIDA, 2015)	23%	100%	

## DELIVERING A WORLD WHERE EVERY CHILDBIRTH IS SAFE

In Mozambique, approximately 20% of maternal deaths occur in adolescent girls who did not complete their twentieth year of life. Childbirth at an early age is associated with greater health risks for the mother.

In countries like Mozambique, complications of pregnancy and childbirth, including obstetric fistula (OF) are the leading cause of death in girls and young women aged 15–19 years. In areas with high maternal mortality, obstetric fistula may occur at a rate of two to three cases of OF per 1,000 pregnancies.

A key result of UNFPA's tireless efforts during 2017 was the signed agreement

in support of the comprehensive national midwifery program due to UNFPA's advocacy and mobilization of partners to boost the midwifery workforce.

A second key result was the endorsement by the Government of the DfID UN Joint Programme for Health (2017-2020). The program is part of the wider Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (RMNCAH/N) investment case for smart, sustainable, and scalable actions to improve the health of women and children in Mozambique. Funded by DfID, the UN agencies involved are UNFPA, UNICEF and WHO.

#### **Key Results**

	236	Maternal and child health nurses began training in 2017
	121	Motorcycle ambulances procured for emergency referral of pregnant women: benefiting 3163 pregnant women
ها. ه	11	National Database for maternal and newborn deaths installed in all provinces to track and address the root causes
	<b>540</b>	Number of women who underwent surgery to correct obstetric fistula
	<b>32</b>	Health providers undergoing in-service obstetric fistula surgical repair training

#### **Enhance the Quality** of the Midwifery **Workforce in Tete**

The insufficient and unequal distribution of a skilled midwifery workforce, inefficient supply chain management of key life-saving commodities and limited availability of basic and comprehensive emergency obstetric care services contribute to high levels of maternal mortality and morbidity. The UNFPA-

supported program in Tete Province aims to increase access to quality sexual and reproductive health services, by ensuring a qualified midwifery workforce deployed in health facilities by strengthening the institutional capacity of the Tete Training Institution (ICS) and immediate capacity development of maternal and child health nurses. Funded by the Government of Flanders, since 2017. the program also includes South-South collaboration between the Ministry of Health in Mozambique and Cuba's Ministry of Health.

#### **Promotion of Women and Girls' Reproductive Health and Rights Through Prevention and Treatment of Obstetric Fistula**

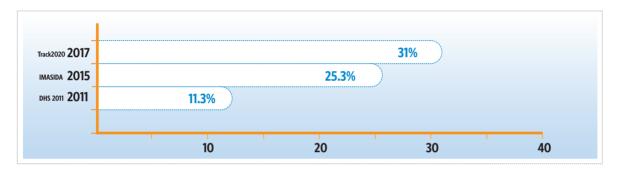
In 2017, UNFPA led the efforts, in partnership with the Ministry of Health, to develop the first \$4,5 million national obstetric fistula program funded by Canada. The overall goal is to improve the well-being of girls and women living with obstetric fistula in Mozambique through improved access to comprehensive surgical obstetric fistula

repair, social reintegration and targeted preventive interventions. UNFPA remains a key partner to the Ministry of Health in its efforts to implement the National Strategy for Prevention and Treatment of Obstetric Fistula 2012-15 (2020).

#### **Delivering a World Where Every Pregnancy is Wanted**

Access to safe, voluntary family planning is a human right and is central to achieving gender equality, empowering women and reducing poverty. During 2017, UNFPA provided support to the provision of family planning information and services, which contributed to a significant increase in

the Contraceptive Prevalence Rate for modern methods (mCPR) from 25.3% in 2015 (IMASIDA 2015), and to 31% in 2017 (Track2020). This demonstrates promising progress towards reaching the FP2020 target of 34%.



The National Family Planning and Contraception Strategy 2011-2015 (2020), places a specific emphasis on adolescents and youth. Mozambique's Family Planning 2020 Commitment also aims to increase the use of modern contraceptive methods for all

adolescents between 15-19 years from 14.1% (IMASIDA, 2015) to 19.3% in 2020 and from 26.7% (DHS, 2011) to 50% in 2020 for unmarried sexually active adolescents between 15-19 years.

#### Mozambique's 2020 Family Planning Commitment at the Family Planning Summit in London in July 2017

- Increase the use of modern contraceptive methods for all adolescents aged 15-19 years from 14.1% (2015) to 19.3%, and for unmarried sexually active adolescents from 26.7% (2011) to 50% in 2020.
- 2. Provide SRH services (information and contraceptives) in all secondary schools by 2020.
- Ensure that 30% of all facilities in the country use the electronic stock management system for managing commodities including contraceptives by 2020.

#### **Key Results**



Percent of health facilities offered at least five modern methods of contraceptives



Health providers trained in provision of the modern contraceptive



Mobile clinics implemented

**Users reached** 



**Increased coverage of training in implant insertion and removal** at primary health facilities from 40% in 2012 to 73% in 2017 (GDS 2017)



Health committees with a total of 285 members were trained on the integration of family planning into other services, and monitoring of new approaches at the community level.

#### **Good Practice: Community-based Family Planning**

The UNFPA-supported communitybased family planning project (KIMCHI) targeting Cabo Delgado province, with funding from the Korea International Cooperation Agency (KOICA), has shifted the provision of family planning methods from the health centers to the communities. The community-based approach includes mobile clinics, schoolbased family planning, community health fairs, door-to-door promotion by community health workers, community dialogues and community radios promoting family planning.

This approach has helped ensure the fulfillment of youth, men and women's reproductive rights to decide whether to get pregnant or not, the number, timing and spacing of their children as well as preventing risky adolescent pregnancies."Key to sustaining the positive trends in the uptake of family planning is to ensure the availability of the modern methods to respond to the new demand from the communities" says Rabia Cartela Picero, Maternal and Child Health Nurse.

# COMMUNITY HEALTH WORKERS IMPROVE FAMILY PLANNING UPTAKE

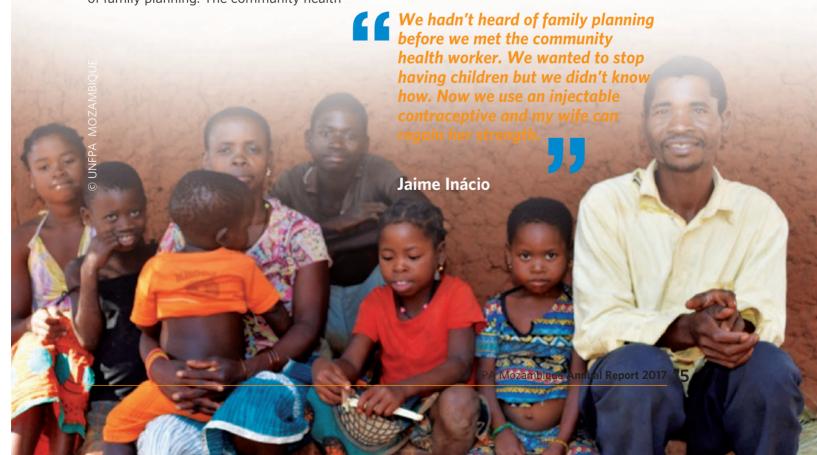
#### A story of change

The community health workers and family planning activists are trained to advocate for the economic and health advantages from the use of family planning towards the greater well-being of youth, women, and families - as well as to inform them about the potential side effect of each method. At the same time, they are providing three of the modern methods of family planning: pills, condoms, and injectables.

Before traditional family planning methods involved men having sex with another woman to give his wife a break. That practice is now replaced by modern methods of family planning. The community health

workers still work to address the existing myths: the belief that some methods provoke bleeding, that women choose to use contraceptives because they are prostitutes and others fear that they will no longer be able to have children after adopting a method of family planning.

Another challenge facing the work of the community health workers is the fact that the chief of the family often wants to ensure more children in the clan, which puts pressure and expectations on girls and young women.





## " Receiving the dignity kits empowered us. Emilia Eugenio (16)

## SEXUAL AND REPRODUCTIVE **HEALTH IN EMERGENCIES**

Mozambique is ranked third amonast African countries most affected by climaterelated hazards due to its geographic location and flat topography. More than 60 percent of the population lives along the coastline and is, therefore, highly vulnerable to recurring cyclones and storms.

UNFPA is leading the protection cluster and continues to strengthen the humanitarian actors to address gender-based violence. We supported the capacity building of the National Institute of Disaster Management. the Ministry of Health and the Ministry of Gender, Children and Social Action to enable the development of Contingency

Plans addressing sexual and reproductive health, including gender at the national level and in the 6 most disaster prone districts of Nampula province.

In the face of Cyclone Dineo in Inhambane and Gaza provinces in 2017, which destroyed homes, hospitals and schools and devastatingly affected 150,000 people and pushed them deeper into extreme poverty, UNFPA supported the humanitarian assistance and empowerment of vulnerable women and girls of reproductive age through the provision of sexual and reproductive health services.

"

We learned about menstrual health and other sexual and reproductive health issues which we never had discussed in school before. In the session, we felt free to discuss and share ideas.

**Emilia Eugenio (16)** 





#### **UNFPA's response to Cyclone Dineo**



## **UNFPA Supports Internally Displaced Girls and Women**

As a result of conflicts in Central and Northern Mozambique, UNFPA assisted 2,000 internally displaced girls and women with dignity kits in the districts of Maringue (Sofala) and Mossurize (Manica).





"

I want a community free of child marriage, a community free of early pregnancy. I want to live in a community where every pregnancy and marriage is wanted.

Lucilia Alima (21)

# EMPOWERING THE NEXT GENERATION

To realize the full potential of adolescents and youth, UNFPA is committed to ensuring their access to sexual and reproductive health and to fulfill their rights. Through these efforts, UNFPA works with multiple partners in Mozambique, including young

mentors, activists and peer-educators, civil society organizations, Government institutions, and UN sister agencies to ensure comprehensive policies and programmes that address the key issues and challenges faced by adolescents and young people.

Child Marriage: 48.2% of young women aged 20-24 years were married before turning 18 and 14.3% before 15 years (DHS, 2011)	48.2%	100%
Teenage Pregnancy: 46.4% of adolescent girls between 15-19 years are pregnant or mothers (IMASIDA, 2015)	46.4%	100%
Adolescent Fertility Rate: 194 births per 1000 adolescent girls aged 15-19 years (IMASIDA, 2015)	194	1000
Family Planning among Adolescent Girls: the Contraceptive Prevalence Rate among adolescent girls is at 14.1% (IMASIDA, 2015)	14.1%	100%
SRH Knowledge: 70% of young people aged 15-24 years have knowledge on SRH of rights and HIV prevention (IMASIDA, 2015)	70%	100%



## PUSHING THE YOUTH AGENDA IN MOZAMBIQUE

Empowering the next generation is a multisectoral agenda and UNFPA plays a fundamental role in establishing a more holistic and integrated multisectoral approach towards adolescents and vouth based on human rights through different interventions includina:

- Revitalizing the Inter-Ministerial Committee (CIADAJ) to lead and support all cross-sector initiatives on adolescents and youth in the country.
- Leveraging Government ownership and support to Mozambique's Universal Periodic Review (UPR) Action Plan
- and the participation of youth in its development. The UPR is a mechanism that facilitates the review of the fulfillment of each United Nations Member State human rights obligations and commitments with the objective of improving the human rights situation on the around.
- Initiating and leading the UN Youth Interagency Network (UN IYAND) with the participation of six UN agencies, which has become a strategic space within the UN for cross-sector discussion and programming related to adolescents and vouth in Mozambique.

#### Rapariga Biz

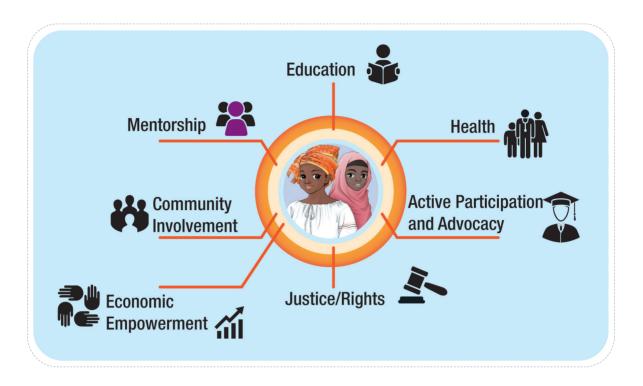
UNFPA leads the first joint UN program in Mozambique for adolescent girls "Rapariga Biz", which reflects the renewed global attention to the equality agenda. Under the notion of "leaving no one behind", Rapariga Biz. launched in May 2016 and ending in April 2020, aims to reach the country's most vulnerable adolescent girls and young women between 10-24 years through a holistic and integrated human rights-based approach, in collaboration with UNESCO, UNICEF and UN Women.

It is being implemented through the structure of Mozambique's nationwide sexual and reproductive health program "Geracao Biz" under the leadership of the Ministry of Youth and Sports in collaboration with the Ministry of Health, Education and Human Development, Justice and Gender, Children and Social Action.

Rapariga Biz intends to empower girls and young women to make informed decisions regarding their sexual and reproductive health and rights through empowerment and information on sexual and reproductive health, gender equality, human rights. leadership, citizenship, and life skills.

The overall goal is to reduce the cases of child marriage and teenage pregnancy in line with Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages and Goal 5: Achieve gender equality and empower all women and girls.

Rapariga Biz, which has received regional and global recognition, is funded by the Swedish International Development Cooperation Agency (SIDA), along with a contribution from the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage.



#### **Key Results**

	98,083	Girls and young women aged 10-24 years were empowered with knowledge, skills, and voice on their SRHR in the safe spaces
111	2,299	Mentors trained and empowered
	49,568	Girls and young women visiting youth-friendly services adopted at least one family planning method other than condoms (78%)
<b>j</b> iệ	1,506	Cases of child marriage with 53 (0.1%) compared to the national average (14%) Cases of child marriage girls in comparison to the national
11/	1,453	average (17%)
	110	Cases of early pregnancy, girls from 15-19 years compared to 46% of girls of the same age, nationwide.

## **Good Practice: Mentors are Leading**

#### Change

The mentorship under the Safe Space Model sits at the heart of Rapariga Biz's holistic and integrated human rightsbased approach. The mentors are young women between 15-24, who are attending secondary school and have previous experience as activists or peer-educators. The mentors are leading the change at the community level: each mentor works with 30 vulnerable girls for a period of 4 months in weekly sessions in so-called safe spaces in the community.

In the safe spaces, they discuss and share issues related to sexual and reproductive health, human rights, citizenship and life

skills. Mentorship is an approach towards personal development and empowerment. The mentors are role models that the girls and young women can identify with; they champion different empowering gender roles; they provide a support system outside of the safe spaces and they help, inspire, and motivate the girls and young women to make informed and healthy choices related to their life including sexual and reproductive health. Finally, the Rapariga Biz mentors act as reference points between the girls and young women in the program and the justice, education, and health services.



#### **Youth-Friendly Services**

#### **Good Practice: School-Based Family Planning**

UNFPA promotes evidence-based social and behavior change communication interventions, addressing social norm barriers to adolescent sexual and reproductive health. One key initiative is the adolescent sexual and reproductive health (ASRH) outreach and provision of contraceptives in secondary schools led by the Ministry of Education and Human Development. School-based family planning provision proves to be a cost-effective and relevant approach to

influence the attitudes and behaviours of adolescents and youth. Once a month, a Maternal and Child Health nurse provides ASRH information and services at the secondary schools and also ensures referrals to youth-friendly services. Mozambique is among the few countries in Africa providing contraceptives for adolescents and youth in schools and the intervention has yielded promising progress.

#### **Key Results**

Adolescents and young women 15 years and above were reached with 226,572 family planning services in the 298 targeted schools in 2017.

214,451 New users of FP as a result of the school-based family planning It represents 8% of the total of new users in the country.

#### **SRH Information and Counselling**

Another UNFPA supported intervention aiming at influencing adolescent and youth's attitudes and behaviors towards greater access to comprehensive sexual and reproductive health information and counseling is the SMS Biz initiative. Led by UNICEF and in partnership with UNFPA and the National Institute of Youth, SMS Biz is targeting adolescents and youth aged 10-24 years with ASRH peer-to-peer counseling and information through a SMS-based technology for development (T4D).

All Rapariga Biz mentors were trained during 2017 to use SMS Biz in their weekly





Adolescents have been empowered to access ASRH information and counseling.

mentorship sessions, which provided them with an immediate source of additional information and knowledge related to a specific sexual and reproductive health issue. They are also referring the girls and young women that they mentor to the SMS BIZ service.



#### **Putting an End to Child Brides**

In response to the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage, UNFPA's key contribution to its implementation in Mozambique is Rapariga Biz. Additionally, UNFPA plays a key role, in collaboration with UNICEF, in the provision of technical support to the Ministry of Gender, Children and Social Action to implement the National Strategy to Prevent and Eliminate Child Marriage. Hereunder, UNFPA is leading the efforts to establish a robust monitoring and evaluation framework for the national strategy and made a key contribution in 2017 to the national mass media campaign on child marriage and the C4D Strategy to complement national efforts to put an end to child brides in the country.

"We are equal to boys and can also contribute to society," says 17-year-old, Lidia Suale Saide. Lidia knows what it means to stand up for her beliefs. One year ago, she refused her mother's attempt to marry her off. She said she wanted to become a doctor instead. "I want to become independent and free of the harms and expectations placed on girls in my community. I resisted my mother's attempt to marry me away at 16 because I didn't want to lose the opportunity to have an education", she explained. "As a mentor, I want to use my experience to encourage and support other girls to make the right choices in life."

I want to become independent and free of the harms and expectations placed on girls in my community. I resisted my mother's attempt to marry me away at 16 because I didn't want to lose the opportunity of having an education.

Lidia Suale Saide (17)





The 2017 Census will enrich the stock of available sociodemographic data and allow decision-makers to develop evidence-based plans and programmes and track progress.

**Rosário Fernandes,** President of the National Institute of Statistics (INE).

"

## **GENERATING DATA ON** POPULATION DYNAMICS

In 2017, UNFPA continued to support the collection of data on population dynamics and conduct evidence-based analysis in Mozambique - the highlight being the 2017 Population and Housing Census. Population dynamics are the cumulative result of individual choices and opportunities and UNFPA plays a key role in generating data to inform investments in human rightsbased and people-centered programming in Mozambique.

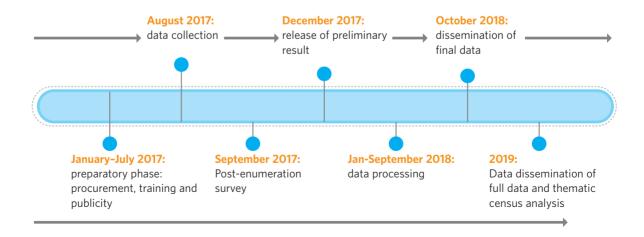
Census 2017

UNFPA supported the successful completion of the 2017 Population and Housing Census, which represents the single largest source of population data collected in Mozambique providing the state, public bodies and the private sector with a full and detailed profile

of the population and households down to the smallest geographical unit. UNFPA was instrumental in mobilizing the \$10 million budget, corresponding to the 22% of the 2017 Census budget.



#### **Timeline**





UNFPA established a Census Trust Fund with donor funding from DFID, Italy, and Norway.



Two international technical experts contracted by UNFPA provided support to the National Institute of Statistics (INE) in the areas of budget management, resource allocation, and Census planning, etc.

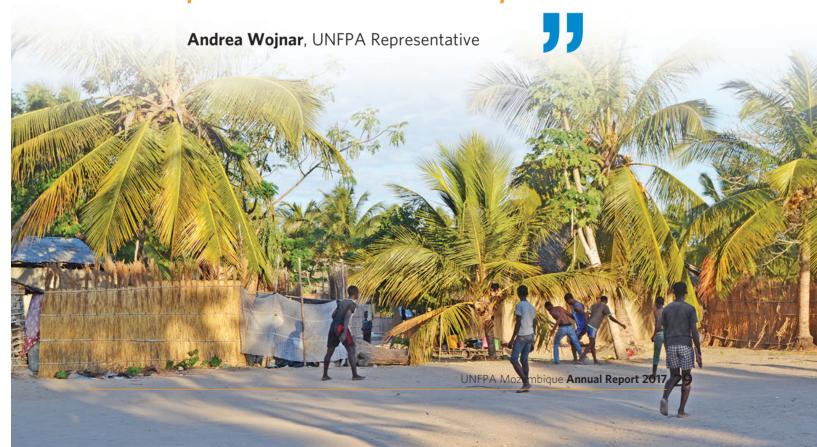


108,322 Participants were trained as enumerators in all 11 provinces of Mozambique.



**UNFPA** provided technical assistance in partnership with **UNFPA** Procurement Services Bureau (PSB) in Copenhagen to develop and update the INE's procurment plan. As a key achievement, and among other goods, 315,000 copies of three different manuals were procured for the enumerators, controllers, and supervisors.

The Census results will support our efforts to effectively and efficiently design evidence-based interventions for economic and social development.



#### **Population Data towards Enhanced Evidence-based Approaches**

UNFPA supported the availability of data through the following key reports and surveys:

- 2017 Population and Housing Census
- Sexual and Reproductive Rights Investment Case 2017
- Maternal and Neonatal Surveillance Audit
- Seventh survey of the availability of modern contraceptives and essential life-saving maternal/reproductive health medicines in health facilities of Mozambique
- Total Market Assessment for Family Planning: Strengthening Mozambique's Family Planning Market: A Way Forward
- Track 2020 Family Planning Report

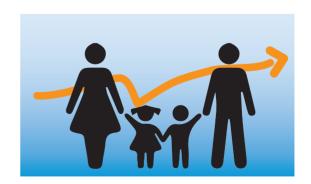
#### Making the Case for the **Demographic Dividend**

The Demographic Dividend (DD) is the accelerated economic growth that may result from a decline in a country's birth and death rates and the subsequent change in the age structure of the population. With fewer births each year, a country's young dependent population declines in relation to the working-age population.

The demographic dividend is a fundamental and pertinent agenda in Mozambique with current national debates focusing on how the country can maximize the valuable resource that makes up the youth bulge in the country as a driver of economic growth.

During 2017, UNFPA engaged in a series of high-level advocacy engagements and policy dialogue with the Ministers of Economy and Finance, Youth and Sports, Gender, Children and Social Affairs and Health, including with

bilateral partners to make the case for the demographic dividend agenda and why it is vital to invest in family planning, youth empowerment, health and education, etc. At the launch of the State of the World Population Report 2017 "Worlds Apart - Reproductive Health and Rights in an Age of Inequality" the demographic dividend was a key theme in the discussion.



## **2017 IN NUMBERS**

#### **Programmatic Expenses by Purpose**

Thematic Area of Work	Core and None Core Funding
Integrated sexual and reproductive health	\$5,954,943
Adolescents and youth	\$3,032,689
Gender equality and rights	\$858,620
Data for development	\$7,239,181
Total	\$17,085,433