

COVID-19 IMPACT ASSESSMENT IN THE CENTRAL REGION OF MOZAMBIQUE (MANICA, SOFALA, TETE AND ZAMBEZIA)

ROUND 2
NOVEMBER 2020



ABOUT THIS REPORT

With this report, IOM's Displacement Tracking Matrix (DTM) assesses the impact of COVID-19 and the following restrictive measures imposed by the government on the communities living in four provinces (Manica, Sofala, Tete and Zambezia) of central Mozambique. This report gives a comprehensive picture on the status of public awareness, healthcare provision, access to services, movement restrictions and the overall impact of the COVID-19 pandemic on employment and businesses across central Mozambique. The report is separated into two sections, based on the data collection methodologies employed: the first based on Key Informant interviews, and the second based on household-level surveys.

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Cover photo: IOM Covid19 prevention women mobile brigade in Bandua 1 Resettlement site in Buzi District.

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Introduction

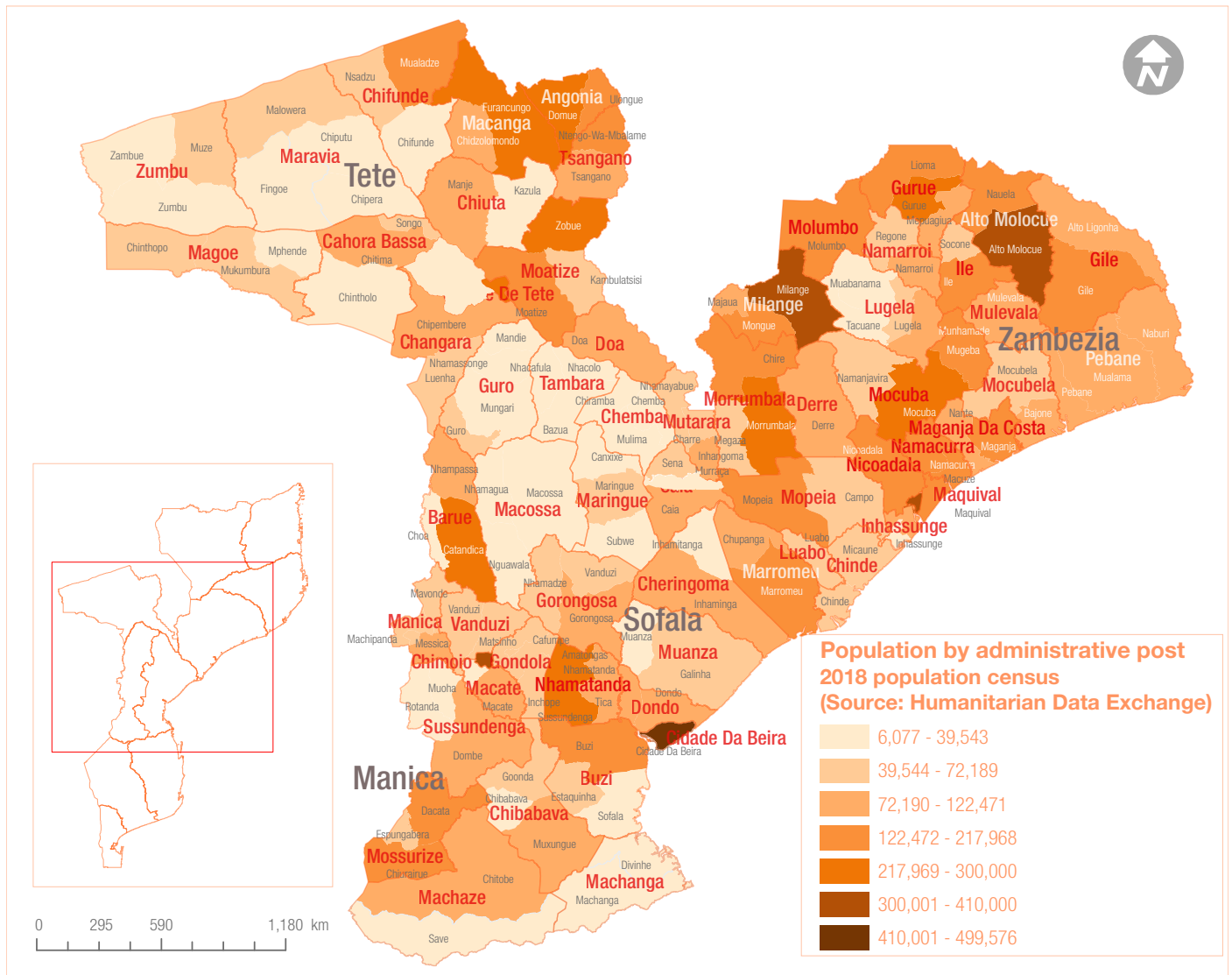
The outbreak of COVID-19 has resulted in a global pandemic, heightening the risk to vulnerable populations, internally displaced people, and people on the move. On 22 March 2020, the Government of Mozambique officially declared the first positive COVID-19 case. Concern about the potential spread of COVID-19 in Mozambique was elevated in late March 2020, when according to Mozambique's National Migration Service (SENAMI) over 14,000 Mozambican migrants returned from South Africa over the Ressano Garcia border within a span of a few days, as South Africa declared lock-down due to COVID-19, further heightening the risk to vulnerable populations especially the internally displaced population.

As of 12 January 2021, Mozambique reported 21,361 positive COVID-19 cases including cases in every province.

Findings from this assessment develop a comprehensive picture on the status of healthcare services, public awareness levels, access to services, movement restrictions and the overall impact of the COVID-19 pandemic across four provinces (Manica, Sofala, Tete and Zambezia) in central Mozambique.



COVERAGE MAP SHOWING CENTRAL REGION POPULATION



14,224,547
individuals
(2018 census)

4
provinces
assessed

60
districts
assessed

158
postos
assessed



IOM awareness session on the correct use of masks, and distribution of masks to pregnant women / XXX 2020

SECTION 1: BASELINE ASSESSMENT

Methodology

The data for this COVID-19 impact assessment report was collected between 10 and 27 November 2020. The information was collected at the posto level and covers 158 postos across four provinces (Manica, Sofala, Tete and Zambezia) in central Mozambique, in coordination with the Institution for Disaster Management and Risk Reduction (INGD). The remaining seven postos (representing 4% of the total postos) were not assessed due to the postos' administrator's unwillingness to participate in the interview. Data was collected through IOM's Displacement Tracking Matrix team, composed of 21 staff members deployed (8 team leaders and 13 enumerators), and 45 INGD staff members. Data was collected through face-to-face interviews with Key Informants (KIs). The key informants are asked questions that aim to assess the impact of COVID-19 across the postos, and their answers are not based on their opinions, unless specifically mentioned.

The aim of the assessment is to develop a comprehensive picture of the status of healthcare services, public awareness levels, access to services, movement restrictions and the overall impact of the pandemic across four provinces of central

Table 1: Number of postos assessed by province

Province	No. of postos assessed
Manica	38
Sofala	32
Tete	38
Zambezia	50
Total	158



SECTION 1: BASELINE ASSESSMENT

KEY FINDINGS

SECTION 1A: Public awareness



99%

of the assessed postos received information about the COVID-19 pandemic and personal hygiene measures

15%

of the KIs believe that someone in their community might hide their status, if diagnosed with COVID-19, for fear of stigma

SECTION 1B: Impact on access to services



13%

of the assessed postos with waste disposal service experienced disruptions in the service provision

42%

of the KIs referred that there have been price increases in their area during the COVID-19 crisis

SECTION 1C: Mobility restrictions



48%

of the KIs reported that most of the population (around 75%) stays at homes during curfew

44%

of the KIs reported that checkpoints and patrols are in place in most of the areas in their posto

SECTION 1D: Impact on vulnerable groups



39%

of the KIs reported that some groups are more affected due to their vulnerabilities by mobility restrictions

84%

of the KIs reported that these vulnerable groups did not receive some sort of assistance

SECTION 1E: Returnees from abroad



16%

of the assessed postos have returnees from abroad

4%

of the KIs reported that there have been negative reactions in their posto to returnees from abroad

SECTION 1F: Impact on livelihoods and post-pandemic needs



16%

of the postos reported that most of the businesses will not be able to reopen at the end of the pandemic

78%

of the KIs mentioned the resumption of education as a top priority needs at the end of the pandemic

SECTION 1A: Public awareness

The results from the assessment show that public awareness about the COVID-19 pandemic appears to be strong across all four provinces with campaigns through leaflets, posters or announcements about the COVID-19 pandemic and personal hygiene measures that have been conducted in almost all postos (156 out of 158, 99%). The main actors involved in the campaigns were: non-medical authorities (65% of the postos), NGOs or UN agencies (55%), medical personnel (54%), media (11%), social media (3%) or other actors (38%).

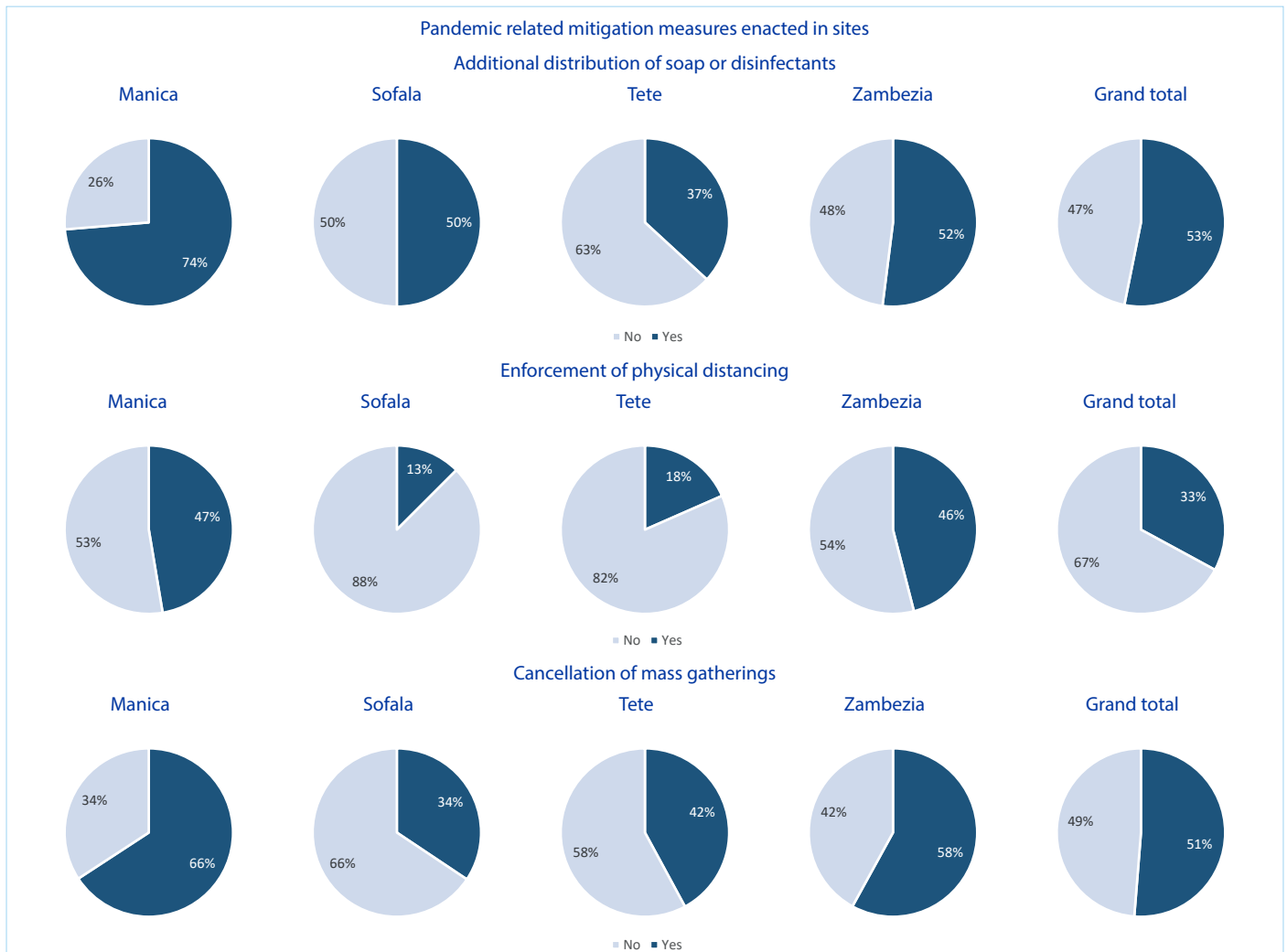
As a result, 98 per cent of the KIs believe that the information received has been adequate and the population in their respective postos is aware of COVID-19 symptoms and prevention measures.

In the event of suspected COVID-19 case in the KI's family, the vast majority (92%, up from 84% in the previous round) would seek medical attention in a public primary health center or hospital, and 12 per cent of KIs would call the dedicated hot-line and follow instructions. Moreover, 68 per cent of the

KIs added that, as a common practice in their posto, people will have to self-isolate if they are diagnosed with COVID-19. On the other hand, 41 per cent of the KIs reported that people will be put in quarantine in a hotel or other designated structure.

KIs reported that the most common public health and social measures implemented in their posto include the following: recommending the use of masks (in 94% of the postos), installation of additional hand-washing stations (78%), enforcing social distancing (67%), disinfection of common spaces (50%), cancellation of mass gatherings (49%), additional distribution of soap/disinfectant to households (47%), individual health screening of newly arrived internally displaced persons (IDPs) (37%), and isolation of suspected cases in separated facilities (28%).

Finally, it is noticeable that while the majority disagrees, 15 per cent (compared to 22% in the previous round) of KIs believe that someone in their community might hide their status, if diagnosed with COVID-19, for fear of stigma.



SECTION 1B: Impact on access to services

Findings from the assessment show that, excluding schools, access to services has been minimally impacted by the COVID-19 pandemic and the following restrictive measures imposed by the authorities.

Markets, pharmacies, supermarkets, banks, transportation and government services continue to operate normally or with reduced hours/limited capacity in a clear majority of postos. On the other hand, in most of the postos, schools have been closed or continue with remote learning (9% and 82% respectively).

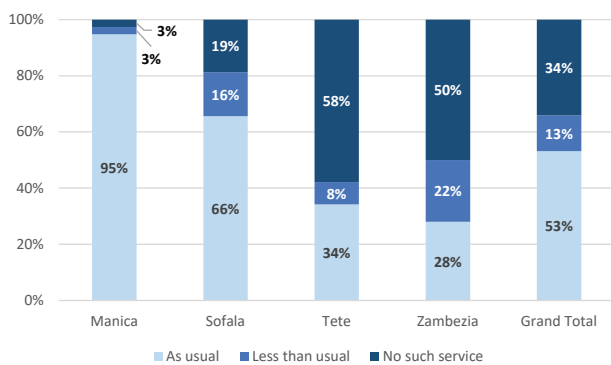
KIs in 42 per cent of the postos (down from 52% in the previous round) reported that there have been price increases, which were associated with product shortages also in 17 per cent of the cases. Additionally, 13 per cent of the KIs reported product shortages, without price increases in their posto. Food items

(74% of postos) and personal hygiene products (26%) have been reported as the most affected items of these phenomena.

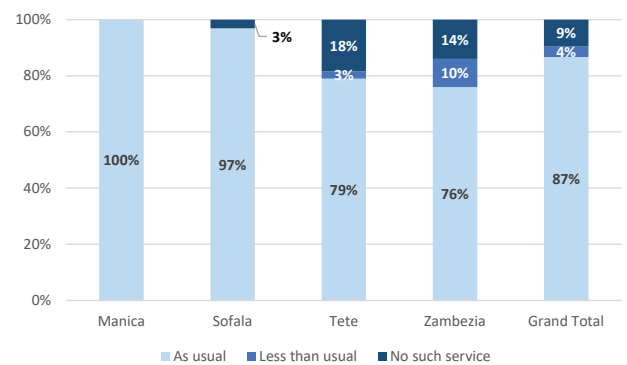
Water and electricity provision, where available, were minimally affected. KIs reported that waste disposal services were operating at a reduced frequency in 13 per cent of postos, while no such services operate in 26 per cent of postos. The reduction in service was most acute in Zambezia, with 30 per cent citing a reduced service. Similarly, Zambezia and Sofala contain the highest number of postos reporting a reduced service for desludging of septic systems (22% and 16% respectively). However, many postos in Zambezia and Tete have no such services (50% and 57% respectively).

Delivery of services as a result of curfew due to COVID-19, by province

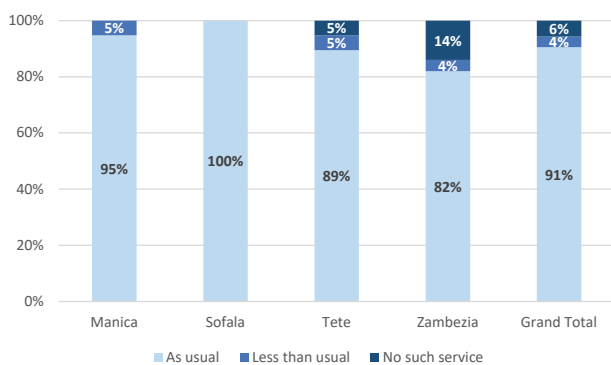
Desludging of septic systems



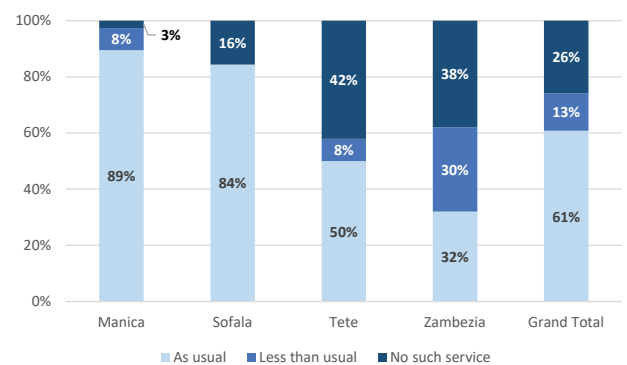
Electricity



Water



Garbage/waste disposal



SECTION 1C: Mobility restrictions

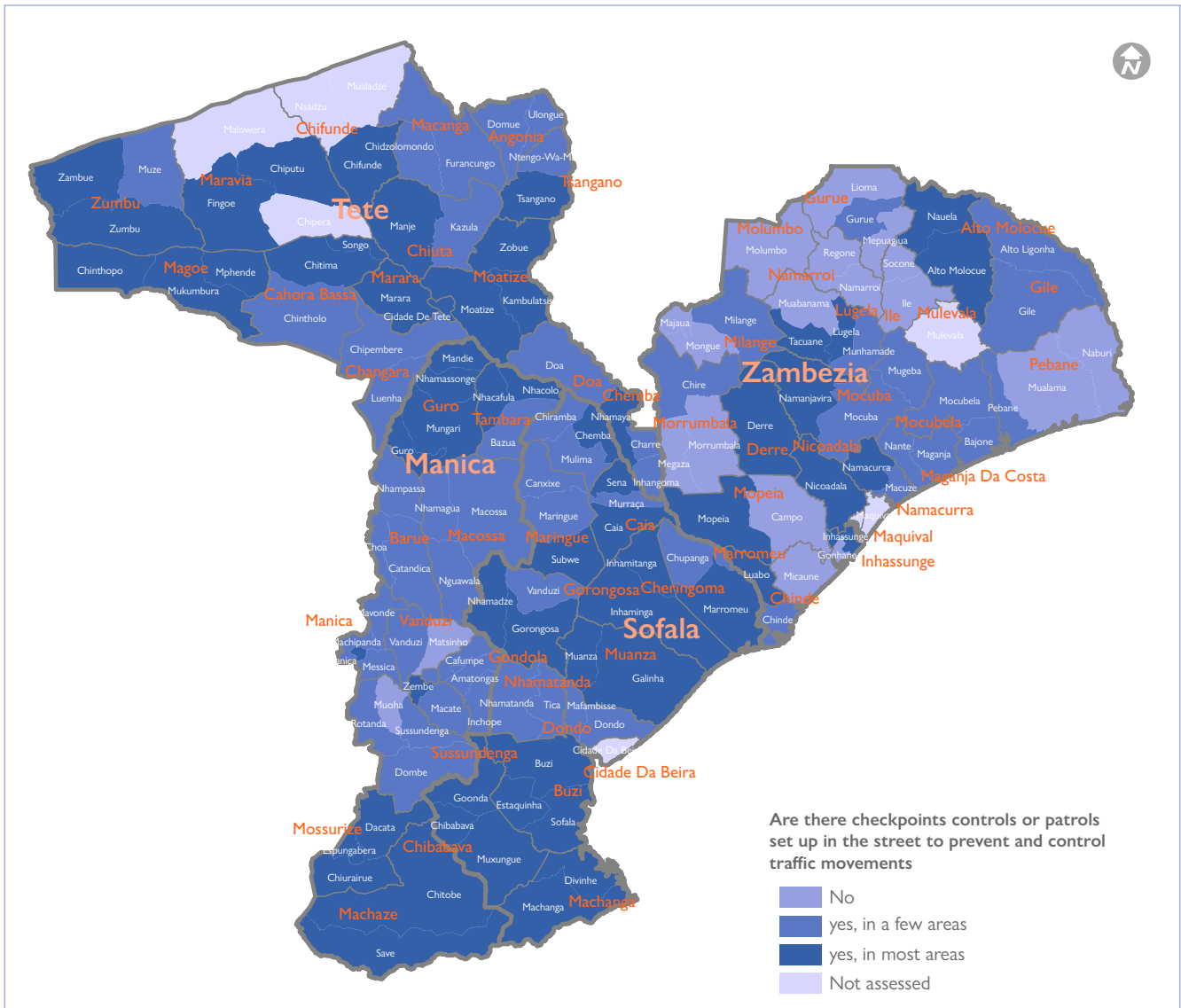
According to 48 per cent of the KIs (down from 75% in the previous round), more than 75 per cent of the population in their posto stays at home during curfew time. For 20 per cent of the KIs, the share of the population who stays at home during curfew is around half, while 24 per cent of the KIs reported that less than a quarter of the population in their posto stays at home during curfew.

Forty-four per cent of the KIs, compared with 55 per cent in the previous round, reported that checkpoints, controls and patrols to monitor the respect of the rules of COVID-19 restrictions are currently happening in most of the areas of their posto. On the other hand, 16 per cent of the KIs referred that no control was in

place in their posto, compared with 5 per cent in the previous round. Zambezia had the highest percentage of postos with no such controls or checkpoints (38%).

KIs from 46 per cent of the postos reported that fines and punishments were not used for people breaking the rules of the curfew (up from 37% in the previous round). This is particularly evident in Zambezia as reported by 68 per cent of the KIs from that province.

Other restrictions reported by KIs in their posto were the following: use of face masks (in 93% of the postos), prohibition of mass gatherings (86%), enforcement of social distancing (74%), and curfew (43%).



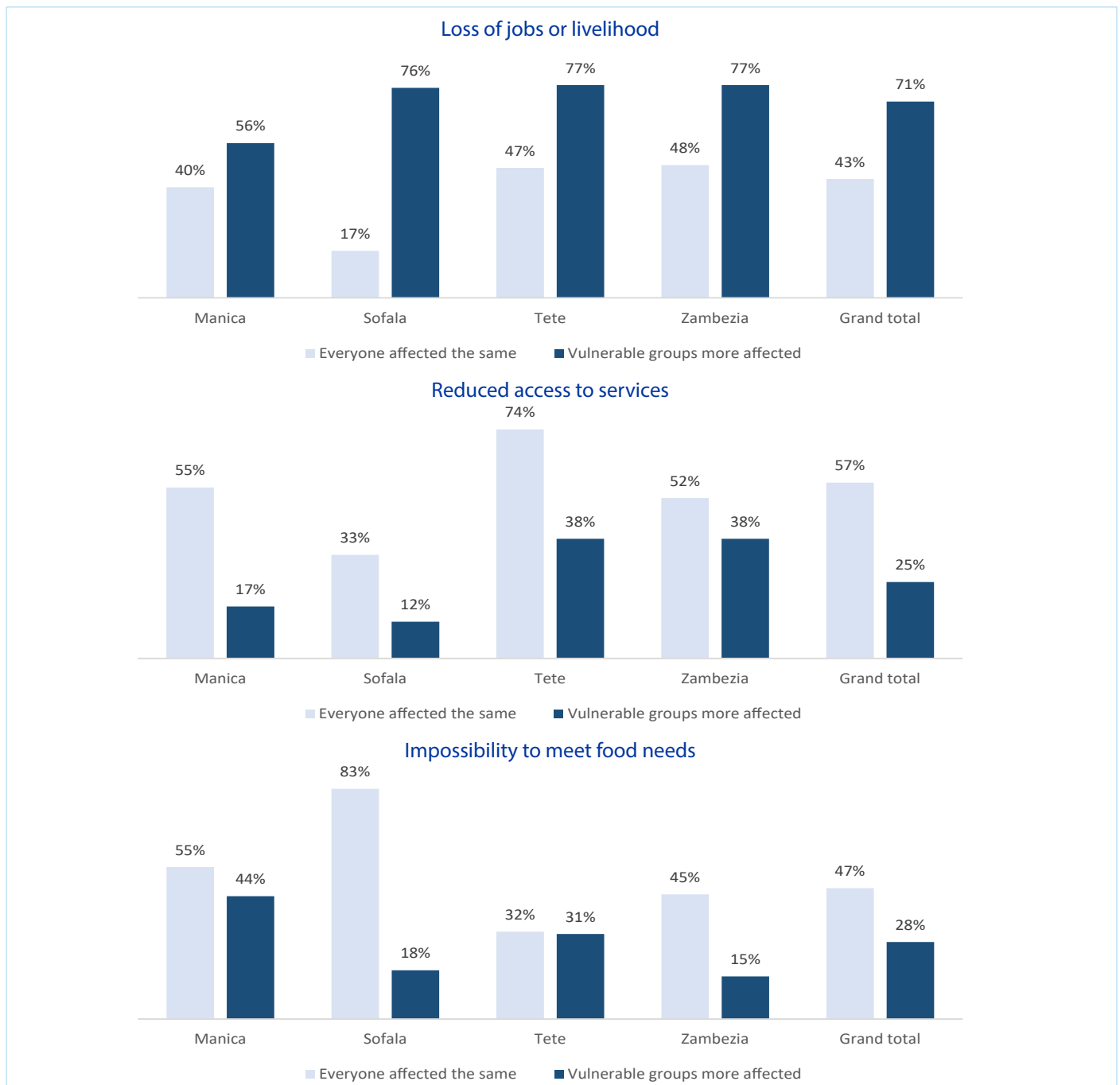
SECTION 1D: Impact on vulnerable groups

KIs in 39 per cent of the postos (compared with 33% in the previous round) felt that some groups were more affected by COVID-19 restrictions in their postos. Positive responses to this question were much greater in Manica and Sofala (47% and 53% respectively). Shopkeepers, young people, elderly people, and persons with disabilities were the most mentioned categories.

KIs reported different consequences and severity of the impact of COVID-19 restrictions, depending on whether they had previously stated that some groups were more affected. The graphs below give an indication on how the aforementioned vulnerable groups have been more affected by loss of jobs or

livelihoods. The largest difference was in Sofala (76% of postos with more vulnerable groups experiencing job losses, versus 17% in postos where all groups were affected to the same degree). On the other hand, the presence of vulnerable groups correlated with reduced access to services, and to difficulties in meeting food needs (apart from in Tete).

Among the postos that reported some groups as more vulnerable to the impacts of COVID-19 related restrictions, only 13 per cent reported that these groups received some sort of assistance (and no postos in Zambezia reported the reception of assistance). The actors who provided assistance, as mentioned by KIs, were the local authorities.



SECTION 1E: Returnees from abroad

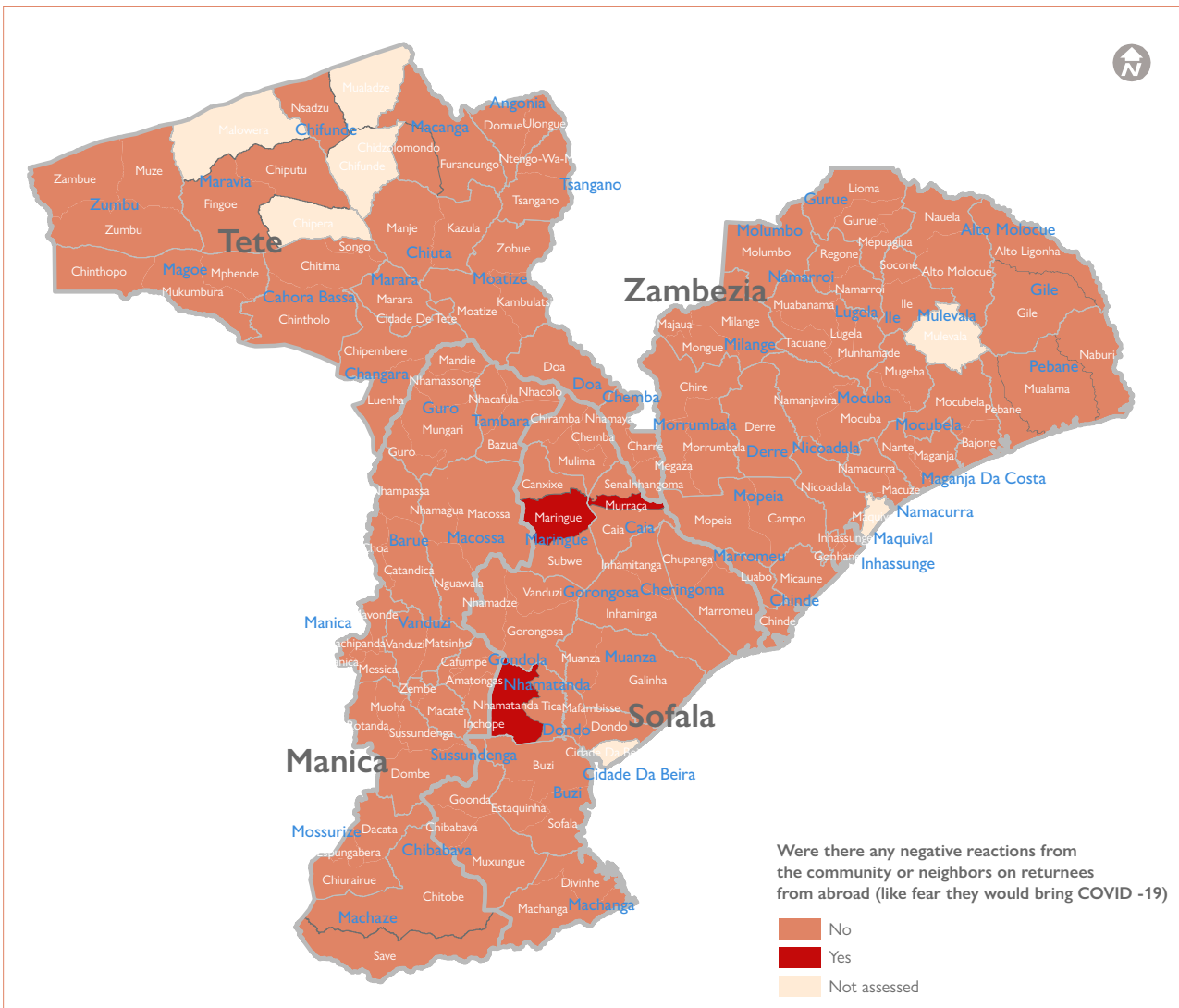
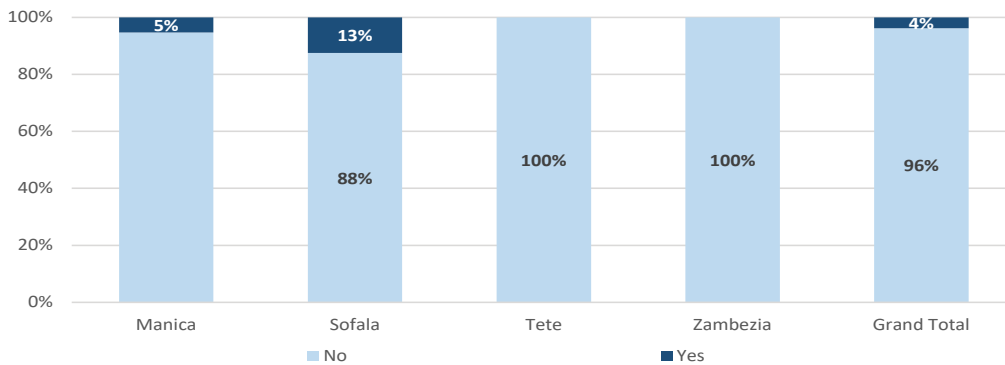
As mentioned earlier, due to COVID-19 restrictions imposed in neighbouring countries, many returnees came back to Mozambique in the past few months.

Overall, 16 per cent of the KIs reported that there are returnees from abroad in their posto, compared to 32 per cent in the previous round. Most of the southern postos were more affected by this phenomenon (with 26% of postos in Manica, and 31% in Sofala noting returns), likely due to their proximity with the borders

with Zimbabwe and South Africa (the latter being mentioned as the country of residence by 88 per cent of the KIs reporting the presence of returnees in their posto).

Only 4 per cent per cent of the postos reported that the arrival of returnees has provoked negative reactions from the community because of the risk of spreading the virus (down from 46% in the previous round).

Were there negative reactions from the community to returnees from abroad?



SECTION 1F: Impact on livelihoods and post-pandemic needs

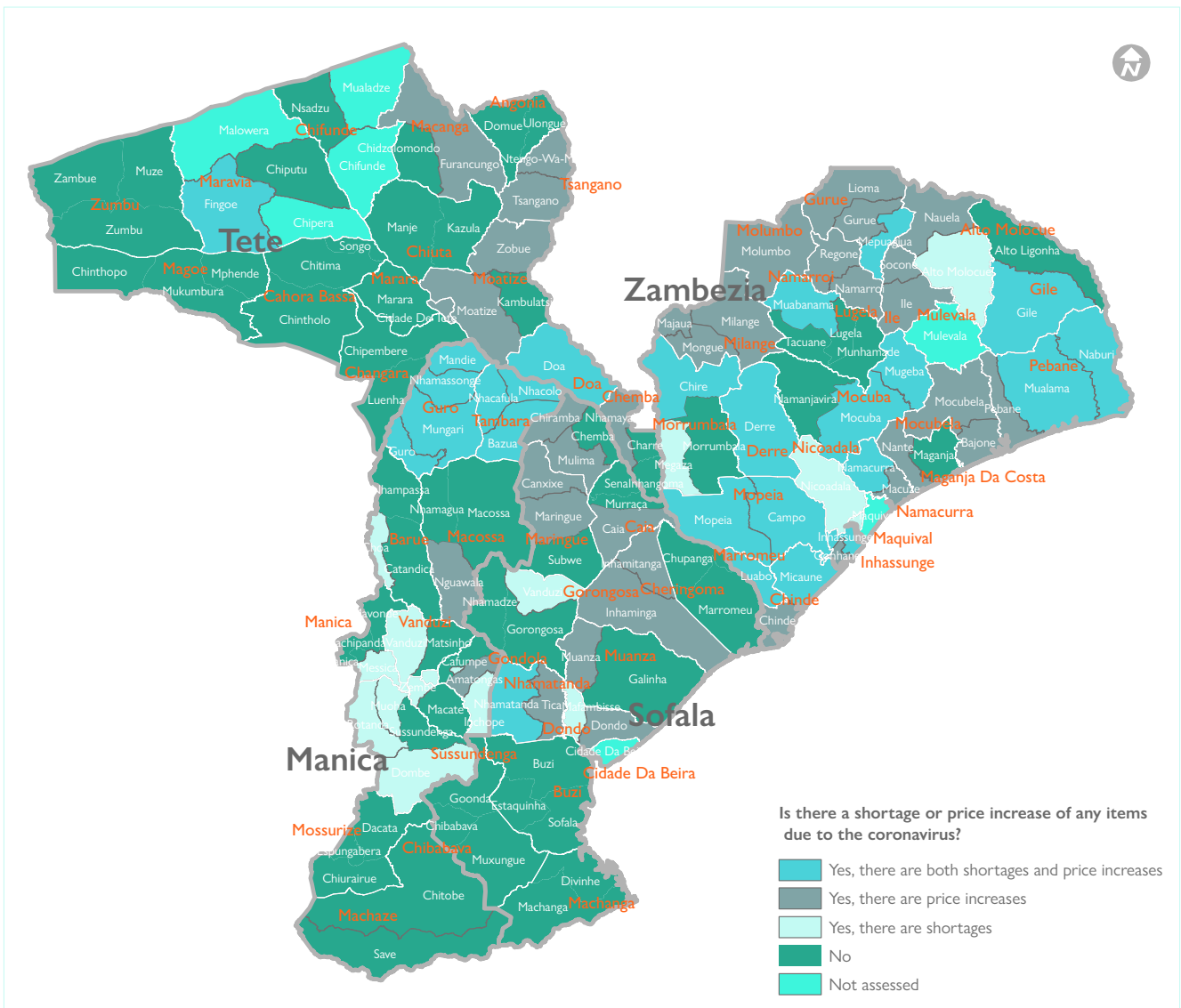
KIs from 16 per cent of the postos reported that most of the businesses that were forced to close due to the COVID-19 restrictions will not be able to cope and reopen at the end of the pandemic. This was more acute in Manica and Sofala provinces, where 18 per cent and 28 per cent of postos reported that businesses are not expected to re-open at the end of the pandemic.

KIs reported the following as the main impacts on livelihoods: reduced income (mentioned in 72% of the postos), decrease in the number of income sources (65%), loss of jobs (39%), and other impacts, such as closure of agricultural and commercial fairs (13%). Zambezia was an outlier, with a far higher percentage of KIs reporting concerns of reduced access to income sources (84%), highlighting a vulnerability.

KIs mentioned the following as the most likely consequences at the end of the pandemic: delays in educational programs, unemployment, and decrease in income.

As a result, the resumption of education was reported as the top priority need at the end of the pandemic: as a matter of fact, it was mentioned by key informants in 78 per cent of the postos. However, Zambezia province was an outlier, with KIs reporting resuming education as a priority only in 52% of postos.

Other priority needs are healthcare (54%), food (53%), livelihoods (40%), public infrastructures (27%), and shelter (3%). Other needs, such as financial support to businesses, distribution of agricultural inputs and job creation, were mentioned by KIs in 34 per cent of the postos.



SECTION 2: HOUSEHOLD SURVEY

Methodology

In addition to the baseline assessment, a household survey was conducted between 2 November and 26 December 2020 in order to obtain a more comprehensive picture of the impact of COVID-19 and mobility restrictions on the population residing in the resettlement sites in Central Mozambique. The information was collected in all the 73 resettlement sites situated in four provinces (Manica, Sofala, Tete and Zambezia) in Central Mozambique, in coordination with INGD. Between 6 and 8 individuals have been interviewed in each resettlement site, corresponding to a total number of 513 individuals who participated to this survey (313 men and 200 women).

The aim of the assessment is to develop a comprehensive picture of the status of healthcare services, public awareness levels, access to services, movement restrictions and the overall impact of the pandemic across four provinces of central Mozambique.

Table 2: Number of individuals interviewed by province

Province	# Resettlement sites	# Individuals interviewed
Manica	31	220
Sofala	29	201
Tete	3	21
Zambezia	10	71
Total	73	513



SECTION 2A: Public awareness

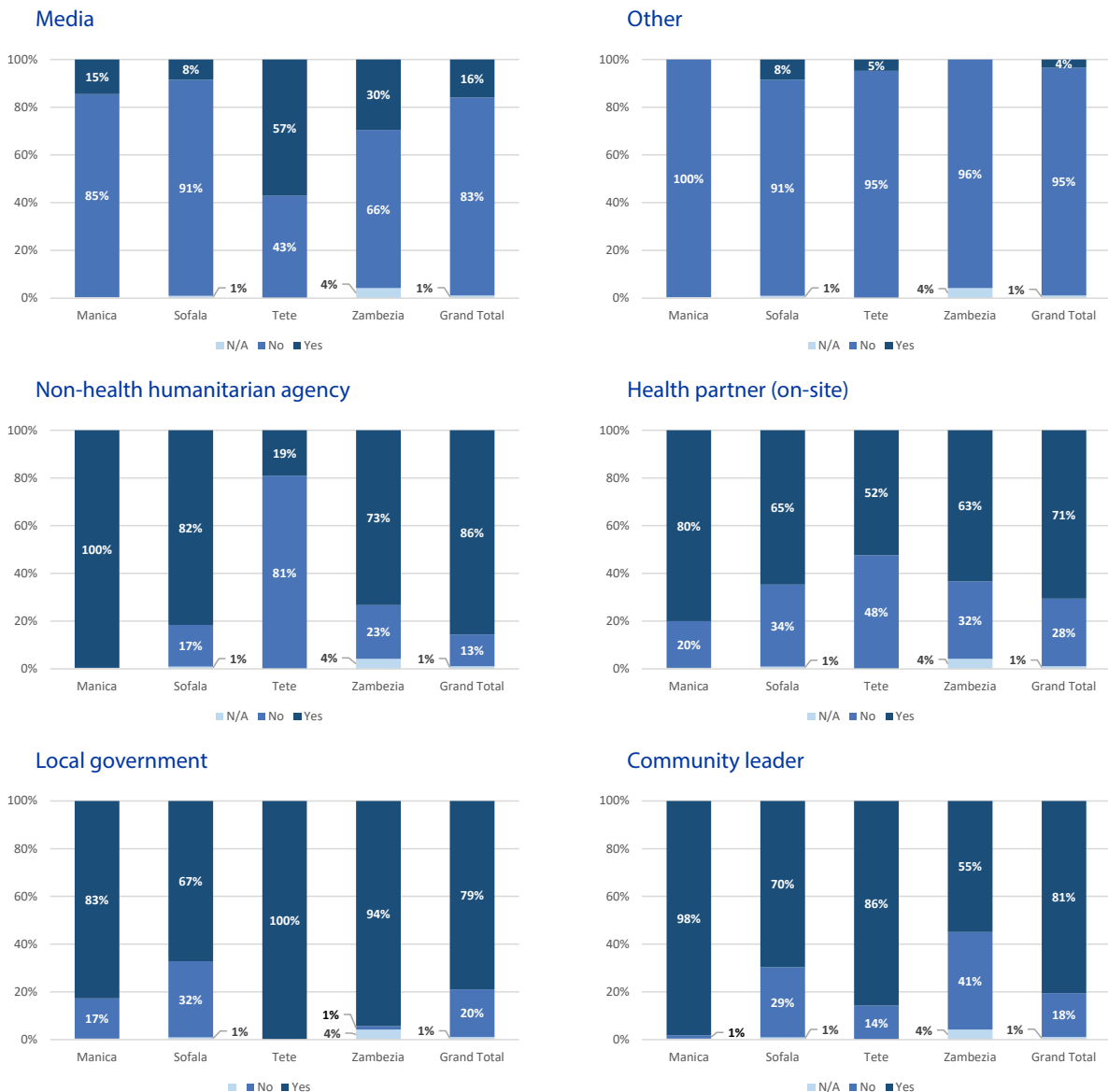
According to the results of the survey, individuals residing in the resettlement aware seem aware of the ongoing COVID-19 pandemic and the preventive measures. In particular, 83 per cent of the respondents answered that everyone in their community is aware of COVID-19 prevention measures. 14 per cent said that most people are aware. A total of 11 respondents in Zambezia (Landinho, Manguissa, and Mucoa sites) reported that only about half of the site inhabitants are aware of the pandemic. In 73 per cent of interviews it was reported that everyone is aware on how to protect themselves against the spread of COVID-19, and in 24 per cent of sites that most people (i.e. around 75%) are aware of such protective measures.

Almost all respondents (99%, 507 out of 513) said that they have received information about COVID-19 and the measures to prevent its spread. The main actors providing information, as mentioned by respondents,

were: non-health humanitarian agencies (mentioned by 87% of the respondents), community leaders (81%), local government office (80%), health partners on the ground (71%), media (16%) and other actors (4%).

Sixty-eight respondents (13% of the total) reported that they have noticed an unusually high number of deaths in the last months. In particular, all respondents in Bairro da unidade, Nhanhamba 1 (Manica province), Macarate and Tchetcha 1 (Sofala province) resettlement sites noticed this unusual increase. The main reasons mentioned for this unusually high number of deaths were diseases (mentioned by 68% of the respondents who noticed this increase) and unknown reasons (35%). The main disease symptoms noticed by respondents have been: fever (80%), diarrhea (35%) and respiratory issues (15%).

Who provided information to IDPs on COVID-19 protection and preparedness measures?



SECTION 2B: Measures and restrictions

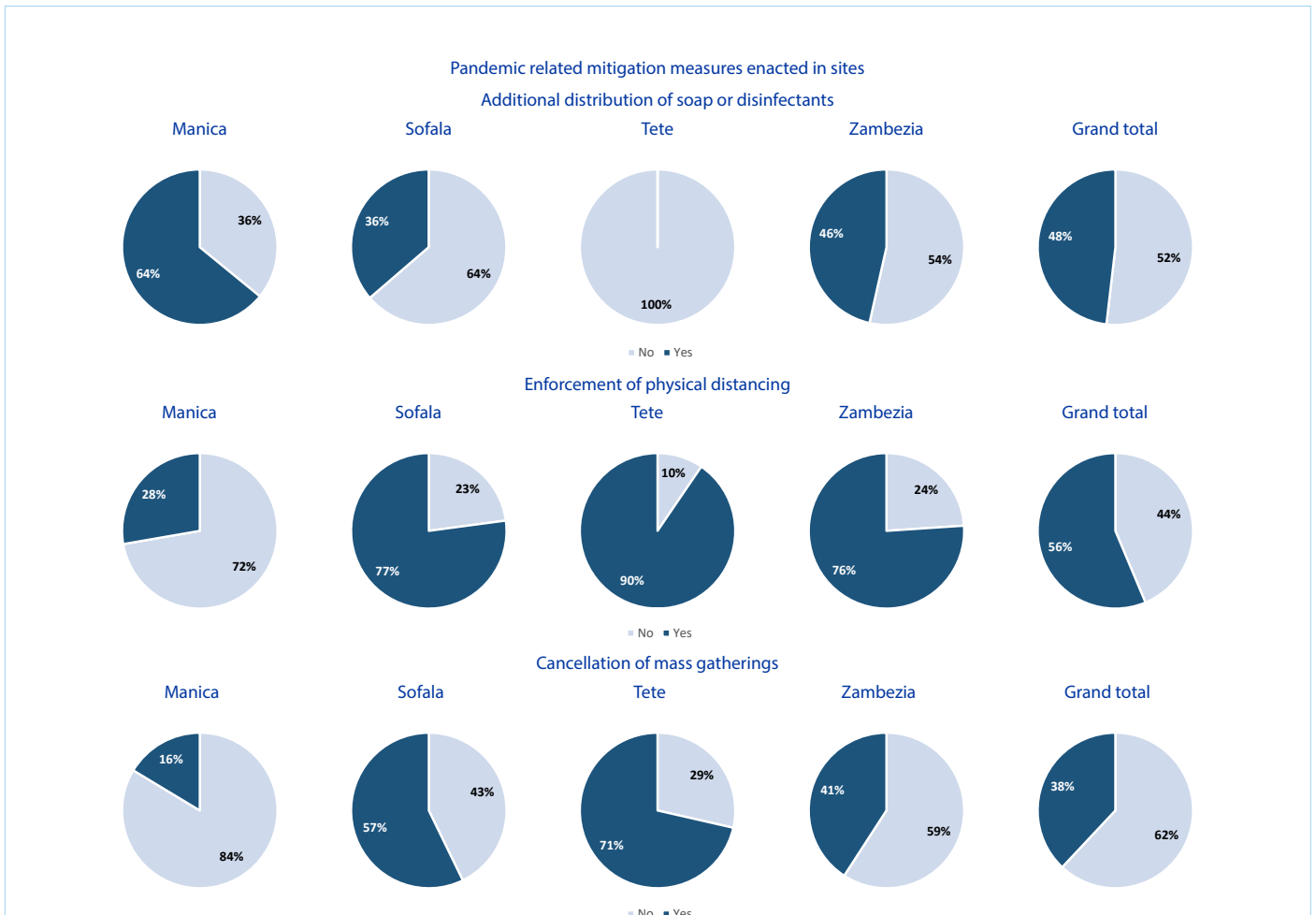
According to the results of the survey, individuals have reported the following as the main measures in their current locations: recommendation to use face masks (86% of the interviewees), installation of additional hand washing facilities (64%) and enforcement of social distancing (56%). Other common measures observed were: additional distribution of soap (48% of the respondents), cancellation of mass gatherings (38%), disinfection of communal spaces (17%), and limitations on access to the site (15%).

The following are some of the key outlier results: 67 per cent of respondents in Tete and 55 per cent in Zambezia reported that there was no additional hand washing facilities (36% average). The only reported health screening for newly arrived IDPs occurred in 6 sites (28 respondents) in Sofala province (Nhacuecha, Magagade, Tchetcha 1 & 2, Ndoro, and Chicuaxa) and the 25 de Setembro site in Manica. Similarly the only respondents who reported the separation of persons who came into contact with someone who was ill, are all found in Sofala (with more than two respondents in each of the following sites: Machonjova, Nhamacunta, Begaja, Maximedje). All respondents from Tete (21

individuals) reported that there has been no additional distribution of soaps or disinfectants, nor has there been disinfection of communal spaces. To combat this, the rates of enforced physical distancing and the cancellation of mass gatherings are much higher in Tete than the average of all provinces.

Among the people taking part to the survey, 35 per cent reported that all services are still open and have not been affected by COVID-19 restrictions. On the other hand, the rest of the respondents reported that several services have been affected by restrictions. These services included: schools (reported by 45% of the respondents), community health workers not visiting households any longer (20%), child protection services (8%), and vaccinations (8%).

Sixty-six per cent of the respondents reported that movement restrictions have been imposed in their locality. Moreover, the following measures have been put in place: use of face masks (88% of the respondents), social distancing (69%), prohibition of mass gatherings (65%), curfew (48%) and travel restrictions (22%).



SECTION 2C: Impact of the pandemic

The main sources of income of the respondents were: farming (96% of the respondents), daily jobs (12%), small businesses (9%), husbandry (7%), remittances (5%), paid jobs (1%) and other sources (1%). Fifty-four per cent of the respondents reported that their economic situation has not been affected by the pandemic. On the other hand, 39 per cent of the interviewees reported that they have experienced reductions in their income, while others reported restriction in the number of income sources (6% of the respondents), loss of income (4%), and loss of job (2%).

Twenty-three per cent of the respondents reported that they have experienced price increases in their locality, while 17 per cent reported that their locality has experienced both price increases and product shortages during the pandemic. Food (reported by 71% of the interviewees) and hygiene items (62%) were the items mostly affected by these phenomena.

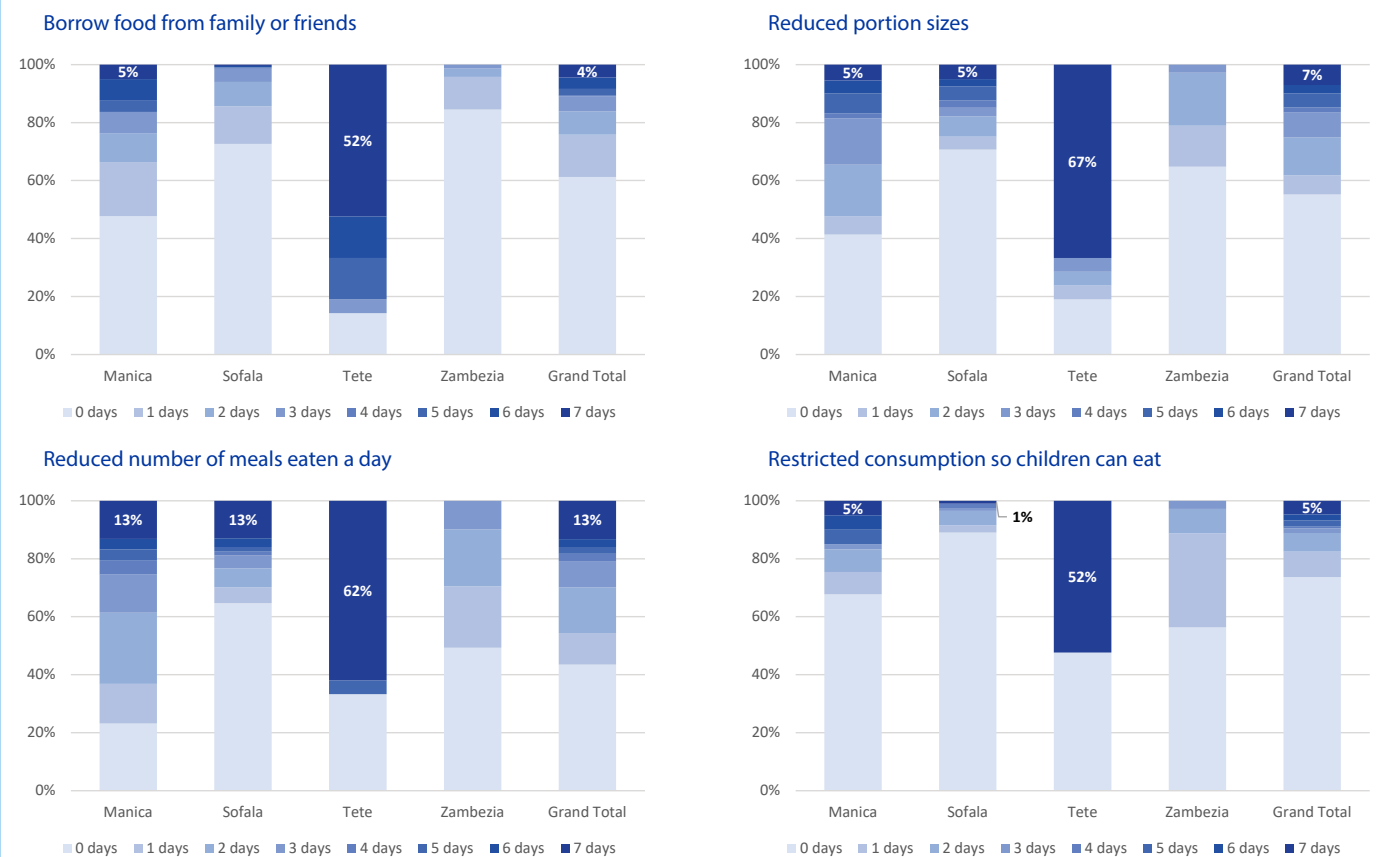
Respondents reported that the pandemic had also psychosocial effects such as less interactions with friends/family (reported by 51% of the respondents),

more stress (32%), distrust of others (24%), and depression (20%).

Seventy-six per cent of the participants to the survey reported that they are receiving assistance. Assistance was mainly focused on: Personal Protective Equipment (71% of the respondents), food (44%), NFI (33%), health (33%), WASH (21%), mental health (10%) and shelter (8%). Humanitarian actors (99%) and government offices (52%) were the main actors assisting the respondents.

The graphs below indicate how often respondents enacted mitigation measures for family nutrition. The darker shading indicates more days per week that these measures were taken. Respondents in Tete consistently indicated the greatest levels of food insecurity, with 52 per cent of respondents having borrowed food from friends or family every day of the week, and 62 per cent of families having reduced the number of meals they eat each day. In total, 93 per cent of individuals in Tete reported that they work in agriculture.

How many days a week have the following mitigation measures been enacted by IDPs to feed their families?



For more information or feedback, please contact:

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