

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

ROUND 3  
MARCH 2021



## ABOUT THIS REPORT

IOM's Displacement Tracking Matrix (DTM) assessed 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.

## ACKNOWLEDGMENTS

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Cover photo: Health committee discussing COVID-19 prevention measures in Macurungo resettlement site in Guara-Guara locality, Buzi District. © IOM Mozambique/2021

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## Introduction

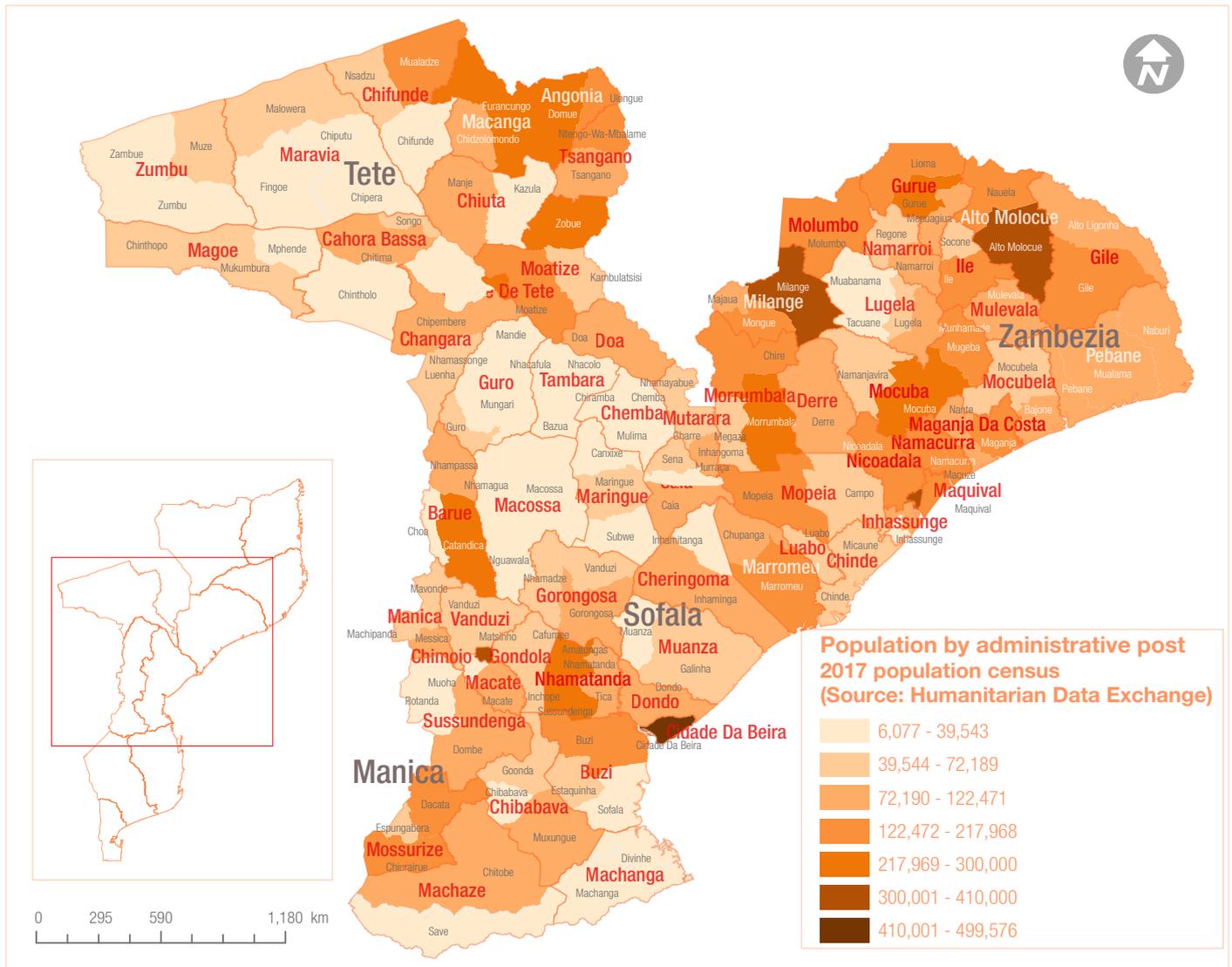
The outbreak of COVID-19 has resulted in a global pandemic, heightening the risk to vulnerable populations, internally displaced people, and people on the move. On 22 March 2020, the Government of Mozambique officially declared the first positive COVID-19 case. Concern about the potential spread of COVID-19 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 all sectors (e.g. 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  
(2017 census)

**4**  
provinces  
assessed

**59**  
districts  
assessed

**157**  
postos  
assessed



IOM awareness session on the correct use of masks, and distribution of masks to pregnant women / Jan 2021

## SECTION 1: BASELINE ASSESSMENT

### Methodology

The data for this COVID-19 impact assessment report was collected between 8 and 13 March 2021. The information was collected at the posto level and covers 157 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 eight postos (representing 4% of the total) 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 Mozambique.

Table 1: Number of postos assessed by province

Province	No. of postos assessed
Manica	38
Sofala	32
Tete	36
Zambezia	51
Total	157



## SECTION 1: BASELINE ASSESSMENT

### KEY FINDINGS

#### SECTION 1A: Public awareness



**97%**

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



**8%**

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

**62%**

of KIs said that there were price increases (with and without shortages) in their area during the COVID-19 crisis

#### SECTION 1C: Mobility restrictions



**54%**

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

**43%**

of the KIs reported that checkpoints and patrols are present in most areas of their posto to enforce COVID-19 protocols

#### SECTION 1D: Impact on vulnerable groups



**29%**

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

**70%**

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

#### SECTION 1E: Returnees from abroad



**10%**

of the assessed postos have returnees from abroad

**3%**

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



**10%**

of the postos reported that most of the businesses will not be able to re-open 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 (153 out of 157, 97%). The main actors involved in the campaigns were: non-medical authorities (71% of the postos), NGOs or UN agencies (64%), medical personnel (64%), media (24%), social media (8%) or other actors (24%).

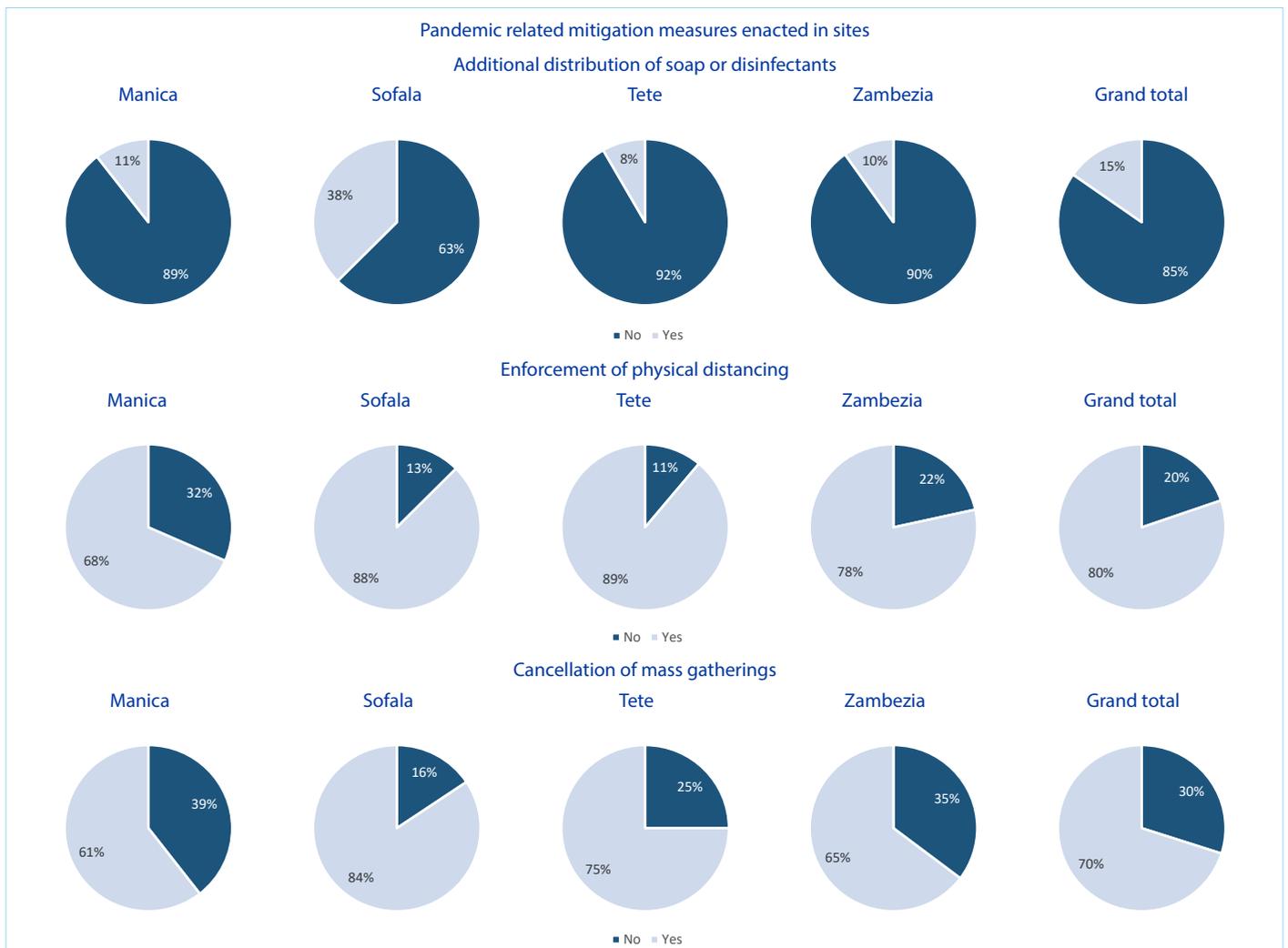
As a result, 96 per cent of the KIs believe that the information received has been adequate and the population in their respective postos is aware of COVID-19 symptoms and prevention measures.

In the event of suspected COVID-19 case in the KI's family, the majority (97%) would seek medical attention in a public primary health center or hospital, while 14 per cent of KIs would call the dedicated hotline and follow instructions. Moreover, 52 per cent of the KIs (down from 64% in Round 2) 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, 64 per cent (up from 41% in the previous round) 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 95% of the postos), enforcing social distancing (80%), installation of additional hand-washing stations (74%), cancellation of mass gatherings (70%, up from 49% in Round 2), disinfection of common spaces (31% down from 50%), isolation of suspected cases in separated facilities (17%), additional distribution of soap/disinfectant to households (15%, down from 47%), and individual health screening of newly arrived internally displaced persons (IDPs) (7%, down from 37%).

It is noticeable that 15 per cent of KIs believe that someone in their community might hide their status, if diagnosed with COVID-19, for fear of stigma. This is the same proportion as reported in Round 2, and a decrease from 22 per cent in Round1.



## 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.

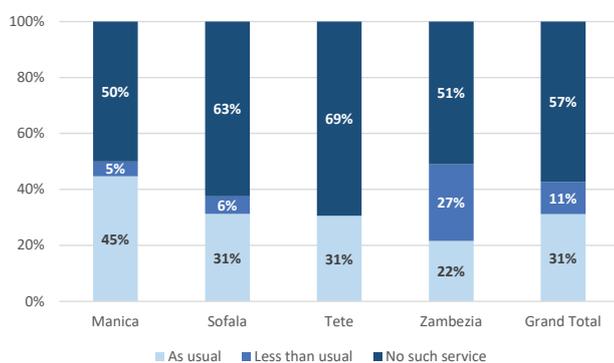
KIs in 42 per cent of the postos reported that there have been price increases, which were associated with product shortages also in 20 per cent of the cases. Additionally, 5 per cent of the KIs reported product shortages, without price increases in their posto. Food items (58% of postos) and personal hygiene products

(9%) have been reported as the most affected items of these phenomena.

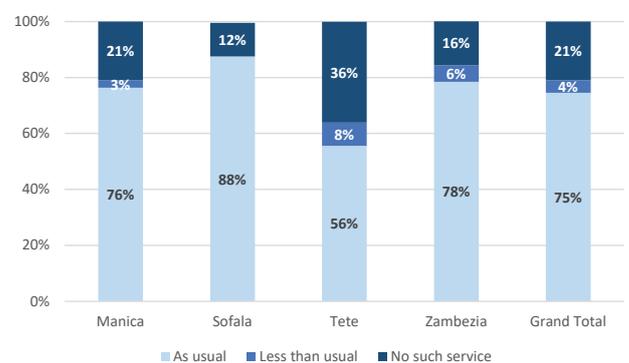
Water and electricity provision have been less affected, though across all provinces the availability of these services has decreased from the previous round. KIs reported that waste disposal services were operating at a reduced frequency in 13 per cent of postos, while no such services operate in 26 per cent of postos. The reduction in service was most acute in Tete, with 81 per cent citing no such service compared to 42 per cent in the previous round. Similarly, Manica reported a large absence in postos with no service for desludging of septic systems (50%, up from 3%). A similar decrease in service provision can be seen in Sofala, with 63 per cent of postos reporting no desludging services compared to 19 per cent in the previous round.

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

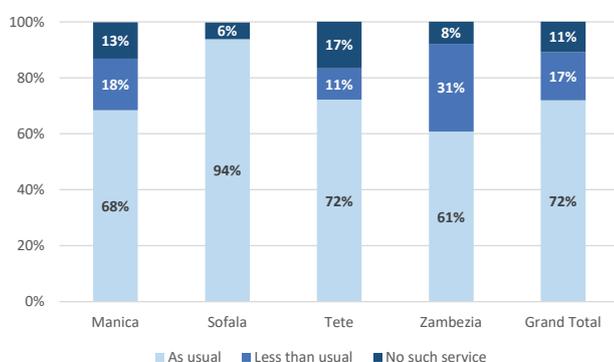
Desludging of septic systems



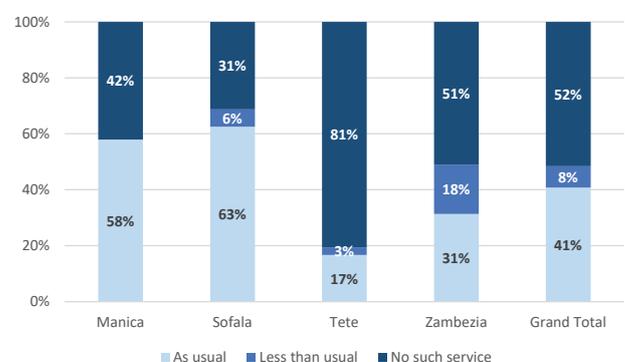
Electricity



Water



Garbage/waste disposal



## SECTION 1C: Mobility restrictions

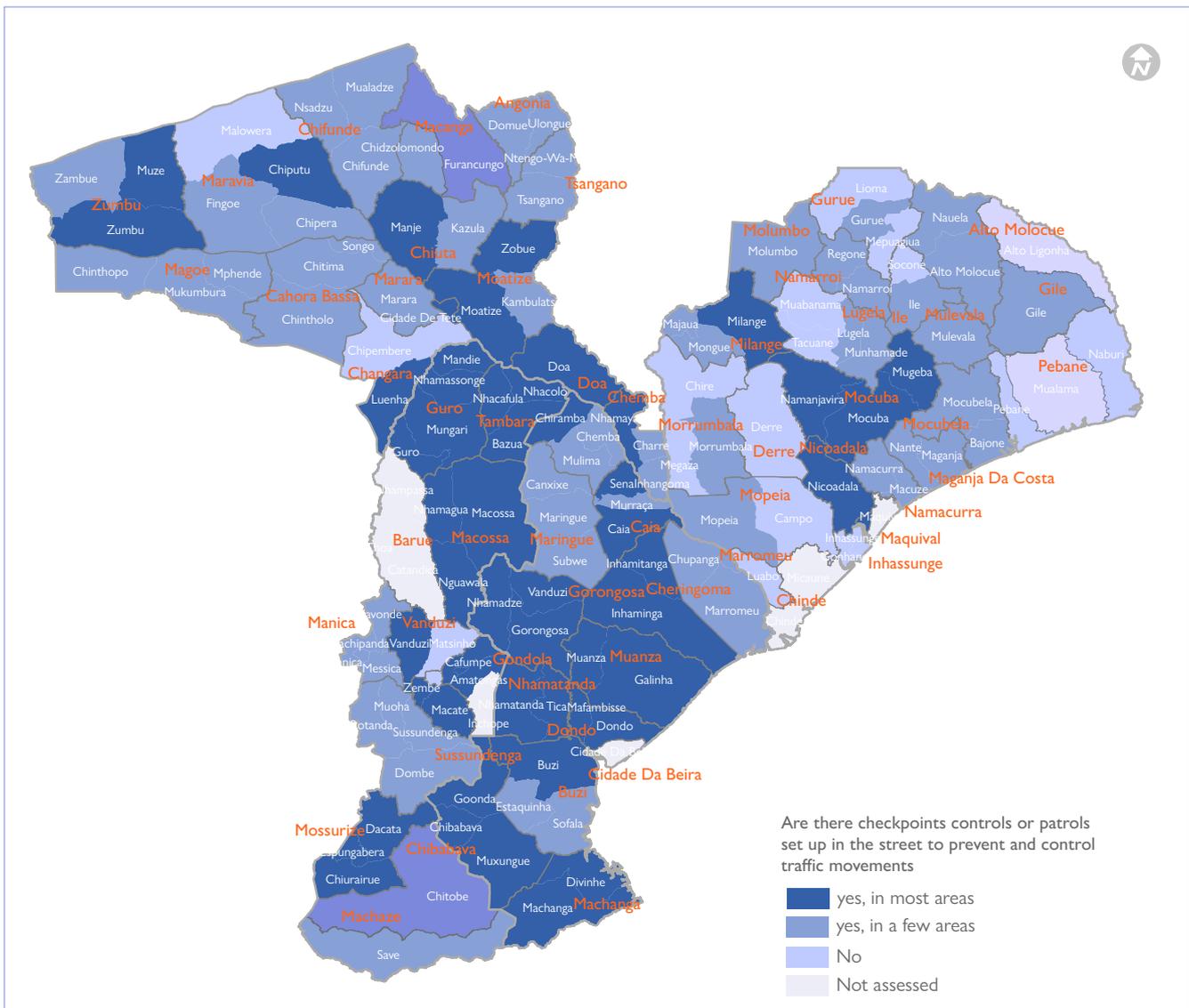
Fifty-four per cent of KIs, reported that more than 75 per cent of the population in their posto stays at home during curfew time. Seven per cent report that around half of the population respects the curfew, whereas 13 per cent have reported that only a quarter of the population respects the curfew. Significantly more KIs reported that they did not know how many people were respecting stay at home orders compared to the previous round.

Forty-four per cent of the KIs, compared with 43 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. Thirteen per cent of

the KIs referred that no control was in place in their posto.

KIs from 45 per cent of the postos reported that fines and punishments were not used for people breaking the rules of the curfew. This is particularly evident in Zambezia as reported by 77 per cent of the KIs from that province.

Other restrictions reported by KIs in their posto were the following: use of face masks (in 87% of the postos), enforcement of social distancing (82%), prohibition of mass gatherings (76%), and curfew (41%).



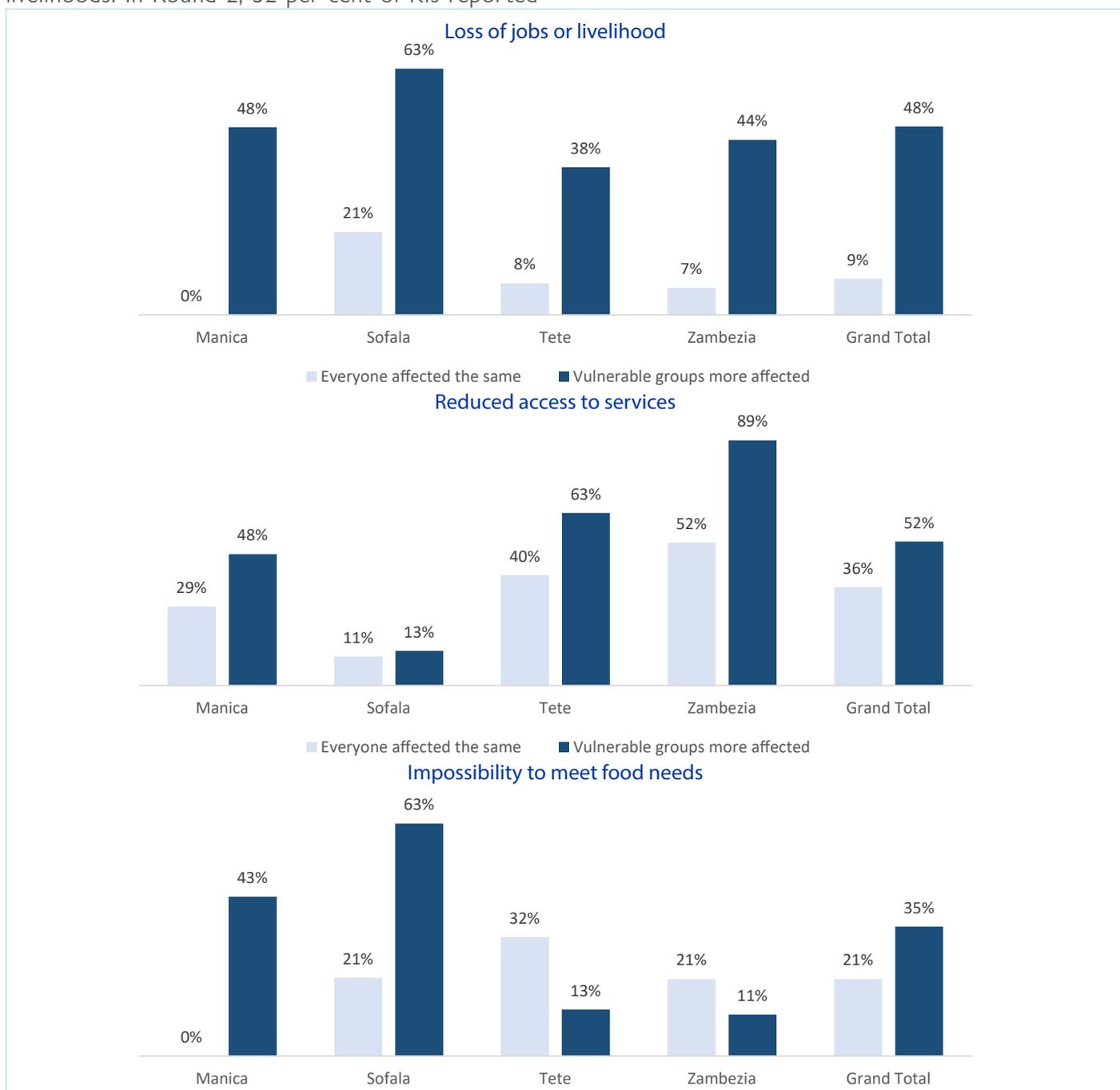
## SECTION 1D: Impact on vulnerable groups

KIs in 29 per cent of the postos (compared with 39% 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 (55% and 25% 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. In Round 2, 52 per cent of KIs reported

that vulnerable groups are more likely to suffer adverse consequences due to COVID-19 restrictions. This has reduced to 40 per cent in Round 3. However, the charts below demonstrate that vulnerable groups still experience these consequences with greater severity and frequency than the rest of the population.

Among the postos that reported some groups as more vulnerable to the impacts of COVID-19 related restrictions, only 8 per cent reported that these groups received some sort of assistance (and no postos in Tete reported the reception of assistance). The actors who provided assistance, as mentioned by KIs, were the local authorities and NGOs.



## SECTION 1E: Returnees from abroad

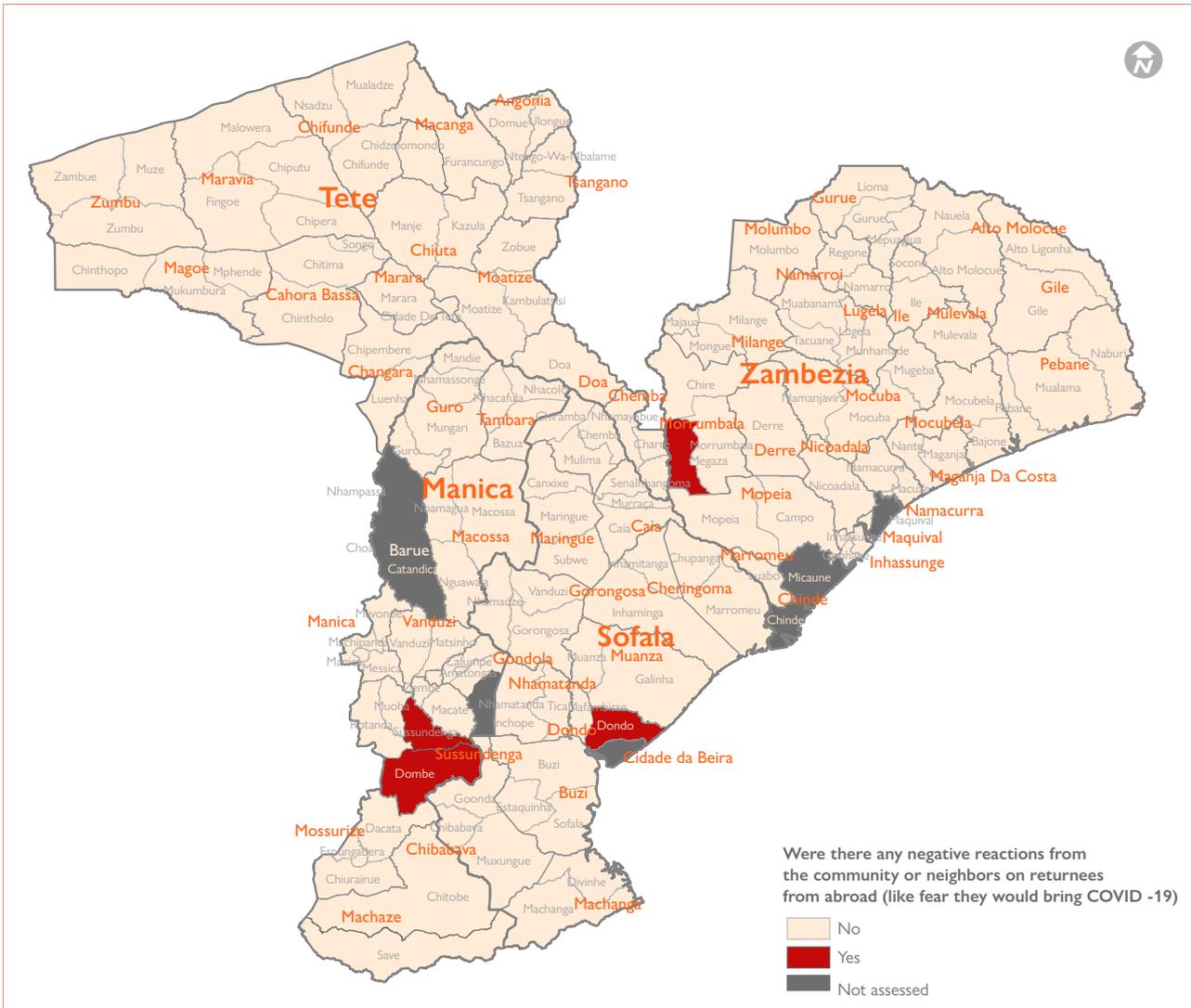
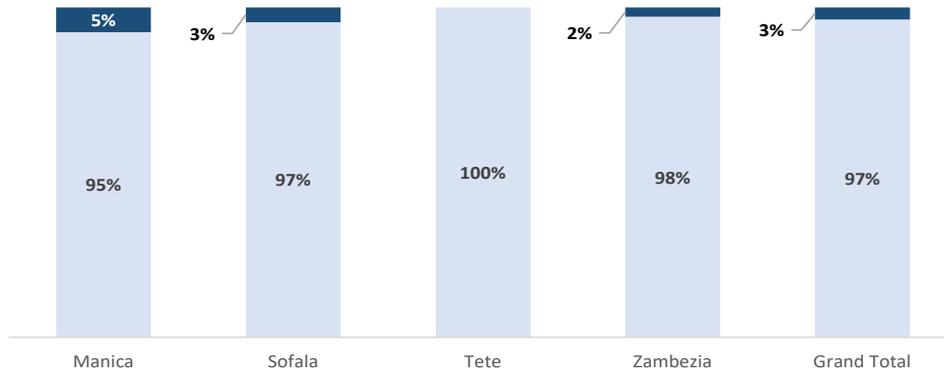
As mentioned earlier, due to COVID-19 restrictions imposed in neighboring countries, many returnees came back to Mozambique in the past few months.

Overall, 10 per cent of the KIs reported that there are returnees from abroad in their posto, compared to 16 per cent in Round 2, and 32 per cent in Round 1. Manica was the most affected by this phenomenon, with 18 per cent of KIs reporting returnees present,

closely followed by Sofala at 13 per cent, and Zambezia at 8 per cent. No KIs in Tete reported the presence of returnees.

Only 3 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 COVID-19 infections (down from 4% in Round 2, and 46% in Round 1).

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



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

KIs from 11 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 re-open at the end of the pandemic. In the previous round, KIs in Manica and Sofala reported that businesses are not expected to re-open in 18 per cent and 28 per cent of cases respectively, compared to 0 per cent and 3 per cent in this round.

KIs reported the following as the main impacts on livelihoods: reduced income (mentioned in 57% of the postos), decrease in the number of income sources (27%, down from 65% in Round 2), loss of jobs (26%), and other impacts, such as closure of agricultural and commercial fairs (8%).

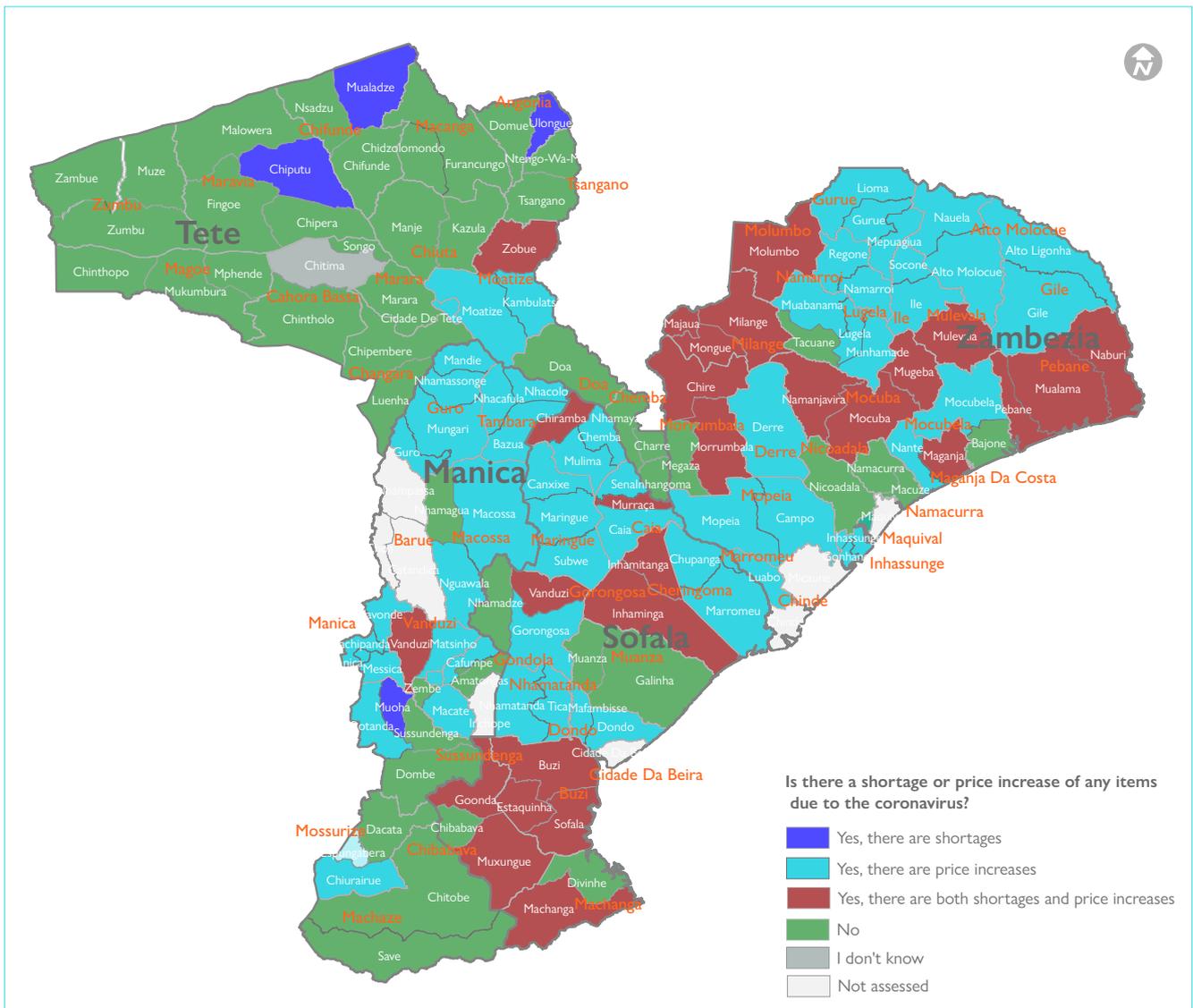
Eleven per cent of KIs reported that there has been a noticeable increase in violence, theft, and other crimes during the pandemic (though proportionally

less in Sofala at 3%), highlighting the need to rebuild economic activity.

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

The resumption of education was reported as the top priority need at the end of the pandemic by 77 per cent of KIs. Manica was an outlier, with 47 per cent of KIs reporting resuming education as a priority.

Other priority needs are healthcare (62%), food (54%), public infrastructures (43%), livelihoods (29%), and shelter (%). Other needs, such as financial support, agricultural inputs, and job creation, were by mentioned KIs in 29 per cent of the postos.



## SECTION 2: HOUSEHOLD SURVEY

### Methodology

In addition to the baseline assessment, a random sampling of households was conducted between 23 February and 26 March 2021 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 72 resettlement sites situated in four provinces (Manica, Sofala, Tete and Zambezia) in Central Mozambique, in coordination with INGD. A total of 1,592 individuals participated in this household-level survey, with 625 females and 967 males.

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 resettlement sites in the four provinces of central Mozambique.

Table 2: Number of individuals interviewed by province

Province	# Resettlement sites	# Individuals interviewed
Manica	31	642
Sofala	28	662
Tete	3	62
Zambezia	10	226
<b>Total</b>	<b>72</b>	<b>1,592</b>



Distribution of material for setting up a hand washing station in the resettlement centers in guara-guara to prevent COVID-19 from resettled populations from the village of Buzi /Mar 2021

## SECTION 2A: Public awareness

According to the results of the survey, individuals residing in the resettlement seem aware of the ongoing COVID-19 pandemic and the preventive measures. Sixty-seven per cent of the respondents answered that everyone in their community is aware of COVID-19 prevention measures. Fifteen per cent said that most people are aware. Thirteen per cent reported that only about half of the site inhabitants are aware of the pandemic. In 68 per cent of respondents it was reported that everyone is aware on how to protect themselves against the spread of COVID-19, and in 20 per cent of sites that most people (i.e. around 75%) are aware of such protective measures.

Almost all respondents (96%) 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: local government office (mentioned by 86% of

the respondents), community leaders (84%), non-health humanitarian agencies (81%), health partners on the ground (67%), media (28%) and other actors (4%).

Thirteen per cent of respondents reported that they have noticed an unusually high number of deaths in the last months. However, when analyzing by province, 32 per cent of respondents in Sofala noticed a higher number of deaths (with 2% in Zambezia, and 0% in both Manica and Tete). The main reasons mentioned for this unusually high number of deaths were diseases (mentioned by 86% of the respondents who noticed this increase) and unknown reasons (17%). The main disease symptoms noticed by respondents have been the following: fever (81%), diarrhea (24%), and respiratory issues (7%).

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



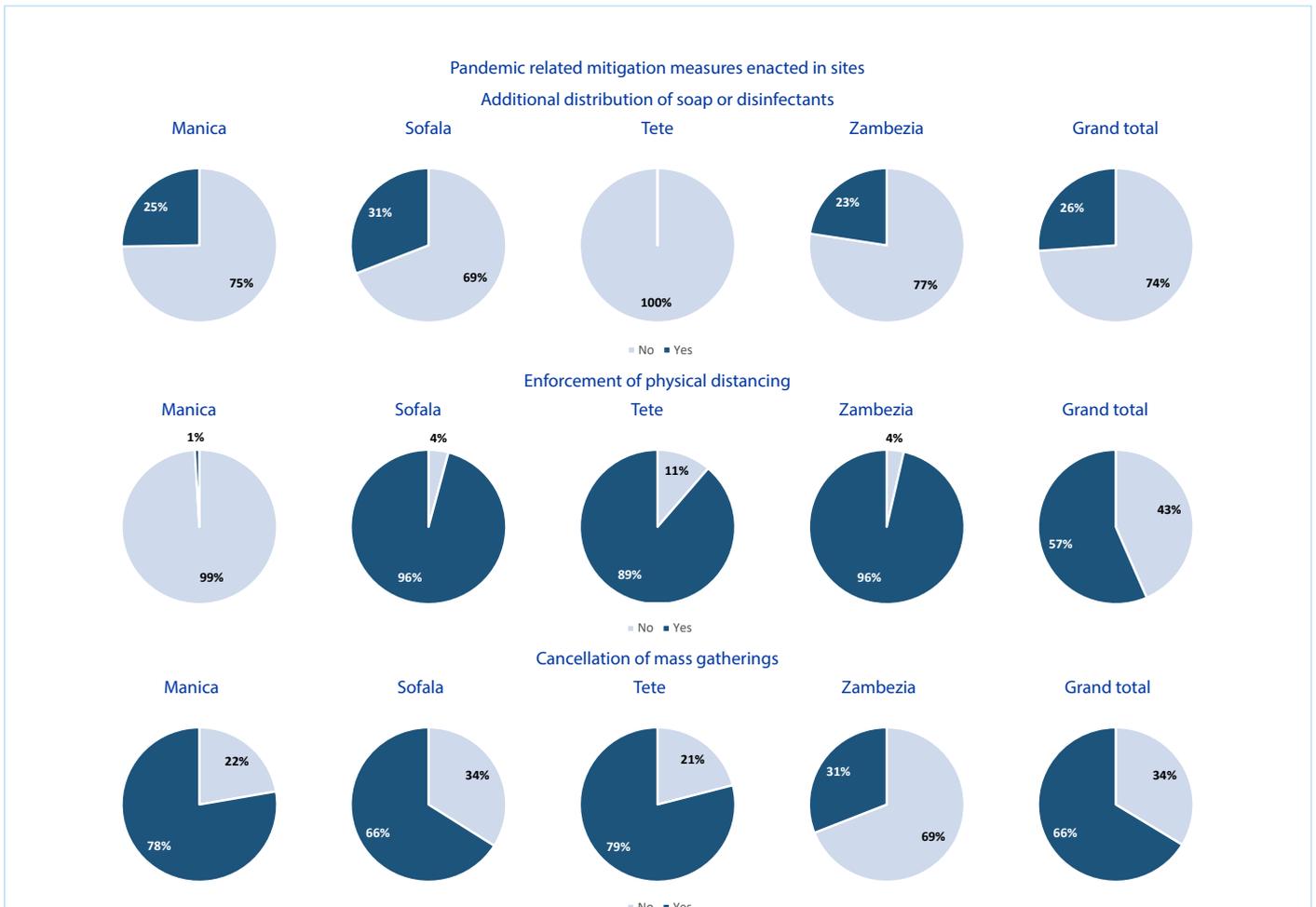
## SECTION 2B: Measures and restrictions

According to the results of the survey, respondents have reported the following as the main measures in their current locations: recommendation to use face masks (98% of the interviewees), installation of additional hand washing facilities (74%) and enforcement of social distancing (57%). Other common measures observed were: additional distribution of soap (26%), cancellation of mass gatherings (38%), disinfection of communal spaces (9%), and limitations on access to the site (15%).

The following are some of the key outlier results: while mass gatherings were said to have been canceled by 66 per cent of respondents overall, only 31 per cent of respondents in Zambezia cited this measure. While the majority (90%+) of respondents in Sofala, Tete, and Zambezia reported enforced physical distances, only 1 per cent of interviews in Sofala cited this option. Significantly fewer people reported the installation of additional hand washing facilities in Tete (23%) compared to the entire survey group (74%).

Disinfection of public spaces is not at all present in Manica or Tete, while the rates in Sofala and Zambezia are 13 per cent and 26 per cent respectively. In Tete, nobody reported that additional soaps or disinfectants have been delivered to households, compared to a 26 per cent overall average. Almost no interviewees in all provinces reported any isolation of individuals/communities (whether infected or in contact with infected persons).

Thirteen per cent reported that all services are still open and have not been affected by COVID-19 restrictions (though this is 40% in Tete, and 0% in Manica). The following is a list of services and how they have been adversely affected by the pandemic: schools/education (75% of interviewees), community health workers not visiting households any longer (51% in Manica only, <1% elsewhere), protection services (24% in Sofala only, <1% elsewhere), child protection services (14%, though only 4% in Manica and 0% in Tete), and vaccinations (1%).



## SECTION 2C: Impact of the pandemic

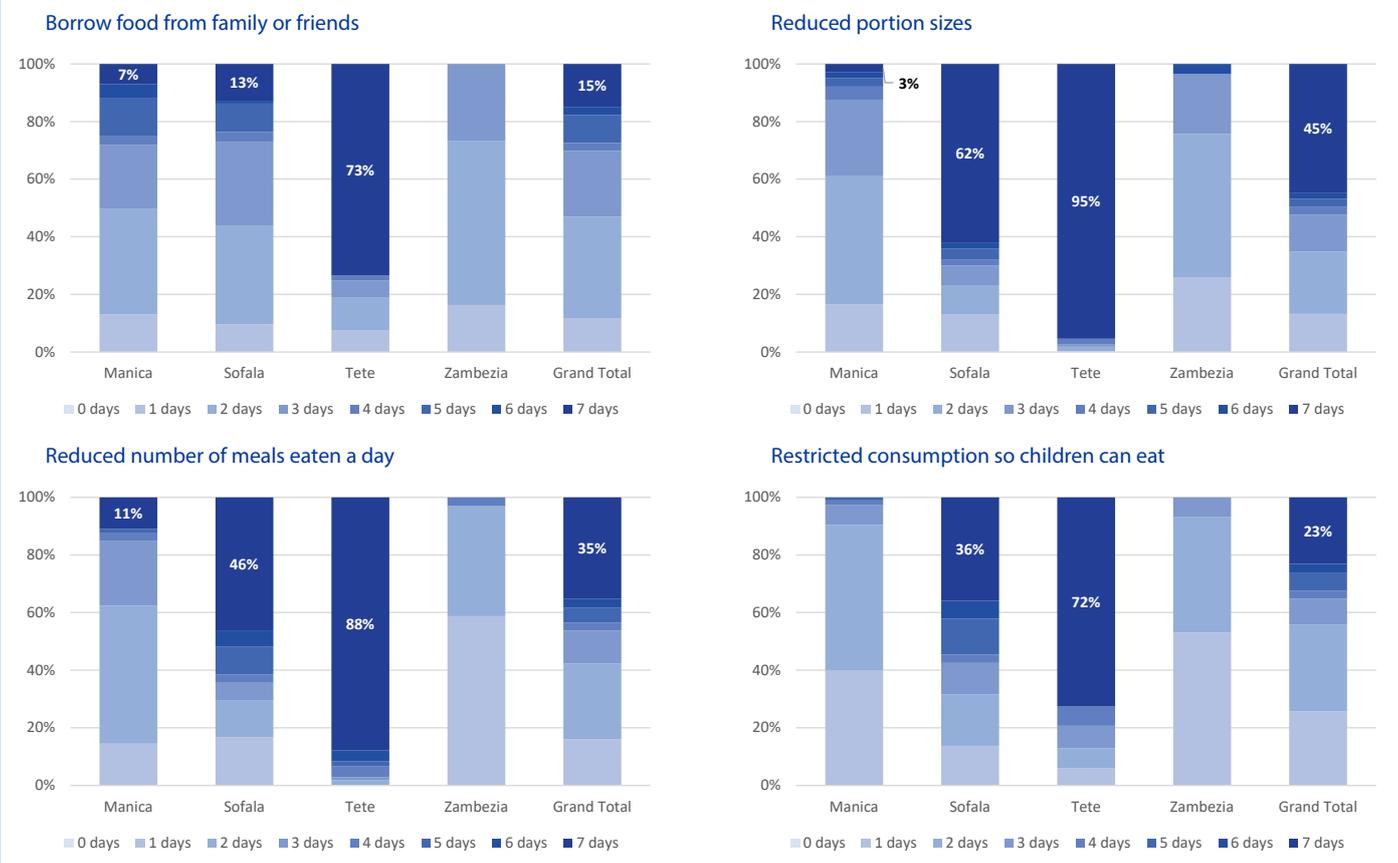
The main sources of income of the respondents were: farming (94% of the respondents), small businesses (10%, but 42% in Zambezia), paid jobs (6%, but 35% in Zambezia), daily jobs (5%), animal husbandry (1%, but 10% in Tete and 0% in Manica), remittances (5%), and other sources (5%, but 48% in Tete, most of whom reported that their main income came from fishing). Sixty-six per cent of the respondents reported that their economic situation has not been affected by the pandemic. On the other hand, 24 per cent of the respondents reported that they have experienced reductions in their income (though 44% in Zambezia), while others reported restriction in the number of income sources (6% overall, but 25% in both Tete and Zambezia, but 0% in Manica), loss of income (4%, but 10% in Zambezia), and loss of job <1%).

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 experiences 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%).

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. Data labels are only included for the "7 days" category. Respondents in Tete consistently indicated the greatest levels of food insecurity, with 73 per cent of respondents (up from 52% in Round 2) having borrowed food from friends or family every day of the week. Eighty-eight per cent (up from 62% in Round 2) of families in Tete reduced the number of meals they eat every day. In Sofala nearly half (46%) of interviewees in the same position. Furthermore, 95 per cent of families in Tete and 62 per cent in Sofala reduced their portion sizes at meal times every day of the week. Finally, 72 per cent of families in Tete, and 36 per cent on Sofala, have reported that adults have reduced their own consumption to prioritize feeding their children.

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



## SECTION 2D: Needs and Assistance

Respondents have nearly universally reported that there are food shortages across all provinces, with 94 per cent of all respondents. Additionally, NFIs related to personal hygiene (soap, disinfectant etc.) are reported as being in short supply by 66 per cent of respondents, through there is large variability between the provinces (89% in Zambezia, 25% in Tete, 54% in Sofala, and 76% in Manica). Only 2 per cent of respondents said there were shortages of medicines.

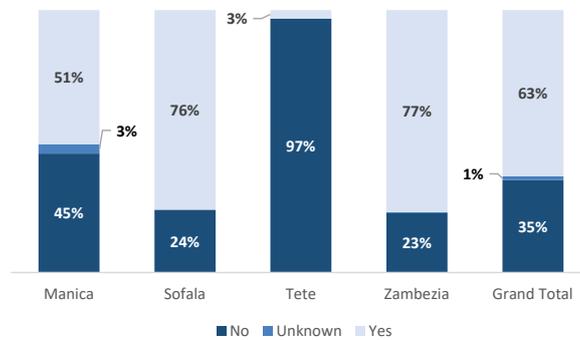
Overall 64 per cent of households reported they had received some type of government assistance, though this number is only 3 per cent in Tete. Furthermore, despite food needs being the most aggravated in Tete (see previous page), non of the aid delivered in Tete was food related. Food aid was delivered in 60 per cent of cases in Sofala, and 56 per cent in Manica. There was no shelter assistance delivered in Tete, and only 5 per cent of families who received assistance had shelter support in Sofala (47% in Zambezia and 64% in Manica). NFIs were not distributed at all in Tete or Manica. There was no health-related aid distribution in Tete, and less than 1 per cent of families in Manica reported received such aid (compared with

47% in Zambezia and 16% in Sofala). No Personal Protection Equipment (PPE) related distributions have taken place in Tete, whereas 98 per cent of families in Zambezia received PPE, 44 per cent overall. On the other hand 100 per cent of families in Tete said that they received cash assistance, compared to 9 per cent in Sofala and 0 per cent elsewhere. Sofala is the only province where a large section of the population received WASH assistance (56%).

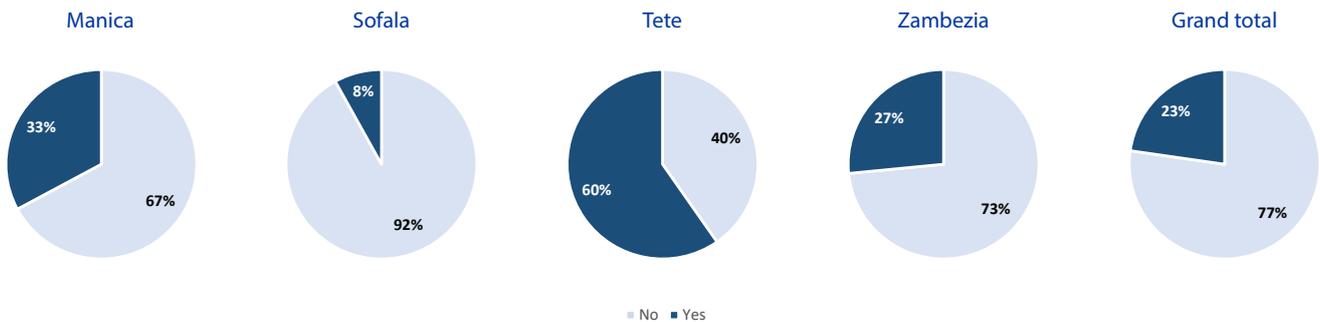
Local government is the sole distributor of aid in Tete, while in all other provinces aid delivery is a shared responsibility between humanitarian actors and local government.

It should be noted that in all provinces higher rates of distrust of others have been reported, due to the pandemic. In Tete 60 per cent of respondents said they have higher distrust following this crisis, compared to 27 per cent in Zambezia, 33 per cent in Manica, and 8 per cent in Sofala. Furthermore, 58 per cent of households in Tete have reported higher stress levels, with 51 per cent of families in Zambezia also citing this. The rates of depressions are also highest in Tete,

Have IDP households received assistance?



Following the pandemic, what percentage of IDP households have a heightened sense of distrust to neighbours/other?



For more information or feedback, please contact:

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