



KNOWLEDGE PLATFORM ON INCLUSIVE DEVELOPMENT POLICIES

Equity in COVID-19 pandemic responses in Africa: Mozambique case study

COVID-19 response: policy coherence from an equity perspective



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Acronyms

BNI	National Investment Bank
CBO	Community-based organization
CDD	Centro para Democracia e Desenvolvimento (Centre for Democracy and Development)
CSO	Civil society organization
ENSSB	National Basic Social Security Strategy
FCDO	Foreign, Commonwealth & Development Office (formerly DFID)
FMO	Fórum de Monitoria do Orçamento (Budget Monitoring Forum)
IDP	Internally displaced person
ILO	International Labour Organization
IMF	International Monetary Fund
INAS	National Institute of Social Action
INSS	National Social Security Institute
MCI	Independent Community Monitoring project
MZN	Mozambique metical
NGO	Non-government organization
OMR	Observatório do Meio Rural (Observatory of Rural Areas)
PAS	Social Action Policy
PASD	Direct Social Support Programme
PASD-PE	Direct Social Support Programme-Post Emergency
PASP	Productive Social Action Programme
PCD	Policy coherence for development
PRC19	COVID-19 Response Plan in Mozambique
PRC19-PS	COVID-19 Response Plan in Mozambique-Social Protection
PSCM-PS	Mozambican Civil Society Platform for Social Protection
PSSB	Basic Social Subsidy Programme
SME	Small and medium enterprise
UN	United Nations
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WLSA	Women and Law in Southern Africa

Chapter 1. Introduction

Background

The COVID-19 pandemic is changing people's way of thinking, doing and being. In the context of this multidimensional crisis, many say that the time has come for countries on the African continent to start prioritizing sustainable national health and social protection systems – to start investing seriously in structural changes and preventive action, so that the most vulnerable populations do not pay the highest price when crises erupt. The socio-economic shocks caused by the COVID-19 pandemic have brought the debate on income distribution/redistribution and social protection to the centre of the public agenda, as governments around the world recognize the need for strategies to protect the most economically vulnerable in times of crisis, be it a pandemic, natural disaster or other crisis.

In Mozambique, this topic is especially relevant because of the cyclical and structural context, which is characterized by multiple crises, including: poverty (an estimated 41–46% of the population, or between 10.5 and 11.3 million people, live in absolute poverty; Santos & Savucci, 2016); food insecurity and chronic malnutrition; reduced ability to raise foreign exchange; lack of confidence on the part of development cooperation partners, as a result of the 'hidden debts' scandal and lack of progress in good governance; the unsustainable level of external public debt, which has led to depreciation of the Mozambique metical (MZN); and military instability in the central region of the country and the insurgency (including violent extremists) in the province of Cabo Delgado (Presidência da República, 2020). These factors weaken the country's ability to face the economic crisis caused by the COVID-19 pandemic, which has led to the partial paralysis of many economic activities, leading to the closure of companies, increased unemployment, and increased cost of living. Data from the National Statistics Institute (2020) for April to June 2020 revealed that, as a result of the measures adopted to curb the COVID-19 pandemic, 62,700 workers were affected by the suspension of contracts, 77,489 by the termination of contracts, and 43,579 by the closure of companies. These numbers are now out-dated (a new report by the National Statistics Institute is pending), however, considering the fact that the economic crisis has deteriorated since June 2020, it is likely that the impact of COVID-19 measures on companies and the labour force has significantly worsened. In addition, an inquiry made by the Association of Trade, Industry and Services (Associação de Comércio, Indústria e Serviço, ACIS) found that Mozambican companies had registered a 60% drop in sales, due to the impact of COVID-19 (República de Moçambique, n.d.). Against this backdrop, the Government of Mozambique was called upon to establish a long-term approach in which policies to mitigate the effects of COVID-19 are part of a strategy for structural change in the economy, rather than just short-term measures.

Another relevant debate in this context is the importance of thinking beyond emergency cash transfers and in-kind benefits and developing more holistic gender and human rights sensitive policies that address the challenges of poor access to health, transportation, and housing, as well as other integrated social protection policies, which are needed to respond effectively to the multiple effects of the COVID-19 pandemic, as well as future crises. In the past few decades an increasing number of developing countries have adopted non-contributory social protection programmes and policies as a way of combating poverty and vulnerability and promoting human development. A major challenge has been to ensure that these policies are implemented equitably and in a socially just way, based on evidence. In times of crisis, when the vulnerable population increases, this challenge is even greater.

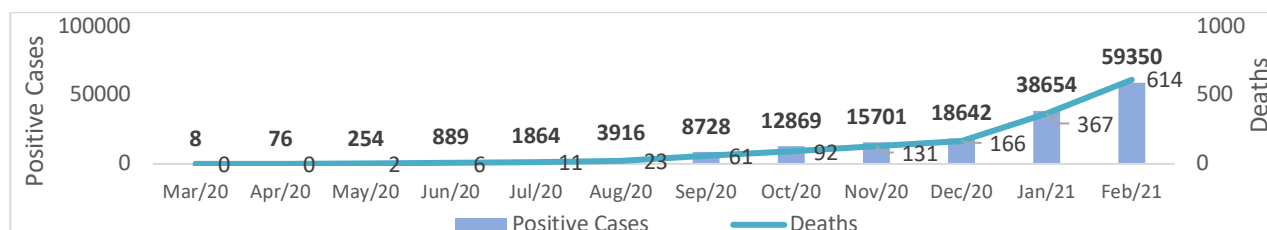
Mozambique’s COVID-19 Response Plan

In order to address the impact of the COVID-19 pandemic, the Government of Mozambique launched the National Plan for Preparation and Response to the COVID-19 Pandemic, with the objective of minimizing the spread of the pandemic in Mozambique and its negative impact on the health of the population, the economy, and in the social sphere (MISAU, 2020). Later, the Government of Mozambique elaborated a COVID-19 Response Plan-Social Protection with measures for the country's neediest and most vulnerable populations (MGCAS, 2020b). Subsequently, the Ministry of Economy and Finance (MEF) initiated a series of reports on the use of resources under the commitments related to the COVID-19 response (MEF, 2020a; MEF 2020b). These reports (based on the Original National Plan, see MISAU, 2020) include a section on the needs and financing of each sector, which will be referred to hereafter as the COVID-19 Response Plan in Mozambique (PRC19).

As in other countries, there have been two ‘waves’ of the COVID-19 pandemic in Mozambique so far: the first covering a nine-month period from March to November 2020 and the second since late December 2020 to time of writing (February 2021). In order to analyse the different impacts of these waves, it is important to remember that Mozambique is currently facing a State-citizen crisis, in which part of the population lack trust in the central government, for various reasons, including because of the ‘hidden debts’ scandal. Considering this, before December 2020, the existence of COVID-19 was not clear to most of the population. During the first wave, individual prevention practices relied mostly on the population’s trust in the little information shared by the government and their willingness to follow the government’s state of emergency/calamity decrees. On top of this, fake news spread through informal channels and social media posts, which made some people believe that COVID-19 would not spread in Mozambique.

Recent analysis notes that the worsening of the COVID-19 pandemic in Mozambique has been associated with two phenomena (Tibana, 2021): the relaxation of prevention measures announced by the government on 17 December 2020 and the penetration of the South African strain of the virus in November 2020, which is considered more infectious and lethal. As illustrated in Figure 1, the number of COVID-19 cases has increased significantly since December 2020.

Figure 1. Cumulative COVID-19 cases in Mozambique (March 2020 to February 2021)



Source: Based on Worldometer (<https://www.worldometers.info/coronavirus/country/mozambique/>); and Mozambican National Institute of Health (<https://covid19.ins.gov.mz/>)

The current crisis is preoccupying the national health system, as health facilities are not equipped to deal with the volume of people needing treatment, as noted in the President’s speech on 4 February 2021 (Presidência da República, 2021). Since March 2020, debates have intensified about the dilemma faced by the government, namely, the need to implement a ‘total lockdown’ to contain the spread of COVID-19 and relieve the pressure on the health system, versus the need to keep the economy running to some extent. Some actors have argued that while it is important to ensure economic stability, saving human lives and caring for the most vulnerable sectors of the population should also be a priority. However, the

debate as to whether or not a lockdown should be applied is not unanimous. In addition, there is no formal channel for civil society to be involved in such debates and decisions related to COVID-19 policies. It was in view of this situation, that a number of civil society organizations (CSOs), such as the Budget Monitoring Forum (FMO), Mozambican Civil Society Platform for Social Protection (PSCM-PS), women's organizations and non-governmental organizations (NGOs), prioritized monitoring the implementation of COVID-19 policies, as well as conducting equity-related advocacy campaigns and research, arguing that the main focus of efforts should be to protect the most vulnerable population groups, based on evidence and data.

COVID-19 mitigation in the provinces

When COVID-19 national policies to support vulnerable groups were still 'promises', some municipalities and provincial governments took the lead to provide support to individuals/families (through food or cash transfers), as in the cities of Pemba and Beira. Since 2017, the province of Cabo Delgado, where Pemba is located, has face violent extremism, which has resulted in an estimated 530,000¹ internally displaced persons (IDPs), who fled to cities where people are also facing multiples crises (i.e. low food supply, unemployment, lack of security). This situation has been compounded by the COVID-19 pandemic. Sofala province, where Beira is located, was one of the regions most affected by Cyclone Idai in March 2019, which destroyed houses, infrastructure, and production units, thus increasing the number of vulnerable citizens in need of support from government social protection programmes. Although, so far, the epicentre of the COVID-19 pandemic has been Maputo, the capital of Mozambique (Presidência da República, 2021), transmission has been increasing in other parts of the country. Health facilities especially equipped to treat people with COVID-19 have been built/repurposed in provincial capitals. If the recent rapid rise in cases (second wave) seen in the capital carries over to the provinces, health facilities are unlikely to be able to cope with the demand for COVID-19 treatment services.

National social protection system

The multidimensional challenges posed by the COVID-19 pandemic have presented an opportunity for reflection on the capacity of Mozambique to deal with such crises in the future, in an equitable and socially just way (see Article 1 of the Constitution of Mozambique on social justice). A better understanding of the national social protection structure and how it fits into the COVID-19 Response Plan is needed. In Mozambique, compulsory social security (contributory) is implemented by the Ministry of Economy and Finance, through the National Institute of Social Security (INPS) and the Ministry of Labour, Employment and Social Security, through the National Social Security Institute (INSS). Basic Social Security (non-contributory) is implemented by the Ministry of Gender, Children and Social Action (MGCAS) through its executive body, the National Institute of Social Action (INAS), which provides direct assistance to people living in poverty and vulnerability.

Basic Social Security is provided by INAS through the following programmes (República de Moçambique – Sistema de Protecção Social, 2019a):

- Basic Social Subsidy Programme (PSSB) and Productive Social Action Programme (PASP) – cash transfers
- Direct Social Support Programme (PASD) – food vouchers, in-kind transfers, service payments
- Social Action Social Services Programme (PSSAS) – assistance in social units and social services

¹ Number includes IDPs located in the provinces of Cabo Delgado, Nampula and Niassa (UNHCR, 2021).

The government's Social Action Unit is guided by the National Basic Social Security Strategy (ENSSB) 2016–2024 and by the multi-sectorial strategic plans. According to the ENSSB, the state budget should allocate 2.23% of gross domestic product (GDP) to social protection interventions (until 2024). In addition, two multi-sectorial strategic plans define the goals of the Social Action Unit (UNICEF & ILO, 2020, p. 3): (i) the government's Five-Year Plan 2020–2024, which states that 28% of vulnerable households (i.e. households below the nationally defined poverty line) should be covered by Basic Social Security programmes by 2024; and (ii) the National Development Strategy (ENDE) 2015–2035, which stipulates that 75% of vulnerable households must be covered by Basic Social Security by 2035. For the current COVID-19 pandemic, non-contributory social protection is to be covered by external funds (MGCAS, 2020a), as it is assumed that State funds for emergency purposes are not available.

Structure of case study

This case study is structured into six chapters. This first chapter introduces the topic, including the national response plan to COVID-19 in Mozambique, the mitigation measures in the provinces, and the national social protection system. This is followed by Chapter 2, which sets out the objective, methodology and analytical framework, as well as the limitations. Chapter 3 presents details of the planned response to the COVID-19 pandemic in Mozambique, including the budget and the proportion allocated to social protection. Chapter 4 hones in on the plan to support vulnerable groups through the social protection response to COVID-19 and presents the findings of the analysis of the policy coherence and equity of this response. Chapter 5 looks at the monitoring of the national response by CSOs and CBOs. And, finally, Chapter 6 draws some conclusions and makes some recommendations.

Chapter 2. Objective, methodology and analytical framework

This case study is part of a regional comparative exercise by INCLUDE on ‘Equity in COVID-19’. The chosen focus for the Mozambican case study was on assessing policies formally planned to target the most vulnerable groups, as part of the broader national plan for the COVID-19 response. Therefore, priority was given to policies/measures coordinated by the Ministry of Gender, Children and Social Action and INAS to respond to the impact of COVID-19 through social protection mechanisms aimed at providing support to the country's most needy and vulnerable populations (MGCAS, 2020b). Other policies/measures that have a clear impact on vulnerable groups (i.e. on health, employment, education, transport and infrastructure) were also studied, to the extent that they focus on vulnerable groups.

Objective

The main objective of the case study was ***to analyse Mozambique’s national COVID-19 response in terms of policy coherence from an equity perspective, with a focus on policies/measures that formally target the most vulnerable groups.***

Towards this, the following tasks were undertaken:

- Mapping of the social protection measures and policies for mitigating and responding to the COVID-19 pandemic (planned and/or implemented) in Mozambique, with a focus on those considered by the government to be ‘vulnerable groups’
- Analysis of the degree of policy coherence and equity of the measures and policies for mitigating and responding to the COVID-19 pandemic in Mozambique, with a focus on social protection measures formally designed to target vulnerable groups, including an assessment based on examples from provincial level community-based actors (Beira and Pemba)
- Identification of good practices, challenges and recommendations for future reflection on the COVID-19 response, mitigation measures, and policies (planned and/or implemented) in Mozambique, formally designed to target vulnerable groups

Methodology

The case study used the data triangulation technique, based on a combination of methods:

Figure 2. Four phase methodology

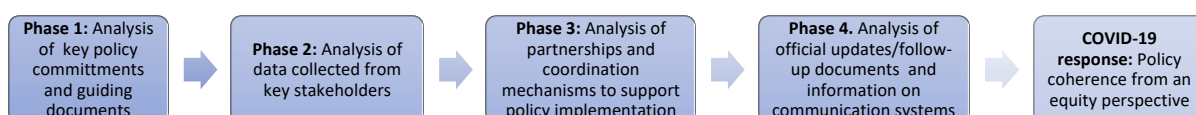


Table 1. Data collection methods and techniques applied in each phase

Phase	Data collection methods and techniques
Phase 1	<ul style="list-style-type: none"> Review of key documents: on the planning/implementation of the national response plan to COVID-19, focusing on non-contributory social protection policies
Phase 2	<ul style="list-style-type: none"> Survey: submitted to the Government of Mozambique and Assembly of the Republic via electronic channels to collect information on the areas suggested in the terms of reference for the INCLUDE case study Survey: submitted to civil society organizations via electronic channels to collect good practices and challenges (support/advocacy actions) related to the COVID-19 response Survey: submitted to the Confederation of Economic Associations via electronic channels to collect examples of the impact of social protection actions targeting formal workers
Phase 3	<ul style="list-style-type: none"> Literature review: search according to predetermined relevant criteria and document analysis with a focus on good practices (in the area of equity and policy coherence) by actors from civil society and development cooperation in the context of the response to the COVID-19 pandemic Workshops (2): with community-based organizations, in the cities of Pemba and Beira, with a total of 38 participating institutions Email interviews (3), online survey and Internet search: on best practices of CSOs in relation to actions for monitoring the COVID-19 response
Phase 4	<ul style="list-style-type: none"> Literature review and Internet search: on official COVID-19 policy updates/follow-up documents, and social protection information and communication systems

Data analysis was based on qualitative techniques, as the surveys used an exploratory approach to COVID-19 pandemic policies and their effectiveness in the field. As for sampling, because this was a qualitative study, techniques such as convenience sampling were used to identify respondents. The primary data collection process ended in November 2020 and COVID-19 statistics were updated until the end of February 2021.

Analytical framework

The analytical framework for this study is ‘**policy coherence for development**’ (PCD) (Cadernos de Estudos Africanos, 2017) from the perspective of ‘**equity**’. The PCD principle was considered to be applicable, and even necessary, for this analysis, as it helps in assessing to what extent specific policies (in this case, the COVID-19 response) are (or should be) contributing (in the medium and long term) to the wider policy objectives contained in the National Development Strategy of Mozambique, namely, combating poverty and promoting inclusive development. In this respect, policy coherence relates directly to the government’s Five-Year Plan, which is approved by the Assembly of the Republic, and is annually transformed into the social economic plan and state budget. The perspective of equity, in relation to the implementation of social protection measures, allowed the policies/measures in response to the COVID-19 pandemic to be analysed through an equity lens, paying special attention to social justice, which is required by the Constitution of Mozambique.² For the purposes of this study, equity is seen as a tool to guide government interventions and policy design. However, the way in which each government interprets and incorporates equity into the design and implementation of policies is different, as are the results of interventions and the power relations in each context (Rizzotto & Bortoloto, 2011).

² Social justice is highlighted in Article 1 of the Constitution of the Republic of Mozambique, which states that Mozambique is an “Independent, Sovereign, Democratic and Socially Just State”.

In Mozambique, the term equity has been mostly applied to public policies in the area of gender. The notion of equity as an inclusive policy approach to guarantee social justice to all vulnerable groups still needs to be better understood by both policymakers and social activists alike. In addition to being emphasised in the Government Gender Policy (República de Moçambique, 2018), the principle of equity is also reflected in the Social Action Policy (República de Moçambique, 2017). The Social Action Policy and its Implementation Strategy (Resolution 46/2017, November 2nd) describes as a principle: **"Social Justice – In the development of programmes and projects in the area of Social Action, criteria of equity must be observed, thus ensuring the prevention and correction of social imbalances and inequalities"**. Therefore, when the government designed the COVID-19 Response Plan for social protection, there was an implied commitment to formulating equitable policies, including preventing and correcting social imbalances and inequalities that affect the poorest and those belonging to vulnerable groups who need attention and support in times of crises, such as the current one due to the COVID-19 pandemic.

In assessing the COVID-19 Response Plan for policy coherence from an equity perspective, policy coherence refers to the way that society structures the organization of power to solve its most critical socio-economic, political, and democratic development challenges. Important to note here is that a key and unresolved policy debate in Mozambique has to do with how the State organizes itself to protect and include vulnerable groups and finds ways for its Five-Year Plan and other plans and strategies to respond to these groups. Considering that exclusion and human rights violations become more severe in times of crisis, addressing this question is even more relevant today.

Policy coherence, combined with an equity lens, is also about questioning the centralization of budget resources, which has historically tended to exclude provinces and districts located away from the centre, channelling the largest part of the state budget to the capital, Maputo. This perspective also pays special attention to justice in the distribution of resources at the sectoral level (namely, social sectors, such as education, health and social protection), which are generally given less priority.

Finally, this analytical framework takes a careful look at how public policies are formulated – to what extent they are participatory and based on context evidence and data gathered by trusted and independent entities. Through this lens, effective participation is a key indicator of equity, related to the presence (or lack) of social justice and opportunities for the most vulnerable groups to access information and take part (directly or indirectly) in decision-making processes related to the policies aimed at promoting the equitable distribution of resources and access to public services and socio-economic opportunities. A search for formal and transparent mechanisms for sharing public information, as well as for implementing monitoring and evaluation systems, could also benefit from this approach.

Limitations

The study had certain limitations related to challenges faced during the data collection period (September–November 2020), including the following:

- COVID-19 prevention measures, such as social distancing, limited the ability to collect primary data through semi-structured interviews/focus group discussions with vulnerable groups (beneficiaries of social protection policies at the provincial level).
- The fact that the impact of the COVID-19 pandemic on the health of the population started to be felt significantly only after the period of primary data collection (in late December, when COVID-19 cases increased) made data collection tools (online surveys) designed to assess the impact of

COVID-19 less effective. As a result, data gathering mainly focused on: planned activities, level of access to information about planned policies, sectorial budget allocation, best practices, and challenges.

- The updated report on the national COVID-19 plan, issued by the government (Ministry of Economy and Finance), focused on funding commitments/allocation, rather than providing data on the implementation and impact of policies/measures, which limited secondary data collection on the impacts of the government's actions.

Chapter 3. Planned response to COVID-19, budget and allocation to social protection

PRC19

Since mid-March 2020, when the first cases of COVID-19 were identified in the country, the Government of Mozambique has taken a series of measures to combat the pandemic, including declaring a State of Emergency (MEF, 2020a). In parallel, and to respond effectively and efficiently to the direct and indirect (potential) impacts of COVID-19, as well as those resulting from the socio-economic impact of the State of Emergency, the government recognized the need to support different sectors (health, social protection, and the private sector) and State revenue, among other things (MEF, 2020b). As indicated in the introduction to this report, in Mozambique the crisis generated by the outbreak of the COVID-19 pandemic is mixed with multiple structural and cyclical crises, such as social, gender and regional inequality, extreme poverty, food insecurity, political-military instability, and the sharp depreciation of the national currency against the US dollar (CDD, 2020b), weakening the government's ability to respond to the socio-economic shocks caused by the COVID-19 pandemic (CDD, 2020a).

Public budget

The Ministry of Economy and Finance estimated that the activities and actions under the COVID-19 Response Plan (PRC19) would cost around USD 700 million (about 5% of Mozambique's GDP, compared to a world average of 3.7%) (BBC, 2020). The government's budget for the PRC19 is set out in Table 2.

Table 2. Government budget for COVID-19 Response Plan (USD)

Areas prioritized	Requested amount
Prevention and treatment	100,000,000
Loss of revenue	200,000,000
Transfers to families	240,000,000
Micro businesses	160,000,000
Total	700,000,000

Source: *Status of Commitments under COVID-19* (MEF, 2020b, November)

Around a third of the total PRC19 budget (approximately USD 240 million) was allocated to 'Transfers to families', to guarantee social protection to the most vulnerable households during the pandemic. Hence, this appears to be the highest priority in terms of allocating funds (34% of funds). It is also noted that 'micro businesses' are targeted (with 23% of funds). The budget allocated to the health sector (14% of funds) also has an impact on the most vulnerable groups, who rely on the national health system, whereas the more privileged segments of the population and some formal workers have the option of accessing private clinics and hospitals. However, it is not clear what evidence the government relied on to decide on these amounts and priority areas. As will be addressed later in this report, some key areas with direct impact on vulnerable population groups (e.g. public transport) were not prioritized in the original plan.

Due to the budget deficit, which is mainly the high debt servicing required as a result of the unsustainability of Mozambique's internal and external public debt (CDD, 2020c), and similar to what happened when the country was hit by cyclones Idai and Kenneth in 2019, the government requested USD 700 million to finance the plan from development cooperation partners. The lack of confidence of development partners in the government, caused by the 'hidden debt' scandal and the lack of progress in good governance, particularly in combating corruption and promoting transparency and accountability, hampered the government's ability to obtain financial support. However, despite this, the Government of Mozambique has managed to mobilize significant resources through loans and grants. For example, in its USD 309 million credit approval document to deal with the COVID-19 pandemic, the International Monetary Fund (IMF) expressed a desire to see its financing (as a conditional loan) not only help Mozambique in the fight against COVID-19, but to also have a catalytic effect on Mozambique's other development partners. For this reason, the IMF incorporated transparency and accountability mechanisms into the agreement, including the publication of large public procurement contracts and the carrying out and publication of audits.

Complementary funds

From the perspective of policy coherence, it is important to recall that the PRC19, provided by the government in its *Status of Commitments under COVID-19* (MEF, 2020b), does not mention other types of support, such as programmes (i) financed by the private sector and operated by the government; (ii) financed by external funds and operated by the government (not directly included in the state budget); (iii) financed and operated by development cooperation partners and coordinated by the government; (iv) financed, operated and coordinated by development cooperation partners; or (v) financed and operated by civil society and the private sector. In other words, in addition to the programmes funded directly through the state budget, there are other programmes, most of which are implemented in coordination with the government, in response to the COVID-19 pandemic.

The government's plan for social protection in response to COVID-19 – COVID-19 Response Plan in Mozambique-Social Protection (PRC19-PS) – is seen as an ambitious plan, requiring multiple funding sources. Updates issued by the Ministry of Economy and Finance on the *Status of Commitments under COVID-19* do not specify the partners that are funding the social protection activities under the plan. The 2020 budget follow-up report on the social action sector (an initiative of UNICEF and the International Labour Organization [ILO], in partnership with Civil Society Forum for Child Rights in Mozambique [ROSC], the Budget Monitoring Forum [FMO] and PSCM-PS; see UNICEF & ILO, 2020) explains, in the section on 'Social protection response plan to COVID-19 in Mozambique', that the funds made available until July 2020 to implement the PRC19-PS totalled USD 79 million, and were provided by the World Bank, the United Kingdom Foreign, Commonwealth and Development Office (FCDO, formerly the Department for International Development [DFID]), and Sweden, and that these funds ensured the full implementation of Phase 1 of the Response Plan, namely: 282,862 new beneficiaries covered through the Direct Social Support Programme-Post Emergency (PASD-PE) 'COVID-19', plus the 592,179 beneficiaries currently covered in the regular Basic Social Security programmes (PSSB, PASD, PASP). This source notes a current deficit of USD 158 million (which would allow the complete implementation of Phase 2 of the PRC19-PS in Mozambique – 686,255 households to be integrated into the PASD-PE 'COVID-19' – which will possibly be provided in 2021 by development cooperation partners (i.e. African Development Bank, European Union, IMF, Canada), which were examining (in August 2020) the possibility of contributing financially to support the implementation of Phase 2, in order to reduce the existing financial deficit for implementation.

ILO and UNICEF's budget analysis of the social action sector (which includes a specific chapter on the Social Protection Response Plan to COVID-19) states that "The ambitious Social Protection Response Plan to COVID-19 in Mozambique, if implemented in its entirety (Phase 1 – already with confirmed funding

– and Phase 2 – funding still to be raised), would imply an **unprecedented extension of the social protection system coverage, both at national level and in the sub-Saharan Africa region**, adding, even if temporarily, almost 1 million new vulnerable beneficiaries not yet included in the non-contributory system managed by INAS” (UNICEF & ILO, 2020, p. 15). The brochure **COVID-19 Response Plan – Social Protection** (June 2020) also highlights the ambitious nature of the plan and notes that in order to ensure its implementation, the Ministry of Gender, Children and Social Action was coordinating efforts with the following partners (MGCAS, 2020b):

- Additional payments to PSSB, PASP and Phase 1 of PASD-PE ‘COVID-19’ are being financed by the World Bank, Government of Sweden, and FCDO.
- Implementation by the Ministry of Gender, Children and Social Action is complemented by UNICEF and the World Food Programme (WFP) in Tete (Moatize) and Zambézia (Quelimane), with financial support from Canada (USD 7 million) and the United States, through the Bureau of Humanitarian Assistance (USD 8 million), and German Cooperation (USD 5.5 million).
- Direct support to the state budget to leverage financial efforts in the response to COVID-19 is being provided by the IMF (USD 300 million), European Union (EUR 100 million), World Bank (USD 100 million) and African Development Bank (USD 40 million).
- Technical support to the government is being provided through the Technical Group for Monitoring Social Protection, which includes UNICEF, ILO, WFP, Sweden, FCDO and World Bank.
- CSOs also play a key role (as specifically addressed in Chapter 5 of this report).

In specific reference to the direct post-emergency transfers (PASD-PE ‘COVID-19’), the Ministry of Gender, Children and Social Action noted that additional resources were being mobilized to finance Phase 2, estimated at USD 140.5 million, of which USD 20.5 million had already been channelled through the United Nations (MGCAS, 2020b); see, for example, the United Nations Multi-Sector Response Plan to COVID-19 for Mozambique (ONU Moçambique, 2020).

Box 1. United Nations Joint Programme for Social Protection in Mozambique 2017–2020

Very important to be highlighted, in terms of support to social protection (indirectly related to the COVID-19 Plan), is the Joint Program for Social Protection (2017–2020), budgeted at USD 18,717,984, financed by the Netherlands, United Kingdom and Sweden, the implementation of which started in Mozambique before the COVID-19 pandemic. This Joint Program was structured around a “coherent package of interventions” included in ENSSB II and aligned with the Operational Plan for the sector. The programme relies on the technical and financial support of ILO and UNICEF, in close coordination and under the leadership of the Ministry of Gender, Children and Social Action, with funding from the FCDO, Sweden and the Netherlands (MGCAS, 2018; UNICEF, 2018b).

This programme was designed based on an assessment of the major challenges that the coherence perspective conveys, with the belief that by facing the challenges, there is a greater possibility of achieving more structural change (i.e. emphasising the link between social protection and inclusive economic growth, as well as social protection as an important element of a more inclusive approach to poverty alleviation). Based on the analysis of the programme funders, which found that social protection coverage was far below the desired level, a ‘coherent and predictable’ state budget was suggested. Once again, it was stressed that in times of financial restrictions, social protection should be a priority area. In addition, the coherence framework was developed to ensure an approach that aligns the support given centrally with monitoring at provincial and district levels. By presenting a structure and modality based on results, the programme was designed to reduce the costs of negotiation and coordination and maximize programmatic coherence (MGCAS, 2018; UNICEF, 2018b). Even though the programme was designed before the COVID-19 pandemic, the lessons learnt and approach put forward since 2018 have laid the foundation for a more coherent and equitable implementation of the COVID-19 Response Plan.

Social protection response

On 30 March 2020, a State of Emergency was declared throughout Mozambique (Presidential Decree No. 11/2020) in order to allow the government to implement measures to combat the spread of COVID-19. The Minister for Gender, Children and Social Action³ advised the INAS and the Provincial Social Affairs Services to implement a sectorial plan at the national level to mitigate the negative socio-economic impacts on the most vulnerable population groups in Mozambique, as a result of the measures taken to control the spread of the virus (UNICEF & ILO, 2020). The preparation of the COVID-19 Response Plan was led by the Ministry of Gender, Children and Social Action and INAS, in collaboration with the Department of Economic Studies of the Ministry of Economy and Finance, with the support of the World Bank, UNICEF, ILO, WFP, the Department of International Development (now the FCDO), and the Embassy of Sweden, constituted as a 'Technical Advisory Group' to provide support in a coordinated manner to the Government of Mozambique (MGCAS, 2020b).

As explained by the Ministry of Gender, Children and Social Action, in terms of procedures, instead of creating new instruments, the government chose to adapt current national policies and programmes to respond to the pandemic (MGCAS, 2020a). The sector did not refer to any study or collect any evidence (i.e. on the anticipated impact of the crisis) as input to decide on the priority areas or target beneficiaries for the Recovery Plan. However, the Ministry mentioned that households in situations of poverty and vulnerability, especially in urban, peri-urban and border areas, would be the focus of social protection measures (MGCAS, 2020a).

In general terms, the PRC19-PS is anchored in the current political and legal framework of the ENSSB II, which allows social protection programmes to be activated in 'emergency scenarios' (MGCAS, 2020b). However, it is noted that the plan is supported by some actions that the Ministry of Gender, Children and Social Action consider 'innovative', in terms of the implementation of social protection mechanisms, including:

- **Objective selection of programme implementation sites:** The selection of neighbourhoods was based on the Multidimensional Poverty Index prepared by the Ministry of Economy and Finance, which combines economic and social indicators.
- **Information management system:** The response is anchored in the existing capacity of the sector with the use of the e-INAS information system, which allows the registration of new beneficiaries in emergency contexts with simplified modalities.
- **Digitalized payments to beneficiaries:** Most of the cash transfers to beneficiaries can be done through mobile phones, using the largest mobile networks in the country (in cooperation with the Bank of Mozambique and the Mozambican Communications Regulatory Authority).
- **Comprehensive programme coverage:** The response to COVID-19 offers an opportunity to link contributory and non-contributory social protection. Mozambique is one of the few countries in Africa that is expanding coverage (INSS enrolment) to more than 30,000 informal low-income workers.
- **Identification of new beneficiaries:** This is to be done through the PASD-PE 'COVID-19' by the INAS, in coordination with the Provincial Services of Social Affairs, District Services of Health, Women and Social Action, Neighbourhood Secretaries and Community Leaders.

³ According to the provisions of Article 36 of Decree No. 12/2020, of 2 April 2020.

As the main purpose of this case study is to assess the main measures/policies used by the Government of Mozambique to support vulnerable groups through the pandemic, the PRC19-PS was identified as the main plan for analysis. The general objective of the plan is to “ensure social support and strengthen the resilience of households in situations of poverty and vulnerabilities exposed to the effects of COVID-19”. Implementation of the plan is led by the Ministry of Gender, Children and Social Action and its executive body, the INAS.

Cash transfers

A core strategy of the PRC19-PS is to adapt the current Basic Social Security programmes managed by INAS in order to make cash transfers available. The Ministry of Gender, Children and Social Action clarified this measure as non-contributory social protection implemented through external funds and that, in addition to making cash transfers available to new beneficiaries (for six months), three-month cash transfers are also forecasted for current beneficiaries of the PSSB and PASP (MGCAS, 2020b). The beneficiaries of cash transfers are households.

The criteria defined by the Ministry of Gender, Children and Social Action (October 2020) for receiving cash transfers are households in situations of poverty and vulnerability and households living in urban, peri-urban and border areas, with priority given to:

- Households headed by older people
- Households headed by people with chronic and degenerative diseases
- Households headed by people with disabilities
- Households headed by children
- Households with children and/or with older people, people with disabilities or people with chronic degenerative diseases
- Households headed by pregnant women without a source of income
- Households headed by women with six or more dependents
- Households that host internally displaced persons

The Ministry of Gender, Children and Social Action explained that, in addition to the criteria for households, the following socio-economic categories were identified as priorities for pandemic response measures/policies: internally displaced people/refugees; disabled people; children in difficult situations; older people in absolute poverty; disabled people in absolute poverty; people with chronic and degenerative diseases; people benefiting from Basic Social Security programmes ; women/women heads of households; and people living on the streets (MGCAS, 2020a).

In-kind social protection measures

The Ministry of Gender, Children, and Social Action foresees the allocation of a food basket, corresponding to three months of food to existing beneficiaries through the PASD for 18,438 current beneficiaries. As noted by the Ministry, this is also a non-contributory social protection programme, implemented through external funds.

Other in-kind benefits are related to the provision of hygiene and personal protection equipment to vulnerable people, technicians, and employees, totalling 600,000 beneficiaries (provision of hygiene material) and 1.6 million beneficiaries (provision of individual protection material such as masks). There are also non-contributory social protection programmes being implemented through external funds (MGCAS, 2020a). The criteria for receiving in-kind benefits is set out in Table 3.

Table 3. Criteria for in-kind social protection benefits

Food basket (3 month)	Hygiene and personal protection material	Masks
<p>Beneficiaries: Direct Social Support Programme (PASD) (18,438 current beneficiaries)</p> <p>Criteria: Households in a vulnerable situation with: children of mothers who cannot breastfeed, children with chronic malnutrition, a child head of household, people on ART with low weight</p>	<p>Beneficiaries: 600,000</p> <p>Criteria: Beneficiaries of social protection programmes; Social Action Unit technicians⁴; INAS collaborators⁵</p>	<p>Beneficiaries: 1,600,000</p> <p>Criteria: Beneficiaries of social protection programmes; Social Action Unit technicians; INAS collaborators</p>

Source: MGCAS (2020a)

Credit for small and medium enterprises

As part of the planned measures to mitigate the effects of COVID-19, the Government of Mozambique created a credit line to support small and medium enterprises (SMEs) (Presidential Decree no. 37/2020, of 2 June 2020). On 1 July 2020, the National Investment Bank (BNI), the Mozambican bank for development proceeded with the launch of two special credit lines with 100% state capital: (i) the ‘Gov. COVID-19 Credit Line’, with USD 15 million funded by the IMF through the state budget, and (ii) the ‘BNI COVID-19 Credit Line’, with USD 9 million funded by the INSS. The BNI created the Special Credit and Evaluation Committee to approve proposals for financing, with a total of 900 proposals received and 151 approved worth USD 18,975,000.

Although there is a need for a more in-depth analysis of selected SMEs (i.e. the equity of the selection criteria), the government’s focus on SMEs is justified by the fact that they absorb the largest part of the active workforce, mostly represented by low-income young people with a low level of academic and technical-professional training. In this sense, financial support for SMEs in the context of the economic difficulties imposed by the COVID-19 pandemic can be seen as an indirect way of protecting vulnerable groups who are dependent on employment by SMEs. The government initiative to protect SMEs has the support of the Confederation of Economic Associations, which is the largest association in the Mozambican private sector. However, The Confederation considers that the response measures do not adequately reach vulnerable groups, as the effective and timely implementation of these plans is still deficient. Hence, there is a need to reinforce the mechanisms for implementing these plans, focusing on the dissemination and consolidation of the procedures for their execution within the implementing institutions.⁶

Another issue that has hampered the efficient implementation of social protection programmes in Mozambique, particularly in the context of COVID-19, is the high level of informality in the economy. In this regard, ILO intends to support low-income self-employed workers by promoting their affiliation with the INSS (ILO, 2020). According to ILO, this mechanism is important to ensure coordination between different elements of social protection, including contributory and non-contributory regimes, because, in addition to extending social protection to workers in the informal economy during the immediate crises, these mechanisms can be developed in a social protection package adapted to support self-employed workers over the long term and can increase workers’ incentives to register and make contributions.

⁴ Official staff of the Social Action Unit of the Ministry of Gender, Children, and Social Action.

⁵ INAS ‘collaborators’ include non-formal staff who are working temporarily for the INAS or collaborating on a specific activity of the INAS.

⁶ Survey questionnaire answered by Non-State actors for the Case Study INCLUDE Equity COVID19

Support to informal sector

In relation to the informal sector, ILO conducted A *Rapid Assessment of the Impact of COVID-19 on the Informal Economy in Mozambique*, using a survey of informal economy workers' associations (ILO, 2020). This assessment makes some recommendations that are important to take into consideration to mitigate the negative socioeconomic impacts of COVID-19 on workers in the informal economy.

Other measures

The PRC19-PS does not include measures to subsidize the cost of electricity, gas, water, or public transport (MGCAS, 2020a). Although it is known that some of these measures are being implemented, it is not clear the source of the funds (private and/or public) or which sector is accountable for such interventions. It should be noted that policies in the health and education sectors, implemented under the PRC19-PS, despite not being included as social protection actions, also benefit (directly and indirectly) the most vulnerable groups in the population.

United Nations COVID-19 Response Plan for Mozambique

Another plan that includes specific funds for social protection is the 'United Nations Multi-Sector Response Plan to COVID-19 for Mozambique' (see ONU Moçambique, 2020). This plan is not limited to social protection, and provides coordinated UN support to combat the spread of COVID-19 and mitigate and build resilience against its impact in every sector. The plan integrates the interventions of UN agencies into a coordinated one-UN response to support Mozambican institutions, civil society, and the private sector.

The UN COVID-19 Response Plan is divided into two phases of implementation, the immediate response (9 months) and the medium-term response (18 months). It is guided by a strong sustainability approach, aiming to transform the challenges posed by COVID-19 into opportunities to continue to accelerate investment in the sustainable development of the country. Interestingly, the plan considers 'coherence' as key, which is defined as: the advantage of allowing joint, coherent and integrated approaches for the socioeconomic response.

The UN Response Plan requires an overall amount of (approximately) USD 377 million, of which USD 42 million is already available. The Plan is based on an assessment of the potential impact of COVID-19 in Mozambique and identifies as key priority areas for investment: (i) food security and nutrition (USD 180 million), (ii) socioeconomic challenges (USD 62 million), (iii) education (USD 11 million); (iv) WASH (USD 21 million), (v) social protection (USD 62 million), (vi) health (USD 27 million), (vii) social cohesion (USD 5 million), and (viii) cross-cutting issues (USD 9 million).

Based on global evidence that shows that the negative impact of COVID-19 extends well beyond the health sector, the UN Response Plan focuses on four work streams, in addition to cross-cutting issues (i.e. human rights, population mobility, protection and gender):

- **Health first:** aims to support the Ministry of Health to prepare for and prevent COVID-19 transmission; detect, report, confirm and respond to outbreaks; and ensure the continuity of essential health services.
- **Protecting people:** from all forms of harm, including social protection and basic services.
- **Economic recovery:** addressing the response to socioeconomic challenges, including employment, livelihoods, food security and nutrition.
- **Social cohesion and community resilience:** aiming at strengthening governance and rule of law, and disaster management capacity.

Planned funds for social protection under this plan total just over USD 62 million, of which only 1.45 million was available in June 2020. Table 4 sets out the main objectives and priorities in regard to social protection.

Table 4. UN Multi-Sector Response Plan to COVID-19 for Mozambique – Social protection actions

Objectives	Priorities
<p>The main objectives of the social protection actions under the UN plan are threefold:</p> <ul style="list-style-type: none"> • Mitigate the impact of the COVID-19 pandemic in Mozambique in a relatively short period of time in relation to the need to ensure income security for affected populations. • Alleviate the immediate economic impact of COVID-19 prevention and control measures, compensating the population, vulnerable informal and street vendors, small suppliers and producers for losses, focusing on the most vulnerable in urban and peri-urban areas. • Support the income of poor and vulnerable families in the face of the medium and long-term economic effects of the COVID-19 pandemic. 	<p>UN agencies involved in social protection plan will support the Government of Mozambique to implement the Direct Social Support Programme-Post Emergency (PASD-PE) to provide cash transfers to the affected population through:</p> <ul style="list-style-type: none"> • Vertical expansion: top-ups for current beneficiaries in urban and peri-urban areas enrolled in the non-contributory social protection system, managed by INAS, plus those currently on the ‘waiting list’ (already identified) • Horizontal expansion: cash transfers to new beneficiaries in urban and peri-urban areas to be reached through institutional referrals through the National Institute of Social Security (INSS) and NGOs supporting vulnerable groups and a combination of geographical and categorical targeting • Provision of cash assistance to self-employed subsistence workers, informal market sellers, street vendors, micro and small suppliers and producers in urban and peri-urban areas • Assessment of vulnerabilities, monitoring and learning, communication for development (C4D), and gender mainstreaming – complementary/in support of cash transfers • Leveraging disaggregated data and innovative approaches to enable social protection measures for the most vulnerable and marginalized populations such as survivors of gender based violence (GBV), teenage mothers, women-headed households etc.

Source: ONU Moçambique (2020)

Chapter 4. Policy coherence and equity of social protection response to COVID-19

After having shared the data on the context, plans, and resources allocated in COVID-19 response, this section highlights the main findings of the case study, in terms of challenges and policy (in)coherency.

Inconsistencies in policies

As shown in Table 2, in requesting financial assistance from the international community, social protection was the top priority of the Government of Mozambique in its plan to mitigate the effects of COVID-19, at least in terms of the volume of investment allocated. So far, the government has managed to allocate 31.1 million dollars, made available by the World Bank, to the Ministry of Gender, Children and Social Action, representing 13% of the amount requested. However, and as described in Table 5, until December, out of a total of USD 700 million, development partners had disbursed approximately USD 662 million in cash and USD 39.5 million in kind.

Table 5. Government budget for COVID-19 response (USD) up to December 2020

Sector	Type of planned activity	Requested amount	Disbursed amount	Amounts channelled to sectors	Expenditure up to December 2020
Health	Prevention and treatment	100,000,000	111,412,785	111,412,785	111,412,785
State budget 2020	Loss of revenue	200,000,000	496,137,974	285,027,174	285,027,174
MGCAS/ INAS	Transfers to families	240,000,000	38,999,185	31,140,385	29,368,183
BNI	Micro business line of credit	160,000,000	15,000,000	15,000,000	24,000,000
	Total	700,000,000	661,549,943	450,439,144	449,808,142

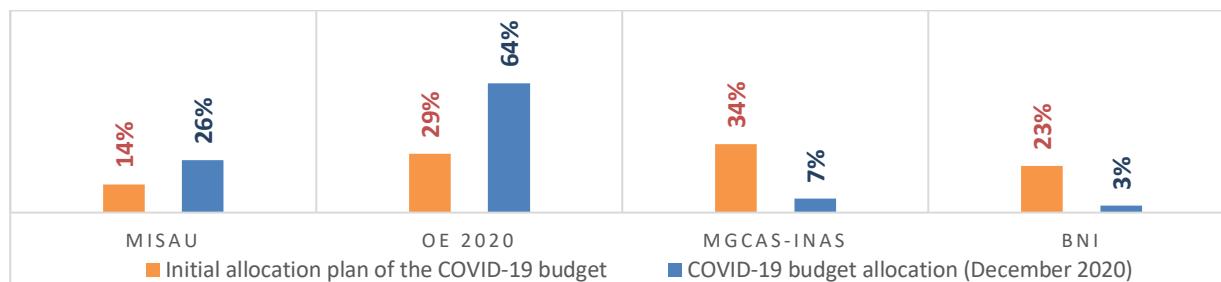
Note: MGCAS = Ministry of Gender, Children and Social Action; Source: MEF (2021, January)

From this amount, USD 450.4 million was channelled to the sectors, namely: USD 111.4 million to the Ministry of Health (MISAU); USD 31.1 million to the Ministry of Gender, Children and Social Action for transfers to the most economically vulnerable households under the social protection plan; USD 15 million to support the private sector; and USD 285 million to compensate for the loss of revenue to the state budget. In the follow up report, *Status of Commitments under COVID-19 – Maputo (December 2020)*, two inconsistencies can be identified, which require further attention:

- The first inconsistency has to do with the content of the report. Although the periodic dissemination of information is acknowledged as a good practice, these updates (the Status of Commitments under COVID-19) report only on the funds received by the government to implement its response plan to COVID-19 and is, consequently, does not report on every fund that is being applied in response to COVID-19 in the country. In addition to government programmes, the response to COVID-19 in Mozambique included interventions by development cooperation partners, whose actions have the same objective: to respond efficiently to the impact of the crisis generated by the COVID-19 pandemic.
- The second area of concern is the considerable shift in budget prioritization, which weakens the

original focus on targeting vulnerable groups. Figure 3 (produced by FMO) shows the percentage allocation plan of the USD 700 million requested from the international community and the channels made cumulatively until the month of November. From an equity perspective, it is concerning to see (through the comparative data on budget allocation per sector in 2020) a clear decrease in the budget funds to social protection targeting vulnerable groups (funds allocated to transfers to households).

Figure 3. Relative deviation between planned and actual allocation of funds



Note: MGCAS = Ministry of Gender, Children and Social Action; OE = State budget; BNI = National Investment Bank
Source: MEF (2020c, December)

By comparing the initial plan and the most updated data (December 2020) we see that the initial allocation to the social protection sector was the highest priority, with a relative weight of around 34% (USD 240 million) of the total volume of this financing. However, of the total amount disbursed to date (USD 661.5 million), only 7% (USD 38.9 million) has been channelled to social protection (Figure 3).

The allocation to social protection has been much lower than expected and is the result of funds (of about USD 496 million) being channelling by the government to the state budget, a value that represents USD 134 million above the financing needs identified for this purpose. This signals a change in the government's understanding of the allocation priorities for COVID-19, which has sacrificed the funding provided for the protection of vulnerable households in order to finance the state budget, above what was initially planned. Explanations for this shift are not provided in the report. As the social protection benefits refer to cash and in-kind transfers, not prevention or treatment, the fact that the number of cases (by December 2020) had not been as high as originally expected, cannot be a reason for the diminished support to vulnerable households, most of which were highly affected by the economic impact of the COVID-19 pandemic.

One of the findings of the work done by FMO in monitoring the procurement process and tracking expenditure related to the plan, was that the government's allocation to the protection sector was initially given the highest priority (34%), against 29% for support of the state budget. However, after receiving the funds for the purposes of combating COVID-19, the government allocated the majority of funds to the state budget (58%) and only 7% to the social protection sector. In this regard, FMO reiterated the need for the government to prioritize the social protection of vulnerable households, as planned when obtaining financing needs.

Appropriate use of funds

Since August 2020, the Budget Monitoring Forum has been assessing the policy coherence of the government's interventions under the COVID-19 Response Plan, including: monitoring the procurement processes carried out and tracking expenditure. Below are the key findings and recommendations from FMO for better public finance management, particularly within the response to COVID-19 (FMO, 2020).

Expenditure by the Ministry of Public Works, Housing and Water Resources

Finding 1: Not all work carried out by the Ministry of Public Works, Housing and Water Resources was submitted for the inspection process and about 99.97% of the funds allocated to Ministry was spent in the form of direct adjustments. There seems to be an excessive use of the funds by the Ministry through the direct award method, even in cases where it was possible to purchase goods and services in good time.

Recommendation: The Ministry of Public Works, Housing and Water Resources needs to improve its contracting method and conduct inspections on all work (construction infrastructures).

Expenditure by the Ministry of Health

Finding: Of the total funds allocated to the Ministry of Health, about 67.1% was allocated to the central level, 31.4% to the provinces, 0.8% to the National Institute of Health, and 0.7 to Maputo Central Hospital.

Recommendation: There needs to be greater decentralization of expenditure execution, especially in relation to structuring expenses and programmes aimed at preventing and combating the spread of COVID-19 and mitigating its impacts, in order to allow for the more efficient management and allocation of resources.

Finding: About 84% of the funds allocated to the Ministry of Health to prevent and combat COVID-19 at the provincial level was spent on food and accommodation expenses for health professionals in hotels in the provinces of Nampula and Maputo (MZN 25 million and MZN 10.8 million, respectively).

Recommendation: Ensure greater rationality in the use of resources and specify the modalities of the 21 awards, which, up until October 2020, have not been specified.

Moreover, as recalled in another publication of FMO (4 February 2021), the transport sector (investment in public transport) does not appear in any plan/budget for the mitigation of the impacts of COVID-19. However, for individuals who depend on overloaded public transport to go to and from work (formal or informal), transport presents a great risk of contracting COVID-19. This daily risk makes the other individual prevention measures less effective (FMO, 2020). Through an equity lens, the findings of FMO bring to light, among other things, the fact that:

- In order to guarantee equitable policies, planning is essential. Establishing fair criteria, based on the evidence of the needs of the most vulnerable groups, is at the core of an equity-oriented planning process.
- Rationality in the use of resources is crucial to guarantee equitable policies. Individual and institutional conscience about budget expenditure is a core ethical value of social justice, as funds allocated to social areas can make a substantial contribution to the life of people from vulnerable groups.
- The decentralization of expenditure execution is key to inclusion, the equitable distribution of resources, and the reduction of regional/urban-rural inequalities.

Equity in budget and implementation

An analysis of the equity of the budget for the social action sector, brings to light key factors in the achievement of effectively equitable policies (in geographical terms), focused on the most vulnerable groups in each region (UNICEF & ILO, 2020):

- As social protection programmes target poor and vulnerable populations,⁷ the most important allocations from the sector should be directed to the provinces, which have a higher percentage of poor and vulnerable households. While allocations from social protection programmes to the most disadvantaged provinces have increased over time in nominal terms, per-capita allocations are not yet equitable.
- The country's poorest provinces⁸ continue to receive the highest nominal allocations from the INAS social protection programmes. However, allocations to provinces with the highest poverty rates in the country are still not sufficient to meet the huge needs of their vulnerable populations. As for geographical equity, in terms of per capita allocation among the poor population), the three poorest provinces receive the lowest allocation.⁹

In the face of these challenges, the case study calls for attention to be given to the voices and analysis of local actors and community-based organizations (CBOs), based on their experiences in these contexts (Beira and Pemba), which point to major structural challenges some of which prevent policies from effectively reaching the most vulnerable groups in all parts of the country. In other words, beyond the specific challenges posed by the COVID-19 pandemic, for the social protection plan to effectively benefit the most vulnerable groups, structural challenges in the local context must be taken into account and addressed. The following examples are based on the data collected from CBOs in the Beira and Pemba:

- Difficulties in accessing and disseminating correct and inclusive information (e.g. on people with disabilities) to communities and beneficiaries
- Weak knowledge on the part of local leaders about the population, especially vulnerable communities
- Current practices of corruption, sexual harassment and poor policy transparency
- Poor dissemination of social protection benefit packages to beneficiaries
- Poor understanding by beneficiaries of their rights and responsibilities
- Lack of inclusion of representatives of vulnerable groups in monitoring
- Poor coordination between government and CBOs
- Instability due to violent conflict

⁷ The definition of poor and vulnerable population is based on the poverty line, which is defined in Mozambique as USD 1.90 per day (MEF, 2017).

⁸ The provinces of Nampula and Zambézia were attributed MZN 1.125 billion and MZN 0.87 billion, respectively. Maputo City and Maputo province received the lowest budget for INAS programmes: MZN 138 million and MZN 145 million, respectively (UNICEF & ILO, 2020, p. 16).

⁹ Although the national average allocation per poor person is approximately MZN 464 per year, the allocation for the poor was only MZN 327 in Niassa and MZN 375 in Nampula, while in Maputo it was MZN 959 per year. This points to a gap in the distribution of sector resources on a per capita basis among those below the poverty line (UNICEF & ILO 2020, p. 17).

It is worth mentioning that the Social Action Policy rests on the principle of ‘respect for cultural diversity’, which states that in the implementation of social action projects and programmes, the cultural specificities of each local context, must be taken into account, as well as the common and unifying elements of the Mozambican nation.

Justice and transparency in targeting criteria

Given the COVID-19 pandemic context – which has restricted access to resources and exacerbated historical and structural socio-economic inequalities – the definition of criteria for the prioritization of social protection policies has become a priority issue. The COVID-19 crisis has become yet another moment in history when, despite some progress (MGCAS, 2020a), the government has been unable to create a social protection system that guarantees the social security of vulnerable groups in times of crisis.

The task of prioritizing certain groups of beneficiaries over others (who may also be vulnerable) or focusing on measures targeting the ‘poorest of the poor’ is ethically complex. The government has identified a list of vulnerable groups but has not clarified the strategy for prioritizing the ‘most vulnerable’ groups in its response to the pandemic. Through an equity lens, it is important to use fair, ethical, just, transparent, and evidence-based criteria for the identification of the most vulnerable groups (people or households) among those impacted by the COVID-19 pandemic. It is necessary to do this exercise in each crisis, as each has will have different impacts. Equity-sensitive planning, implementing, monitoring, and evaluation also requires an understanding of intersectionality (multiple inequalities and discrimination) in order to identify persons/groups that belong to more than one social category or have more than one condition that creates barriers to access to resources and services. Examples, based on the Pemba, Beira and Maputo contexts include the importance of paying specific attention to:

- People with disabilities who, in addition to having a tendency to be economically vulnerable, may encounter barriers to access to information and services¹⁰
- Internally displaced persons (IDPs) who, in addition to typically facing severe economic vulnerability, may also suffer from inclusion barriers linked to gender, religious, ethnic, age, disability, chronic illness or other inequalities, as well as IDP women, who may have specific needs (for example, access to sexual and reproductive health services)¹¹
- Women heads of households, who can be more vulnerable to sexual violence (domestic or in public spaces), which adds to their economic vulnerability, and can have other vulnerabilities linked to gender inequalities (see Chapter 5 of this report)

From the perspective of equity, depending on the multiple challenges faced during the spread of the COVID-19 pandemic, beneficiaries can be identified using diverse and interrelated factors. For example, *economic condition* serves as a defining criterion for the choice of households in poverty (although the definition of poverty does not take into account only family income), and can be added to other criteria such as *geographical locality* (households/population living in urban, peri-urban and border areas) (MGCAS, 2020a), *social inequality* (based on gender, ethnicity/race, age, women-headed household, elderly, children), and *health/biological conditions* (chronic diseases, disabilities, etc.). These conditions are in addition to conditions of vulnerability and emergency, whether due to the pandemic, violent conflict or climate crises, resulting in the creation of new categories of beneficiaries such as internally displaced

¹⁰ INCLUDE Equity Covid-19 Case Study Workshop data collection with community based organizations (CBOs) Beira-City (interview by CDD) Beira City, Mozambique, 2020

¹¹ INCLUDE Equity Covid-19 Case Study Workshop data collection with community based organizations (CBOs) Pemba-City (interview by CDD) Pemba City, Mozambique, 2020

persons (from the Cabo Delgado conflict or as a result of cyclones Idai and Kenneth). All these factors should be taken into account in a cross-cutting analysis of equity and policy coherence for development in the context of the COVID-19 response, as they are indicators of the barriers faced by vulnerable groups, which depend on social protection .

An equity lens on social protection is also about enhancing the perspective, beyond the policies of the Social Action Unit, and paying attention to, for instance, the budget for health and criteria for policy prioritization, as well as the identification of target groups in terms of health. As noted through the shared experience of the Citizen Observatory for Health (Observatório Cidadão para a Saúde), there is a need to enhance strategies to reach out to vulnerable groups with chronic diseases or others who, for instance, may depend on domestic medical support during the pandemic.¹² Moreover, it is to be remembered that, in regard to the expenditure by the Ministry of Health (assessed by FMO, mentioned earlier in this chapter), the distribution of funds among provinces has been uneven and the government has not explained the criteria used to determine the amounts to be allocated to each province, or the criteria used to allocate 67.1% to the central level and 31.4% to the provinces (FMO, 2020).

Although the pandemic can potentially affect anyone, its impact is also determined by inequalities. In that sense, people's level of vulnerability and access to resources are key determinants to be taken into account in studies carried out to support the definition of criteria, not only for social protection policies, but also for other decisions, including prioritization during the vaccination process. In addition, the focus on vulnerable groups should not disregard a close assessment of how socio-economic privileged groups are differently impacted by the COVID-19 pandemic.

Expansion of coverage and decrease in planned investment

The PRC19-PS is 'ambitious' (in terms of its expansive coverage). The plan is designed to place Mozambique "at the forefront of the implementation of social protection programs in Africa" in pursuing the objective of "ensuring social support and reinforcing the resilience of households in situations of poverty and vulnerabilities exposed to the effects of COVID-19" (MGCAS, 2020b, p. 1). However, as mentioned earlier, there has been a decrease in the level of prioritization in terms of the allocation of the financial resources necessary to fulfil the desired goals (hence, whether or not the plan should still be considered ambitious is questionable and would require further data and analysis, which is not the main purpose here).

Still, even when funds are available, an analysis of the equity of the COVID-19 response and mitigation policies calls attention to the need to expand the spectrum from a narrow perspective focused on quantitative goals to the broader aim of pursuing the goal of social justice. Qualitative impacts, may include a focus on:

- The multiple inequalities and discriminations (gender, ethnicity/race, regional, generational, among others) that are determinants of the structural context of poverty in Mozambique, which create additional barriers for vulnerable groups to access health, water, sanitation and other services
- Inclusive and transparent governance mechanisms that favour or create barriers to access to information and the effective participation of vulnerable groups during the decision-making and implementation of the PRC19

¹² Individual questionnaires answered by civil society organizations for this case study. These findings are indicative only, requiring further study with a targeted and more comprehensive sample.

From an equity perspective, it is fundamental to reflect on the quality of the objectives to be reached, without losing sight of the numbers. In social protection policies, numbers are human beings and, therefore, quantitative and qualitative results should go hand-in-hand. If the government sets a plan that is ambitious in terms of the number of beneficiaries, it also needs to incorporate a commitment to qualitative equity measured by indicators (i.e. equitable distribution of resources, justice in the definition of policy criteria, affirmative action defined according to evidence-based data, among other things).

Role of governance actors

This case study highlights the importance of inclusive governance spaces that guarantee the 'complementarity principle' (emphasized in the Social Action Policy), which reinforces that: The interventions of the various stakeholders, carried out within the scope of social action, must complement each other, to guarantee a greater impact on the beneficiaries, always considering the multidimensionality of their needs (República de Moçambique, 2017).

Chapter 5. Monitoring of national response

The present equity and policy coherence analysis has identified the absence of participation by civil society organizations in the multi-sectoral Technical and Scientific Commission created to advise the government on the COVID-19 response policies and measures as a key barrier to the effectiveness of these policies. The fact that the role of civil society is not understood, including its potential for technical support, deserves further reflection, as this sector has vast knowledge about the needs of these groups and can play a valuable technical role in the daily support (and monitoring of support) of vulnerable groups, which is essential to ensure the equity of COVID-19 policies and plans.

Role of CSOs and CBOs

The government recognizes the key role of CSOs, as part of the implementation of the PRC19-PS, in terms of monitoring and identifying potential beneficiaries so that they can be enrolled in the PASD-PE 'COVID-19', as well as channelling complaints and claims by beneficiaries (MGCAS, 2020b, p. 2). At the meeting on 'The Role of CSOs in the consolidation of the Social Protection Response Plan to COVID-19 in Mozambique', organized by the PSCM-PS to provide CSOs with information on the PRC19-PS in Mozambique, a representative of ILO (part of the United Nations Joint Programme for Social Protection in Mozambique) noted the preeminent role of civil society in mapping, identifying, and registering people eligible for post-emergency social support, as well as the advance submission of lists of potential beneficiaries to the INAS.¹³ This role, however, must be carefully planned, as the definition of criteria is one of the most critical areas for ensuring the equity of social protection policies.

According to the evidence gathered for this case study, the role of CSOs is crucial, as the Government of Mozambique has shown limited capacity to protect its vulnerable population.¹⁴ On the specific roles of CSOs, these included: raising awareness; denouncing, proposing, and supporting government action for prevention and awareness raising; and translating and ensuring that reliable information reaches communities.¹⁵ According to the PSCM-PS, CSOs also play a role in "contributing to the demand for actions in social protection resulting in advocacy and policy influence, as well as accountability for improving the conditions of vulnerable groups eligible for the programme".¹⁶

When assessing their role, CSOs and CBOs at the provincial level (both in Beira and in Pemba) stressed that despite the relevance of their activities they face several challenges in fulfilling their role. The main barrier highlighted in supporting the implementation of policies to respond to COVID-19 is the lack of access to information about the government's COVID-19 Response Plan and its benefits for vulnerable groups. Access to this information is essential for the realization of the role that the government expects CSOs and CBOs to play, as well as for the monitoring and channelling of complaints. Table 6 summarizes some of the key social protection measures carried out by CBOs in response to the COVID-19 pandemic in support of the most vulnerable groups.

¹³ Facebook page of PSC-PS: <https://www.facebook.com/pscmps/>

¹⁴ Individual questionnaires answered by civil society organizations for this case study. These findings are indicative only, requiring further study with a targeted and more comprehensive sample.

¹⁵ Ibid.

¹⁶ Ibid.

Table 6. COVID-19 social protection activities carried out by CBOs

Sofala province	Cabo Delgado province
Distribution of hygiene products (soap, masks, and buckets) to the most vulnerable groups; raising awareness on “how to deal with the pandemic”; distribution of non-perishable food staples (rice, oil, sugar, and beans); support to the health sector with hygiene materials (gloves, gowns, and thermometers); distribution of dignity kits for vulnerable women (sanitary napkins, panties, hygienic sheets) and children and girls school kits (notebooks and folders); distribution of income generation kits; sensitization of vulnerable communities (in districts as well as the capital) and distribution of hygiene and prevention material (masks, etc.); awareness raising about proper application of COVID-19 standards	Identification of the most vulnerable groups (PCD); dissemination of messages regarding COVID-19; distribution of prevention material and food kits; dissemination of information via megaphone in neighbourhoods; distribution of masks and basic baskets of good; distribution of material to prevent and combat COVID-19; distribution of food kits; raising awareness on prevention measures; dissemination of preventive information, availability of masks, media intervention on Rádio Moçambique, soap, pamphlets; training on COVID-19 prevention measures (social distancing, hand washing, etc.); delivery/donation of food products to communities; distribution and placement of pamphlets in places with clusters of people (hospitals, wells, markets) in support of the Provincial Directorate of Health (DPS)

In addition to the analysis of the various plans and documents guiding the government's COVID-19 pandemic response strategy (already cited throughout this report), some provincial CBOs have also identified some areas for action and make the following **recommendations**:

- Improve information channels on the benefits of government measures and programmes, including holding events to share information and experiences between the authorities responsible for implementing social protection programmes and the population, in order to enhance understanding of the rights and responsibilities of the parties involved in the process.
- Improve coordination between the government, CSOs and CBOs, including in relation to the design and implementation of operational plans. The government should involve CSOs, CBOs, the private sector and local authorities from the beginning to the end of each process of providing social benefits to the people eligible for support.
- Create strategies focused on supporting the most vulnerable groups, taking into account the situation of instability, due to violent conflict.
- Provide training for social activists in matters of humanitarian aid and the existing benefits for the most vulnerable groups.
- Strengthen the government's work in relation to food assistance, identifying vulnerable groups, the flexible channelling of subsidies, and the fair distribution of benefits to vulnerable communities.
- Provide training for community leaders on interventions for benefit distribution and community awareness.
- Prioritize the most remote areas, which are difficult to access and involve civil society and other entities in the distribution process.
- Correctly distribute information to communities including on the criteria for benefits and explaining the method of distribution in terms of the procedure for receiving benefits.
- Provide psycho-social support to vulnerable groups, in addition to financial and food support, to minimize the impact of trauma caused by the COVID-19 pandemic.
- The concept of leader or head of household should be more inclusive and recognize polygamy and female-headed families, and a strategy should be identified for dealing with child-headed households.

- The National Statistics Institute should be involved in meetings related to social protection issues so that it is more sensitive to the concept of 'vulnerability' when recording statistical data.
- The technicians who distribute the social protection subsidies must be people outside the target communities to avoid bias and nepotism in the process of distributing benefits.
- Improve water distribution mechanisms, as this is one of the main factors hindering the social protection of vulnerable groups.
- Improve communication in order to bring the local culture closer, including catering for the deaf (sign language), individuals with disabilities, albino people, and other groups.
- Develop fair mechanisms to ensure that benefits are distributed fairly without deviation by individual technicians and that there is no discrimination in the distribution of benefits, based on political affiliation/interests.
- Improve understanding of vulnerability, which must be seen in several dimensions, including access to goods and services, financial capacity, housing area, and so forth.
- Involve CSOs working in the social areas in the development of procedures for identifying vulnerable groups.
- Carry out awareness campaigns on combating and preventing the spread of COVID-19, with the involvement of local and religious leaders in community awareness, as well as in the monitoring of social protection programmes.

Gender inequality and vulnerability of women and girls

One of the principles of the Social Action Policy is gender equality and equity, which means that "In the implementation of projects and programmes of assistance and social protection, actors should take into account that men and women should contribute equally in all spheres of economic, social, political and cultural life of the country, taking into account their nature, their situations and their characteristics" (República de Moçambique, 2017). Because of the diversity found within the category, 'women' (in general) are not a target group for non-contributory social protection. However, certain groups of women, such as women heads of households, mothers of more than six children, and others, may be beneficiaries, depending on the context.

A gender equality/equity approach to the social protection policies in response to COVID-19 requires looking beyond policies specifically categorized as 'social protection' (contributory or non-contributory) to how/why women and man are impacted by the specific context of the COVID-19 pandemic. In Mozambique, gender studies are being carried out in this regard. Preliminary analyses show that women tend to be more vulnerable to domestic, sexual, 'moral'¹⁷ and property-based violence, as demonstrated by the testimonies of women in vulnerable conditions in Table 7, which were collected as part of a research carried out by Women and Law in Southern Africa (WLSA), with support from Aliadas, Oxfam, AGIR and the Swedish Embassy, as part of the '16 Day Campaign Against Gender Violence–2020' (25 November to 10 December 2020). These organizations developed a digital campaign to create awareness of the problems faced by women in the context of the COVID-19 pandemic. The research¹⁸ identified a worrying situation in relation to access to health and found that the COVID-19 pandemic has

¹⁷ Law 29/2009 on domestic violence says that: moral violence refers to anyone who in writing, published drawing or any publication imputes a fact that is offensive to the honor and character of woman (Mozambique, Law 29/2009, Domestic Violence, Article 16 Violência moral).

¹⁸ Data gathering for the case study ended before publication of research results by WLSA (for research results see <https://www.wlsa.org.mz/lancamento-de-um-relatorio-de-pesquisa-sobre-mulheres-e-covid/>).

exacerbated inequalities already present in Mozambican society. The campaign calls attention to the new vulnerabilities affecting women and children through the dissemination of testimonies (WLSA, 2020).

Table 7. Testimonials of women from digital campaign by WLSA on ‘Women and Human Rights in the COVID-19 in Mozambique’

Testimonials	
I was working at a friend's stall. There were two of us. Now, because of COVID-19 they say there can only be one. So, I have to sit outside on the floor waiting for the customers. (Informal market vendor)	I always have to wash my hands. But how will I be able to carry so much water for washing and cooking too? (Market vendor)
Nobody works at home. My husband lost his job and I have to work. I leave home very early and when I come back, I sometimes get beaten up because I didn't bring enough money. (Informal saleswoman)	We know that in the government there is a ministry that protects women and children. I am very unlucky. I have never seen the face of these people. (Informal market saleswoman)
We don't want to wait for the government to give us money. We want to work. Please let us work. (Informal market vendor)	I used to come home with a little money for curry for the children, now for many days I have arrived empty-handed. We have no protection, only hunger. (Informal market vendor)
In ‘the new normal’ we need to think that women who work in the markets, who are more than 80%, deserve a dignified life; a place where they and their children have access to health and education. (Social activist)	During COVID-19 we continued to seek products from South Africa by other routes and many were robbed and raped by South African and Mozambican police. We could not complain, because they threatened us with death. (Female informal cross-border trader)

Source: WLSA (2020)

Debates that have taken place include a Webinar on Gender Violence in COVID-19.¹⁹ Also to be noted, the Women's Forum had prepared a ‘Positioning of Women and Girls’ (Fórum Mulher, 2020a) at the beginning of the COVID-19 Pandemic (7 April 2020), in which the CBO members of the Forum called upon the government to:

- Recognize the special contribution of women, their work, and their commitment to their efforts, both in the public and private sphere, in response to COVID-19 and its impact on Mozambican society.
- Reject the idea that one-size-fits-all: This means recognizing that this calamity affects women and men differently and that, in many cases, the impact on women's lives is not only unequal, but more violent, affecting them and all those who depend on them. For this reason, responses must be differentiated and the specificities of the social groups to which women belong respected.
- Implement parity between women and men in all processes of analysis, including in understanding the problem and decision making regarding the present state of emergency, as well as subsequent processes of economic recovery and the ‘normalization’ of civic, political and cultural life in the country. We consider that parity is only achieved when there is the integration of women from several generations, from the various sectors of society (civil society, government and economy), from all provinces and with different types of skills.

¹⁹ For further information see: <https://www.wlsa.org.mz/mocambique-o-covid-19-numa-perspectiva-de-genero/> and <https://www.wlsa.org.mz/covid-25-preocupacoes-mais-comuns-das-mulheres/>.

- Implement special protection measures for women and girls who are survivors of violence (physical, sexual, economic, and psychological), who are increasingly vulnerable in times of conflict and crisis.
- The Women's Forum also recommended to: Circulate relevant information, validated by the scientific community, on the risks posed by the COVID-19 pandemic and the preventive measures that individuals, in particular girls and women, can and should take. This information must be disseminated in several national languages and through various means: SMS messages, radio, television, and posters, among others. This implies making funds available to CSOs in collaboration with universities and research centres for the elaboration of appropriate material and its distribution to the populations of the country.
- Create an emergency telephone number, accessible by SMS, to report or call for help in cases of violence. This requires the transfer of resources to CSOs in collaboration with mobile phone companies and government structures to respond to requests and implement mitigation measures such as the removal of women and girls from dangerous situations.
- Guarantee constitutional rights, which should not be inhibited by the State of Emergency, through effective and democratic oversight by the government and parliament of the actions of security forces, police and the military.
- Establish (legal and social) rules for the protection of employment (prohibition of unemployment) and income generating activities (health security infrastructure) for those who need to work by obliging companies to assume their social responsibility.
- Initiate a nationwide process of reflection, ensuring gender equality, about the current development model, so as to enable social justice based on: gender justice in the future; food sovereignty; the conservation of biodiversity; the preservation of natural resources for the benefit of all Mozambicans; the fight against climate change; and the development of a government with the capacity for redistribution and the social protection of all its citizens.

Monitoring and accountability

FMO, which is the largest platform of Mozambican civil society organizations,²⁰ advocates for transparency and accountability in public finances, particularly on the issue of public debt. The Forum is implementing an initiative called 'Response to COVID-19 with Right Accounts', which aims to ensure that all the money made available to the government to mitigate the effects of the COVID-19 pandemic is being effectively applied for the purposes for which it was intended, as well as, and above all, that the response is coherent and effective. The objective of FMO is to assess the coherence of government interventions within the scope of the response to COVID-19, monitor procurement, and track public expenditure, with a particular focus on health, education, water, sanitation, and social protection.

For FMO, the participation of civil society in monitoring the response to COVID-19 is essential, not only for these measures to be effective, but also to stimulate an environment for good governance and an effective response to COVID-19, within the framework of a greater relationship between the State and

²⁰ FMO members are: Centro para Democracia e Desenvolvimento (CDD), Nwete, Grupo Moçambicano da dívida (GMD), Centro de Integridade Pública (CIP), Centro de aprendizagem e capacitação (CESC), Fundo para desenvolvimento da Comunidade (FDC), Observatorio Cidadão para Saúde (OCS), Forum Mulher, JOINT, Mozambican Civil Society Platform for Social Protection (PSCM-PS), Observatório do Meio Rural (OMR), ROSC, Helvetas Swiss Intercooperations, Instituto de Estudos Sociais e Económicos (IESE), Water Aid, Associação Mulher, Lei e Desenvolvimento (Muleide), Mept Moçambique, Fórum Nacional de Rádios Comunitárias (Forcom), Actionaid, Open Society Initiative for Southern Africa (OSISA), and Swiss Embassy in Mozambique.

Mozambican society. It is in this context that FMO held a national conference aimed at sharing the civil society initiative and reviewing progress made in preventing and combating COVID-19, with a focus on: the coherence of the policies adopted; resources mobilized and their governance; public debt; and key interventions and results.

Following this conference – which counted among its participants the Ministry of Economy and Finance, Ministry of Gender, Children and Social Action, Ministry of Health, Ministry of Education and Human Development, and Ministry of Public Works and Water Resources – FMO agreed to carry out budgetary monitoring to compare the resources that enter the public purse and specific products, goods or services resulting from the use of these resources. In this context, monitoring will require relevant information to be collected, analysed, and compiled to influence decisions in the context of the response to COVID-19, in terms of: the progress/course of activities, depending on what had been planned and the implementation timetable previously established, as well as the application of resources/assets/means of achieving the response plan. Specifically, this initiative aims to verify whether or not the central, provincial, and district governments have done (are doing) what they planned to do in the context of COVID-19, including in relation to social protection. The Mozambican Civil Society Platform for Social Protection (PSCM-PS) is an integral part of FMO. In an approach based on equity and policy coherence, this relationship emphasizes the importance of increasing the effectiveness of policies and ensuring that the mechanisms for monitoring fiscal policies have the participation of agents (CSOs, CBOs, or government sectors) that are directly linked to vulnerable groups.

This case study found that FMO, as a platform that helps to understand how budget monitoring works, is a crucial tool in the search for effective policies that value both budgetary coherence and equity, in the sense of its impact for vulnerable groups.

Independent Community Monitoring project

The Independent Community Monitoring (MCI) project²¹ (which is part of the PSCM-PS and supported by diverse partners²²) has a strong potential to contribute significantly to ensuring equity and consistency in social protection policies in response to the COVID-19 pandemic. Despite its independent character, it prioritizes both the integration of action with the government's plans and the close monitoring (on the spot) of the impact of income transfer policies for vulnerable beneficiary groups. The MCI model combines four elements:

- Community participation in an independent monitoring process for services provided by the government
- Implementation in close collaboration with the Ministry of Gender, Children and Social Action- INAS and CSOs, and the participation of committees, community leaders, and PSSB beneficiaries
- Specifically, community-based (i.e. based on communities and made by people in the community)
- The collection of information that allows for a better understanding of the challenges and successes in the operationalization of the PSSB, including the problems and solutions found locally

²¹ Sources: Interview/summary text by the focal point of the PSC-PS to the MCI in the province of Sofala and PSCM-PS (2020b).

²² MCI is supported/partnered by: European Union, Paane, OXFAN, AGIR, and Sweden Sverige, with technical support from ILO and Irish Aid.

In terms of policy coherence, the reports are presented and discussed with the district delegations of INAS and the *Serviços Distritais de Mulher e Acção Social* (District Services for Women and Social Action [SDSMAS]) and, at the provincial and central level, with INAS, the Ministry of Gender, Children and Social Action, and other relevant institutions for social protection (Ministry of Health, Ministry of Education and Human Development, Parliament, CSOs, and development cooperation partners). From these discussions emerged recommendations aimed at improving social protection programmes and services. As for equity, right at the beginning of this pandemic, MCI identified that COVID-19 affects “social protection networks, already weakened, with potential implications for health services, social work, education, agriculture/food security, work, transport, security and well-being in general, with an impact on increasing the vulnerability of the target groups of social protection and the PSSB beneficiaries, particularly the elderly, people with disabilities, chronically ill and malnourished pregnant women” (PSCM-PS, 2020c, p. 7, translated from Portuguese) .

The Independent Community Monitoring Project of the PSSB (implemented by PSCM-PS in five provinces with European Union funding) has proved to be a good practice in terms of ensuring equity in response policies for COVID-19 by monitoring the channelling of benefits to beneficiaries, identifying gaps, and making recommendations for improving the programme. Monitoring is carried out by community monitors and community social protection committees, who conduct mini-interviews (based on lists of programme beneficiaries, made available by the INAS) to identify gaps and give voice to people benefiting from the PSSB, as well as providing beneficiaries with the knowledge of their rights and duties.

The work carried out in Sofala by MCI²³, in response to COVID-19, focuses on:

- Monitoring the exercise of prevention practices by beneficiaries
- Monitoring how the INAS technical team deals with beneficiaries, as the presidential decree is more focused on physical distance
- Other actions (lectures, distribution of prevention materials)

Some of the challenges identified, include:

- In one of the districts, beneficiaries of the PSSB went for about five months without access to the subsidy. As the beneficiaries depend on these funds for their livelihood, to purchase hygiene materials and protective masks, MCI focused on advocacy to solve this problem.
- Weaknesses were observed due to the abundance of local INAS technicians disseminating COVID-19 prevention measures. To address this, MCI gave public lectures at every payment point in the districts to ensure that beneficiaries have adequate knowledge.
- The evaluation of the field team is that although there are resources (financial and human) available, these are not enough to guarantee monitoring that covers every district.

The case study identified that this initiative has strong potential and great relevance. However, clear procedures and roles are required so that the independent character of the monitoring is not impaired and the focus of the MCI project can be maintained. Specifically, independent monitoring should not be carried out along with other actions (public lectures, material distribution, etc.). In addition, it should be noted that the initiative should not replace actions that are the government’s responsibility to carry out.

²³ Source: e-mail interview on the Independent Community Monitoring Project (December 2020)

Monitoring of COVID-19 policies by CSOs

In March 2020, the **Centro para Democracia e Desenvolvimento** (Centre for Democracy and Development [CDD]) and various other national CSOs started to closely follow the COVID-19 response, with a focus on its areas of priority. The CDD is one of the main organizations engaging in such monitoring and focuses on economics, governance and human rights with a variety of information and analysis on its website (<https://cddmoz.org/especial-covid-19/>) and presented in webinars. The CDD is also head of the secretariat of the FMO.

The **Observatório do Meio Rural** (Rural Observatory [OMR]) also plays a watchdog role and has been analysing the reasons for the substantial increase in COVID-19 cases and deaths in Mozambique since the beginning of 2021. According to the OMR, this worsening of the situation (from March 2020 to February 2021) is associated with two factors: (i) the relaxation of prevention measures by the government on 17 December 2020; and (ii) the penetration of the South African strain of the virus, considered more infectious and lethal, which, according to data from the Ministry of Health, entered the country last November. One of the questions raised is whether or not additional information about the COVID-19 pandemic in Mozambique and South Africa would have changed the decision to relax COVID-19 measures in December. Another key area studied by OMR is the impact of COVID-19 on informal economic agents in the city of Maputo (Agy, Maquenzi, & Mosca, 2020). Through its ongoing analysis of this and other questions, OMR believes that it will learn lessons for the future management of the COVID-19 pandemic, with a focus on more in-depth technical work to inform the government's recommendations and decisions (Tibana, 2021).

It is clear that, going forward, it is important to carry out research and analysis on the PRC19-PS and its implementation. In regard to the cash transfers implemented by the INAS, the **Center for Public Integrity** (CIP, 2020) carried out field work research in Matutuine district. It found that, among other things, COVID-19 resources allocated for social protection may not be reaching all beneficiaries. More specifically, in a specific case, the Centre found that INAS control mechanisms were not effective to avoid the misappropriation of funds during the distribution of subsidies.

Another important area interacting with COVID-19 social protection in Mozambique, studied from diverse perspectives by the Institute of Social and Economic Studies (IESE), relates to ongoing violent extremism and terrorism. Siúta (2021) highlights that one of the main challenges facing the country is to support the population in the areas most affected by violent extremism, who are vulnerable to multiple risks – e.g. climate change, political-military conflict, and the COVID-19 pandemic. There is an urgent need to change the approach to social protection programmes to make them economically sustainable and capable of supporting the population post-conflict. Investing in social protection programmes aimed at training beneficiaries to generate income, making the country's economy more productive and, thus, reducing the number of dependents on in-kind and cash transfers (by making a switch to social security systems), are key recommendations made so far (Siúta, 2021).

Chapter 6. Conclusion and recommendations

This case study presents the results of an analysis of the COVID-19 response by the Government of Mozambique in terms of policy coherence and equity. The analysis has highlighted many areas that need attention in order to protect vulnerable citizens. However, the issues raised deserve further analysis to allow a proper understanding of how the country can enhance its response capabilities, not only to the COVID-19 pandemic, but to any other crises that may directly or indirectly affect the population. This chapter draws some conclusions and makes some recommendations in relation to this, including areas for further study.

Suitability of measures and proportionality of response

Based on the limited evidence available on the impact of social protection policies, in terms of the planning and allocation of resources, it can be concluded that the government measures in response to COVID-19 have, up until December 2020, **failed to strongly prioritize social protection**, as committed to by the government in the original budget plan. Given that the state budget deficit was a reality (which could not be solved in the short term), the decision to ask for external aid or loans was appropriate, however, as analysed by FMO, **how the funds were used was not appropriate**. From a policy coherence and equity perspective, the misuse (and inefficient use) of funds has had a direct negative impact on the most vulnerable groups, to which the funds could have been channelled.

On the impact of social protection policies, **it is recommended that further follow-up/evaluation be conducted** on the following:

- Government budget planning and updates, which have so far failed to explain the criteria (and data/evidence underpinning such criteria) used for decision-making about areas to prioritize and the amount of funds to allocate. In terms of social protection, there is a need to evaluate to what extent the decision to adapt the existing non-contributory policies to the context of COVID-19 has led to the support of the groups most vulnerable during the pandemic. Especially, by assessing the:
 - relevance of the ‘new categories of beneficiaries’
 - potential duplication of benefits (i.e. for IDPs in Cabo Delgado, who are also entitled to receive social benefits related to the humanitarian crisis)
 - impact of the application of policies in Mozambique inspired by neighbouring countries with different realities (i.e. South Africa, which may not serve as a comparison, as it has more developed public services, e.g. for health and transportation)
- As noted by CBOs (in Beira and Pemba), the lack of information provided to CBOs and beneficiaries about the planned social protection benefits under the government’s PRC19 indicates the need for an assessment of the extent to which the transfers to families were effective in reaching the groups most impacted by COVID-19. The ‘ambitious’ PRC19-SP is to be assessed to determine the extent to which the broad coverage of the plan has been accompanied by equity; in other words, whether or not the policy decision to reach out to a large number of beneficiaries has enabled the government to provide support to those groups mostly affected and in need of social protection due to the COVID-19 pandemic.
- The economic measures taken during the early stages of the COVID-19 pandemic (when the government declare a State of Emergency when there were only a few imported cases of COVID-19 and no community transmission) need to be properly evaluated in terms of their

appropriateness and proportionality, especially as these measures had significant negative impacts on the economy, which is now almost at the point of collapse, while at the same time the cases of COVID-19 are dramatically increasing.

Inclusiveness of policies/measures, planning and implementation

The original demand for external funds (aid or loan) was inclusive, as the request strongly prioritized the need for social protection (based on the assumption that the country would need to protect vulnerable groups if it entered lockdown). However, at the time of allocating these funds, social protection became secondary. Hence, **the implementation of policies is at great risk of not being inclusive**, in terms of prioritizing the protection of vulnerable groups.

This lack of inclusion is also noted in terms of the weak, unequal and inefficient allocation of funds to the provinces (31.4%, until October 2020), considering the priority given to allocating funds to the central level (67.1%, until October 2020). It is recommended an **equity-accountability assessment of the application of COVID-19 budget plan be conducted in relation to the allocation of funds to the provinces**, taking into account the fact that, historically, the central level has not prioritized allocating funds to promote inclusion and reduce urban-rural or province-central structural inequalities.

Inclusive policies that promote a better understanding of the State-citizen relationship were also identified as relevant. The **rationale behind the public debate, in which the public were partially blamed for the substantial increase in COVID-19 cases, needs to be further understood** and clarified, especially in terms of the State's role in formulating policies to ensure that the population can exercise their right to health. For instance, the fact that public transportation investments were not prioritized in the government's budget for the COVID-19 Response Plan weakens the responsibility of poor/low income workers, who do not have any other option than to take an overloaded bus to work every day.

As pointed out above, the **lack of inclusion is also present in the shift of priorities, from social protection policies to other areas**, which did not aim to directly benefit the poor or vulnerable groups or to tackle the specific needs of vulnerable groups.

An inclusive approach also needs fair and transparent mechanisms for decision-making in regard to the **criteria for the prioritization of vaccines**. As noted by the CDD (CDD, 2021b), as the first batch of vaccines has already arrived in Maputo, the Ministry of Health is called on to openly disseminate the vaccination plan to inform public debate.

Participatory mechanisms of communication and consultation

The government's decision-making mechanisms about the COVID-19 pandemic **failed to include civil society stakeholders and lacked official mechanisms of consultation**, including a CSO representative in the COVID-19 Technical-Scientific Committee. This Committee did not establish a formal channel of communication with the public, CSOs or CBOs, nor did it conduct any press conferences. It was established without the composition or structure to be robustly inclusive in terms of representation, and it lacked a participatory mechanism to generate the lessons that the government would need to be able to enhance knowledge based on the local context, which is necessary to deal with the current COVID-19 pandemic, as well as future crises. With an overall and detailed content that still requires further analysis, the letter of resignation of Professor Helder Martins from the role of member of the Scientific Technical Commission for Prevention and Response to the COVID-19 Pandemic on 16 February 2021 (Martins, 2021) (Res. of the Council of Ministers no 20/2020, of 25 of March) reinforces,

among other things, that an epidemic cannot be managed by politicians. The former member of the COVID-19 Commission also regretted the closure of the Commission to society and the media and stressed the need for its composition to be in public domain (noting that the publication of Republic Bulletins is insufficient in this regard, as almost nobody reads them), and for its recommendations to be made public. He further noted, that the opening of the Commission to society and the media could have prevented the fake news items that were circulated on social networks, which caused panic in the population.

In terms of effective participation, CSOs expected that the government would have learnt from past experiences (i.e. Agenda 2025) and established a Committee to connect diverse sectors, from national to local stakeholders, including channels for shared information and data gathering on the needs and context specific impact of COVID-19 on the most vulnerable populations. To the contrary, the **CBOs consulted lacked access to information on the planned social protection policies**, which prevented them from exercising their role of monitoring, advocating for inclusion, and supporting the government in the implementation of local level actions for the prevention and mitigation of the impacts of COVID-19.

Learning processes

This case study showed that **an analysis of the policy coherence and equity of the COVID-19 response in Mozambique goes far beyond the current pandemic context**, and concerns the country's ability to deal with crises in general. During the current crisis, **civil society organizations have been active and willing to engage in inclusive governance**, which requires efforts from all sectors. Likewise, international cooperation and private sector actors have been supporting government policies, despite the lack of confidence generated by the 'hidden debts' scandal (some, like the IMF, are reinforcing the conditionality of accountability and transparency, which is an opportunity to advance inclusive governance mechanisms in the country).

In terms of **good practices by the governments**, it can be observed that:

- Social protection was prioritized during the planning phase of policies (although, regrettably, there was a shift in priorities during the fund allocation phase, which saw more funds being allocated to general budget support).
- The COVID-19 policies, in terms of health, were concentrated at the level of the National Institute of Health, rather than the National Health System, showing an enhanced understanding of the difference between these two levels of policy making in the fulfilment of the right to health, especially because the National Institute of Health is responsible for conducting research on health and, as noted throughout this report, is key to guaranteeing that policies are based on evidence and quality data collection (quantitative and qualitative).
- The practice of frequently submitting updated reports on the COVID-19 Response Plan was positive (five issues were released up until December 2020).

Taking into account the multiple effects of the COVID-19 pandemic and the context of strong and multiple inequalities in Mozambique, the **social protection approach could be expanded** (i.e. beyond emergency cash and in-kind transfers), by intensifying implementation synergies with gender and human rights policies, also tackling other challenges faced by vulnerable groups, including: poor access to health, transportation, housing, gender based violence, education, and internal displacement, among other things.

Sustainability

The absence of a strategy to ensure that the COVID-19 pandemic response policies and measures are directed towards structural changes and are inclusive of marginalized groups (MGCAS, 2020a) suggests the need for an assessment and strategy by the government and partners (with the participation of CBOs/CSOs), **to guarantee that the significant resources invested during the COVID-19 pandemic contribute to poverty alleviation and inclusive growth.**

Apart from social protection policies, other policies and interventions (i.e. support for the reduction of electricity, gas, water, or public transport), some of which use non-State funds, also have an impact on vulnerable groups. Hence, it is recommended that a **compiled report is produced detailing all policies** (government and non-government) that directly or indirectly target poor and vulnerable groups. Such a report would also be key to avoiding potential overlaps/duplications among COVID-19 related social protection programmes.

In regard to the government initiative to protect SMEs, **it is recommended a clear strategy/mechanisms be introduced to guarantee that policies targeting SMEs have concrete impacts** for vulnerable population groups (and households) to overcome the current multidimensional crisis.

Particularly in the context of COVID-19, **the impact of the high level of informality in the economy deserves more attention in order to create equitable and gender-sensitive strategies that support low-income self-employed workers.** For instance, the policy of confiscating the goods sold by informal workers does not seem to contribute to social justice and risks exacerbating the lack of social cohesion. It is advisable that the recommendations from the various policy-oriented research studies conducted by CSOs (e.g. WLSA, CDD, OMR, Institute of Social and Economic Studies, Confederation of Economic Associations, Center for Public Integrity and many others), UN agencies and representative forums (e.g. the Women's Forum) are taken into consideration to improve COVID-19 related policies to protect informal workers and their multiple vulnerabilities.

Against this backdrop, in terms of the economy, the Government of Mozambique is called upon to **establish a long-term approach in which policies to mitigate the impacts of COVID-19 are part of a strategy for structural change in the economy,** rather than mere short-term measures.

Last, but not least, considering the complex context in which the COVID-19 pandemic is embedded, at the confluence of multiple 'crises' (food, economic, security, etc.), and the learning from the past year of experience in dealing with the COVID-19 pandemic, **effective and sustainable policies are required to strengthen the participatory and well-coordinated collective efforts of CSOs, CBOs, the government, international cooperation partners, and private companies,** among others. For that to happen, the investment in inclusive governance mechanisms has to become one of the main priorities. This will enable the country to overcome the multiple challenges posed by the COVID-19 pandemic, with policy coherence and equity at the core of its strategies.

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Annex 1. Context for country comparisons

Table A1. Selected country indicators

Indicator	Value	Year and Source
1. Country status a) Least developed country (LDC) b) Low income country (LIC) c) Low middle income country (LMIC) d) Middle income country (MC)	LIC	2019
2. GDP	USD 521.274	2019
3. Sectoral composition of GDP in percentage a) Agriculture b) Manufacturing c) Services	a) Agriculture (26%) b) Manufacturing (7.7%) c) Services (9.3%)	2 nd quarter 2020
4. Sectoral composition of employment in percentage a) Agriculture b) Manufacturing c) Services	a) Agriculture (66.1%) b) Manufacturing (2.5%) c) Services (8.2%)	Censo 2017 (Final Report – 2019)
5. Income poverty levels national poverty headcount disaggregated by a) Region b) Rural and urban	a) Region (53.5%) b) Rural (58.3%) and urban (43.1%)	Castigo & Salvucc (n.d.)
6. Gini index a) Income disparities in percentage	a) Income disparities in percentage (30%) – GDP per capita (2006)	https://data.worldbank.org/indicator/SI.POV.GINI?locations=MZ
7. Food security: Under five malnutrition	43.3%	Mader (2013)
8. Violence against women	78%	MINT (2010)
9. Attitude to violence against women	Data not available	Data not available
10. Adult literacy rates (male vs female)	Adult (20+) literacy rates (30%) (male 17%; female 13%)	Censo 2017 (Final Report – 2019)
11. Doctor-patient ratio	0.07 doctors/1,000 habitants (2017)	https://www.indexmundi.com/pt/mocambique/densidade_de_medicos.html
12. Nurse-patient ratio	Ratio of workers in the fields of medicine, nursing and obstetrics/SMI per 100,000 inhabitants (68.2)	MISAU (2019)

Table A2. Political and governance contexts

Political systems	Political situation	Political stressors, including a short explanation	Main inequalities
a) Military b) Constitutional democracy	a) Highly volatile b) Volatile c) Not volatile	a) Insurgency b) Ethnic tensions c) Partisan polarization d) Other stressors	a) Gender b) Region c) Location d) Religion e) Age f) Disability

Annex 2. COVID-19 and pre-existing situation

Table A3. Employment structure: currently employed population 15 years (%)

Indicators	Total	Women	Men	Rural	Urban	Disability	Age (till age 35)	Age (60 and above)	Expenditure quintile (poorest 20%)	Total
Type of work	N/A									
Wage employment- Public sector	7%	44%	56%	32%	68%	N/A				
Wage employment- Private sector	N/A									
Self-employed with employees a) Non-agricultural b) Agricultural	18%	a) 59.3% b) 82.4%	N/A							
Self-employed without employees a) Non-agricultural b) Agricultural	Data not available									
Contributing family worker a) Non-Agricultural b) Agricultural	7%	a) 7.0% b) 16.5%	N/A							
Casual worker	3%	N/A								
Unpaid apprentice	28%	N/A								
Domestic worker		4.1%	1.4%	Women 0.6%; Men 0.9%	Women 11.1%; Men 2.8%	N/A	N/A	N/A	Women 0.2%; Men 0.2%	N/A
Labour force participation, 15 years and older (%)	9%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Vulnerable employment, 15 years and above (%)	N/A									
Time spent on unpaid domestic work, 10 years and older in minutes	N/A									
Other	N/A									
Total	N/A									

Note: N/A means not available

Source: World Bank (2011) and MEF (2019)

Table A4. Pre-COVID-19 social protection programmes

Name of programme		Type of beneficiaries	Number of beneficiaries	Modifications since COVID-19
Programa Subsídio Social Básico (PSSB)		Poor individuals older than 60	592,179 poor households	Increase in the number of families benefiting from Basic Social Subsidies from 592,179 to 1,695,004
Programa Acção Social Productiva (PASP)		Poor households Women	592,179 poor households	
Programa de Apoio Social Directo (PASD) – Cesta básica		Poor households Women	592,179 poor households	
Transferências Directas Pós-Emergência (PASD-PE 'COVID-10')	Provides a cash transfer of MZN 1,500 per month, every two months, for six months for vulnerable families in urban, peri-urban and border areas.	Households headed by an elderly person, or a person with a chronic and degenerative diseases, or with a disability, or headed by a child Households headed by a pregnant woman without an income source Female-headed households living with six or more dependents Host families for IDPs	290,000 poor households	

Table A5. Access to health care services

Indicator	Total (% of population)	Sex		Location		Age (till age 35)	Age (60 and above)	Expenditure quintile (poorest 20 percent)	Disability
		Female	Male	Rural	Urban				
Access to health facility	N/A								
Registered with Health Insurance	N/A	2.7%	2.9%	Female 1.8%; Male 1.0%	Female 4.3%; Male 5.4%	N/A	N/A	Female 1.2%; Male 0.0%	N/A

Note: N/A means not available

Source: World Bank (2011)

Annex 3. Those likely to benefit from COVID-19 support measures or struggle to comply with directives

Table A6. Living conditions

Indicator	Total	Rural	Urban	Age (till age 35)	Age (60 and above)	Disability	Expenditure quintile (poorest 20 per cent)
Use electricity	33% (2019)	5.4% (2011)	54.5% (2011)	N/A			
Pay electricity bill	Data not available						
Have pipe borne water at home	34% ²⁴	N/A					
Pay water bill	Data not available						
Have private toilet facilities	23.8%	12.8%	47.8%	Data not available			
Share toilet facilities	4%	1.6%	9.2%	Data not available			
Single room household	34.2%	37.3%	26.9%	Data not available			
Compound house	Data not available						

Source: World Bank (2011) and MEF (2019)

Table A7. Proportion of individuals aged 12 years and older who own, or use computers by region, locality, sex, age group, disability, and expenditure quintile

Indicators	Total (%)	Female	Male	Urban	Rural	Age (till 35 years)	Age (60 years and above)	Disability (where available)	Expenditure quintile (poorest 20%)
Own laptop	N/A								
Own desktop	N/A								
Own tablet	N/A								
Own any one of the devices	6% (use)	N/A							
Used a computer	6%	N/A							
ICT skills (basic knowledge)	N/A								
Mobile phone ownership and use	Use 65% Own 3%	N/A							

²⁴ https://drive.google.com/file/d/1TYp_gAuemR2rUVUNWeYyA2N9hG5U7qUS/view

TV ownership	25%	N/A
Radio ownership	41%	N/A

Note: N/A means not available

Table A8. COVID-19 measures

Type of measure	Description	Intended beneficiaries	Conditions of access	Excluded categories not likely to benefit
Social protection ²⁵	Basket basic: This support is equivalent to an additional 3 months of payments and covers a total of 592,179 households throughout the country. This support has an estimated budget of USD 29 million.	Current beneficiaries of the Basic Social Subsidy Program (PSSB), the Productive Social Action Program (PASP) and the Direct Social Support Program (PASD)		
	Direct post-emergency transfers (PASD-PE 'COVID-19') to 1,102,825 additional households. This programme will provide a cash transfer of MZN 1,500 per month, every 2 months, for 6 months for vulnerable families in urban, peri-urban and border areas.	Covers 1,102,825 additional households, representing 35% of the poor population living in urban areas.		
Income support ²⁶	<p>Suspension of tax or contributory obligations and customs and tax facilities, namely:</p> <ul style="list-style-type: none"> Release of payments on account Postponement of the special payment on account, which should be made in three instalments, during the months of June, August and October 2020, for the months of January, February and March 2021 Benefit, until 31 December 2020, from the authorization of early departures in the import of COVID-19 prevention and treatment products, with the respective regularization taking place within a maximum period of 90 days, within the referred period 	Economic agents and taxable persons in the Republic of Mozambique affected by the impact of COVID-19	<ul style="list-style-type: none"> Have presented, in 2019, an annual turnover not exceeding MZN 2,500,000 Have a regularized fiscal situation. Reasoned request to be submitted under the terms to be regulated by the Minister who oversees the area of finance 	

²⁵ <https://www.unicef.org/mozambique/media/2886/file/PLANO%20DE%20RESPOSTA%20%C3%80%20COVID-19%20EM%20MO%20-%20PROTEC%C3%87%C3%83O%20SOCIAL.pdf>

²⁶ https://cta.org.mz/wp-content/uploads/2020/04/BR_79-Facilidades-aduaneiras-e-fiscais-com-vista-a-mitigar-os-efeitos-econ%C3%B3micos-da-COVID-19..pdf

Access to services	<ul style="list-style-type: none"> 100% increase in the limit per transaction in the mobile wallet (from 25 thousand to 50 thousand MZN), and in the daily transaction limit in the mobile wallet (from 125 thousand MZN to 250 thousand MZN) Exemption from service fees related to transactions on mobile banking and ATM platforms 			
Regulations/ advisories	N/A	N/A	N/A	N/A
Business stimulus	Two credit lines namely: 'GOV.COVID-19' in the amount of 1,000 million MZN financed by state funds, and 'BNI COVID-19' in the amount of 600 million MZN financed by funds from the National Institute Social Security	Micro small and medium enterprises (MSMEs) affected by COVID-19	<ul style="list-style-type: none"> Application forms Have a permit or licence for the activity Have a regularized tax situation by 31 December 2019 Are enrolled in the Mandatory Social Security System Have a positive equity position in the last approved term (this requirement does not apply to micro-companies and companies that have started activities less than 12 months ago, as long as they prove to have recorded a decrease in their billing by at least 30% due to the COVID-19 pandemic) Not presenting unpaid debts with the bank, until 31 December 2019 	People in the informal economy
Other	<ul style="list-style-type: none"> Import credit, announced by the Bank of Mozambique Introduction of a foreign currency financing line for authorized commercial banks, in the amount of USD 500 million 			

Table A9. Nature of COVID-19 containment measures

COVID-19 containment measures	Total lockdown	Partial lockdown (describe nature)	No lockdown	Curfew/restriction of movement (describe nature)
Declaration of first state of emergency (from 1–30 April 2020)		x		<ul style="list-style-type: none"> • Limitation of movement of people and goods throughout the national territory • Limitation of entry of people at land borders, airports and ports, except for reasons of interest to the State, transportation of goods and goods by duly accredited operators, and health-related situations • Mandatory quarantine for all citizens who have travelled outside the country, or who have been in contact with confirmed cases of COVID-19 • Prohibition of any public or private activities, such as sports, religious, cultural, recreational and other activities that concentrate crowds in the same enclosure, except for urgent State or social issues • Inspection of the prices of essential goods for the population, including those necessary to prevent and combat the pandemic • Introduction of job rotation or other modalities depending on the specificities of the public and private sector • Closure of commercial or similar establishments or, when applicable, reduction of their activity
Amendment of measures in decree for state of emergency (9 April 2020)				<ul style="list-style-type: none"> • Authorization to provide motorcycle and bicycle-taxi services, with the mandatory use of masks and in compliance with the maximum capacity limit • Public transport limited to one third of passengers, with the mandatory use of masks
Extension of state of emergency (from 1–30 May 2020)		x		<ul style="list-style-type: none"> • Reinforcement of home quarantine measures • Limitation of internal movement of people • Compliance with the mandatory use of masks in all places where people are crowded, such as public roads, collective and semi-collective passenger transport, and informal markets, favouring community-made masks, reserving surgical masks for health personnel • Compliance with the minimum social distance required by health authorities of 1.5 metres • Promotion of greater participation by higher education and research institutions in the fight against this pandemic • Capitalizing on accumulated experience of the police-community link to ensure the thorough inspection of the informal sector, in order to ensure the effective closure of leisure and entertainment establishments (<i>barracas</i>) using the proper channels for reporting • Improvement of communication and community awareness campaigns using our vast experience in disseminating positive messages through the media, community radio and information and communication technologies, focusing on the use of local languages • Exploration of those who are in a position to do teleworking for those on the job in the public and private sectors • Avoid any crowds, particularly for the purpose of fun and leisure • Limitation of participation in urgent social events and funeral ceremonies to a maximum of 20 people
Extension of state of emergency (from		x		<ul style="list-style-type: none"> • Reinforcement of home quarantine measures • Limitation of the internal movement of people

31 May to 29 June 2020)				<ul style="list-style-type: none"> • Compliance with the mandatory use of masks in all places where people are crowded, such as public roads, collective and semi-collective passenger transport and informal markets, favouring community-made masks, reserving surgical masks for health personnel • Compliance with the minimum social distance required by health authorities of 1.5 metres • Promotion of greater participation by higher education and research institutions in the fight against this pandemic • Capitalizing on the accumulated experience of the police-community link to ensure thorough inspection of the informal sector, in order to ensure the effective closure of leisure and entertainment establishments (<i>barracas</i>), using the proper channels for reporting • Improvement of communication and community awareness campaigns using our vast experience in disseminating positive messages through the media, community radio and information and communication technologies, focusing on the use of local languages • Exploration of those who are in a position to do teleworking for those on the job in the public and private sectors • Avoid any crowds, particularly for the purpose of fun and leisure • Limitation of participation in urgent social events and funeral ceremonies to a maximum of 20 people.
Extended state of emergency, for the third time (from 30 June 30 to 29 July 2020), but with gradual easing of some restrictions			x	<ul style="list-style-type: none"> • Increase of 1/3 to an amount not exceeding half the actual workforce of service teams every 15 days, in public and private institutions • Reopening of museums and galleries, with limited capacity, complying with the social distance rules of two metres • Resumption of air connections abroad with selected countries, in the form of reciprocity, in order to respond to the need for specialists, managers and investors to boost tourism and business
Renewal of state of emergency within the scope of the measures to combat and prevent COVID-19 (from 8 August to 6 September 2020) with three phases for the relief of restrictive measures			x	<ul style="list-style-type: none"> • Phase 1: Low-risk activities, <u>starting on 18 August 2020</u>: a) Resumption of classes in higher education, at the academies and schools of the defence and security forces, in all institutions and training centres, health training and in technical vocational training institutes; b) Extension of the number of participants in funeral ceremonies to a maximum of 50 people, except when COVID-19 was the cause of death, in which the number will remain 10; c) Resumption of religious services, with the number of participants not to exceed 50 people • Phase 2: Medium-risk activities, <u>starting on 1 September 2020</u>: a) Reopening of cinemas, theatres, casinos and gyms; b) Reopening of driving schools; c) Resumption of motor sports • Phase 3: High-risk activities, <u>starting on 1 October 2020</u>: a) Resumption of 12th grade classes
State of emergency finishes and public calamity starts (from 4 September 2020 – indefinite duration)			x	

Source: <https://www.presidencia.gov.mz/por/content/search?SearchText=covid>

Annex 4. Sustainability and governance implications of COVID-19 responses

Table A10(a). Financing of COVID measures

Source	Amount (USD)	Nature of finance-loan, grant, own sources	Sustainability assessment
World Bank loan	55,162,100	Donation	The effectiveness of these funds in combating COVID-19 is undermined by the structural weakness of the national health system in Mozambique. Before the money is used for equipment to combat COVID-19, the money must be used to solve problems related to the weak structure of the health system, such as the construction of at least one health centre in all easily accessible locations.
Government budgetary sources	309,000,000		
Heritage funds / reserves	
Aid	118,139,100	National and International donation	
Private funds	77,000	National donation	
Other	27,950,00	Concessional credit	

Source: <https://www.mef.gov.mz/index.php/covid-19/1177--253>

Table A10 (b). Financing of COVID measures: in-kind (e.g. PPE, technical support, expertise, etc.)

Source	Description of support (USD)	Beneficiary sector (health, services, manufacturing, education)	Sustainability assessment
Various cooperation partners	37,643,014	Health	Weaknesses in the donation management and distribution system can create cases of theft, blocking the arrival for those who really need it.

Source: <https://www.mef.gov.mz/index.php/covid-19/1177--253>

Table A11. Nature of innovation

Name of innovation	Description of innovation	Beneficiary sector	Sustainability assessment
Disinfection tunnels	Ensures that everyone who passes through the tunnel has complete disinfection, from shoes, clothing, and hands.	Manufacturing	<p>After a short time, the government abolished disinfection tunnels and does not recommend their use to mitigate the spread of COVID-19.</p> <p>The passage through the disinfection tunnel, does not guarantee protection against contamination by COVID-19 (information was provided by the Minister of Health, Armindo Tiago).</p> <p>https://www.portaldogoverno.gov.mz/por/Im-prensa/Noticias/Covid-19-Governo-nao-recomenda-uso-de-tuneis-de-desinfeccao</p>
'Tippy Tap' faucet	The 'Tippy Tap' Faucet is made from a simple plastic bottle that regulates the flow of water for washing hands. It	Manufacturing	This innovation has been very useful for disinfecting hands in places with difficult access to water; the buckets can be filled with water and used anywhere.

	is simple, quick to build and uses a very small amount of water. The soap is placed next to the tap, tied with string to prevent it from being lost or dissolved by water.		https://www.nit.pt/fit/saude/so-precisa-dar-4e-para-esta-associacao-construir-torneiras-em-mocambique
Homemade capulana fabric masks	Protective masks are made with capulana – one of the most accessible fabrics in the country.	Health	<p>This initiative alleviated the mask deficit that was felt at the beginning of the pandemic. In addition, it made masks more accessible to the population, thus reducing the spread of the virus.</p> <p>However, the disadvantage is that some of these masks did not comply with the standards recommended by the Ministry of Health.</p> <p>https://mobile.facebook.com/MISAUMOCAMBIQUE/photos/a.115696649843817/231266471620167/?type=3&source=48&__tn__=EHH-R&_rdr</p>
Foot lever for taps and gel alcohol devices	Manual mechanisms designed to prevent people from using their hands to open and close the tap.	Manufacturing and health	<p>This innovation allows for no contact of the hands on the same surface by several people, thus limiting the spread of the virus.</p> <p>https://www.tv.mz/index.php?option=com_k2&view=item&id=6799:lavagem-das-maos-secretario-de-estado-da-juventude-lanca-sistema-automatico-em-maputo&Itemid=277</p>

Table A12. Interventions by non-state actors²⁷

Type of actor	Nature of intervention	Sustainability assessment
Mobile phone service providers operating in Mozambique	<p>TmCel, VODACOM and MOVITEL</p> <p>Information sharing: The support consisted of the provision of communication technologies that allow the dissemination of information (data and voice messages), for prevention, as well as the implementation of a central telephone to assist the citizen, with clinical guidance for cases that do not need Sanitary Units to be sent.</p> <p>https://www.misau.gov.mz/index.php/realizacoes-nacionais/128-prevencao-e-combate-ao-coronavirus-operadoras-de-telefonias-movel-associam-se-ao-misau</p>	<p>The intervention has a positive impact, due to the ability to provide information to individuals who do not have a television, and helped to identify new suspected cases without the person having to go to a distant health unit.</p>

²⁷ Information provided are examples, and cannot be taken as an exhaustive list of interventions

Private sector	<p>Sasol</p> <p>Donation: Support to the government's efforts to combat COVID-19, providing a total of 60 thousand litres of disinfectant, of which 23 thousand litres were sent directly to the province of Inhambane to support the province in general and the districts of Inhassoro, Govuro and Vilanculos, in particular, which are the focus of our operations for that company.</p> <p>https://www.misau.gov.mz/index.php/realizacoes-nacionais/149-sasol-mocambique-doa-60-mil-litros-de-desinfecante-ao-misau</p>	The intervention helps to strengthen access to prevention materials for populations without the capacity to acquire them and at the same time encourages their use.
	<p>Puma Energy Mozambique</p> <p>Donation: 25 thousand litres of fuel to supply the ambulances identified by the Ministry of Health as supporting COVID-19 operations</p> <p>https://www.misau.gov.mz/index.php/realizacoes-nacionais/157-misau-recebe-apoio-para-a-mobilidade-das-ambulancias</p>	The intervention helps the Ministry of Health to respond to emergencies in relation to critical COVID-19 patients.
CSOs/NGOs	<p>Fundação Taiwanese Tzu Chi</p> <p>Donation: 3,000 bags of rice distributed by the Internment and Treatment Centers for people infected by COVID-19, throughout the country</p> <p>https://www.misau.gov.mz/index.php/realizacoes-nacionais/129-misau-recebe-botijas-de-gas-de-cozinha-e-arroz-para-apoiar-os-centros-de-internamento-e-tratamento-de-pacientes-da-covid-19</p>	
	<p>Centro para Democracia e Desenvolvimento (CDD)</p> <p>Information sharing and demonstrations: Produced 35 three-minute videos (COVID-19 prevention measures) in 15 national languages, in two phases and disseminated them through Facebook (CDD Moçambique; CDD youth online TV), Canal do Youtube (CDD Moçambique); WhatsApp</p> <p>Rented vehicles and sound equipment from the Institute of Social Communication (ICS) for the sensitization of communities in communal villages</p>	The fact that the videos are in local languages, strengthens the transmission of information to the elderly, as well as allowing greater dissemination of information in rural areas.
	<p>Centro para Democracia e Desenvolvimento (CDD)</p> <p>Monitoring the response to COVID-19: A special series of publications 'CDD Special COVID-19' were launched to monitor government policy, programmes and projects on emergency response to save the economy and social protection for the most economically vulnerable in Mozambique.</p> <p>https://cddmoz.org/especial-covid-19/</p>	Monitoring the response to COVID-19 is one of the most crucial actions, as it seeks to accompany pandemic response programmes with the aim of ensuring that these measures are inclusive and that promote equity.
	<p>Centro para Democracia e Desenvolvimento (CDD)</p> <p>Promotion and protection of human rights during the state of emergency declared in the context of COVID-19: In parallel, a programme was implemented to monitor human rights abuses perpetrated by law and order authorities during the state of emergency. This programme consists of a telephone line with legal assistants who receive complaints and report quickly to the team of lawyers. In each provincial capital, the CDD has a team of paralegals who follow up on reports, mostly made by police authorities against civilians for allegedly violating the state of emergency.</p> <p>Source: https://cddmoz.org/</p>	This initiative helps the population to be aware of their right to be respected. The telephone line already receives numerous calls throughout the country, so it is a sign that it is a well-taken measure to promote and protect human rights in a context of a state of emergency.

	<p>The consortium against sexual violence, through the Spotlight initiative</p> <p>Donation and information sharing: This initiative has offered more than 20,000 masks, buckets, hygiene materials (soap and alcohol and gel), as well as organizing training sessions on the pandemic, in order to raise awareness about the pandemic and about prevention.</p> <p>https://web.facebook.com/ConsortioContraAViolencia/?_rdc=1&_rdr</p>	<p>The allocation of prevention materials helps improve their accessibility and at the same time raises the awareness of the population.</p>
	<p>Litsuri e Rosc</p> <p>Donation: Due to the closure of several employment points, many youth organizations supported the needs of women and distributed masks in markets, bus stops, etc.</p> <p>https://web.facebook.com/Litsurimz/?__xts__%5B2%5D=68.ardsd7uwsued...&_rdc=1&_rdr</p> <p>https://web.facebook.com/RoscCrianca/</p>	<p>The materials were donated in strategic locations and where the population is concentrated, which helps reduce the spread of the pandemic and increase the population's awareness.</p>
	<p>Social Protection Platform of Civil Society (PSCM-PS)</p> <p>Identification of vulnerable groups: Mapping, identifying and registration of people eligible for the post-emergency social support programme, and subsequent advance submission of lists of potential beneficiaries to INAS</p> <p>Facebook page of PSC-PS: https://www.facebook.com/pscmpps/</p>	<p>This role, however, must be carefully planned, as the selection of criteria for inclusion is one of the most critical areas for achieving a result that effectively demonstrates the equity of social protection policies.</p>
	<p>Social Protection Platform of Civil Society (PSCM-PS) – Independent Community Monitoring Project (MCI)</p> <p>Monitoring the response to COVID-19:</p> <p>As an example, the work carried out in Sofala by MCI, in response to COVID-19, focuses on:</p> <ul style="list-style-type: none"> • Monitoring the exercise of prevention practices by beneficiaries • Monitoring how the INAS technical team deals with beneficiaries, as the presidential decree is focused on physical distancing <p>Other actions include: lectures, distribution of prevention materials</p> <p>Facebook page of PSCM-PS: https://www.facebook.com/pscmpps/</p>	<p>The MCI of the PSSB, implemented by PSCM-PS in five provinces, with European Union funding, has proved to be a good practice in the effort to ensure equity in response policies to COVID-19. When monitoring the channelling of benefits to beneficiaries, MCI identifies gaps and makes recommendations for improving the programme, giving a voice to people benefiting from the PSSB, as well as providing beneficiaries with information about their rights and duties.</p>
	<p>CBO-led COVID-19 social protection action</p> <p>Donation and Information sharing:</p> <p>Sofala and Cabo Delgado provinces:</p> <ul style="list-style-type: none"> • Distribution of hygiene products, income generation kits and non-perishable food staples to the most vulnerable groups • Raising awareness on how to deal with the pandemic • Support to the health sector with hygiene materials (gloves, gowns, and thermometers) • Distribution of dignity kits for vulnerable women (sanitary napkins, panties, hygienic sheets) and children and girls school kits (notebooks and folders) • Identification of the most vulnerable groups (PCD) • Dissemination of messages regarding COVID-19 	<p>The allocation of prevention materials helps in their accessibility and, at the same time, in raising awareness among the population.</p>

	<p>Women and Law in Southern Africa (WLSA)</p> <p>Information sharing: WLSA developed a digital campaign to create awareness of the problems faced by women in the context of the COVID-19 pandemic. The digital campaign aims to explore the new vulnerabilities affecting women and children, through the dissemination of extracts from testimonies collected under the <i>Project Women and Human Rights in the context of COVID-19 in Mozambique</i> (WLSA, 2020).</p>	<p>Research led by WLSA²⁸ notes the differentiated conditions for women in to health, and that the COVID-19 pandemic has been exposing and exacerbating the existing inequalities in Mozambican society.</p>
	<p>Budget Monitoring Forum (FMO)</p> <p>Monitoring the response to COVID-19: FMO is implementing an initiative, called 'Response to COVID-19 with Right Accounts', which aims to ensure that not only all the money made available to the government to mitigate the effects of the COVID-19 pandemic is being effectively applied for the purposes for which it was intended, but also, and most importantly, that the COVID-19 response is the coherent and effective. The objective of FMO is to assess the coherence of government interventions within the scope of the response to COVID-19, to monitor the procurement processes carried out, and to track public expenditure, with a particular focus on health, education, water, sanitation, and social protection.</p> <p>Facebook page of FMO: https://www.facebook.com/FMO.Mozambique/</p>	<p>The intervention aim to ensure that the pandemic response programmes and measures are inclusive and promote equity.</p>

²⁸ Data gathering of case study ended before publication of research results by WLSA. For further information on this research see WLSA website: <https://www.wlsa.org.mz/mocambique-o-covid-19-numa-perspectiva-de-genero/> and <https://www.wlsa.org.mz/covid-25-preocupacoes-mais-comuns-das-mulheres/>.

Table A13. Citizens and governance (State and local government)

Intervention (e.g. legislation and regulations)	Description	Purpose	Rule of law	Democracy and participation ²⁹	Implications for different social groups
Law	https://macua.blogs.com/files/br_62_i_se%CC%81rie_20201.pdf	Ratified the Declaration of the State of Emergency, contained in Presidential Decree 11	Law No. 1/2020 of March 31, 2020	Public participation in the approval of this law was through parliamentary representation and deputies as representatives of the people. There was no direct participation by citizens or civil society. The Assembly of the Republic was not given reasonable time to discuss the terms of this law and played a passive role of simply ratifying the presidential decree into law, as if obeying a presidential order.	This law limited the free movement of people and goods.
Decree	http://www.open.ac.uk/technology/mozambique/sites/www.open.ac.uk.technology.mozambique/files/files/Decreto_12_2020_de_2_de_Abril_BR_64_I_SERIE_2020.pdf	Approved the administrative execution measures for the prevention and containment of the spread of COVID-19 to be in force during the State of Emergency	Decree No. 12/2020 of April 2, 2020	There was no public participation in the approval of this decree. Law No. 1/2020, of March 31, which determined the State of Emergency, was urgently approved for materialization.	This law involved the closure of classes in public and private schools.
Decree	https://www.inss.gov.mz/publicacoes/decretos/viewdownload/4-decretos/80-decreto-22-2020-de-23-de-abril-relativo-a-perdao-de-multas-e-reducao-de-juros-de-moraos-contribuintes-devedores-de-contribuicoes.html	Concerned the granting of forgiveness of fines and reduction of interest on arrears arising from debt contributions to the Mandatory Social Security System	Decree No. 22/2020 of April 23, 2020	This decree limited the freedom of the press to a certain extent.	This law imposed a ban on the practice of informal business by families that depend on the informal sector.
Decree	https://cta.org.mz/wp-content/uploads/2020/04/BR_79-	Approved customs and tax facilities, with a view to mitigating the economic	Decree No. 23/2020 of April 27, 2020	This decree was also not subject to public participation and was a measure to reduce the taxpayers' burden due to	This law involved the closure of several companies and

²⁹ The laws and decrees in question were essentially approved through the advice of a Technical-Scientific Commission for the Prevention and Response to the Pandemic of COVID-19

	Facilidades-aduaneiras-e-fiscais-com-vista-a-mitigar-os-efeitos-econ%C3%B3micos-da-COVID-19..pdf	effects of COVID-19		the difficulties with sources of income due to the declaration of the State of Emergency.	increased unemployment.
Law	http://www.portucelmocambique.com/var/ezdemo_site/storage/original/application/1ef8b4f907bce629e92665e5d113c158.pdf	Ratified the extension of the declaration of the State of Emergency, contained in Presidential Decree 12/2020 of 29 April	Law No. 4/2020 of April 30, 2020	The implementation of this law was marked by a lack of transparency and bureaucracy.	This decree almost paralyzed the informal trade of the poorest social groups, whose income comes from stalls and informal markets.
Decree	https://reforma.r.co.mz/documentos-diversos/br_874_i_serie_suplemento_2020-decreto-26_2020-de-8-de-maio-medidas-para-prevencao-de-covid-19.pdf	Established administrative execution measures for the prevention and containment of the spread of COVID-19, to be in force during the State of Emergency and repealed Decrees no. 12/2020, of 2 April, and no. 14/2020, of 9 of April	Decree No. 26/2020 of May 8, 2020	There was no public participation in the approval of this decree and it was not the subject of public debate involving civil society.	Arrest of several poor citizens for allegedly breaching the measures contained in the decree.
Presidential Decree		Extended the State of Emergency, for reasons of public calamity for another 30 days	Presidential Decree No. 12/2020 of April 29, 2020	Public participation in the approval of this law was through deputies as representatives of the people. The Assembly of the Republic played a passive role in simply ratifying the presidential decree into law. It did not have time for due analysis.	Discrimination against the poor.
Presidential Decree	https://www.misau.gov.mz/index.php/covid-19-actualizacoes-periodicas?download=379:despacho-presidencial-14-2020-prorroga-o-estado-de-emergencia-31-maio-29-junho-2020	Extended the State of Emergency, for reasons of public calamity for another 30 days	Presidential Order No. 14/2020 of May 28, 2020	There was no public participation in the approval of this decree. Law No. 12/2020, of 29 April, which extended the State of Emergency, which was urgently approved.	This decree benefited several groups of taxpayers.

Law		Ratified the Declaration that extends, for the second time, the State of Emergency, contained in Presidential Decree No. 14/2020, of 29 May	Law 6/2020 of May 29, 2020	This law was approved without public participation.	
Decree	https://www.rsm.global/mozambique/sites/default/files/br_104_i_seriecm_emergencia_junho.pdf	Approved the administrative execution measures for the prevention and containment of the spread of COVID-19, to be in force during the State of Emergency and repealed Decree No. 26/2020, of 8 May, and Decree No. 32/2020, of May 20	Decree No. 36/2020 of 02 June 2020	Approved without public participation	This decree benefited more large and medium-sized companies, to the detriment of small companies and traders in the informal sector.
Decree	https://www.rsm.global/mozambique/en/State-of-Emergency-economic-and-social-measures	Approved additional economic and social measures, exceptional and temporary, with a view to mitigating the impacts of the COVID-19 pandemic, during the term of the State of Emergency and repealing Decree 22/2020, of 23 April	Decree No. 37/2020 of 02 June 2020	Public participation in the approval of this law was through deputies as representatives of the people. The Assembly of the Republic played a passive role by simply ratifying the presidential decree into law. It did not have time for due analysis.	This law limited the free movement of people and goods.
Presidential Decree	https://cta.org.mz/wp-content/uploads/2020/06/Decreto-Presidencial-n.%C2%BA-21_2020.pdf	Extended the State of Emergency, for reasons of public calamity for another 30 days	Presidential Decree No. 2112020 of 26 June 2020	Approved without public participation	This decree maintained the paralysis of the education system at all levels.
Decree	https://reforma.rco.mz/documentos-diversos/prorrogação-do-estado-de-emergência_decreto_cm_51_2020-de-01-de-julho-pdf.pdf	Approved the administrative execution measures for the prevention and containment of the spread of the COVID-19 pandemic, to be in force during the State of	Decree No. 51/2020 of July 1, 2020	Approved without public participation	This decree largely paralyzed the informal business and increased unemployment among the poorest.

		Emergency, and repealed Decree no. 36/2020, of 2 of June			
Presidential Decree	https://www.rsmbique/sites/default/files/dec reto_presidencial_23-2020.pdf	Declared a State of Emergency, for reasons of public calamity, throughout the national territory	Presidential Decree No. 23/2020 of August 5, 2020	Approved without public participation	This decree limited several fundamental rights and freedoms.
Resolution		Approved the Communication from the President of the Republic of the Republic by the Term of the State of Emergency Ministerial Diploma No. 4112020 of August 6, 2020; approved the necessary procedures for the application of Decree No. 23/2020, of April 27, which approved customs and tax facilities to mitigate the economic effects of COVID-19	Resolution No. 72/2020 of August 5, 2020	Approved without public participation	This decree potentially marginalizes the poorest citizens who were left without a source of income and without State subsidies for survival.
Decree	http://www.portucelmocambique.com/var/ezdemo_site/storage/original/application/29d80cc41f42e2b45e8d95fdd4de848d.pdf	Approved the administrative execution measures to contain the spread of the COVID-19 pandemic, to be in force during the State of Emergency	Decree No. 69/2020 of August 11, 2020	Approved without public participation	This decree maintained the limitations on certain fundamental rights and freedoms.
Law	http://www.ts.gov.mz/images/Lei_n_9_2020_de_7_de_Agosto_-_Ratifica_a_Declaracao_do_Estado_de_Emergencia_constante_do_Decreto_Presidencial_n_23_2020_de_5_de_Agosto_4_1.pdf	Ratified the Declaration of the State of Emergency, contained in Presidential Decree No. 23/2020, of 5 August	Law No. 9/2020 of August 7, 2020	The constitutionality of this approval was of doubtful and it was highly contested.	Poorer social groups continued to suffer the most.

Decree	http://www.exteriores.gob.es/Embajadas/MAPUTO/es/Noticias/Documents/201126-Decreto%20102%20Medidas%20de%20contenci%C3%B3n%20Covid.pdf	Established measures to contain the spread of the COVID-19 pandemic, while the Public Disaster Situation is in effect	Decree No. 102/2020 of 23 November 2020	Public participation was through the deputies of the Assembly of the Republic, through representatives of the people.	This law limited the free movement of people and goods.
Decree	http://www.exteriores.gob.es/Embajadas/MAPUTO/es/Noticias/Documents/Decreto%20110-2020%20Medidas%20de%20contenci%C3%B3n%20Covid-19.pdf	Established measures to contain the spread of the COVID-19 pandemic, while the Public Disaster Situation is in force and repealed Decree No. 102/2020, of 23 November	Decree no 110/2020 of 18 December 2020	Provides information of public interest through a democratic body, the Assembly of the Republic.	The Assembly of the Republic maintained the paralysis of the education system at all levels.
Decree	https://www.misau.gov.mz/index.php/estado-de-calamidade-publica?download=799:decreto-n-1-2021-de-13-de-janeiro-de-2021-reve-as-medidas-para-a-contencao-da-propagacao-da-pandemia-da-covid-19-enquanto-durar-a-situacao-de-calamidade-publica	Reviewed the measures to contain the spread of the COVID-19 pandemic, while the Public Disaster Situation lasts, and repealed Decree No. 110/2020, of 18 December	Decree no 1/2021 of January 13, 2021	Approved without public participation	This decree has largely paralyzed informal businesses and has increased unemployment among the poorest.

Table A14. Citizenship and governance (non-state actors such as chieftains and religious institutions)

Intervention	Description	Nature of intervention	Purpose	Rule of law	Democracy and participation	Implications for different social groups
Collaboration with local health entities in raising awareness and prevention in the communities	Awareness campaigns in markets and public spaces on preventive measures against COVID-19	Information sharing	To raise awareness about the importance of preventive measures	Article 45(e) of Mozambique Constitution	Strengthening the participation of local actors, greater social cohesion and identification with the public cause	<p>Informed and aware communities about preventive measures against COVID-19; and less burden on health services.</p> <p>Some religious institutions required that cults (limited by Decree) continue to take place. The government issued a note on procedures to prevent COVID-19 in churches. The media highlighted, however, that part of the religious leaders and some religious leaders were not aware of the need to strictly follow preventive measures.</p> <p>https://covid19.ins.gov.mz/wp-content/uploads/2020/10/CONFISSEES-RELIGIOSAS.pdf</p> <p>https://www.dw.com/pt-002/covid-19-</p>

						<p>muda-rotina-de-cultos-religiosos-em-mo%C3%A7ambique/a-52939761</p>
Registration of vulnerable groups	Identification of vulnerable groups to receive complementary support from INAS	Selection of vulnerable groups	The selected groups are considered to be vulnerable, and will, therefore, receive support.	Article 11 (c) (e) and Article 124 of Mozambique Constitution	Participation of neighbourhood structures in the identification of vulnerable groups	<p>Sometimes the chieftaincy makes a selection of beneficiaries without actually receiving training from INAS, and without any defined criteria.</p> <p>People are receiving duplicate support and some citizens have been waiting for several years.</p> <p>https://www.dw.com/pt-002/mo%C3%A7ambique-verbas-para-as-popula%C3%A7%C3%B5es-vulner%C3%A1veis-podem-estar-a-ser-desviadas/a-55019711</p>
Assembly of Tippy Taps (for washing hands) in neighbourhoods and markets	This took place within the scope of the awareness campaign on COVID-19 and consisted of the use of local materials (piles and gallons of water) for the assembly of hand washing systems.	Humanitarian aid	To provide sanitation systems using local resources	Articles 45 (e) and 46 of Mozambique Constitution	Participation of neighbourhood structures in the identification of main critical points	<p>Communities with means of hand hygiene in markets and other public spaces; communities formed in the assembly of Tippy Taps, giving them greater autonomy and diffusion of the system.</p> <p>https://cartamz.com/index.php/sociedade/item/5608-tippy-</p>

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