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United Nations Population Fund

Country programme document for Mozambique

Proposed indicative UNFPA assistance:	$72.6 million: $13.4 million from regular resources and $59.2 million through co-financing modalities or other resources
Programme period:	Four years (2027-2030)
Cycle of assistance:	Eleventh
Category:	Tier I
Alignment with the UNSDCF cycle	United Nations Sustainable Development Cooperation Framework, 2027-2030

Note: The present document was processed in its entirety by UNFPA

I. Programme rationale

1. Located on the southeast coast of Africa, Mozambique is a vast country covering nearly 800,000 square kilometres, including a strategic 2,470-kilometer coastline along the Indian Ocean. It shares borders with six countries and serves as a vital gateway for the region. While rich in natural resources, including gas, minerals, and fertile land, recurring climate shocks and protracted insecurity have challenged its trajectory toward realizing its full development potential. Mozambique is a low-income country with an estimated population of approximately 34 million in 2025, characterized by a pronounced youth bulge. Its demographic profile is notably young: 72 per cent of the population is under the age of 30, while about 51 per cent falls within the working-age bracket (15 to 60).

2. In 2023, Mozambique ranked 182 on the human development index, with widespread poverty affecting 65 per cent of the population, particularly in rural and northern regions. The gross domestic product growth rate declined from 5.4 per cent 2023 to 2.5 per cent in 2025.[1] Inclusive development remains hindered by deep inequality, climate vulnerability and insecurity. The Government's Five-Year Programme, 2025-2029, targets these challenges and harnesses the demographic dividend through economic diversification, though structural fragilities are constraining progress.

3. Between 2007 and 2023, the maternal mortality ratio fell from 500 to 233 per 100,000 live births and the proportion of skilled birth attendance reached 68 per cent. However, rural access and service quality gaps persist, causing preventable complications such as obstetric fistula and postpartum haemorrhage. The country also faces a severe HIV burden, ranking third globally for people living with HIV (2.4 million) and second for new HIV infections.

4. The fertility rate remains high at 4.9, with sharp regional disparities: ranging from 6.2 in Cabo Delgado to 2.1 in Maputo city. Despite modern contraceptive use rising to 25 per cent by 2022, unmet family planning needs also grew to 27 per cent, due mainly to barriers to access and service quality. Addressing this challenge is vital for ensuring maternal health, preventing unintended pregnancies, and furthering female autonomy.

5. Gender inequality is deeply entrenched in Mozambique, which ranked 0.479 on the gender inequality index in 2023. Women and girls face high risks from poverty, conflict and climate shocks, which exacerbate gender-based violence and harmful practices such as child marriage (48 per cent). Teenage pregnancy is also critical, with 180 births per 1,000 girls 15 to 19 years of age. Nearly half of girls (48 per cent) become pregnant by age 18, and 1 in 10 by age 15. Insecurity in the northern region further increases the risks of sexual violence and trafficking. While legislative reforms exist, implementation remains uneven, and intimate partner violence affects 26 per cent of women.

6. Adolescents and youth—who constitute 33 per cent of the population 10 to 24 years of age—face profound challenges. Mozambique ranks 177 out of 183 countries on the youth development index (0.585 in 2023). Adolescents and young people from poor, marginalized and crisis-affected settings, including out-of-school youth, young people with disabilities, and those in displacement camps, experience the worst sexual and reproductive health and reproductive rights outcomes.

7. Mozambique faces recurrent cyclones, droughts and floods that severely impact infrastructure, displace populations, and disrupt service continuity. Simultaneously, the country hosts about one million internally displaced persons (IDPs), primarily due to the protracted conflict in the north. This "double burden" of climate shocks and insecurity, particularly in the northern provinces, stretches national capacity, necessitating a shift from reactive humanitarian aid to proactive resilience frameworks.

8. Persistent data gaps—including that only 45 per cent of Sustainable Development Goal (SDG) targets have available data and existing data often lack necessary disaggregation—constrain effective policy and programme design. Strengthening data governance, especially at the provincial level, is essential, as the actual use of reliably disaggregated data by policymakers remains a challenge.

9. The tenth country programme evaluation confirmed alignment with national priorities and the United Nations Sustainable Development Cooperation Framework (UNSDCF), 2022-2026, noting successes in policy, partnerships, and data analytics on sexual and reproductive health and reproductive rights and gender-based violence. Lessons learned emphasize the need to diversify partnerships, scale high-impact interventions for the marginalized, and strengthen the humanitarian-development-peace nexus. The unique value added of

[1] African Development Bank.

UNFPA in sexual and reproductive health and reproductive rights, gender, population data and demographic intelligence enables it to use evidence-based targeting to bridge the continuum and drive transformative impact.

II. Programme priorities and partnerships

10. The eleventh country programme contributes to national Five-Year Programme, 2025-2029, under the National Development Strategy, and, within the context of the Decade of Action, to SDGs 3, 5, 10, 16 and 17. Anchored in the UNSDCF, the programme responds to national priorities, including equitable access to high-quality social services, strengthening health systems, preventing gender-based violence and other forms of discrimination, thereby reducing vulnerabilities and improving the availability and use of disaggregated data.

11. Informed by strategic foresight analysis and environmental scanning, as reflected in the Futures Paper[2], the development of the programme was shaped through an evidence-driven, consultative process that examined the country's evolving development landscape and identified key forces likely to influence progress on sexual and reproductive health and reproductive rights, gender equality and youth empowerment. The analysis brought together various stakeholders to explore emerging trends, risks and opportunities affecting the country's demographic and development trajectory. The foresight exercise highlighted several critical drivers shaping the country's future, including a delayed demographic transition, extreme vulnerability to climate shocks, persistent humanitarian crises and conflict in parts of the country, and widening inequalities between regions and population groups.

12. At the same time, the country's large and growing youth population presents a strategic opportunity to accelerate progress toward a demographic dividend if investments in education, health, employment and empowerment are sustained. The programme places strong emphasis on strengthening resilience and anticipatory governance, integrating the humanitarian–development–peace continuum to ensure that life-saving sexual and reproductive health and reproductive rights, maternal health and gender-based violence services remain accessible and adaptable in crisis settings. It also prioritizes investments in demographic intelligence, inclusive digital transformation—complemented by traditional outreach for those without connectivity—and strengthened data systems to better anticipate emerging risks, guide evidence-based policy and planning, and support national efforts to harness the potential of its youthful population for inclusive and sustainable development.

13. The programme's vision is to achieve universal access to sexual and reproductive health and reproductive rights, ensuring that women, adolescents and youth—particularly adolescent girls and young women, persons with disabilities, and populations affected by conflict and climate shocks—are not left behind. It will primarily target young people 15–24 years old and women of reproductive age, with a deliberate focus on hard-to-reach rural areas and internally displaced populations where vulnerabilities and service gaps are greatest.

14. To respond to the country's complex and intersecting challenges, the programme will apply context-specific, integrated approaches across four interconnected outputs that collectively address both immediate needs and structural drivers and accelerate progress towards the three transformative results. The programme adopts an integrated, systems-based approach that leverages data and transformative norm change to stimulate equitable demand for and access to services, while robust crisis-response mechanisms safeguard continuity of delivery. Within this architecture, sexual and reproductive health and reproductive rights function as the primary delivery engine that converts upstream investments into sustained, rights-based outcomes. To maximize the impact, the programme adopts a principle of strategic prioritization with its direct service delivery and subnational capacity-building in geographic 'hotspots', specifically provinces in the north (Cabo Delgado, Nampula, Niassa) characterized by conflict and displacement, and the south/central zones (Gaza, Sofala) most prone to recurring climate shocks. This approach, in turn, strengthens both systems and climate resilience at the subnational level. In other regions, UNFPA will limit its role to high-level technical assistance and policy advocacy to ensure national coverage without overextending resources, while maintaining continuity across the humanitarian–development–peace continuum.

[2] UNFPA Mozambique's 2025 *Futures Paper* utilizes the STEEP framework to analyse how intersecting trends in climate vulnerability, persistent conflict, and significant youth bulge necessitate a humanitarian-development-peace continuum approach to accelerate progress on maternal health, family planning, and gender equality by 2030.

15. A core strategic entry point is reducing unmet need for family planning, recognizing its catalytic role in achieving the three transformative results, and the opportunity to leverage the family planning delivery system to reach commonly targeted beneficiaries with a package of sexual and reproductive health, reproductive rights and HIV prevention options to optimize resources and harness efficiencies to deliver choices. The programme aims to increase the proportion of women of reproductive age (15–49) whose need for family planning is satisfied with modern methods from 55 per cent in 2025 to 60 per cent by 2030, thereby reducing unintended pregnancies, unsafe abortions, maternal deaths and new HIV infections—particularly among adolescent girls, young women and key populations.

16. The demographic transition is moving slowly; large cohorts of young people will continue to exist in the age structure pyramid for at least 20–30 years, indicating the country will need to continuously meet the unmet need for family planning. A second entry point is strengthening resilience**.** UNFPA will strengthen community and individual resilience by promoting integrated sexual and reproductive health and reproductive rights, gender equality and data-driven preparedness, supporting equitable, rights-based health systems to deliver integrated sexual and reproductive health and reproductive rights, HIV and gender-based violence services across development and crisis contexts.

17. The programme also prioritizes transforming gender and social norms and strengthening accountability mechanisms and national mechanisms to track human rights obligations and address structural drivers of gender inequality, gender-based violence and harmful practices. The programme integrates measures to prevent and respond to sexual exploitation and abuse, strengthening safeguarding standards, community awareness, reporting channels and partner accountability. Alongside these efforts, the programme will strengthen data and demographic intelligence to enable evidence-based policy, targeting, monitoring and accountability. Across all areas, the programme integrates resilience, emergency preparedness and climate responsiveness, supporting the incorporation of essential services into national policies, strengthening early warning and anticipatory action, and leveraging the national digitization agenda.

18. The voluntary commitments of Mozambique to the International Conference on Population and Development (ICPD)+30 focus on reducing maternal mortality, enhancing sexual and reproductive health and reproductive rights for adolescents and on empowering women by 2030. Key actions by the Government include reducing foreign medicine dependency by 30 per cent, expanding access to long-acting reversible contraceptives, reducing teenage pregnancies, and mitigating climate change impacts on population vulnerability.

19. UNFPA will foster partnerships with government institutions at central, provincial and municipal levels, civil society, United Nations organizations, donors, development banks and the private sector to foster innovative financing to fill the funding gap. Strategic partnerships will include ministries of health, planning and development, education, youth, gender and social affairs, the National Institute of Statistics, and the National Parliament.

A. Output 1. By 2030, national and subnational data systems, analysis and strategic foresight capacities are strengthened and integrated to inform inclusive, rights-based policies, planning, financing and programme implementation across the humanitarian–development–peace continuum, particularly for the youth agenda, sexual and reproductive health and reproductive rights, gender-based violence and harmful practices

20. This output shifts governance from reactive to anticipatory, integrating megatrends such as climate change, urbanization and the youth bulge into national planning and budgeting, thereby ensuring sustainable, rights-based human capital development, despite shocks. It also addresses gaps in population and administrative data for evidence-based decision-making, particularly in fragile contexts, positioning demographics, megatrends and humanitarian risk as core inputs for anticipatory governance and planning while safeguarding rights.

21. The implementation strategy relies on several mutually reinforcing interventions: (a) boosting analytical capacity for the 2027 housing and population census and household surveys through digital innovation to improve data disaggregation and collection; (b) strengthening integrated administrative data systems, including civil registration and vital statistics, the Health Management Information System, and the Gender-based

Violence Information Management System at all levels; (c) advancing data-driven governance by utilizing census data, demographic health surveys and household budget surveys to produce subnational demographic projections and foresight for forward-looking planning; (d) improving multisectoral oversight, such as through the Comite Intersectorial de Apoio ao Desenvolvimento de Adolescentes e Jovens (CIADAJ)[3], to bolster monitoring and funding for the youth agenda; (e) revitalizing platforms such as the Youth Partners' Group to harmonize partner investments; (f) incorporating peacebuilding initiatives to reach vulnerable young women through inclusive comprehensive sexuality education; (g) providing support to prevent new HIV infections, early pregnancy and child marriage; (h) promoting financial literacy while expanding access to economic opportunities, life skills and quality education; (i) addressing disability-specific needs; and (j) utilizing high-level advocacy and data to enhance the enforcement of existing normative frameworks.

22. The programme prioritizes systematic utilization of data over mere generation, embedding population dynamics and scenario-based foresight into national strategies to inform domestic budget planning and the Medium-Term Fiscal Framework. Core strategic interventions include: (a) reinforcing common operational datasets and anticipatory actions for humanitarian readiness; (b) guaranteeing that national plans are supported by transparent budgets and monitored to protect the rights of the most vulnerable; and (c) applying economic modelling and investment cases, such as the MILENA[4] methodology, to determine GDP loss and the fiscal consequences of teenage pregnancy and child marriage. By bolstering national data governance frameworks and analytical expertise, the programme ensures that all digital tools and demographic intelligence remain under national ownership and are integrated into the Government's own digital and statistical infrastructure. This approach secures data sovereignty and security, providing the evidence needed to implement inclusive, risk-informed and forward-looking responses to demographic transitions, climate shocks and conflict.

B. Output 2. By 2030, discriminatory gender and social norms are transformed, and systems are strengthened to prevent and respond to gender-based violence and harmful practices, ensuring equitable access to survivor-centred services, justice and protection—particularly for women, adolescents and youth in fragile, conflict and climate-affected settings

23. This output adopts a transformative and integrated approach that addresses the institutional, community and individual-level social and behavioural drivers of gender-based violence, with a deliberate balance between prevention and response. Implementation will prioritize gender-transformative investments that move beyond business-as-usual by strengthening accountability systems, shifting harmful norms and expanding survivor-centred services that are enshrined in justice and protection systems, including in humanitarian contexts. UNFPA comparative advantage will be leveraged through support to medical, forensic, inclusive digital and data innovations that account for the digital literacy gap, comprehensive sexual behaviour communication, and mobile service delivery platforms. All activities will be implemented in close collaboration with national counterparts to ensure local ownership and sustainability.

24. To effectively respond to and prevent gender-based violence, the programme will: (a) empower women and girls as agents of change through initiatives that advance school reintegration, economic empowerment and leadership; (b) expand evidence-based behaviour change initiatives to transform harmful gender norms, focusing on men and boys and community leaders as influencers; (c) improve the quality and reach of essential gender-based violence services, including through multiple approaches to serve youth and vulnerable populations in remote areas; (d) strengthen health service providers at different levels on gender-based violence and protection from sexual exploitation abuse prevention and response; (e) invest in digital and technology-driven tools, including generative artificial intelligence, which is aligned with the national digitization agenda and government-approved data standards, to strengthen case management and coordination, monitor harmful social norms, and enhance survivor-centred care; and (f) reinforce multisectoral gender-based violence coordination mechanisms at national and subnational levels to ensure a coherent, accountable and evidence-informed response.

C. Output 3. By 2030, equitable, resilient, high-quality and integrated sexual and reproductive health and reproductive rights services, including family planning,

[3] Inter-sectoral Committee for the Support to the Development of Adolescent and Youth
[4] Methodology for Assessing the Economic Impact of Adolescent Pregnancy and Early Motherhood

maternal and newborn health, are scaled up and sustained, ensuring continuity of care for women, adolescents and youth, particularly those furthest behind and in humanitarian and fragile settings

25. This output covers national strategies to reduce unmet need for family planning and maternal mortality and scale up investments in human capital development to empower adolescents and youth population. UNFPA will work in close collaboration with United Nations partners to ensure programmatic synergy and integrated outcomes. Joint programming will strengthen the humanitarian–development–peace continuum by aligning efforts on education, social protection, governance, health systems strengthening and economic empowerment.

26. Despite progress, Mozambique continues to face high unmet need for family planning, particularly for young people, persistent sociocultural barriers, fragile supply chains and uneven quality of maternal and newborn care—challenges exacerbated by climate shocks, conflict and displacement. This output adopts a health-systems and rights-based approach, integrating service delivery, demand generation, financing and data use to strengthen quality, equity and resilience. Investment cases on climate-related loss and damage, as well as midwifery and maternal mortality reduction—including its linkages to sexual and reproductive health and reproductive rights and gender-based violence—will be developed and leveraged to support resource mobilization efforts.

27. Specifically, this output will focus on: (a) integrating family planning as a core component of reproductive, maternal, newborn, child and adolescent health services, including postpartum and post-abortion care, HIV prevention services, and other sexual and reproductive health and reproductive rights platforms, with disability-inclusive strategies tailored for vulnerable and marginalized groups, including adolescents and youth, persons with disabilities, key populations and sex workers; (b) addressing sociocultural barriers to family planning and sexual and reproductive health and reproductive rights through community engagement and social and behaviour change interventions that empower individuals, adolescents and young people as informed decision-makers. Service delivery will be expanded through youth-friendly services, school health corners, mobile brigades, and stigma-free, inclusive approaches tailored to key populations, and the most marginalized groups, including self-care models such as the DMPA-SC self-injection contraceptive and community-based distribution, supported by both digital and analogue outreach in low connectivity settings; (c) strengthening commodity forecasting, procurement, last-mile sustainable distribution systems, and supply chain management through anticipatory planning, green procurement practices, and decentralized pre-positioning of buffer stocks, flexible transport modalities, such as boats and mobile outreach, and push-based resupply systems to ensure service continuity and reach underserved populations in last mile settings.

28. The programme will lead the transition from funding to sustainable financing by advocating for efficiency gains and developing shock-responsive financing models. This includes exploring contingency funds and insurance-linked instruments for sexual and reproductive health and reproductive rights and gender-based violence services, ensuring that life-saving interventions remain funded even during climate-induced disasters or periods of political volatility; (d) supporting the integration of comprehensive sexual and reproductive health and reproductive rights— including emergency obstetric and neonatal care and fistula prevention and treatment — within primary health care and universal health coverage frameworks through sustained technical assistance, policy advocacy and system strengthening; (e) expanding comprehensive sexual and reproductive health and reproductive rights service packages by upgrading and certifying emergency obstetric and neonatal care facilities, training and mentoring health providers, equipping maternity and surgical units, and establishing efficient referral and transport systems; and (f) strengthening maternal and newborn health information systems to improve the availability, quality and use of subnational data for planning, monitoring and accountability.

29. Shifting from "funding to financing" and leveraging domestic resources will form a strong foundation to secure the necessary funding to push forward this development and human rights agenda. Domestic financing, in particular—in spite of current limited fiscal space in the country—will include sustainable financing and will seek efficiency gains. A current example is UNFPA utilization of a third-party procurement agent with the Ministry of Health, the Global Financing Facility and the World Bank for reproductive health commodities. UNFPA will seek technical partnership opportunities with the international financial institutions, focused on integrating sexual and reproductive health and reproductive rights, gender-based violence and youth-friendly services, and on leveraging existing lessons for commodity security. Beyond advocacy, UNFPA will utilize innovative financing mechanisms, including blended finance, development bonds and tailored

instruments. Strategic partnerships with the private sector will adopt a broader approach, beyond funding, to include mutually beneficial outcomes such as enhanced corporate citizenship in support of UNFPA mandate areas.

D. Output 4. By 2030, national and local systems, communities and populations are better prepared for, and resilient to, shocks and crises, ensuring the continuity of lifesaving sexual and reproductive health and reproductive rights and gender-based violence services across the humanitarian, development and peace continuum

30. Resilience building is a strategic priority for UNFPA in Mozambique, where populations face dual crises of conflict and climate-related disasters. The programme aims to strengthen the capacity of national and local individuals, communities and systems to absorb, respond to and adapt to shocks, reinforcing resilience-building across the humanitarian–development–peace continuum. This approach tackles both immediate risks and structural drivers, maintaining the continuity of lifesaving sexual and reproductive health and reproductive rights and gender-based violence prevention and response services, so that essential support remains available before, during and after crises. The programme will promote a more coherent financing approach that better integrates short-term humanitarian funding with long-term development investments, while advocating for national contingency funds to explicitly include the continuity of sexual and reproductive health and reproductive rights and gender-based violence services during climate-related shocks.

31. Guided by the UNFPA system-wide approach to risk and resilience, the programme will achieve this output by: (a) strengthening preparedness, anticipatory and early response actions by integrating sexual and reproductive health and reproductive rights and gender-based violence risk mitigation, prevention and response into disaster risk reduction, vulnerability assessments, early warning, anticipatory action, contingency planning and climate adaptation systems; (b) implementing innovative service delivery approaches, including mobile brigades and community-based outreach, ensuring integration of the minimum initial service package for sexual and reproductive health and reproductive rights into national systems, and prepositioning essential gender-based violence and sexual and reproductive health and reproductive rights supplies to reach the most vulnerable populations, including women, adolescents, youth and internally displaced persons (within the provincial contingency plans of the National Institute for Disaster Management, the minimum initial service package plays a critical role in ensuring that sexual and reproductive health and reproductive rights needs are systematically addressed during emergencies); (c) reinforcing inter-agency and national humanitarian coordination mechanisms to ensure timely, comprehensive and effective service delivery in humanitarian settings; and (d) empowering local and national actors—including women and youth-led organizations—to lead preparedness, response and recovery initiatives. This includes providing direct technical and institutional support to frontline local actors to lead community-based protection and response, and ensuring accountability for affected populations through established feedback and complaint mechanisms.

32. UNFPA will deepen its support for youth, peace and security and women, peace and security by strengthening and reinforcing inclusive, rights-based policies and programming that empower young people and women as agents of peace. This will include expanding safe spaces, leadership, participation in conflict-resolution training and forums for young women and men at community, district and national levels, and partnering with government, civil society and traditional leaders to address structural drivers of exclusion, such as gender-based violence and limited access to sexual and reproductive health and reproductive rights services.

III. Programme and risk management

33. Country programme implementation will be guided by strong coordination at both the strategic and technical levels. Strategic oversight will involve the Inter-sectoral Committee for the support to the Development of Adolescents and Youth (CIADAJ), led by the Prime Minister, the United Nations country team and the humanitarian country team. The overall coordinating ministry will be the Ministry of Planning and Development. Technical coordination will occur through the Health Partners Group, the United Nations thematic coordination groups and the data task team, among others.

34. The programme will be implemented through national and government partners to secure national ownership as well as accountability to rights holders through the active involvement of target groups and affected populations in the design, implementation and monitoring of UNFPA-supported interventions. Civil society organizations, in particular, will assume a pivotal role in supporting accountability processes, enhancing the understanding of local contexts, promoting local ownership, and providing critical platforms that enable women, adolescents and youth to participate more substantially in processes for setting and monitoring programme and budgetary priorities.

35. The country programme will be delivered through a core team of professional technical and programme staff with a skills mix that is fit for purpose, ensuring dedicated humanitarian and coordination capacity in conflict-affected regions. In such contexts, priority will be given to integrating the sexual and reproductive health agenda into humanitarian contexts, including the prevention of gender-based violence. Implementing partners will be selected through a competitive process based on their capacity to deliver high-quality programmes, strategic relevance, geographic representation and appropriate risk analysis. UNFPA will continue to implement the harmonized approach to cash transfers, following risk and capacity assessments of implementing partners, and leverage inter-agency cooperation for risk mitigation and cost efficiencies.

36. The following programme risks have been identified and categorized to ensure targeted mitigation measures: (a) the escalation of humanitarian situations due to protracted insecurity and conflict (notably in the north) creates limited access for service delivery (a strategic risk from prolonged reliance on external security actors remains and may affect long-term local institutional presence and stability); (b) the escalation of humanitarian situations due to recurrent climate crises (cyclones, floods) and emerging public health crises driven by environmental pollution (related to extractives and waste) continue to disrupt service continuity and cause displacement; (c) diminished fiscal space is resulting in reduced domestic financing for key social sectors, compounded by the risk that political volatility and environmental shocks may stall the national financing agenda; and (d) deep-rooted sociocultural norms impede gender equality and positive change.

37. The following mitigation measures are directly aligned with the identified risks: (a) UNFPA will continue to collaborate within the United Nations system to enhance resilience and improve emergency preparedness and response, including capacity development and monitoring of "weak signals" from foresight analysis to pivot programming; (b) UNFPA will advocate for the integration of disaster-risk financing into national health budgets to ensure fiscal liquidity during humanitarian responses, and strengthen preparedness through anticipatory actions and pre-positioning of essential supplies; (c) UNFPA will advocate for increased domestic funding, diversify the financing portfolio to include private sector and blended finance, and utilize multi-year planning frameworks with the Ministry of Finance that are decoupled from short-term political cycles; and (d) UNFPA will promote positive masculinity and engage men and boys, communities, civil society organizations, local and religious leaders, and youth and women-led organizations in social innovation for integrated sexual and reproductive health and reproductive rights.

38. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

IV. Monitoring and evaluation

39. The eleventh country programme, 2027-2030, will be guided by a strong results-based management framework to ensure accountability, learning and evidence-driven decision-making. The programme will emphasize systematic monitoring of results, data collection, analysis, reporting and evaluation to track progress toward national priorities, the UNSDCF and the SDGs.

40. The UNFPA country office will perform routine tracking of output and outcome indicators through national and UNFPA systems, complemented by quarterly reviews and annual programme performance assessments. Data will be disaggregated by sex, age, geography, disability and vulnerability status to ensure equity-focused analysis, whenever possible. The programme will leverage digital tools to enhance data quality, timeliness and accessibility of decision-making. Midterm and end-of-cycle reviews for projects will be conducted jointly with partners.

41. To strengthen a culture of results, UNFPA will continue investing in national and subnational capacity-building initiatives on results-based management, monitoring and evaluation. This will include technical support and capacity-building to government institutions, civil society organizations and youth networks to collect, manage and use data for planning and accountability. The programme's evaluative activities will be guided by a costed evaluation plan developed in line with the UNFPA evaluation policy of 2024. Key learning questions will focus on the sustainability of community-based models, the effectiveness of youth leadership approaches, and evidence on behaviour change drivers. The programme will contribute to national efforts to monitor and report on the SDGs, with a focus on SDGs 3, 5 and 10. UNFPA will support the voluntary national reviews and the universal periodic reviews.

42. Through this integrated approach, the eleventh country programme will enhance accountability, transparency and learning, ensuring that results monitoring and evaluation contribute to sustained progress toward universal access to sexual and reproductive health and reproductive rights, gender equality and population data systems that leave no one behind.

RESULTS AND RESOURCES FRAMEWORK FOR MOZAMBIQUE (2027-2030)

NATIONAL PRIORITY: Five-Year Government Programme, 2025-2029: Pillar III—Social and Demographic Transition				
UNSDCF OUTCOME 2: By 2030, more people—especially women, youth, those affected by conflict and those furthest behind—participate meaningfully in society and hold public institutions accountable, benefiting from protected human rights and civic space, accessible justice, and transparent management of public resources, thereby reinforcing the social contract and contributing to a more stable and inclusive society.				
RELATED UNFPA STRATEGIC PLAN (SP) OUTCOME(S): Outcome 1. By 2029, the reduction in the unmet need for family planning has accelerated; Outcome 2. By 2029, the reduction of preventable maternal deaths has accelerated; Outcome 3. By 2029, the reduction in gender-based violence and harmful practices has accelerated; Outcome 4. By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.				
UNSDCF outcome indicator(s), baselines, target(s)	**Country programme outputs**	**Output indicators, baselines and targets**	**Partner contributions**	**Indicative resources**
Related UNSDCF and UNFPA Strategic Plan outcome indicator(s): ● Country has national budget allocations, including for health, social protection and infrastructure, that are informed by population projections *Baseline: No* *Target: Yes*	Output 1: By 2030, national and subnational data systems, analysis and strategic foresight capacities are strengthened and integrated to inform inclusive, rights-based policies, planning, financing and programme implementation across the humanitarian–development–peace continuum, particularly for the youth agenda, sexual and reproductive health and reproductive rights, gender-based violence and harmful practices.	● The preliminary results of 2027 digital population census with disaggregated data available within 12 months *Baseline: No; Target: Yes* ● Number of strategic data products, including population situation analyses, utilized to inform national development strategies, climate policies and demographic dividend plans *Baseline: 2; Target: 6* ● Number of key national and subnational development plans that integrate strategic foresight, futures analysis and population projections. *Baseline: 1; Target: 3* ● Number of humanitarian response plans, grounded in the human rights-based approach, that utilize available common operational datasets on population statistics for targeting *Baseline: 2; Target: 4*	Ministry of Planning and Development, National Statistics Institute, Ministry of Justice, Constitutional and Religious Affairs, Ministry of Youth and Sport, Eduardo Mondlane University, National Institute for Disaster Management, United Nations Office for the Coordination of Humanitarian Affairs (OCHA), International Organization for Migration (IOM), United Nations High Commissioner for Refugees (UNHCR), United Nations Human Settlements Programme (UN-Habitat), national and international civil society organizations (CSOs)	$17.4 million ($2.9 million from regular resources and $14.5 million from other resources)
NATIONAL PRIORITY: Five-Year Government Programme, 2025–2029: Pillar I—National Unity, Peace, Security and Governance; PILLAR III—Social and Demographic Transition				
UNSDCF OUTCOME 2: By 2030, more people—especially women, youth, those affected by conflict and those furthest behind—participate meaningfully in society and hold public institutions accountable, benefiting from protected human rights and civic space, accessible justice and transparent management of public resources, thereby reinforcing the social contract and contributing to a more stable and inclusive society.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): Outcome 1. By 2029, the reduction in the unmet need for family planning has accelerated; Outcome 2. By 2029, the				

reduction of preventable maternal deaths has accelerated; Outcome 3. By 2029, the reduction in gender-based violence and harmful practices has accelerated; Outcome 4. By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.				
Related UNSDCF and UNFPA Strategic Plan outcome indicator(s): ● Percentage of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months *Baseline*: 37%; *Target*: 33% ● Percentage of women 20-24 years old who were married or in a union before: (a) age 15; and (b) age 18 *Baselines*: (a) 13% (b) 48%; *Targets*: (a) 10% (b) 45%	Output 2: By 2030, discriminatory gender and social norms are transformed, and systems are strengthened to prevent and respond to gender-based violence and harmful practices, ensuring equitable access to survivor-centred services, justice and protection—particularly for women, adolescents and youth in fragile, conflict and climate-affected settings.	● Number of men and boys reached through targeted interventions promoting positive masculinities to transform harmful gender norms *Baseline*: 48,016; *Target*: 200,000 ● Number of women and adolescent girls, including those in displacement and with disabilities, empowered through leadership and agency programmes to prevent gender-based violence and harmful practices *Baseline*: 272,139; *Target*: 500,000 ● Number of people, including those with disabilities, who benefitted from high-quality essential gender-based violence services, including through mobile brigades, digital platforms and courts *Baseline*: 57,994; *Target*: 160,000 ● Number of national, provincial and district gender-based violence multisectoral coordination mechanisms that are functional and meeting standardized performance benchmarks for survivor-centred care *Baseline*: 7; *Target*: 9	Ministry of Labour, Gender and Social Action, Ministry of Justice, Constitutional and Religious Affairs, Ministry of Youth and Sports, Ministry of Health, National Statistics Office, provincial directorates, United Nations Children's Fund (UNICEF), World Health Organization (WHO), national and international CSOs	$14.4 million ($1.7 million from regular resources and $12.7 million from other resources)
NATIONAL PRIORITY: Five-Year Government Programme, 2025–2029: Pillar III—Social and Demographic Transition; Pillar IV—Infrastructure, Organization, and Land Use Planning.				
UNSDCF OUTCOME 1: By 2030, more children and youth—especially girls, young women, and those furthest behind—experience enhanced well-being and strengthened capabilities to realize their full potential through equitable and inclusive access to integrated, quality services and supportive environments.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1. By 2029, the reduction in the unmet need for family planning has accelerated; 2. By 2029, the reduction of preventable maternal deaths has accelerated; 3. By 2029, the reduction in gender-based and harmful practices has accelerated; 4. By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.				
Related UNSDCF and UNFPA Strategic Plan outcome indicator(s): ● Unmet need for family planning *Baseline*: 26.6%; *Target*: 22% ● Percentage of births attended by skilled health personnel *Baseline*: 68%; *Target*: 75%	Output 3: By 2030, equitable, resilient, quality and integrated sexual and reproductive health and reproductive rights services, including family planning, maternal and newborn health, are scaled up and sustained, ensuring continuity of care for women, adolescents and youth, particularly those furthest behind and in humanitarian and fragile settings	● Percentage of health facilities with no stock-out of contraceptives reported in the last 3 months *Baseline*: 28%; *Target*: 36% ● Number of service delivery points providing human rights-based adolescent-responsive sexual and reproductive health and reproductive rights and HIV prevention services aligned with national standards *Baseline: 198; Target: 250* ● Percentage of institutional maternal deaths that were reviewed *Baseline*: 50%; *Target*: 75% ● Percentage of contraceptive needs financed by the domestic budget *Baseline*: 4%; *Target*: 10%	Ministry of Health, and directorates, Ministry of Finance, Ministry of Labour, Gender and Social Action, Ministry of Justice, Constitutional and Religious Affairs, National Statistics Office, provincial directorates, UNICEF, WHO, national and international CSOs	$28.4 million ($5.0 million from regular resources and $23.4 million from other resources)

NATIONAL PRIORITY: Five-Year Government Programme, 2025–2029: Pillar III—Social and Demographic Transition; Pillar IV—Infrastructure, Organization and Land Use Planning; Pillar V—Environmental Sustainability, Climate Change and Circular Economy				
UNSDCF OUTCOME 1: By 2030, more children and youth—especially girls, young women, and those furthest behind—experience enhanced well-being and strengthened capabilities to realize their full potential through equitable and inclusive access to integrated, quality services and supportive environments.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1. By 2029, the reduction in the unmet need for family planning has accelerated; 2. By 2029, the reduction of preventable maternal deaths has accelerated; 3. By 2029, the reduction in gender-based violence and harmful practices has accelerated; 4. By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.				
Related UNSDCF and UNFPA Strategic Plan outcome indicator(s): ● Percentage of active emergencies where UNFPA initiated a humanitarian response within 72 hours *Baseline*: 10%; *Target*: 35%	Output 4: By 2030, national and local systems, communities and populations are better prepared for, and resilient to, shocks and crises, ensuring the continuity of lifesaving sexual and reproductive health and reproductive rights and gender-based violence services across the humanitarian–development–peace continuum	● Number of national and provincial preparedness, response, climate adaptation and disaster risk reduction plans that integrate sexual and reproductive health and reproductive rights and gender-based violence risk mitigation, prevention and response measures *Baseline*: 5; *Target*: 8 ● Number of people, including those with disabilities, who received life-saving sexual and reproductive health and reproductive rights and gender-based violence services in humanitarian settings, conflict and natural disasters *Baseline*: 794,175; *Target*: 1,500,000 ● Percentage of national/ subnational sexual and reproductive health and reproductive rights and gender-based violence humanitarian inter-agency coordination mechanisms operating effectively in accordance with their agreed terms of reference *Baseline*: 50%; *Target*: 90% ● Number of youth and women-led organizations/networks supported on resilience-building initiatives in humanitarian, peacebuilding and climate actions *Baseline*: 0; *Target*: 4	National Institute for Disaster Management, Ministry of Labour, Gender and Social Action, provincial directorates, Ministry of Health, Ministry of Planning and Development, National Statistics Institute, OCHA, IOM, UNHCR, UNICEF, WHO, national and international CSOs.	$11.4 million ($2.8 million from regular resources and $8.6 million from other resources)
Programme coordination and assistance				$1.0 million from regular resources