COUNTRY CONTEXT

ozambique has emerged as one of Africa's leading examples of effective post-conflict reconstruction and economic recovery.

The country has experienced a relatively smooth transition to political stability and

democracy. In this stable democratic environment, delivery of basic services and social support programmes have gradually improved and an enabling policy environment has been created with national policies focusing on key priority areas for children and women.

The economy has grown at a strong pace, averaging about 8.5 per cent per year since the late 1990s. This growth has been supported by a rapid and sustained expansion of the education sector and a quick recovery of the agricultural sector, which accounted for 23.6 per cent of real GDP growth between 1991 and 2004, suggesting a relatively broad-based economic revival with benefits for poor rural families. The result has been a downward trend in poverty, with significant reductions in the proportion of those living in poverty. The percentage of the population living below the consumption poverty line fell from 69 to 54 per cent between 1996/97 and 2002/03, exceeding the target of 60 per cent set in the country's first poverty reduction strategy, known as PARPA I.

Despite this impressive progress, the low base from which progress began – Mozambique was ranked as the poorest country in the world in 1992 – means that there is still a long way to go. More than half of Mozambican children continue to live below the poverty line. Therefore, renewed effort is needed to accelerate progress, particularly in disadvantaged areas of the country.

The following table summarises Mozambique's progress towards achieving the Millennium Development Goals (MDGs).

Progress towards the Millennium Development Goals

Target for 2015	On Track?
Halve the proportion of people living in extreme poverty	Yes
Halve the proportion of people who suffer from hunger	No
Ensure that all boys and girls are able to complete a full course of primary schooling	No
Eliminate gender disparity in all levels of education	No
Reduce by two-thirds the under-five mortality rate	Yes
Reduce by three quarters the maternal mortality ratio	Yes
Have halted and begun to reverse the spread of HIV/AIDS	No
Have halted and begun to reverse the incidence of malaria and other major diseases	Yes
Integrate principles of sustainable development into country policies and reverse loss of environmental resources	No
Halve the proportion of people without access to safe drinking water and sanitation	No
Develop further an open, ruled based, predictable, non-discriminatory trading and financial system	Yes

Source: GoM/UN 2005

According to the most recent estimates, based on projections from 2003 data, the under-five mortality rate is estimated at 140 per 1,000 live births, which represents a significant decline since 1990, when the rate was 235 per 1,000 live births. The leading causes of child mortality are preventable and treatable diseases such as malaria, respiratory illnesses, diarrhea and vaccine-preventable diseases. If this trend is maintained, Mozambique has the potential to achieve the MDG target on child mortality.

The poor nutritional status of children as well as HIV and AIDS remain the main underlying causes of child mortality in Mozambigue.

The maternal mortality ratio has decreased significantly over the last ten years to 408 per 100,000 live births according to the latest available data estimates. If this trend continues, the country is on track to achieve the MDG target on maternal mortality. At the same time, significant disparities related to geographic location and women's socio-economic status persist, especially in terms of access to key maternal health interventions. For example, the percentage of deliveries attended by skilled health personnel varies from 81 per cent in urban areas to only 35 per cent in rural areas.

Although access to safe water and sanitation has improved, it remains a major concern. The most recent data available indicate that only 36 per cent of the population has access to safe drinking water, with great disparities between areas. For example, in Zambezia and Maputo City 19 and 96 per cent of the population respectively is using water from safe water sources. Access to sanitary means of excreta disposal is also low at 46 per cent.

In recent years, Mozambique has experienced a sustained increase in enrolment rates in primary and, to a lesser extent, in secondary school. The primary school (grades 1-7) net enrolment ratio increased from 87.1 per cent in 2006 (83.8 per cent for girls) to 94.1 per cent in 2007 (90.9 per cent for girls). The steady decrease in the gap in enrolment rates between girls and boys in grades 1-5 indicates that the objective of eliminating gender disparities in the first cycle of primary education is within reach. Despite these positive trends, Mozambique is not likely to achieve the MDG target related to universal primary education. The challenges ahead are illustrated by the low gross completion rate in 2006 – 75.5 per cent for EP1 and 34.9 per cent for EP2 (28.8 per cent among girls versus 41.1 per cent among boys).

The quality of education continues to be a matter of concern, increasingly so as the augmented inflow of learners is placing

pressure on the education system and generating negative effects on the quality of the learning environment. In addition, gender disparity remains high in the higher levels of education (6-7 and 8-12 grade) which makes it unlikely that Mozambique will achieve the MDG target related to the elimination of gender disparities in access to all levels of education.

Despite concerted efforts by the Government to halt the spread of the AIDS epidemic, AIDS is becoming the greatest development challenge for the country, threatening the gains made and creating an orphan crisis. In Mozambique today, it is estimated that over 1.7 million people are living with HIV or AIDS. Latest data on HIV prevalence in 2007 indicate a prevalence of 16 per cent among the 15-49 years old population.

Mozambique is considered unlikely to meet the MDG target related to HIV and AIDS. The epidemic seems to have reached a plateau in the central region, while it continues to increase in the southern region and remains stable in the northern region. It is estimated that approximately 100,000 children under the age of 15 are living with HIV or AIDS and the disease is thought to be the underlying cause of 17 per cent of deaths among children under five. Social services are affected by increasing illness and vulnerability among both users and service providers. Mozambique has a shortage of trained personnel, and the situation is likely to be exacerbated by the loss of skilled staff to the epidemic.

