



THE WORLD BANK
IBRD • IDA | WORLD BANK GROUP

FOR OFFICIAL USE ONLY

Report No: PADHI00376

INTERNATIONAL DEVELOPMENT ASSOCIATION

PROJECT APPRAISAL DOCUMENT

ON A

PROPOSED GRANT

IN THE AMOUNT OF SDR 15.2 MILLION
(US\$20 MILLION EQUIVALENT)

TO THE

REPUBLIC OF MOZAMBIQUE

FOR A

CAPACITY BUILDING FOR IMPROVED GENDER-BASED VIOLENCE RESPONSE PROJECT

APRIL 9, 2024

Social Sustainability and Inclusion Global Practice
Eastern and Southern Africa Region

This document has a restricted distribution and may be used by recipients only in the performance of their official duties. Its contents may not otherwise be disclosed without World Bank authorization.

CURRENCY EQUIVALENTS

(Exchange Rate Effective March 31, 2024)

Currency Unit = New Mozambique
Metical (MZN)

MZN 63.86 = US\$1

US\$ 1 = SDR 0.76

FISCAL YEAR

January 1 - December 31

Regional Vice President: Victoria Kwakwa

Regional Director: Iain G. Shuker

Country Director: Zviripayi Idah Pswarayi Riddihough

Practice Manager: David Seth Warren

Task Team Leader: Hiska Noemi Reyes

ABBREVIATIONS AND ACRONYMS

CAI	<i>Centros de Atendimento Integrado</i> (Integrated Care Centers)
CPF	Country Partnership Framework
CSO	Civil Society Organization
DAF	Department of Administration and Finance
EAGER	East Africa Girls' Empowerment and Resilience Project
EDGE	Digital Governance and Economy Project
E&S	Environmental and Social Risks
FM	Financial Management
GBV	Gender-based Violence
GDP	Gross Domestic Product
GEMS	Geo-Enabling method for Monitoring and Supervision
GHG	Global Greenhouse Gas
GRM	Grievance Redress Mechanism
GRS	Grievance Redress Service
HCDP	Human Capital Development Project
HLO	High-Level Objective
IBRD	International Bank for Reconstruction and Development
IDA	International Development Association
IPAJ	<i>Instituto do Patrocinio e Assitencia Juridica</i> (Institutes for Legal Assistance and Representation)
IPF	Investment Project Financing
MEF	Ministry of Economy and Finance
MGCAS	<i>Ministério do Gênero, Criança e Ação Social</i> (Ministry of Gender, Children and Social Action)
MINT	<i>Ministério do Interior</i> (Ministry of Interior)
MISAU	<i>Ministério da Saúde</i> (Ministry of Health)
MJACR	<i>Ministério da Justiça, Assuntos Constitucionais e Religiosos</i> (Ministry of Justice, Constitutional and Religious Affairs)
M&E	Monitoring and Evaluation
NAP	National Adaptation Plan
NDC	Nationally Determined Contribution
PDO	Project Development Objective
PIM	Project Implementation Manual
PIU	Project Implementation Unit
PPSD	Project Procurement Strategy for Development
SEA/SH	Sexual Exploitation/Sexual Harassment
SMS	Short Messaging Service
SIMA	Information System for Monitoring and Evaluation
SISMA	Health Information System for Monitoring and Evaluation



TABLE OF CONTENTS

DATASHEET	i
I. STRATEGIC CONTEXT	1
A. Country Context	1
B. Sectoral and Institutional Context	1
C. Relevance to Higher Level Objectives	4
II. PROJECT DESCRIPTION	5
A. Project Development Objective	5
B. Project Components	6
C. Project Beneficiaries	9
D. Results Chain.....	10
E. Rationale for Bank Involvement and Role of Partners.....	11
F. Lessons Learned and Reflected in the Project Design.....	12
III. IMPLEMENTATION ARRANGEMENTS	13
A. Institutional and Implementation Arrangements.....	13
B. Results Monitoring and Evaluation Arrangements.....	13
C. Sustainability.....	14
IV. PROJECT APPRAISAL SUMMARY	14
A. Technical, Economic and Financial Analysis	14
B. Fiduciary	17
C. Legal Operational Policies	18
D. Environmental and Social	18
V. GRIEVANCE REDRESS SERVICES.....	18
VI. KEY RISKS	19
VII. RESULTS FRAMEWORK AND MONITORING	20
ANNEX 1: Implementation Arrangements and Support Plan.....	25



DATASHEET

BASIC INFORMATION

Project Beneficiary(ies) Mozambique	Operation Name Capacity Building for Improved Gender-based Violence Response Project		
Operation ID P502471	Financing Instrument Investment Project Financing (IPF)	Environmental and Social Risk Classification Low	

Financing & Implementation Modalities

<input type="checkbox"/> Multiphase Programmatic Approach (MPA)	<input type="checkbox"/> Contingent Emergency Response Component (CERC)
<input type="checkbox"/> Series of Projects (SOP)	<input checked="" type="checkbox"/> Fragile State(s)
<input type="checkbox"/> Performance-Based Conditions (PBCs)	<input type="checkbox"/> Small State(s)
<input type="checkbox"/> Financial Intermediaries (FI)	<input type="checkbox"/> Fragile within a non-fragile Country
<input type="checkbox"/> Project-Based Guarantee	<input checked="" type="checkbox"/> Conflict
<input type="checkbox"/> Deferred Drawdown	<input type="checkbox"/> Responding to Natural or Man-made Disaster
<input type="checkbox"/> Alternative Procurement Arrangements (APA)	<input type="checkbox"/> Hands-on Expanded Implementation Support (HEIS)

Expected Approval Date 30-Apr-2024	Expected Closing Date 31-May-2029
Bank/IFC Collaboration No	

Proposed Development Objective(s)

The Project Development Objective is to improve the capacity of GBV service providers, enhance the provision of integrated digital GBV services and increase use of services by GBV survivors.

Components

Component Name	Cost (US\$)
----------------	-------------



Component 1. Strengthening capacity of GBV service providers	6,500,000.00
Component 2. Integrated digital tools for better case management	5,500,000.00
Component 3. Improving coordination and information for better access to services	4,500,000.00
Component 4. Project management and evaluation	3,500,000.00

Organizations

Borrower:	Republic of Mozambique
Implementing Agency:	Ministry of Gender, Children and Social Action (Ministério do Género, Criança e Acção Social)

PROJECT FINANCING DATA (US\$, Millions)**Maximizing Finance for Development**

Is this an MFD-Enabling Project (MFD-EP)?	No
Is this project Private Capital Enabling (PCE)?	No

SUMMARY

Total Operation Cost	20.00
Total Financing	20.00
of which IBRD/IDA	20.00
Financing Gap	0.00

DETAILS**World Bank Group Financing**

International Development Association (IDA)	20.00
IDA Grant	20.00

IDA Resources (US\$, Millions)



	Credit Amount	Grant Amount	SML Amount	Guarantee Amount	Total Amount
National Performance-Based Allocations (PBA)	0.00	20.00	0.00	0.00	20.00
Total	0.00	20.00	0.00	0.00	20.00

Expected Disbursements (US\$, Millions)

WB Fiscal Year	2024	2025	2026	2027	2028	2029	2030
Annual	0.50	3.50	6.50	4.50	3.00	2.00	0.00
Cumulative	0.50	4.00	10.50	15.00	18.00	20.00	20.00

PRACTICE AREA(S)

Practice Area (Lead)

Social Sustainability and Inclusion

Contributing Practice Areas

Digital Development; Governance; Gender; Social Protection & Jobs

CLIMATE

Climate Change and Disaster Screening

Yes, it has been screened and the results are discussed in the Operation Document

SYSTEMATIC OPERATIONS RISK- RATING TOOL (SORT)

Risk Category

Rating

1. Political and Governance

● Substantial

2. Macroeconomic

● Moderate

3. Sector Strategies and Policies

● Moderate



4. Technical Design of Project or Program	● Moderate
5. Institutional Capacity for Implementation and Sustainability	● Moderate
6. Fiduciary	● Substantial
7. Environment and Social	● Low
8. Stakeholders	● Low
9. Overall	● Moderate

POLICY COMPLIANCE

Policy

Does the project depart from the CPF in content or in other significant respects?

Yes No

Does the project require any waivers of Bank policies?

Yes No

ENVIRONMENTAL AND SOCIAL

Environmental and Social Standards Relevance Given its Context at the Time of Appraisal

E & S Standards	Relevance
ESS 1: Assessment and Management of Environmental and Social Risks and Impacts	Relevant
ESS 10: Stakeholder Engagement and Information Disclosure	Relevant
ESS 2: Labor and Working Conditions	Relevant
ESS 3: Resource Efficiency and Pollution Prevention and Management	Relevant
ESS 4: Community Health and Safety	Relevant
ESS 5: Land Acquisition, Restrictions on Land Use and Involuntary Resettlement	Not Currently Relevant
ESS 6: Biodiversity Conservation and Sustainable Management of Living Natural Resources	Not Currently Relevant
ESS 7: Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities	Not Currently Relevant
ESS 8: Cultural Heritage	Not Currently Relevant
ESS 9: Financial Intermediaries	Not Currently Relevant



NOTE: For further information regarding the World Bank’s due diligence assessment of the Project’s potential environmental and social risks and impacts, please refer to the Project’s Appraisal Environmental and Social Review Summary (ESRS).

LEGAL

Legal Covenants

Sections and Description

FA, Schedule 2, Section I.A.(c): The Recipient shall not later than 120 days after the Effectiveness of the Project recruit the following key additional professionals to ensure smooth projects implementation: (i) one GBV Specialist/Deputy Project Coordinator; (ii) one Information Technology & Communications Specialist; (iii) one procurement assistant; and (iv) one finance management assistant.

FA, Schedule 2, Section I.A.2: The Recipient shall establish, not later than 45 after the Effective Date, and maintain, throughout the implementation of the Project, a multi-sector steering committee (“Project Steering Committee” or “PSC”), with a composition, mandate, and resources satisfactory to the Association and detailed in the PIM.

FA, Schedule 2, Section B.1: The Recipient shall not later than 45 days after the Effective Date, prepare and adopt, in form and substance acceptable to the Association, a project implementation manual (PIM) setting out inter alia all multi-level operational details setting out detailed guidelines, methods and procedures for the implementation of the Project, including: (i) the different roles and responsibilities in the implementation of the Project, including the various mechanisms for ensuring close coordination and collaboration between various Project stakeholders; (ii) budget and budgetary control; (iii) flow of funds, disbursement procedures and banking arrangements; (iv) financial, procurement and accounting procedures; (v) Personal Data collection and processing in accordance with applicable national law and good international practice; (vi) monitoring and evaluation arrangements; (vii) the Annual Work Plans and Budget for the first year of Project implementation; and (viii) such other arrangements and procedures as shall be required for the effective implementation of the Project.

Conditions

Type	Citation	Description	Financing Source
------	----------	-------------	------------------



I. STRATEGIC CONTEXT

A. Country Context

1. **Mozambique is a low-income coastal country of 33 million, with a young and rapidly growing population, where economic growth has translated into limited poverty reduction and job creation.** Between 2000-2015, real Gross Domestic Product (GDP) expanded 7.3 percent annually on average due to large-scale foreign investments in the extractive sectors, macro and political stability, and international support. Over the same period, the population living in extreme poverty (US\$2.15/day) declined from 80 percent to around 65 percent. Since 2016, Mozambique has faced successive internal and external shocks. The revelation of undisclosed sovereign debts in 2016 provoked an economic and financial crisis that more than halved the growth rate. Insurgency in the north, tropical cyclones in 2019 (the worst in recorded history) and the COVID-19 pandemic compounded the growth setbacks. Following COVID-19, Mozambique's poverty rate, one of the highest in the world, is expected to have increased. According to the Institute of National Statistics 2019/2020 Household Budget Survey, the national poverty rate increased 14.4 percentage points to 62.8 percent from 2015 to 2020.¹

2. **Climate change will continue to impact Mozambique.** According to the 2021 Global Climate Risk Index, Mozambique is among the ten countries most vulnerable to climate change globally. The country is especially vulnerable to floods, droughts, and cyclones.² In addition to devastating cyclones in 2019, the country faced nine severe droughts between 1998 and 2020 and significant devastation caused by Cyclone Gombe in March 2022 and Cyclone Freddie in March 2023. Research indicates that women and girls are up to 14 times more likely to be harmed during a disaster. For those who survive, climate-induced disasters can amplify gender inequalities, making them more vulnerable to gender-based violence (GBV), even when life for others may go back to normal.³ For instance, women are significantly impacted by climate shocks given the division of labor within households and greater engagement in the agriculture sector. Extreme weather events increase stress in communities, which can lead to more conservative patriarchal practices such as son preference, differential feeding, child marriage and intimate partner violence, as well as an increased risk of land-grabbing.⁴ In disasters such as flooding and wildfires, additional workloads may mean that women and girls are not able to be as responsive to domestic demands, increasing household tensions that result in violence. Furthermore, during times of resource scarcity, women are more likely to be coerced into sexual exploitation in exchange for goods or services and walk increasingly longer distances to find potable water and food, making them vulnerable to sexual assault. Similarly, when families are unable to meet basic needs, the risk of child marriage increases significantly.⁵

3. **Mozambique has seen progress with regards to gender equality, but women and girls still face many challenges.** Despite a high female labor force participation, women are predominately employed in the informal sector. Available data on GBV shows that: 37 percent of women and girls have experienced physical or sexual violence; 53 percent of women aged 20-24 were married before 18 and 17 percent before 15; and, one in every four children aged 15-19 experienced physical violence, with girls three times more likely to experience sexual violence than boys.⁶

B. Sectoral and Institutional Context

4. **GBV is an extreme denial of agency that has significant costs.** In addition to the direct physical and psychological harm to women, GBV is a drain on human capital development, poverty reduction, and growth. Conservative estimates suggest that up to 3.7 percent of GDP can be lost annually due to GBV – about the amount most developing countries

¹ World Bank. 2023. Mozambique Poverty Assessment: Poverty Reduction Setback in Times of Compounding Shocks. Washington, D.C.: World Bank Group

² World Bank. 2023. Mozambique - Country Climate and Development Report. Washington, D.C.: World Bank Group

³ Climate Change and Gender-based Violence: Interlinked Crises in East Africa. World Bank Group.

⁴ World Bank. 2023. Mozambique - Country Climate and Development Report. Washington, D.C.: World Bank Group

⁵ Climate Change and Gender-based Violence: Interlinked Crises in East Africa. World Bank Group.

⁶ World Bank. 2023. Mozambique Gender Assessment: Leveraging Women and Girls' Potential. Washington, D.C.: World Bank Group.



spend on primary education.⁷ There are also direct costs on the health care system; for example, women survivors of violence make much greater use of health services than non-abused women, even years after the violence has ended.⁸ GBV comes in many forms, and includes, inter alia, child marriage, intimate partner violence, sexual exploitation and abuse and sexual harassment, among others.

5. **By some estimates, Mozambique has the sixth highest rate of adolescent fertility and the tenth highest rate of child marriage in the world.**⁹ One in four women aged 18-49 has experienced physical or sexual violence at some point in their life, mainly perpetrated by an intimate partner.¹⁰ Exposure to violence starts at a young age for both men and women. A 2019 national survey on violence against children and youth found that among 18–24-year-olds, 32 percent of young women and 40 percent of young men had experienced at least one form of physical, sexual, or emotional violence in childhood.¹¹ Less than 50 percent of physical violence survivors seek help and only 25 percent of survivors of sexual violence do so.¹² When women do seek help, they turn to their family.¹³ GBV support services are generally uneven and poorly coordinated. Access in conflict affected areas, for example, is limited.¹⁴

6. **Mozambique has adopted policies and laws to address GBV.** This includes: the Law on Domestic Violence Perpetrated Against Women (2009) which defines domestic violence and introduces penalties for perpetrators; the Family Law (2019) which establishes 18 years old as the legal age of marriage; and the Law to Prevent and Combat Early Marriage (2019) which establishes procedures for the protection and care of children and introduces penalties for perpetrators and anyone who facilitates a child marriage. Recent legislation to address GBV are the result of engagements and commitments made in national strategies and action plans such as the National Strategy to End Child Marriage (2016–2019) and the National Plan to Prevent and Combat Gender-based Violence (2018–2021).

7. **Guiding principles for the provision of services for GBV survivors were defined in the Multisectoral Mechanism for Integrated Care of Women Victims of Violence (2012)¹⁵ and the Law on the Regulation on the Organization and Operation of Integrated Care Centers for Victims of Domestic and Gender-Based Violence (2020).** Four GBV essential services – medical, social, police and justice – were defined with the overall coordination of the mechanism placed under the leadership of the Ministry of Gender, Children and Social Action (*Ministério do Género, Criança e Acção Social*, MGCAS). In addition to MGCAS, the Ministry of Health (*Ministério da Saúde*, MISAU), Ministry of Justice, Constitutional and Religious Affairs (*Ministério da Justiça, Assuntos Constitucionais e Religiosos*, MJACR) and the Ministry of Interior (*Ministério do Interior*, MINT) are part of the multisectoral mechanism. The services to be provided by these agencies include: (i) the provision of health services and psychosocial support; (ii) protection for survivors and enforcement of laws to hold perpetrators accountable; (iii) legal support and counseling; and iv) referral to other services. These services are delivered at local health centers, specialized police offices, Institutes for Legal Assistance and Representation (*Instituto do Patrocínio e Assitencia Juridica*, IPAJ) and Integrated Care Centers (*Centros de Atendimento Integrado*, CAI).

⁷ World Bank. 2018. Fact Sheet: Update on Addressing Gender-Based Violence in Development Projects.

⁸ Amy E. Bonomi et al., “Health Care Utilization and Costs Associated with Physical and Nonphysical-Only Intimate Partner Violence,” *Health Services Research* 44, no. 3 (2009): 1052–67.

⁹ World Bank. 2023. Mozambique Gender Assessment: Leveraging Women and Girls' Potential. Washington, D.C.: World Bank Group.

¹⁰ Ministry of Health, National Statistics Institute, ICF International. 2018. “Mozambique Immunization, Malaria and HIV/AIDS Indicator Survey 2015 (IMASIDA), 2015.” Maputo, Mozambique: MISAU/ Mozambique, INE, and ICF.

¹¹ Ministry of Health (MISAU) et al., “Priority Indicator Report from the Mozambique Violence Against Children and Youth Survey,” 2019.

¹² World Bank. 2023. Mozambique Gender Assessment: Leveraging Women and Girls' Potential. Washington, D.C.: World Bank Group.

¹³ Ministry of Health, National Statistics Institute, ICF International. 2018. “Mozambique Immunization, Malaria and HIV/AIDS Indicator Survey 2015 (IMASIDA), 2015.” Maputo, Mozambique: MISAU/ Mozambique, INE, and ICF.

¹⁴ UNHCR, “A Rapid Assessment of the Gender-Based Violence (GBV) Situation and Response in Cabo Delgado, Mozambique,” ReliefWeb, accessed May 10, 2022.

¹⁵ Hereafter the Multisectoral Mechanism. The Multisectoral Mechanism for Integrated Care of Women Victims of Violence is a document approved by the Council of Ministers in 2012 that outlines the roles and responsibilities of four ministries, MISAU, MJACR, MINT, and MGCAS with regards to addressing GBV in Mozambique.



8. **Existing protocols guide the delivery of services.** The MINT has two protocols, one for child survivors of rape or sexual abuse, and the other for adult GBV survivors. The MISAU currently has three protocols providing guidance for the provision of support for child sexual abuse, domestic violence survivors, and adult sexual abuse survivors. The protocols used by MGCAS focus on social care and involve the provision of counselling services, assistance, rehabilitation (psychosocial support) and reintegration of survivors. The MJACR lacks guidelines and protocols, although the IPAJ is an entry point for GBV survivors seeking services. The role of civil society organizations (CSOs) is highlighted in the Multisectoral Mechanism, which calls for partnerships to be established between government and non-government actors for improved GBV service delivery. However, no set protocols to guide the provision of services by CSOs has been developed. Similarly, the protocols do not reflect the heightened risk of GBV due to climate-induced disasters. An assessment of the protocols and their implementation revealed a misalignment between the protocols and laws as they focus more on response rather than prevention of GBV, and there was a marked need for training of GBV care providers to ensure consistency and quality of support services.¹⁶

9. **Lack of coordination among different actors, including for case management and collection and utilization of data, limits the availability of reliable data and potentially access to GBV services.** GBV data collection is done by most actors in the Multisectoral Mechanism following a largely paper-based modality. The *Ficha Única* (single file) was designed as a centralized case management system that would allow cases to be transferred across sectors using a single number to identify each case, thereby avoiding duplication of data and revictimization of survivors, while managing sensitive information. However, the *Ficha Única* is currently only used in the CAIs by MGCAS, and contains limited information compared to the more detailed forms used by other sectors, which might lead to loss of relevant information as part of referrals. Moreover, not all CAIs are consistently reporting data on GBV cases or utilization of services by providers. In 2023, for example, the CAIs reported just 3,795 cases. In practice, each service provider that is part of the Multisectoral Mechanism continues to use its respective data registration tools – through largely paper-based processes – thereby resulting in incomplete and/or complex files.¹⁷ The service providers often record cases under one single form of violence, while survivors may have experienced multiple and concurrent forms of violence. GBV cases supported by the CSOs outside the CAIs that do not require health assistance and are not reported to police are not always registered as GBV cases by social workers and are therefore, not reflected in the data collection systems. This poses challenges for data collection and GBV case management as data on continuity of service provision is not available.

10. **The use of digital systems to collect and aid in case management and referrals varies by service provider.** Except for the health system whose digital information system covers most of the country, digital data collection and case management systems are not widely used (the digital *Ficha Única*, for example, was piloted in only three CAIs and was not continued after the pilot period). At the central level there is no integrated data management system, instead each sector relies on different digital platforms that do not interact with each other: MGCAS utilizes SIMA (Information System for Monitoring and Evaluation), MISAU uses SISMA (Health Information System for Monitoring and Evaluation), and MINT utilizes *InfoViolencia*, while the MJACR currently lacks a digital system for the collection and management of GBV data. This fragmentation hinders efficient coordination and efforts to address GBV comprehensively across sectors as it causes duplication of efforts and limits effective analysis and utilization of data. A comprehensive analysis and understanding of the actual needs across the various levels of data collection and management is critical for a broader approach to GBV data management in the country.

11. **Care for GBV survivors should also consider their social and economic integration.** However, GBV support programs for survivors in Mozambique focus more on the provision of immediate services with limited assistance to resources such as shelters and economic assistance through social protection programs that can facilitate the

¹⁶ Jethá E, Keygnaert I, Martins E, Sidat M, Roelens K. Domestic violence in Mozambique: from policy to practice. BMC Public Health. 2021 Apr 22;21(1):772.

¹⁷ UNFPA. 2023. Assessment on the Functioning and Sustainability of the Integrated Care Center for GBV Survivors in Mozambique.



reintegration of a survivor. Mozambique has a low number of shelters, resulting in many survivors having to return to abusive situations and potentially facing stigmatization in their communities. The CAIs are supposed to function as transit centers, providing short-term emergency shelter for GBV survivors. However, there are only 26 CAIs currently operating in the country and an additional 25 are due to begin delivering services in 2024 and 2025. Service provision in the CAI is limited due to a lack of awareness of the general population and GBV survivors of where these are located and what services they offer as well as by perceived stigmatization of survivors; both result in a low number of cases at the CAIs (around 20 per month). CSOs run five specialized shelters for GBV survivors with technical support from MGCAS, and training and funding from private donors and international organizations.¹⁸ When available, GBV survivors are accommodated in non-specialized shelters or other accommodations run by MGCAS (i.e., orphanages, hospices), which have very poor conditions and lack specialized staff. Most girls at risk or survivors of early unions are placed with extended family and later reintegrated with their immediate families. For example, all 196 children rescued from early marriages during the first semester of 2021 were reintegrated with their families.¹⁹ The reintegration process requires the participation of a wider group actors beyond CSOs and government; community engagement is particularly needed given the role these play.

12. **Civil society actors in Mozambique play a key role in GBV prevention and response as well as an advocacy role in promoting landmark laws and reforms.** CSOs at the local level often fill critical gaps in the GBV service provision and support institutional capacity by strengthening service provider capacities and skills. However, CSOs face several challenges in terms of financial resources and management capacities which affect the sustainability and continuity of interventions. Improving the provision of services for survivors will require better capacity of CSOs as well as better engagement of CSOs as part of the multisectoral mechanism.

C. Relevance to Higher Level Objectives

13. **The project is consistent with the World Bank Group’s Country Partnership Framework (CPF) for Mozambique for FY2023-27 (Report no. 176672), discussed by the Board on February 23, 2023.** The CPF emphasizes the importance of integrating gender across the World Bank’s engagements to achieve impact and recognizes that GBV and Sexual Exploitation/Sexual Harassment (SEA/SH) are significant risks in the country and the portfolio. The project will directly support High-Level Objective 1 (HLO) on *more inclusive institutions* and Objective 3 of that HLO that focuses on strengthened crises and disaster preparedness and response. The project will also directly support HLO3 on *improved human capital and women’s empowerment*, in particular Objectives 8 and 9, as the focus on improving capacity of GBV service providers, coordination and data collection will result in better quality in the delivery and access to GBV services. Additionally, the targeted capacity building of civil society organizations will strengthen the systemic identification, prevention, and mitigation of SEA/SH across Mozambique.

14. **The project is aligned with the World Bank’s Evolution priorities, its mission to end extreme poverty and boost shared prosperity on a livable planet as well as global and regional gender strategies.** The new World Bank vision and mission recognizes the need to enhance work on inclusion, especially on women’s economic empowerment and addressing GBV. Improvements in the quality of GBV services and utilization of said services by GBV survivors will contribute to greater gender equality. The project is also aligned with the World Bank Group Gender Strategy (2024-2030)²⁰ which include addressing impacts and lowering rates of GBV as a priority area, and the Eastern and Southern Africa Regional Gender Action Plan (2024-2028).²¹

¹⁸ UNICEF. February 2022. Study on Shelters for Women and Girls Survivors of Violence in Mozambique.

¹⁹ Ibid.

²⁰ World Bank. World Bank Gender Strategy 2024 - 2030: Accelerate Gender Equality for a Sustainable, Resilient, and Inclusive Future - Consultation Draft. Washington, D.C.: World Bank Group.

²¹ Regional Gender Action Plan for Eastern and Southern Africa (AFE) - FY24-28 (English). Washington, D.C.: World Bank



15. **The Project is aligned with Mozambique’s Nationally Determined Contribution (NDC, updated in 2021),²² National Adaptation Plan (NAP)²³ and other climate policies.** The project activities are not expected to hinder the implementation of the NDCs. The project is consistent with climate strategies (particularly the NDC and NAP) submitted by Phase I countries (Mozambique and Madagascar). Although Mozambique’s contribution to global greenhouse gas (GHG) emissions is minimal, at 0.21 percent, the NDC reaffirms Mozambique’s commitment to reduce GHG by about 40 million tCO₂eq (2020-2025) compared to business-as-usual. The NDC includes a section on adaptation and resilience measures in response to climate change. It includes strategic actions and respective measures that implemented will build climate resilience in communities and natural and built capital in the country.²⁴ The country has benefitted from the World Bank and NDC Partnership initiative through which it intended to support the Government to prioritize the operationalization of Mozambique’s NDC targets in key sectors, including early warning system and aligning them with government policies and priorities. Mozambique is also in a process of defining budget lines that aim to ensure that at least a small portion of the adaptation and mitigation actions and programs foreseen in the NDC are captured and already included in the state budget. The project is aligned with the NAP 2023 which includes objectives to implement adaptation actions for greater resilience of the most vulnerable more specifically reinforcing the capacity to prepare and respond to climate risks and disasters. Mozambique has also prepared a National Strategy for Adaptation and Mitigation of Climate Change for the period 2013-2025 which sets out its strategic objective for Mozambique to become resilient to the impacts of climate change, reducing to a minimum the climate risks to people and property, restoring and ensuring the rational use and the protection of the natural and physical capitals.²⁵ Finally, the project is aligned with the World Bank Climate Change Action Plan 2021-2025²⁶ and the Action Plan on Climate Change Adaptation and Resilience.²⁷

II. PROJECT DESCRIPTION

A. Project Development Objective

16. The Project Development Objective (PDO) is to improve the capacity of GBV service providers, enhance the provision of integrated digital GBV services and increase use of services by GBV survivors.

17. Achievement of the PDO will be measured by the following outcome indicators:

(a) Improve capacity of GBV service providers

- Percentage of GBV service providers that use survivor-centered approaches and apply national laws and good practices as part of GBV service provision.

(b) Enhance the provision of integrated digital GBV services.

- Number of CAI utilizing digital tools to streamline case management and data collection.

(c) Increase use of services by GBV survivors.

- Number of GBV survivors seeking care (% of which women and girls).

²² Government of Mozambique. 2021. Updated First Nationally Determined Contribution of Mozambique. Climate Change Directorate. Ministry of Land and Environment.

²³ Government of Mozambique. 2023. National Adaptation Plan. Ministry of Land and Environment.

²⁴ Government of Mozambique. 2021. Updated First Nationally Determined Contribution of Mozambique. Climate Change Directorate. Ministry of Land and Environment.

²⁵ Government of Mozambique. 2012. National Climate Change Strategy.

²⁶ World Bank Group. 2021. World Bank Group Climate Change Action Plan 2021–2025: Supporting Green, Resilient, and Inclusive Development. World Bank, Washington, DC.

²⁷ The World Bank Group's Action Plan on Climate Change Adaptation and Resilience: Managing Risks for a More Resilient Future. Washington, D.C.: World Bank Group.



B. Project Components

18. **Given the challenging context for women and girls in Mozambique, the high prevalence of GBV and dispersed nature of GBV mitigation, prevention and response interventions, there is a need to strengthen survivor-centered accountability mechanisms as well as address bottlenecks that impede women and girls from accessing much needed services.** By focusing on institutional strengthening and capacity building of government and CSO service providers, the project will complement other operational engagements across the portfolio in Mozambique that seek to expand the provision of services for survivors, improve the capacity of civil servants and strengthen GBV prevention efforts such as those promoting behavioral and attitudinal changes.

19. **The project will contribute to greater harmonization of data collection, management, and information about GBV services.** Having reliable data of essential services is key to improve the capacity of the system to respond to GBV and inform national policies and strategies. Ensuring that information on services is available to GBV survivors will be an important project activity that will be done both through digital engagements as well as through wide reaching and community-level awareness raising activities.

Component 1: Strengthening capacity of GBV service providers (US\$6.5 million equivalent)

20. This component aims to improve the capacity of government and CSOs to deliver GBV services. Component activities will focus specifically on strengthening national protocols and guidelines that govern the delivery of integrated services as well as capacity building of key actors at various levels. The training package supported under this component will be included as part of the mandatory training program for all government personnel delivering services to GBV survivors.

Sub-component 1.1. Harmonization and strengthening of GBV protocols (US\$0.7 million equivalent)

21. The provision of support services for survivors of GBV is guided by protocols developed after the launch of the Multisectoral Mechanism in 2012. The protocols will be updated to: (i) ensure consistency with national laws and international good practice (reflect more of a survivor-centered approach); (ii) integrate the justice sector; (iii) include a focus on prevention, especially given the increased risk of GBV during and following slow- and rapid-onset impacts of climate change; (iv) effectively address different forms of violence and child abuse, including by integrating the mitigation of sexual exploitation and abuse/sexual harassment; (v) set minimum standards for planning and implementation of specialized services to prevent and respond to GBV/SEA/SH during natural disasters and climate-induced emergency situations;²⁸ and, (vi) set standards to guide service delivery by CSOs. Preparation of the updated protocols will follow a participatory approach engaging CSOs, donors, representatives from the four ministries engaged in the Multisectoral Mechanism and other stakeholders at the local level.

Sub-component 1.2. Training of GBV service providers (US\$5.8 million equivalent)

22. The component will support the preparation and implementation of a training package for GBV focal points at the national, provincial and district levels; service providers from the Multisectoral Mechanism working in the CAI; and a select number of CSOs.²⁹ The preparation of the training program will be guided by an assessment and revision of existing training curricula and materials on GBV, gender and human rights currently used by the members of the Multisectoral Mechanism

²⁸ Integrating climate induced disaster scenarios as part of the updated protocols will highlight how service provision during emergencies brought about by natural disasters are an integral part of GBV planning. This input in the protocols will be used to prepare a separate training module on GBV, provision of services and climate-induced disasters under Sub-component 1.2.

²⁹ Training will be provided to all 704 GBV focal points at the national, provincial and district levels; 612 CAI professionals, all CAI professionals and accounting for movement of professionals in/out of the CAI; and 880 CSO members from 220 organizations.



or developed by development partners.³⁰ The training package will support training on: (i) soft skills (social norms and unconscious bias of service providers); (ii) technical skills (protocols for survivor-centered care and referrals, SEA/SH mitigation, relevant laws and policies, and data collection and utilization); and, (iii) climate change and standards for planning and implementation of specialized services to prevent and respond to GBV/SEA/SH during natural disasters and climate-induced emergency situations. The inclusion of soft skills will address the problem of stigmatization and revictimization that many survivors face when seeking care. Mapping of formal and informal service providers conducted by the World Bank and the Government will be used to identify the CSOs and GBV focal points to be trained. The selection of CSOs to be trained will take into consideration the need of services by vulnerable populations such as women living with disabilities and people who identify with a different sexual orientation or gender identity. The training will utilize existing training structures and be delivered utilizing a training-of-trainers approach to support continuation of said training outside of the project. An online training platform will also be developed, that will feature a resource library containing manuals, toolkits, and training materials on various aspects of GBV prevention, survivor support, legal frameworks, among others. The project will engage early and frequently with the Ministry of State Administration and Public Service to support the integration of the training package as part of the mandatory trainings offered to civil servants.

Component 2: Integrated digital tools for better case management (US\$5.5 million equivalent)

23. This component will focus on the development and roll out of an integrated and digitalized GBV service in the CAIs and the development of localized referral pathways. This will include improving and standardizing processes and integrating systems for enhanced GBV case management. Improved GBV data management will contribute to greater efficiency and foster a better understanding of GBV prevalence across the country and could inform the allocation of budgets for GBV prevention and response, including as GBV risk contexts evolve, for example with the projected increase in climate change impacts.

Sub-component 2.1. Integrated digital GBV services (US\$5.2 million equivalent)

24. This sub-component will support: (i) a user journey mapping, which will detail the steps and processes through which GBV survivors access public services and how the back-end systems work together to create the user experience across this journey, and capture critical touchpoints for stigmatization and revictimization in the survivor “journey” and potential privacy risks associated with the data collection and processing activities; (ii) a comprehensive assessment of GBV systems’ functionalities, technology, architecture, infrastructure, governance and data mapping to inform the development of data standards and solutions to promote interoperability of systems; (iii) the development of harmonized and streamlined GBV data collection processes, including an upgraded integrated entry and referral form (*Ficha Única*); (iv) procedures for data protection and privacy to ensure data minimization, informed feedback, anonymization and pseudonymization where possible to reduce the risk of re-identification, secure data storage and transmission (including cloud storage platforms with access controls and audit trails), and relevant procedures for data retention and disposal to prevent unauthorized access or disclosure; (v) the digitalization of 51 CAIs³¹ through the provision of connectivity, equipment, and materials (thus contributing to a reduction in GHG emissions from previous paper-based processes) and engaging youth champions through internships to support data entry; (vi) the digitalization of GBV-related paper-based archives in supported CAIs; (vii) training on data collection tools, protocols and systems for both government (CAI staff and GBV focal points) and CSOs to ensure that all actors handling sensitive data understand their responsibilities and know how to handle data securely and ethically; and (viii) training on data-based decision-making, for example to evaluate GBV trends linked to climate shocks prior to and post, by including information on climate change related vulnerabilities into

³⁰ This includes CSO training packages developed as part of SEA/SH mitigation activities in operations financed by the World Bank in Mozambique.

³¹ This will include the 26 CAIs that are operating and 25 new CAIs that will start providing services in 2024. List of CAIs per location in annex 1.



GBV data collection, and accordingly adapting digital GBV services to these trends to reduce the risk of increased GBV associated with climate shocks.

Sub-component 2.2. Strengthening referrals (US\$0.3 million equivalent)

25. Localized referral pathways for the 11 provinces that include formal and informal service providers (including CSOs trained under component 1) will be prepared and disseminated. Referral pathways will be digitized to improve coordination, communication, and access to services. With digital mapping and geolocation tools' service providers from government and CSOs will be able to make informed decisions on referral options based on proximity, availability, and accessibility to improve GBV services delivery to survivors, including during climate-induced disasters and emergencies. A tracking and monitoring system will also be put in the CAIs to track the status of referrals and monitoring of cases will be supported through the provision of resources to cover the transport and communications costs. Under this subcomponent a feasibility study on the development of a nationwide helpline for GBV survivors will also be undertaken.

Component 3: Improving coordination and information for better access to services (US\$4.5 million equivalent)

26. This component will focus on improving coordination and awareness raising at the community level. Component activities will enhance sustainability of efforts supported under the previous components as well as provide necessary inputs for the preparation of future GBV programs.

Sub-component 3.1. Improving coordination (US\$1.9 million equivalent)

27. This sub-component will support analytical work to improve ongoing GBV engagements as well as inform future programs. An evaluation of the multi-sectoral mechanism will be supported. The evaluation will assess progress since the adoption of the Multisectoral Mechanism in 2012 and will include: (i) an assessment of the allocation and utilization of GBV program budgets; (ii) an assessment of coordination and support modalities at the national and local levels; (iii) an evaluation of reintegration efforts and identification of opportunities to improve the provision of shelters, including emergency shelters at the CAI; and, (iv) an infrastructure assessment of the CAIs with a view of accessing services, needs and degree of resilience to natural disasters.³² The assessment will be aided by user engagement/satisfaction surveys that will identify how users of such services assess their quality and what challenges they encounter when accessing such services. As a result of the evaluation, the national guidelines for the functioning of the Multisectoral Mechanism will be updated. The preparation of the evaluation will be aided by workshops and consultations with CSOs and other partners. This subcomponent will also support the operationalization and revitalization of the Multisectoral Mechanism at district level under the coordination of the social district services that will guide the coordination and peer support between the sectors at the local level and enhance integrated support to survivors. Peer support will include virtual exchanges, including the establishment of WhatsApp groups and other social media engagement platforms. A monitoring and referral mobile application³³ will be piloted in five provinces to identify the most efficient and adequate approach to track cases referred and/or supported by service providers outside of the CAI. The mobile application will provide information and resources to service providers from government and selected CSOs, with features such as safety planning tools, emergency contact lists and reporting mechanisms, and geolocation-based referrals developed under Subcomponent 2.2. WhatsApp groups and the piloting of mobile application will be used in case of climate-induced disasters to monitor and mobilize the delivery of services to GBV survivors.

³² Since the CAI provide emergency shelters, understanding their infrastructure needs will help in improving their resilience to natural disasters.

³³ The development of the app will build on existing similar apps, such as Fight Violence Against Woman, developed in Nepal.



Sub-component 3.2. Increasing awareness of GBV services (US\$2.6 million equivalent)

28. Under this subcomponent awareness raising campaigns and initiatives to engage and inform communities about GBV and services available will be supported. These initiatives will be implemented utilizing a variety of methods including community dialogues, posters, and community radio, at the province and district levels as well as innovative and digital outreach strategies (mass media campaigns, mobile applications, edutainment, among others). The sub-component will leverage the Short Messaging Service (SMS) platform (under development through Digital Governance and Economy Project),³⁴ to proactively send bulk SMS containing key messages to raise awareness regarding GBV and information on how to seek help to the population. The in-person and digital awareness raising, and communication activities will also include information about how climate shocks tend to increase the prevalence of GBV and prepare the communities and the service providers for such shocks (e.g., mobilizing more resources and being more vigilant during such times).

Component 4: Project management and evaluation (US\$3.5 million equivalent)

29. Under this component, the project will support project coordination and reporting, financial management, procurement management, implementation of the project's environmental and social risk (E&S) commitments as described in the environmental and social commitment plan, monitoring using open-source tools, communication, and citizen engagement activities. An impact assessment to review the impact of the project's activities on utilization of services will be supported under this component; this assessment will also support a more accurate assessment of the costs of GBV service provision and evaluate potential spillovers of the training.³⁵ The Project Implementation Unit (PIU) that will be established for the East Africa Girls' Empowerment and Resilience Project (EAGER, P179293) will serve as the PIU for this operation and will be expanded with the addition of key personnel to avoid delays in project implementation (see Annex 1). Capacity building of MGCAS will be an integral part of project activities. In addition to improving financial management, procurement and monitoring capacity, the project will support transfer of capacity from the PIU to MGCAS staff through job shadowing and other capacity building means. Funding for joint supervision with other actors in the multi-sectoral mechanism will be provided. Efforts will be made to ensure that project implementation is done in coordination with other World Bank-financed projects implementing GBV prevention and response activities, this can include the organization of joint workshops and exchanges. A sustainability plan will also be developed to support MGCAS' ability to continue with the programmatic enhancements and engagements supported by the project.

C. Project Beneficiaries

30. Project activities will be implemented at the national level, with digital development activities covering the districts where the 51 CAIs are operating (Annex 1). Direct project beneficiaries include 2,196 GBV service providers, including GBV focal points that are part of the Multisectoral Mechanism providing services at the national, provincial and district levels and civil society members representing 220 civil society organizations. By focusing on improving the capacity of the GBV focal points and CAI professionals, the project can reach all the Multisectoral Mechanism members that oversee the overall delivery of services across the Multisectoral Mechanism and the CAIs. The capacity building of GBV service providers and CSOs, digital enhancements, greater coordination and awareness raising on the availability and location of services, is expected to contribute to an increase in health seeking behavior by GBV survivors in the CAIs. Given the available data on access to services in the CAI, a conservative estimate is that 13,056 GBV survivors are expected to seek services in the CAI over the project duration (a 20 percent yearly increase during the first half of project

³⁴ Digital Governance and Economy Project (EDGE, P172350). <https://projects.worldbank.org/en/projects-operations/project-detail/P172350>

³⁵ This includes the extent that CSO members trained under the project used their training to train others in their organization as well as the extent that CAI professionals that were trained continued using their training and trained others after leaving the CAI.



implementation from the baseline and a 30 percent yearly increase during the second half of project implementation).³⁶ Awareness raising and information sharing activities are expected to reach 10 million people (close to 30 percent of the total population).

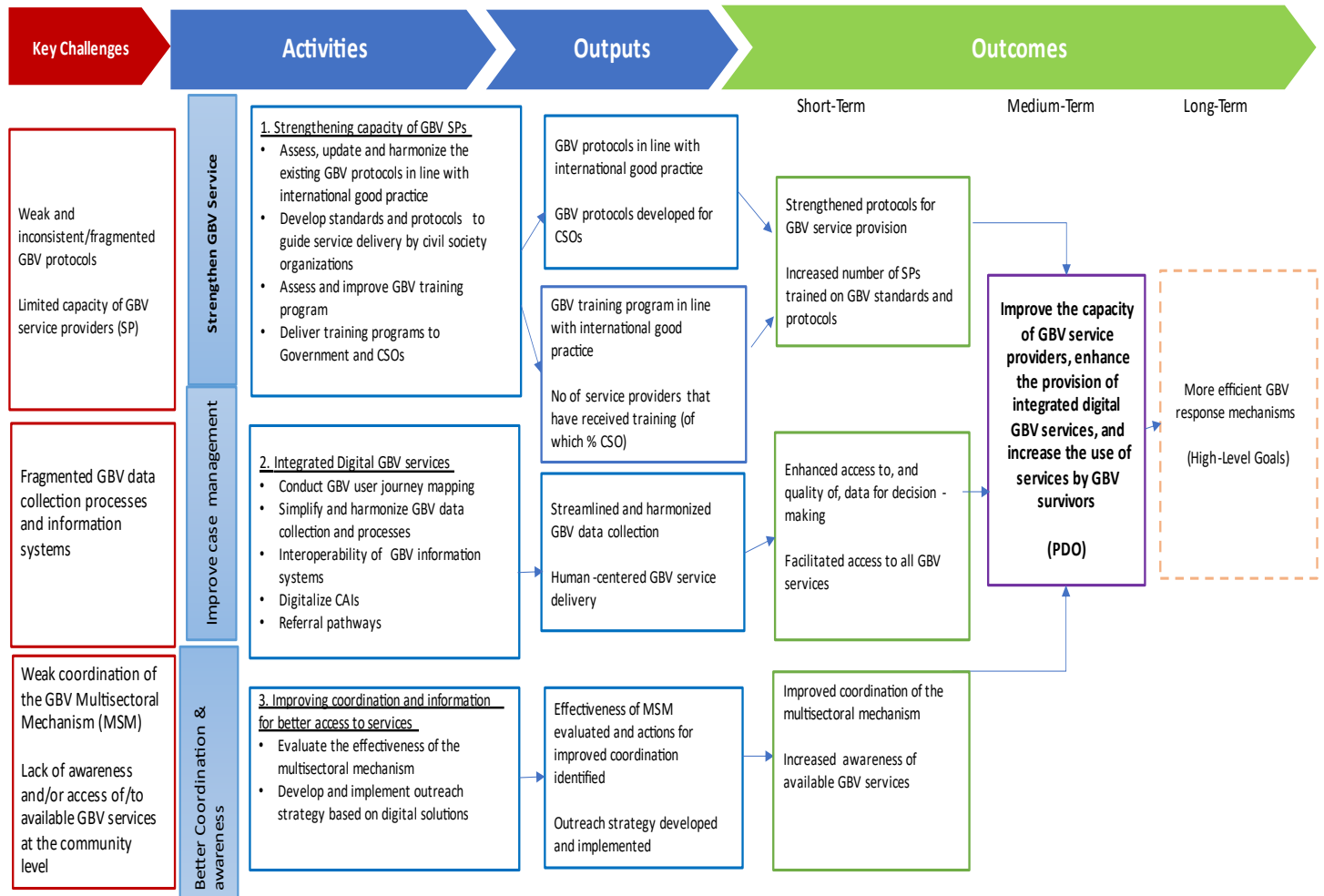
D. Results Chain

31. The project has been structured into three strategic priorities, namely: (i) strengthening of GBV service provision; (ii) improving case management; and (iii) improving GBV coordination and awareness. The first priority aims to improve the capacity of government and CSOs to deliver GBV services. These activities will focus specifically on strengthening national protocols and guidelines that govern the delivery of integrated services as well as capacity building of key actors at various levels. The second priority will focus on improving and standardizing data collection, management and monitoring of GBV cases over time (service delivered, referrals, status of processes, etc.). Activities will aim to enhance efficiency, quality, accuracy and security of current data collection and management systems. The third priority will focus on improving coordination and awareness raising at the national and community levels. The project theory of change is presented in figure 1.

³⁶ These estimates are based on available data on services provision in CAIs that are in operation and will be updated as additional CAI begin to deliver services.



Figure 1: Project Theory of Change



Assumptions: A. Increased awareness of services available will increase use. B. There is political will to integrate digital services.

E. Rationale for Bank Involvement and Role of Partners

32. The World Bank's value-added is its global knowledge and expertise in the design and implementation of GBV and SEA/SH programs. Operational engagements and research supported by the World Bank have contributed to the knowledge base of what works to prevent and respond to GBV. In Mozambique, the World Bank's engagement on GBV encompasses a broad range of sectors and supports partnerships with a broad set of actors, including civil society.

33. SEA/SH risk mitigation is one of the main areas of social risk management in the Mozambique portfolio and serves as a core entry point for broader GBV prevention and response programming. The Mozambique portfolio is a complex one, with several high-risk projects ongoing in the conflict-affected areas in the northern part of the country as well as several projects with elevated SEA/SH risk in the transport and energy sectors. As part of client engagement under the Environmental and Social Framework, the World Bank has invested significant resources across the Mozambique portfolio to improve client understanding of SEA/SH risk mitigation and survivor-centered incident response as well as to



ensure projects were developing and putting into place adequate measures to address SEA/SH risks, in particular, effective grievance redress mechanisms and survivor response protocols as well as adequate staffing and technical support for clients to manage SEA/SH risks. As part of this overall country portfolio of SEA/SH work, the World Bank is also working to streamline SEA/SH risk mitigation support and implement portfolio or sector-level approaches to address SEA/SH risks. The World Bank is currently working with clients in these areas to transfer the expertise and knowledge of technical assistance partners supporting projects on GBV to local and community structures on the ground in the interests of sustainability and ensuring that GBV services and support remain accessible even after project closure. Having a pool of local partners equipped to provide project support on SEA/SH risk management will also help maximize use of limited project resources and streamline SEA/SH support across projects in a region or sector. This project will be key to supporting this wider goal of sustainability and strengthening of local structures to provide SEA/SH risk management support, as part of wider GBV prevention and response, in the long term.

34. **GBV prevention and response in Mozambique has garnered significant support from development partners over the past decade.** An initial review and consultations with these partners have informed both the project design and its geographic focus. The project aims to capitalize on synergies and foster strong coordination with existing programs. Specifically, this involves aligning efforts to enhance the capacity of service providers, improve data collection and management systems, and bolster case management processes. By collaborating with these partners, the project will leverage existing training and capacity building resources (materials and manuals) and experiences, particularly those of the European Union-United Nations supported Spotlight Initiative linked to the “Essential Services Package for Women and Girls Subject to Violence”³⁷ which aims to strengthen capacities for the multi-sectoral integrated assistance for survivors of GBV, including the improvement of the coordination mechanisms at local level. In the area of digitalization efforts, data collection and case management, the project will promote coordinated actions with existing interventions supported by the United Nations Population Fund (UNFPA) and the United Nations Children’s Fund (UNICEF) that seek to strengthen administrative data collection systems through the expansion of the *InfoViolencia* digital system and digitalization of the CAIs, while supporting the overall improvement and efficiency of the national data information system in Mozambique. Drawing from these collaborations, the project will tap into a broader network of expertise and support, enabling a more holistic and sustainable approach while contributing to good practices and avoiding duplication of efforts.

F. Lessons Learned and Reflected in the Project Design

35. **Global literature and evidence reveal that survivors seek help primarily from their family or community and GBV service provision requires the availability of multiple services, including those providing immediate emergency support and longer-term psychosocial care and reintegration.** The evidence also reveals the need for enhanced collaboration between the sectors that are delivering services and service providers; this includes CSOs and local delivery mechanisms. The project will strengthen the multisectoral mechanism as well as improve the linkages between civil society and government actors. Technology and digital systems are increasingly being used to improve GBV service provision. Digital solutions will be supported under the project to improve case management as well as the survivor help seeking experience, increase capacity of service providers, promote peer learning and link survivors to services. The World Bank is also promoting the use technology to help the government stay abreast with what is happening on the ground, such as the use of Geo-Enabling method for Monitoring and Supervision (GEMS) for remote supervision and real-time E&S risk management, and project activities are aligned with this approach.

36. **SEA/SH mitigation measures across the World Bank highlight the need for GBV service providers with robust capacity to implement survivor-centered care.** The project will address gaps in capacity of GBV service providers and contribute to the development of a network of CSOs and local GBV focal points that can be engaged in social risk

³⁷ United Nations. 2015. Essential Services Package for Women and Girls Subject to Violence.



management. The assessments and feasibility studies supported by the project will help in the identification of areas for further improvement in future GBV programs.

III. IMPLEMENTATION ARRANGEMENTS

A. Institutional and Implementation Arrangements

37. **MGCAS has been identified as the lead Implementing Agency, with the Ministry of Economy and Finance (MEF) having a key coordination role.** MGCAS has the mandate of coordinating GBV interventions in the country including coordinating services provided in the CAI and the Multisectoral Mechanism. In addition to this, MGCAS is one of the implementing partners of the East Africa EAGER and is responsible for leadership in the implementation of the GBV-specific activities under that project. As such, this will allow for greater synergies between the two projects. The PIU that will be established in the Ministry to implement EAGER will also serve as the Project PIU. The PIU will be strengthened with the recruitment of key additional professionals to ensure smooth project implementation: one GBV Specialist/Deputy Project Coordinator, one Information Technology & Communications Specialist, one procurement assistant, and one finance management assistant. Additionally, each PIU specialist will be paired with one MGCAS technician from their respective area to ensure collaborative efforts with government structures and facilitate the transfer of capacity. Annex 1 summarizes the PIU set up covering both operations. The project will collaborate closely with the other actors engaged in the Multisectoral Mechanism for the development and updating of GBV protocols and guidelines, training of GBV service providers, digital engagements and awareness raising activities as these activities will benefit all the members of the Multisectoral Mechanism. A multi-sectoral Steering Committee will provide high-level project oversight and guidance and ensure inter-ministerial cooperation and resolution of issues. The Steering Committee will meet on a quarterly basis and will include representatives from MEF, MGCAS, MISAU, MINT and MJACR. Other agencies such as the Ministry of State Administration and Public Service will be invited to steering committee meetings as needed.

B. Results Monitoring and Evaluation Arrangements

38. **The PIU will be responsible for overall project monitoring and evaluation (M&E).** Implementation of project activities will be documented in progress reports prepared by the PIU and submitted to the World Bank on a quarterly basis. In addition to reporting on PDO and intermediate outcome indicators, quarterly project progress reports will include information on disbursements, implementation of the annual workplan and budget, financial management, procurement, and E&S risk management. Monitoring and evaluation will have a centralized M&E system that will utilize data from engagement surveys, aggregated data on service provision in the CAIs and quantitative data collection tools.

39. **For real-time data collection and analysis, the project will implement the GEMS.**³⁸ The use of GEMS enables project teams to use open-source tools for in-field collection of structured digital data that automatically feeds into a centralized M&E system and management information system. The integrated data can include any kind of indicators, based on tailor-made forms; photos, audio, videos; time and date stamps; and Global Positioning System (GPS) coordinates that allow for automated geo-mapping of the information. Using these tools systematically will improve project transparency and accuracy, as well as M&E throughout the project cycle.

40. **To sustainably implement the GEMS, capacity-building sessions will be delivered for representatives from the PIU and World Bank Task Team.** The training sessions will have two major objectives: (i) establish a digital data platform that allows for real-time supervision and coordination of components, including through an interactive map of individual

³⁸ GEMS includes digital data collection tools and methods used by over 1,000 World Bank projects. The system and tools will be adapted for the project.



activities; and (ii) build M&E capacity among PIU to use the GEMS flexibly and sustainably, customized to specific data needs throughout the project cycle. This continuous support and training session cover everything needed for the project team to run the system independently, including: (i) data platform creation and administration; (ii) digital questionnaire design and deployment; (iii) in-field project data collection; (iv) geo-mapping and analysis of collected data within the application; (v) data export, spatial/Excel analysis; and (vi) creation of a customized data architecture.

C. Sustainability

41. **Sustainability is a cornerstone of the project.** The project activities have been designed with a focus on leveraging and strengthening the existing national GBV prevention and response mechanism. This GBV mechanism is operationalized through the Multisectoral Mechanism composed by the four essential services (social, health, police and justice) in coordination with relevant local actors and CSOs. The project's approach ensures sustainability by leveraging resources, knowledge and structures that are already part of the Multisectoral Mechanism at the national and provincial levels. By enhancing capacities and institutionalization of capacity building and digital enhancements, the project contributes to efficiency gains and national and local GBV response systems being more self-reliant and less dependent on external support. In addition, engaging local actors will foster ownership and commitment within targeted communities, as well as ensure that project activities are appropriate to local contexts and aligned with local needs and priorities. The planned evaluation and updating of the Multisectoral Mechanism will help identify areas for improvement and enhance collaboration; this evaluation also responds to a request from MGCAS to enable it to strengthen its mandate. Furthermore, the project will leverage other World Bank supported projects that are supporting capacity building of relevant government institutions, and will, therefore, complement areas and actors that are not yet receiving such support. This allows for a sustained support to various actors in the Multisectoral Mechanism and civil society that will have longer-term impact.

IV. PROJECT APPRAISAL SUMMARY

A. Technical, Economic and Financial Analysis

42. **Addressing GBV is a long-term goal.** The proposed program is framed around the assumption that effective GBV response mechanisms require actors with sufficient capacity to provide services, adequate data management systems that promote coordination and provision of quality services to GBV survivors. While the project will mainly focus on capacity and data aspects, it recognizes that there are gaps in service provision that cannot be addressed given the project scope and available budget. Nevertheless, the project will support the preparation of assessments that will guide future programs.

43. **Leveraging ongoing engagements to mitigate GBV, specifically SEA/SH, across the Mozambique portfolio will be an important aspect of the project.** The protocols updated by the project will form the basis for the SEA/SH specific training modules that will be prepared and integrated in the overall Environmental and Social Risk Management curriculum and training of civil servants and professionals supported under the Mozambique Institutional Capacity Building Project (MozCapacidades, P179942) that is under preparation and expected to be approved in February 2025. By strengthening the capacity of CSOs and government counterparts, the project will contribute to the development of a model that ensures that adequate capacity to manage SEA/SH risks is available across the country.

44. **The project will complement ongoing GBV prevention and response engagements across the portfolio.** This includes the EAGER Project (P179293), which supports improvements in the quality and accessibility of GBV survivor care (including through supporting improvements in service provision in the CAIs), and the Investing in Inclusive Human Capital Development in Northern Mozambique Project (HCDP, P175298) which use a multisectoral approach bringing health,



education, and social protection to improve holistic survivor care in the northern region and conflict-affected areas. Leveraging these engagements promotes a comprehensive approach to address GBV where EAGER and HCDP focus on expanding and improving services at the local level and the project focuses on strengthening institutional coordination, capacity building of service providers, improving data collection and promoting greater awareness of where and which services are available to GBV survivors. The project also leverages digital engagements supported by the Mozambique Digital Acceleration Project (P176459) and Digital Governance and Economy Project (EDGE, P172350) This includes engagement of youth champions (tapping into the network of digital ambassadors to be developed under the Mozambique Digital Acceleration Project) and using SMS platforms for coordination and information sharing.

45. **Data protection measures are integrated in the project design.** The provision of services for GBV survivors means that sensitive personal data will be collected and handled by multiple service providers. The safe and ethical handling of this data is needed to safeguard the safety of the survivor and avoid revictimization and stigmatization. The project will support the development of procedures for data protection and privacy as well as training to ensure that all actors handling sensitive data understand their responsibilities and know how to handle data securely and ethically.

46. **Economic analysis:** The anticipated economic and financial benefits of the project are expected to exceed costs, however, performing a cost-benefit analysis would present a challenge because of the methodological challenges in monetizing benefits of providing critical response services to survivors of violence and scarcity of data on service provision in the CAI. Drawing comparisons with findings from other studies is also challenging because of a scarcity of evidence. This is highlighted in a recent systematic review of the economic costs of violence against women and girls in low- and middle-income countries which sought to document evidence on the direct costs of service provision to survivors of violence.³⁹ Cost studies have primarily focused on assessing the expenditures associated with preventing violence against women.⁴⁰ Furthermore, this project's focus on systems strengthening, rather than direct service delivery, limits comparisons. While costing of GBV for Mozambique is not available, an assessment of the economic cost of violence against women in Maputo, Matola, Beira and Nampula found that in 2005-2008, the economic cost of violence against women was US\$1,473,829; an amount that was over half of the US\$2,933,333 allocated for the National Plan of Action for the Prevention and Combat of Violence Against Women for 2008-2012. Most of these costs were absorbed by the health sector (81 percent), followed by the justice sector (17 percent) and prevention efforts (2 percent).⁴¹ The anticipated benefits of the project include improvements in the ability to assess the economic cost of violence in Mozambique due to the availability of more robust data on services, referrals, and help-seeking by GBV survivors. Capacity building of GBV service providers, with a focus on CSOs, will increase the quality of services, while the integration of CSOs in local referral pathways will ensure proper follow-up of survivors after they leave the health centers or the CAI. The anticipated benefits also include improvements in the quality of implementation of SEA/SH mitigation measures. This will result in better allocation of SEA/SH budgets in World Bank-financed engagements in Mozambique as individual projects will not need to hire an international organization to train CSOs and coordinate grievance mechanisms. System strengthening is likely to yield a range of multi-faceted impacts, that extends beyond service provision to GBV survivors, which may not be measurable. For example, trained staff may translate benefits from the intervention to other non-GBV areas of their work.

³⁹ Vyas, S., Meinhart, M., Troy, K., Brumbaum, H., Poulton, C., & Stark, L. (2023). The Economic Cost of Violence Against Women and Girls in Low- and Middle-Income Countries: A Systematic Review of the Evidence. *Trauma, Violence, & Abuse*, 24(1), 44-55.

⁴⁰ Torres-Rueda S, Ferrari G, Orangi S, Hitimana R, Daviaud E, Tawiah T, Prah RKD, Karmaliani R, Kapapa E, Barasa E, Jewkes R, Vassall A. What will it cost to prevent violence against women and girls in low- and middle-income countries? Evidence from Ghana, Kenya, Pakistan, Rwanda, South Africa and Zambia. *Health Policy Plan*. 2020 Aug 1;35(7):855-866.

Michaels-Igbokwe, C., Abramsky, T., Devries, K. et al. Cost and cost-effectiveness analysis of a community mobilisation intervention to reduce intimate partner violence in Kampala, Uganda. *BMC Public Health* 16, 196 (2016).

⁴¹ Tchamo, S., Mucambe, M., José, G., Manuel, B., & Mataveia, G. (2021). Economic Costs of Violence Against Women in Mozambique. *Journal of Interpersonal Violence*, 36(23-24).



47. **Citizen engagement.** The project will facilitate continuous engagement with stakeholders and beneficiaries during implementation. The framework for citizen engagement will include: (i) access to project information; (ii) information campaigns to raise awareness about the project among stakeholders, including youth, women and people with disabilities; (iii) consultations with stakeholders; and (iv) a feedback and Grievance Redress Mechanism (GRM) mechanism to process complaints, concerns, and questions from stakeholders. Consultations with stakeholders done as part of the project identification have influenced the design of the same. Consultations with government actors, CSOs, donors and other stakeholders will guide the preparation of updated and new protocols and guidelines and the training of GBV service providers will be aided by a capacity needs assessment and consultative process. Similarly, digitalization and awareness raising activities will engage with local communities to ensure that these tools and messages have a broad reach. The project will use beneficiary feedback surveys to measure satisfaction with the training activities, user journey mapping will identify challenges faced by survivors when seeking services and the use of scorecards to evaluate the quality of service provided as perceived by users will be piloted in the CAIs in the project area.

48. **Climate Co-Benefits.** Although more research is needed in Mozambique, international evidence suggests that climate and natural disasters have worse health impacts on women and girls, in part linked to impacts on reproductive health.⁴² In times of crisis, girls are also more likely than boys to be taken out of school and financial strain leads some parents to marry their daughters prematurely. Rates of GBV are higher in areas affected by conflict and displacement while access to support services is curtailed.⁴³ The World Bank 2023 Country Climate and Development Report for Mozambique found that the impact of climate change is particularly significant on Mozambican women, increasing the incidence of poverty and widening gender inequalities. For example, the share of women in nonagricultural employment has slightly increased but remains considerably low (34.8 percent in 2019 versus 31 percent in 2011). This indicates that Mozambique's women are still highly exposed to climate hazards. Furthermore, there are gender-specific divisions of labor and responsibility in water resource access that have a particular effect on women. With increasing drought, women need to walk longer distances to collect water, increasing risks related to GBV and SEA/SH.⁴⁴ The project (Component 1) intends to strengthen GBV prevention and response mechanisms during natural disasters and climate-induced emergency situations by integrating in GBV service provision protocols set minimum standards for implementing, supporting and/or planning specialized GBV multisectoral services during such times and to do no harm. Furthermore, it intends to build capacity of GBV service providers (CSO and government actors) on climate change impacts on women and girls in particular induced GBV risks and their readiness to respond to such shocks. Expanding digital data collection and strengthening GBV-related information systems (Component 2) will contribute to greater evidence-based data on interlinkages between climate shocks and GBV through enhanced data collection tools and interoperable systems. Digitization of service delivery is also anticipated to lead to a reduction in travel and material use. The awareness campaigns (Component 3) are anticipated to enhance the understanding of impacted communities on climate change impacts on women and girls and in particular the increased risk of GBV during such shocks, this will contribute to their enhanced awareness and readiness to respond to such shocks.

49. **The project is aligned with the goals of the Paris Agreement on both mitigation and adaptation.** Although Mozambique's contribution to global GHG emissions is minimal, at 0.21 percent, the NDC reaffirms Mozambique's commitment to reduce GHG by about 40 million tCO₂e (2020-2025) compared to business-as-usual.

50. **Assessment and reduction of mitigation risks.** The project is expected to have a low impact on greenhouse gas (GHG) emissions and to align with the country's transition to low GHG emissions pathways. Project activities focus on capacity building, data collection, and improving coordination of GBV service providers, which are not expected to cause

⁴² Riyad Fatema S, Islam MS, East L, Usher K. Women's health-related vulnerabilities in natural disasters: a systematic review protocol. *BMJ Open*. 2019 Dec 29;9(12)

⁴³ World Bank. 2023. Mozambique Gender Assessment: Leveraging Women and Girls' Potential. Washington, D.C.: World Bank Group.

⁴⁴ World Bank: Mozambique Country Climate and Development Report (2023)



emissions, or carbon lock-in. The operation also does not prevent the transition to lower-carbon alternatives that may become viable in the future and remains viable after accounting for transition risks.

51. **Assessment and reduction of adaptation risks.** A climate and disaster risk screening has been carried out highlighting a high exposure of project sites to climate and disaster risks (particularly extreme precipitation, flooding and droughts) but identifying no to low risks of climate or disaster risks impacting the project's ability to achieve its outcomes, given the nature of the activities financed, the mitigation measures implemented by the countries (including through World Bank support) and the adaptation features embedded in project's design. The project intends to strengthen GBV prevention and response mechanisms during natural disasters and climate-induced emergency situations by developing protocols to set minimum standards for implementing, supporting and/or planning to implement specialized GBV multisectoral services during such times and to do no harm. Furthermore, it intends to build capacity and awareness of GBV service providers and communities on climate change impacts on women and girls in particular induced GBV risks and their readiness to respond to such shocks. Expanding digital data collection and strengthening GBV-related information systems will contribute to greater evidence-based data on interlinkages between climate shocks and GBV through the enhanced data collection tools and interoperable systems. Digitization of service delivery is also expected to reduce travel and material use.⁴⁵

B. Fiduciary

52. **Financial Management.** A Financial Management (FM) Assessment was undertaken in accordance with the Directives and Policy for Investment Project Financing (IPF) and the Bank Guidance - Financial Management Manual in World Bank IPF Operations issued on September 7, 2021. The assessment covered budgeting, staffing, accounting system, reporting, internal controls, and internal and external audits. The assessment revealed acceptable financial management arrangements at the Department of Administration and Finance (DAF) within MGCAS despite the limited experience in handling FM of World Bank-financed operations. The overall financial management was assessed to be adequate with Moderate residual risk rating as the project will be implemented by MGCAS and the DAF at MGCAS will be supported by a Financial Management Specialist and assistant with skills and experience for this position, to be recruited on a competitiveness basis.

53. **Procurement.** Procurement will be carried out in accordance with the (i) World Bank Procurement Regulations for IPF Borrowers, dated September 2023; (ii) the 'Guidelines on Preventing and Combating Fraud and Corruption in Projects financed by International Bank for Reconstruction and Development (IBRD) Loans and International Development Association (IDA) Credits and Grants', dated October 15, 2006, revised in January 2011 and July 1, 2016; and (iii) the provisions stipulated in the Financing Agreement. The implementation capacity of the procurement staff at the DAF has been reviewed and found to be adequate, at least for the initial phase of implementation. While the project will leverage the available capacity, the overall residual risk after the implementation of the mitigation measures detailed in Annex 1 is Substantial as the PIU will need to manage several stakeholders. MGCAS has developed a Project Procurement Strategy for Development (PPSD), which has informed the procurement plan and specified the required procurement methods for the activities to be implemented. The procurement plan will be updated, as needed, to reflect the actual project implementation needs.

⁴⁵ The project will attempt to measure this qualitatively through the user journey assessment and scorecard in the CAIs that will also look at the time it takes for survivors to access service and transport needs to measures whether the time and transport needs were reduced by the project activities.



C. Legal Operational Policies

Legal Operational Policies	Triggered?
Projects on International Waterways OP 7.50	No
Projects in Disputed Area OP 7.60	No

D. Environmental and Social

54. Social and environmental risks (E&S) are anticipated to be low as the project does not entail any civil works and will mainly consist of technical assistance, capacity building, awareness raising activities, and assessments and feasibility studies with limited number of workers who will work mostly in institutional contexts. These types of technical assistance activities are likely to generate minimal and temporary environmental and social risks and negative impacts. Specifically, on the social side, at this stage, main anticipated social risks include: (i) occupational health, safety and security risks; (ii) SEA/SH risks at workplace and during the roll out of training and data collection activities and engagement with communities; (iii) generation of electronic waste, associated with installation of information technology equipment, which could also pose minor health and safety risks to adjacent communities if not properly installed and managed; and (iv) data security risks associated with collection and management of sensitive data in digital format. An Environment and Social Commitment Plan (including specific measures for labor management and stakeholder engagement) specifying all the E&S provisions necessary to address the identified risks and impacts was developed and disclosed on March 13, 2024, and revised and redisclosed on April 1, 2024. Consultations with relevant stakeholders were held in January and February 2024. The Program’s Implementation Manual will be prepared no later than 45 days after project effectiveness and will include specific provisions to address the management of the project’s’s E&S risks and impacts.

V. GRIEVANCE REDRESS SERVICES

55. **Grievance Redress.** Communities and individuals who believe that they are adversely affected by a project supported by the World Bank may submit complaints to existing project-level grievance mechanisms or the Bank’s Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed in order to address project-related concerns. Project affected communities and individuals may submit their complaint to the Bank’s independent Accountability Mechanism (AM). The AM houses the Inspection Panel, which determines whether harm occurred, or could occur, as a result of Bank non-compliance with its policies and procedures, and the Dispute Resolution Service, which provides communities and borrowers with the opportunity to address complaints through dispute resolution. Complaints may be submitted to the AM at any time after concerns have been brought directly to the attention of Bank Management and after Management has been given an opportunity to respond. For information on how to submit complaints to the Bank’s Grievance Redress Service (GRS), visit <http://www.worldbank.org/GRS>. For information on how to submit complaints to the Bank’s Accountability Mechanism, visit <https://accountability.worldbank.org>.



VI. KEY RISKS

56. **The overall risk of the project is rated Moderate.** The rating reflects substantial ratings for political and governance, and fiduciary risks:

- (i) **Political and governance risks are rated substantial.** Personal data, personally identifiable information and sensitive data will be collected and used in connection with the management of the project interventions. If mishandled, the personal data of GBV survivors can result in revictimization or stigmatization of the survivor. In the absence of a national data privacy law, the project will support the development of procedures for data protection and privacy as well as training for all actors handling sensitive data.
- (ii) **Fiduciary risks are rated substantial.** The fiduciary assessments found that systems within the implementing agency were adequate, and the FM risk is moderate. However, the procurement risk is assessed as substantial due to the additional workload that the project will generate and the need for the PIU to manage several stakeholders. As a mitigation measure, the PIU will hire additional procurement and FM staff.



VII. RESULTS FRAMEWORK AND MONITORING

PDO Indicators by PDO Outcomes

Baseline	Period 1	Closing Period
Improve capacity of GBV service providers		
Percentage of GBV service providers that use survivor-centered approaches and apply national laws and good practices as part of GBV service provision (Percentage)		
Mar/2024	May/2027	May/2029
0	65	85
Enhance the provision of integrated digital GBV services		
Number of CAI utilizing digital tools to streamline case management and data collection (Number)		
Mar/2024	May/2027	May/2029
0	35	51
Increase use of services by GBV survivors		
Number of GBV survivors seeking care (Number)		
Mar/2024	May/2027	May/2029
3975	6850	13056
>% women and girls (Percentage)		
65	75	80

Intermediate Indicators by Components

Baseline	Period 1	Closing Period
Component 1. Strengthening capacity of GBV service providers		
Number of GBV service providers trained (Number)		
Mar/2024	May/2027	May/2029
0	1400	2196
>GBV focal points at national, provincial and district levels (Number)		
0		704
>CAI professionals (Number)		
0		612
>CSO members (Number)		



0		880
Number of GBV service provision protocols updated (Number)		
Mar/2024		Nov/2025
0		4
Component 2. Integrated digital tools for better case management		
Development and adoption of data privacy manual (Yes/No)		
Mar/2024		Dec/2025
N		Y
Number of localized referral pathways prepared (Number)		
Mar/2024		Dec/2027
0		11
Adoption and roll out of harmonized GBV data integration process and data collection tools (Yes/No)		
Mar/2024		Dec/2025
No		Yes
Component 3. Improving coordination and information for better access to services		
Number of GBV multisectoral coordination meetings organized at the local level (Number)		
Mar/2024	May/2027	May/2029
0	80	155
Number of people reached with awareness raising initiatives (Number)		
Mar/2024	May/2027	May/2029
0	6,000,000	10,000,000
Number of CSOs engaged in enhanced monitoring pilot (Number)		
Mar/2024	May/2027	May/2029
0	18	25
Component 4. Project management and evaluation		
People reporting increased awareness of available GBV response services in their province/district (Percentage)		
Mar/2024	May/2027	May/2029
0	80	100
>% female (Percentage)		
0		100
Percentage of complaints received resolved on time (Percentage)		
Mar/2024		May/2029
0		100



Monitoring & Evaluation Plan: PDO Indicators by PDO Outcomes

Improve capacity of GBV service providers	
Percentage of GBV service providers that use survivor-centered approaches and apply national laws and good practices as part of GBV service provision	
Description	GBV service providers are defined as GBV Focal Points at national, provincial and district level; professionals from the Multisectoral Mechanism working in the CAI; and CSO members trained under the project.
Frequency	Semi-annual
Data source	Project engagement surveys
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU
Enhance the provision of integrated digital GBV services	
Number of CAI utilizing digital tools to streamline case management and data collection	
Description	Number of CAIs equipped with digital data collection, case management and referral tools and are regularly using these tools for case management and reporting purposes
Frequency	Annual
Data source	Project M&E system and MGCAS reports
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU
Increase use of services by GBV survivors	
Number of GBV survivors seeking care, % of which women and girls	
Description	Number of survivors that seek GBV services in the CAIs
Frequency	Annual
Data source	Project M&E system and MGCAS reports
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Monitoring & Evaluation Plan: Intermediate Results Indicators by Components

Strengthening capacity of GBV service providers	
Number of GBV service providers trained (disaggregated by type of service provider)	
Description	Number of GBV focal points, GBV providers in the CAI, and civil society members trained in survivor-centered approaches to GBV, including SEA/SAH mitigation measures in accordance with the revised GBV service provision protocols and good practices
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU
Number of GBV service provision protocols updated	
Description	Number of protocols updated following consultative participatory processes



Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Integrated digital tools for better case management

Development and adoption of data privacy manual

Description	Data privacy model prepared and integrated in training program
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Adoption and roll out of harmonized GBV data integration process and data collection tools

Description	Harmonization and adoption of GBV data collection tool, Ficha Unica, among the multisectoral mechanism, interoperability of systems and begin data collection using harmonized tool
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Number of localized referral pathways prepared

Description	Number of referral pathways prepared for each province
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Improving coordination and information for better access to services

Number of GBV multisectoral coordination meetings organized at the local level

Description	Number of multisectoral meetings organized at the local level, with the participation of CSOs, and used to improve coordination, improve case management and validate GBV case data
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Number of people reached with awareness raising initiatives

Description	Number of people reached with awareness raising initiatives including in-person and initiatives that use digital tools such as mass media campaigns, online platforms and messages sent by SMS platforms
-------------	--



Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU
Number of CSOs engaged in enhanced monitoring pilot	
Description	Number of CSOs engaged in monitoring pilot in five provinces
Frequency	Annual
Data source	Project M&E system
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU

Project management and evaluation	
People reporting increased awareness of available GBV response services in their province/district (% female)	
Description	Percentage of people reached with awareness raising activities who report knowing which services are available in their province or district as a result of project awareness raising activities.
Frequency	Annual
Data source	Project M&E system, aggregated data
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU
Percentage of complaints received resolved on time	
Description	Percentage of complaints received, investigated, and a response given to the complainant and/or recorded closed within the stipulated period of time as defined in the Project Operations Manual/GRM manual
Frequency	Annual
Data source	Project M&E system, aggregate data
Methodology for Data Collection	Regular monitoring
Responsibility for Data Collection	PIU



ANNEX 1: Implementation Arrangements and Support Plan

Institutional and Implementation Arrangements

1. The MGCAS has been identified as the lead Implementing Agency, with the MEF having a key coordination role. The PIU will be established to implement the EAGER will also be the PIU for this project and will be strengthened with the recruitment of key additional professionals to ensure smooth projects implementation (Figure 1.2). The project will collaborate closely with the other actors engaged in the Multisectoral Mechanism, especially, for development and updating of GBV protocols and guidelines, training of GBV service providers, digital engagements and awareness raising activities as these activities will benefit all the members of the multisectoral mechanism. A multi-sectoral Steering Committee will provide high-level project oversight and guidance and ensure inter-ministerial cooperation and resolution of issues.

Figure 1.2: PIU arrangements

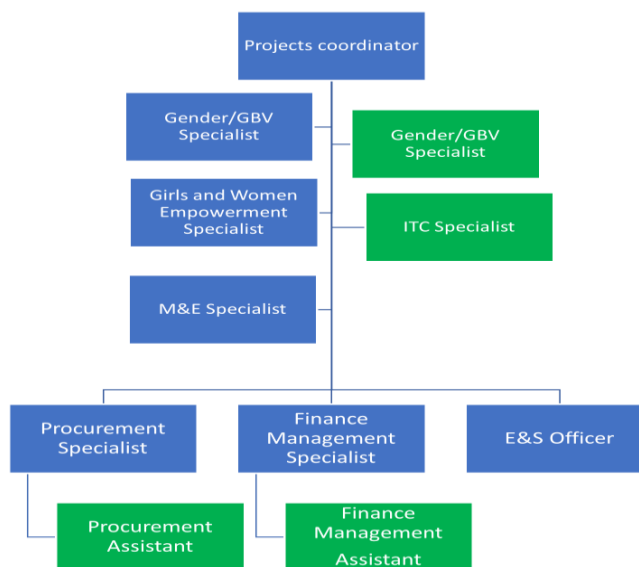
Institutional arrangements EAGER and CAPACITY BUILDING FOR IMPROVED GBV RESPONSE PROJECT

MGCAS PIU

All hired specialists and assistants will be engaged in both projects. Additionally, each PIU specialist will be paired with one MGCAS technician from their respective field to ensure collaborative efforts with government structures and facilitate capacity-building transfer.

Professionals hired with EAGER funds

Professionals hired with CAPACITY BUILDING FOR IMPROVED GBV RESPONSE PROJECT funds



Financial Management

2. The overall financial management was assessed to be adequate with a Moderate residual risk rating. The Department of Administration and Finance (DAF) at MGCAS will be responsible for fiduciary aspects of the project, which will be supported by a Financial Management Specialist and assistant with skills and experience for this position, to be recruited on a competitiveness basis. Annual budgets monitoring of budget execution will follow national procedures which will be documented in the PIM. The DAF will account for all project funds, expenditures, and resources using the government’s integrated financial management information system, the Electronic State Financial Administration System. Internal controls system and procedures of the project will be based on national procedures, defined in the Financial Administration Manual and the PIM. The DAF will prepare quarterly interim financial reports for the project in form and content satisfactory to the World Bank. The Administrative Tribunal (the country’s supreme audit institution) is mandated to audit all government funds, including donor-financed projects. As such, the project financial statements will be audited by the Tribunal in accordance with International Standards of Supreme Audit Institutions issued by the International Organization of Supreme Audit Institutions.



3. **Implementation support plan.** Based on the current overall FM risk of this operation, the project will be supervised at least once a year. In addition to desk-based reviews, the World Bank will perform field visits to ensure that Project’s FM arrangements operate as intended. Transaction review will be conducted during the field visits. The World Bank will provide required training to the DAF staff on FM and disbursement procedures to familiarize them with these procedures and to ensure the project funds are used for the intended purposes.

4. **FM action plan.** To mitigate FM risks, the following measures should be taken.

Table 1.1: FM risk mitigation measures

No.	Action	Responsibility	Completion date
1	Develop and adopt the Project Implementation Manual including FM procedures	MGCAS	No later than 45 days after effectiveness
2	Inscribe the project in the government budget	MGCAS	Within one month after effectiveness
3	Appointment of project FM staff	MGCAS	No later than 120 days after effectiveness

Procurement

5. **Procurement risk is assessed as substantial.** While the project will leverage the available capacity within the DAF, the associated risk from implementation is higher due to the additional workload that the activities of the project will create and the need for the PIU to manage several stakeholders. The procurement team will be strengthened with additional resources to support the implementation. Goods, Non-Consultant Services and works will be procured using the applicable versions of the World Bank’s Standard Procurement Documents for all procurement undertaken on Open International Bidding. Applicable versions of the World Bank’s Standard Request for Proposals, with standard contract templates, will be used for the selection of consulting firms. Based on the assessed Implementation Agency risk, the World Bank will carry out a Procurement Post Reviews for all contracts that are based on the approved procurement plan but which not having been subject of prior review by the World Bank using a sample of at least 20 percent of the review sample. Based on continuing assessment of risk and the success of the implementation of the risk mitigation measures, the overall Procurement risk will be revised. MGCAS has developed a Project Procurement Strategy for Development, which has informed the procurement plan and specified the required procurement methods for the activities to be implemented. The procurement plan will be updated, as needed, to reflect the actual project implementation needs.

6. **Project risks affecting procurement.** While there is capacity to implement the project, there are risks that may impact implementation of the project and these are summarized below, including the mitigation measures:

Table 1.2. Procurement risk assessment and mitigation measures

Risk Description	Description of Mitigation	Residual Risk
Availability of qualifies personnel to support Procurement implementation	MGCAS to ensure that qualified personnel, under terms satisfactory to the World Bank are recruited to support the procurement function. This arrangement should be kept throughout the project's life. The World Bank will work closely with MGCAS to enhance the available capacity, through hands-on support, as required.	Substantial
Lengthy internal procurement reviewing process may cause project implementation delays. Country procedures for payments abroad may also affect performance of procurement.	While these are portfolio wide issues, the adoption of sound operational procedures for project implementation, with responsibilities and timelines requirements for procurement activities, will reduce the impact.	Substantial



7. **Payments to foreign consultants and service providers may delay the implementation of contracts**, as has occurred in other projects, as there is a need to obtain government authorizations (including the MEF and the Central Bank) before payments abroad can be authorized. Furthermore, the implementing agency should be proactive in ensuring that work permits for foreign consultants and service providers are issued expeditiously. In addition, the requirements of the Attorney General’s Office and the Administrative Tribunal for the legal vetting of contracts may lead to delays in contract signing, after the contracts are awarded. It is imperative that the potential constraints are considered in the procurement planning for the activities.

Project Implementation Area

8. The project will be national in scope with digitization and local awareness raising and coordination activities covering the districts where the Integrated Care Centers (CAIs) are located; capacity building and awareness raising activities will also be implemented in Niassa, even though there is no CAI in that province.

Table 1.3: List of CAI across Mozambique

No.	CAI name/district	Province	Status
1	CAI de Namuno	Cabo Delgado	Undergoing works for opening
2	CAI de Ancuabe	Cabo Delgado	Undergoing works for opening
3	CAI de Pemba	Cabo Delgado	Undergoing works for opening
4	CAI do H. Provincial de Xai-Xai	Gaza	Operational
5	CAI do Chokwé	Gaza	Operational
6	CAI de Limpopo-Chicubana	Gaza	Operational
7	CAI de Chibuto	Gaza	Operational
8	CAI de Guijá	Gaza	Operational
9	CAI de Chicualacuala	Gaza	Operational
10	CAI de Bilene-Macia	Gaza	Operational
11	CAI de Mandlakazi	Gaza	Operational
12	CAI de Chonguene	Gaza	Operational
13	CAI de Massigir	Gaza	Operational
14	CAI de Chicuque	Inhambane	Operational
15	CAI de Jangamo	Inhambane	Operational
16	CAI de H.P. Inhambane	Inhambane	Operational
17	CAI de H. Rural de Zavala	Inhambane	Operational
18	CAI de Vilanculos	Inhambane	Operational
19	CAI de Chimoio	Manica	Operational
20	CAI de Machaze	Manica	Undergoing works for opening
21	CAI de Sussundenga	Manica	Undergoing works for opening
22	CAI de Barué	Manica	Undergoing works for opening
23	CAI de Manica -	Manica	Undergoing works for opening
24	CAI do Hospital Geral de. Mavalane	Maputo city	Operational
25	CAI do Hospital José Macamo	Maputo city	Operational
26	CAI do Centro de Saúde de Bagamayo	Maputo city	Operational
27	CAI de Centro de Saúde da Polana Caniço	Maputo city	Operational



No.	CAI name/district	Province	Status
28	CAI de Hospital do Chamaculo	Maputo city	Operational
29	CAI de Marracuene	Maputo province	Undergoing works for opening
30	CAI de Manhiça	Maputo province	Undergoing works for opening
31	CAI de Ndlavela	Maputo Province	Operational
32	CAI do Nampula	Nampula	Operational
33	CAI de Ilha de Moçambique	Nampula	Undergoing works for opening
34	CAI de Nacala Porto	Nampula	Undergoing works for opening
35	CAI de Moma	Nampula	Undergoing works for opening
36	CAI de Mecuburi	Nampula	Undergoing works for opening
37	CAI de Mossuril	Nampula	Undergoing works for opening
38	CAI de VAZ	Sofala	Operational
39	CAI de Dondo	Sofala	Undergoing works for opening
40	CAI de Nhamatanda	Sofala	Undergoing works for opening
41	CAI de Buzi	Sofala	Undergoing works for opening
42	CAI de Marromeu	Sofala	Undergoing works for opening
43	CAI of Tete	Tete	Operational
44	Tete – Moatize	Tete	Undergoing works for opening
45	Tete – Angónia	Tete	Undergoing works for opening
46	Tete – Changara	Tete	Undergoing works for opening
47	CAI de Quelimane	Zambezia	Operational
48	CAI do Mocuba	Zambezia	Undergoing works for opening
49	CAI do Milange	Zambezia	Undergoing works for opening
50	CAI do Maganja da Costa	Zambezia	Undergoing works for opening
51	CAI do Morrumbala	Zambezia	Undergoing works for opening

World Bank Implementation Support

9. **The World Bank will provide the implementation support to help the Government achieve the PDO.** The World Bank will provide needed technical assistance, guidance, and training for the overall implementation of project activities as well as on fiduciary, procurement, E&S, M&E, GBV/SEA/SH, digital development, and others, as needed. Implementation support and oversight will be provided through implementation support missions (including joint missions with the EAGER project team), regular project meetings and a midterm review. The World Bank will also facilitate learning and exchanges with other GBV programs implemented in the region and elsewhere to promote adoption of good practices, support convening of donors and other stakeholders, and coordinate with World Bank teams supporting complementary projects in Mozambique. The M&E system will include the use of the GEMS for real time data collection and analysis.