

Mozambique DHS 2011: Children's Care and Living Arrangements



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This report was written by Garazi Zulaika and Florence Martin.

*This series of country briefs aim to provide an analysis of children's living and care arrangements according to the latest available data from **Demographic and Health Surveys (DHS)** or **Multiple Indicators Cluster Surveys (MICS)** at the time of publication.*

*Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly **Demographic and Health Surveys (DHS)** and **Multiple Indicators Cluster Surveys (MICS)**, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. It does not seek at this stage to show how these various arrangements relate to particular outcomes for child well-being, although work is being carried out, to be able to do so as part of the Technical Working Group on Children and Care under the Child Protection Monitoring and Evaluation Reference Group (CP MERG). The content of these papers will evolve as a result, and feedback and suggestions are welcome on the content of the briefs as well as how they can be improved. Communications should be sent to Florence.martin@bettercarenetwork.org*

The briefs are targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels. In order to enable researchers and policy makers in the countries and regions to conduct further analysis, tables with the data extracted for the purpose of this brief have been included at the end of this report.

Source of data, unless otherwise noted is DHS implementing partners and ICF International. (2000-2015). Demographic and Health Surveys 2000-2015. Data extract from DHS Recode files. Integrated Demographic and Health Series (IDHS), version 2.0, Minnesota Population Center and ICF International [Distributors]. Accessed from <http://www.dhsprogram.com/>.

Front cover map from Ministerio da Saude (MISAU), Instituto Nacional de Estatística (INE) e ICF International (ICFI), 2013. *Moçambique Inquérito Demográfico e de Saúde 2011*. Calverton, Maryland, USA: MISAU, INE e ICFI.

Other maps are produced through ICF International. (2015). The DHS Program STATcompiler. Funded by USAID. Retrieved from <http://www.statcompiler.com>.

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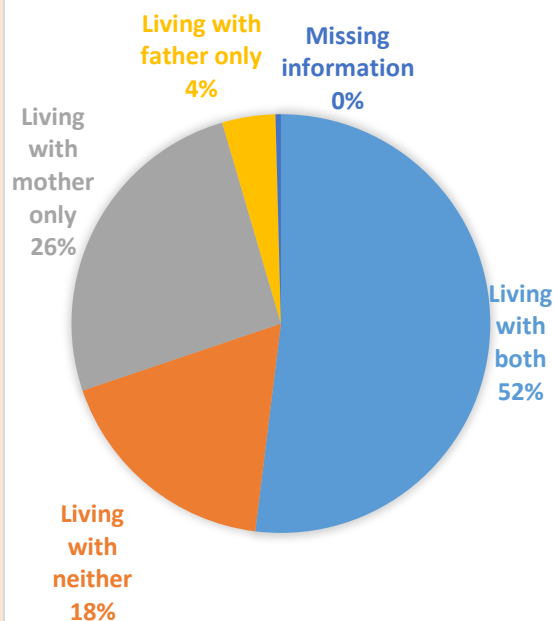
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EXECUTIVE SUMMARY:

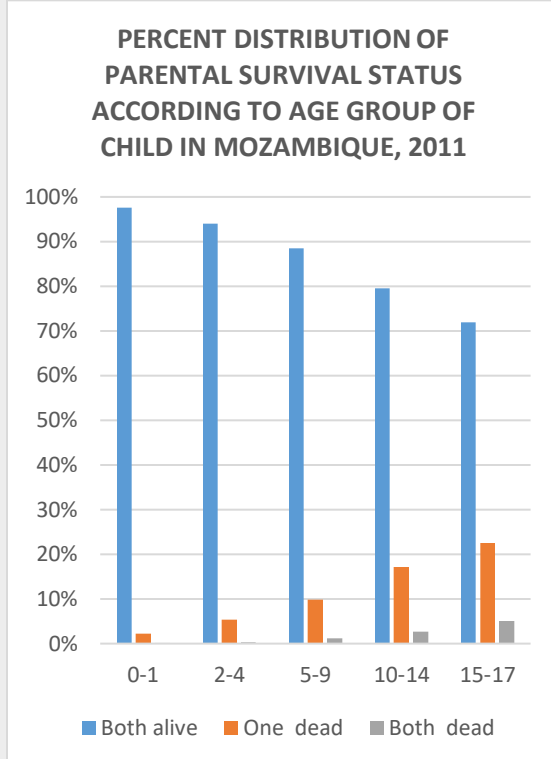
Children's Living Arrangements:

PERCENT DISTRIBUTION OF LIVING ARRANGEMENTS AMONG CHILDREN 0-17 IN MOZAMBIQUE, 2011



- Half of all children (age 0-17) in Mozambique live with both biological parents (52%). Another 26% live with their biological mother only and 4% with only their biological father. A significant percentage of children (18%) do not live with either biological parent.
- Large variations in living arrangement are seen according to age group, gender, wealth quintile, rural-urban, and regional background characteristics.
 - For children under 1, the majority of children live with both biological parents (70%). This percentage declines as children age, reaching 33% for children 15-17. Living with neither biological parent, on the other hand, becomes more common as children age, increasing exponentially between the youngest and oldest age groups (1.5% among those 0-1 to 41% for children ages 15-17).
 - For children 0-17 in Mozambique, the proportion living with only their mother decreases as children age, with 28% of newborns and 20% of teenagers living with only their mothers. Conversely, the proportion of children living with only their biological father increases as children age, going from under 1% in the youngest age group to 6% in the oldest age cohorts.
- Male children are slightly more likely to live in households with biological parents compared to female children (53% vs. 51%). Living with a single biological parent does not appear to vary across gender. Girls are more likely to live with neither biological parent compared to boys (20% vs. 16%).
- Wealth quintile is associated with living with neither biological parent. Households in the richest quintile more frequently house children who are living with neither biological parent than households in the poorest wealth quintiles (24% of the richest households compared to 15% of the poorest households nationwide). The vast majority of these children living outside of parental care still have two living biological parents.
- Significant regional variations are found in children's living arrangements in Mozambique. This is partly driven by urban-rural differences, where more children live with both biological parents in rural areas compared to urban areas (54% vs. 47%). In Maputo City, the nation's capital, 44% of children live with both parents while more rural provinces such as Tete (66%) see higher rates of children living with both parents.
- Mozambique has a comparable rate of children living with neither biological parent compared to other East African countries at 18% for children ages 0-17. In the region, Southern African countries see higher rates of children not living with a biological parent.

Parent Survivorship:



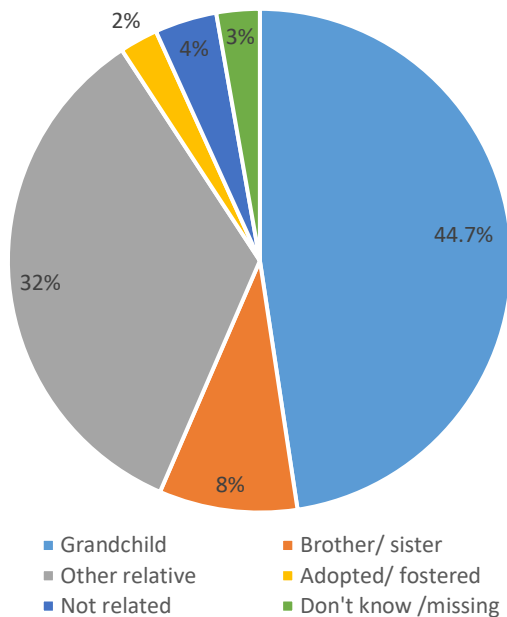
- 1.7% of all children ages 0-17 in Mozambique experience being orphaned in the country (the loss of both biological parents). However, 11% of children have lost one parent by age 18 and 10% of children have lost a mother or a father before reaching 15 years of age.
 - There is little variation in the percentage of children living in urban areas who are orphaned (2.1%) compared to those living in rural areas (1.5%). There is a similarly small difference in the percentage of children with one living parent in urban and rural areas (12% vs. 11%).
 - Great diversity is seen in the regional distribution of parental death for children under the age of 18 in Mozambique, ranging from less than 1% of children orphaned in Tete Province to 3.2% of children orphaned in Sofala Province. There is also large regional variation for children with only one surviving biological parent, ranging from less than 8% of children in Niassa Province who have lost a mother or a father to nearly 17% in Gaza Province who have experienced the same.

- Regionally, Mozambique ties for second in the East Africa region for most single parent loss with Burundi at 11%, after Zimbabwe (13%). At 1.2% of children 0-17 being orphaned in the country, Mozambique sees comparably low rates of double parent death compared to its neighbors Zimbabwe (4%) and Malawi (2.1%)
- Wealth quintile is not strongly associated with orphanhood. However, there is a higher percentage of children living in the two richest quintiles who are orphaned compared to the three poorest quintiles.

Living Arrangements of Children Living with Neither Biological Parent:

- In Mozambique, nearly 18% of children age 0-17 live with neither biological parent. Of these, 62% have two living biological parents and another 27% have one. In Mozambique, 9% of these children do not have a surviving biological parent. This underlines the reality in Mozambique that most children living out of parental care have at least one parent alive (91%).
- The large majority of these children 0-17 living with neither biological parent - 94% - live in households headed by a relative.
 - In the regional context, Mozambique's prevalence of children 0-14 who live in households in which they are related to the household head is comparable to other East African countries.
- Among children living with neither biological parent, age is a clear determinant of whom children are most likely to live with. In the youngest age groups the prevalence of living in households headed by a grandparent is high at 70% for children aged 0-1, but only 17% for the oldest age group of 15-17. Conversely, these younger age groups have low rates of living in households

PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN AGE 0-17 LIVING WITH NEITHER BIOLOGICAL PARENT IN MOZAMBIQUE, 2011



headed by siblings, adoptive families, or other relatives. However, in the older age groups the likelihood of living with these relative becomes more common. In fact, for the oldest age group of years 15-17, more children live with other relatives more than with their grandparents (30% vs. 17%). For children 15-17 years old living with a husband or wife (16%) is more common than living with a brother or sister (13%).

- Differences across gender are seen when looking at living arrangements in Mozambique. Boys are more likely than girls to live with their grandparents, siblings, or in un-related households. Girls, on the other hand, are more likely to live with other relatives, adoptive families, or their spouses.
- Only 3.8% of surveyed households report hosting a child 0-17 unrelated to the head of the household.
 - In the region, Mozambique has a comparable rate of children living out of family care as its neighbors. Among children 0-14, 98% of those not living with a biological parent in Zimbabwe and Malawi live in related care, only slightly higher than the 97% of children 0-14 in Mozambique found in this living arrangement.
- Rural and urban differences also appear to have an impact on living arrangements of children living with neither biological parent. Of children who do not live with their biological parents, there are a larger percentage of children in urban areas living in unrelated households compared to rural areas (4.5% vs 3.3%). Additionally, nearly double the number children live with their spouses in rural areas compared to urban areas (5% vs. 2.2%).
- Households in wealthier quintiles have a higher likelihood of hosting unrelated children and these children are generally in the older age groups.
- Tete and Sofala Provinces see nearly double the number of children living in unrelated care compared to the national average with over 6% of all children living with neither biological parent living in households with an unrelated household head.

“The family being the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members.”

– The Guidelines for the Alternative Care of Children (2009) II.A.3

Over the last 30 years there has been a growing understanding of the critical importance of the family and a family environment for children in terms of their development and well-being. This realization is at the core of the *United Nations Convention on the Rights of the Child* adopted in 1989, and more recently, of the *Guidelines for the Alternative Care of Children* welcomed by the United Nations General Assembly in 2009.¹

A major body of empirical research in psychology, neuroscience, social work, and other disciplines has demonstrated the importance of investing in children’s early years to support this critical period of child development.² Findings about the negative impact of emotional deprivation and institutionalization for younger children have further reinforced the critical importance of parental care and a family environment.³ As a result, reforms of child protection and alternative care systems for children deprived of parental care, or at risk of being so, have been ongoing in virtually all regions of the world, with a particular focus on moving away from the use of residential care and strengthening the capacity of parents and families to care for their children.⁴

These reforms have also been informed by research that has shown that the vast majority of children in residential care are not placed there because care is genuinely needed or that they are without parental or family care, but rather because their families are facing a range of challenges in their capacity to care, including poverty, lack of access to social services, discrimination and social exclusion, as well as a result of personal or social crises and emergencies.⁵ As a result, governments and other stakeholders in these reform processes have recognized that a major focus of this shift away from the use of residential care for children is not simply about reducing the numbers of institutions and removing children from there, but also about establishing better preventive and family support services to reduce child-family separation and stop children going into alternative care in the first place.

Understanding better the situation of children in ‘care vulnerable situations’, including those outside of parental care, has become crucial not only for HIV prevalent countries but for all countries seeking to strengthen their responses and systems for children facing a range of care and protection risks. A number

¹ UN General Assembly, Guidelines for the Alternative Care of Children: resolution adopted by the General Assembly, 24 February 2010, (A/RES/64/142). Available at: <http://www.bettercarenetwork.org/docs/Guidelines-English.pdf>

² National Research Council and Institute of Medicine (2000) *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Committee on Integrating the Science of Early Childhood Development. Jack P. Shonkoff and Deborah A. Phillips, eds. Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

³ For a review of the evidence, see for example Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from <http://www.bettercarenetwork.org/docs/Families%20Not%20Orphanages.pdf>; Browne, K. (2009). The Risk of Harm to Young Children in Institutional Care. Better Care Network and Save the Children Working Paper). Retrieved from http://www.bettercarenetwork.org/docs/The_Risk_of_Harm.pdf; Csaky (2009) Keeping Children Out of harmful institutions, Save the Children UK. Retrieved from <http://www.bettercarenetwork.org/BCN/details.asp?id=21471&themeID=1003&topicID=1023>

⁴ For documentation of these reforms, go to Better Care Network online Library of Documents at: www.bettercarenetwork.org

⁵ Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from <http://www.bettercarenetwork.org/BCN/details.asp?id=23328&themeID=1003&topicID=1023>.

of organizations and initiatives have drawn attention to the need for more systematic data on children's care situations, including family arrangements, parental status, care practices, and their impact on child well-being.

National household surveys provide critical data to monitor population-level patterns and trends in relation to key socio-demographic indicators at national and sub-national levels that can also be used to draw important comparisons between countries at both regional and international levels. These surveys provide particularly rich data sets through which changing household compositions and living arrangements, fertility and marriage, health and nutrition, literacy and access to education, poverty and deprivation, and other key indicators of child and family well-being are being gathered on a five-yearly basis for a nationally representative sample of households. Initial analysis of this data for a small number of countries has shown how critical this data can be to understand the care situations of these children but also to highlight potential indicators of vulnerability associated with different care and living arrangements.⁶

Demographic and Health Surveys (DHS) have been conducted in middle to low income countries by national statistical agencies with support from USAID since the mid-1980s in over 90 countries. The DHS has now entered its Phase 7 (2011-2018). The survey includes 3 main questionnaires (Household, woman and man's questionnaires) and provides nationally representative data on health and population, including fertility, maternal and child survival, immunization, water and sanitation, education, living arrangements among others. In addition, the DHS has included questionnaire modules on a range of topics such as domestic violence, Female Genital Mutilation, Fistula, out of pocket expenditures.

Multiple Indicators Cluster Surveys (MICS) have been conducted with support from UNICEF since the mid-1990s in more than 100 countries, tracking progress and trends on more than 20 indicators relating to the Millennium Development Goals (MDGs) and other major international commitments relevant to the situation of women and children. MICS has entered in its fifth phase, MICS 5 (2012-2011). The survey includes a household questionnaire, a questionnaire for women 15-49 years of age with or without birth history, a questionnaire on children under 5 years of age administered to the mothers or caretaker of these children and a questionnaire for men 15-49 years of age. The questionnaires cover a wide range of issues, including education, child labor, child discipline, water and sanitation, maternal and new born health, marriage and union, FGM, birth registration, early childhood development, breastfeeding, sexual behavior, fertility and Tobacco and alcohol use among others.

Both DHS and MICs have also increasingly gathered data on attitudes and beliefs on some critical social issues such as child care practices, attitudes towards HIV AIDS, domestic violence and child discipline.

Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly DHS and MICS data, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. In collaboration with members of the Child Protection Monitoring, Evaluation Reference Group (CP MERG) and its Technical Working Group on Children Without Adequate Care, and with support from Save the Children, it is developing a series of country briefs using the latest available data set from DHS or MICS for the country

⁶ See for examples, Family for Every Child and INTRAC (2012) Context for Children and Policy situation paper, Roby (2011) Children in Informal Alternative Care, UNICEF; Child Frontiers (2012) Family support services and alternative care in Sub-Saharan Africa: Background paper; Better Care Network (2011) Analysis of DHS data (Ghana, Liberia, Rwanda, Jordan, Sierra Leone); Save the Children (2011). Save the Children Research Initiative: Understanding and Improving Informal Alternative Care Mechanisms to increase the care and protection of children, with a focus on Kinship care in West Central Africa.

and presenting the data and analysis of the trends, when data is available, regarding children's living arrangements and care situations. It does not seek at this stage to show how these various arrangements relate to particular outcomes for child well-being, although work is being carried out to be able to do so and the content of these papers will evolve as a result. The brief is targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels.

The DHS and MICS core questionnaires contain a number of questions in relation to children's living arrangements, survivorship of parents, and relationship to the head of the household. This data in some countries is collected for all children under 15 years of age in a household and in others for children under 18 years of age. The data on survival status of parents is collected under the HIV AIDS section of the questionnaire and whilst it is collected systematically in countries with high HIV prevalence, other countries do not always collect it. This data is key to understanding the extent of parental loss (single/double orphans) but also the extent to which parental loss is a significant factor in children's living arrangement as well as a number of outcome indicators.

A core question asked by all DHS/MICS questionnaires relates to the relationship between children in a particular household to the head of the household. Although there are slight variations in the range of possible relationships provided, there is general consistency as far as the key categories are concerned (grandchild, niece and nephews, foster child, unrelated, for example). This data is systematically collected but rarely extracted and analyzed in the national reports, despite its clear relevance to children's care situations. Although that data is not a perfect proxy indicator for caregiving arrangements, as it does not provide actual information as to who the legal or de facto caregiver for a particular child is in that household, it is nonetheless a clear indicator of whether a child is living within or outside of family care. This information is key to understanding the extent and patterns of informal alternative care, particularly kinship care, in a given country and this, in turn is critical to inform policies seeking to strengthen parental care, prevent harmful separation but also support adequate family care and family based alternative care.

The DHS and MICS data has huge potential to inform child protection policy and programming, however currently this potential is not being realized. A key barrier is that in most cases the data that would be useful, such as on children's care and different living arrangements, is not extracted and presented in national reports. Furthermore, awareness of this potentially useful DHS and MICS data amongst child protection practitioners is very low. Given the scarcity of national monitoring data on child protection issues in many contexts, it is important that the sector explores the potential of the DHS and MICS data and also is better informed of what it could offer and how it could be used to support better policies and interventions targeting at risk children and families. It is hoped that these country briefs can contribute to this.

MOZAMBIQUE 2011 DHS:

The data presented in this report come from the 2011 Mozambique Demographic and Health Survey (DHS) that was carried out by the Ministry of Health (MISAU) in collaboration with the National Institute of Statistics (INE) under the technical guidance of ICF International. MEASURE DHS is a USAID-funded project that provides technical support in the implementation country-wide surveys across the world. Funding for this effort came from the Government of Mozambique and the United States Agency for International Development (USAID).

The primary objective for this data collection effort is to provide country-wide information on demographic characteristics, health conditions and behaviors, and indicators around mortality. The child well-being indicators reported here come from the DHS Household Questionnaire. This questionnaire is used to list all individuals who spent the previous night in a selected household. It collects basic information of each member listed: name, sex, age, education, relationship to head of the household, and disability status. Additionally, for children under the age of 18 survival status of parents is also recorded.

During the 2011 Mozambique DHS data collection effort, a total of 13,919 households were interviewed and 60,587 household members were listed as having slept in the household during the previous night.. The household questionnaire retained a response rate of 99%. All figures reported here have accounted for sample weights, none are unweighted. No exclusion criteria has been applied – the data presented below represent the entire sample of individuals present in the dataset. As a result, the numbers below are slightly larger than the figures reported in the 2011 Mozambique DHS country report. Data were analyzed using the statistical software package SAS 9.4. To measure statistically significant levels of association chi-squared tests and t-tests were run using a 5% alpha level.

To understand Mozambique in its regional context and compare across other Eastern and Southern African states, data was pulled from nationally representative Demographic and Health Surveys (DHS) that were most recently run in these neighboring countries. Given that many of these countries collected data for the 0-15 age range until recently, for cross country comparisons under 15 age groups will be used when under 18 data is unavailable. Lastly, all country level development statistics were pulled from the Human Development Report 2011⁷.

⁷ United Nations Development Program 2011. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2011. Tokyo.

CHILDREN'S LIVING ARRANGEMENTS:

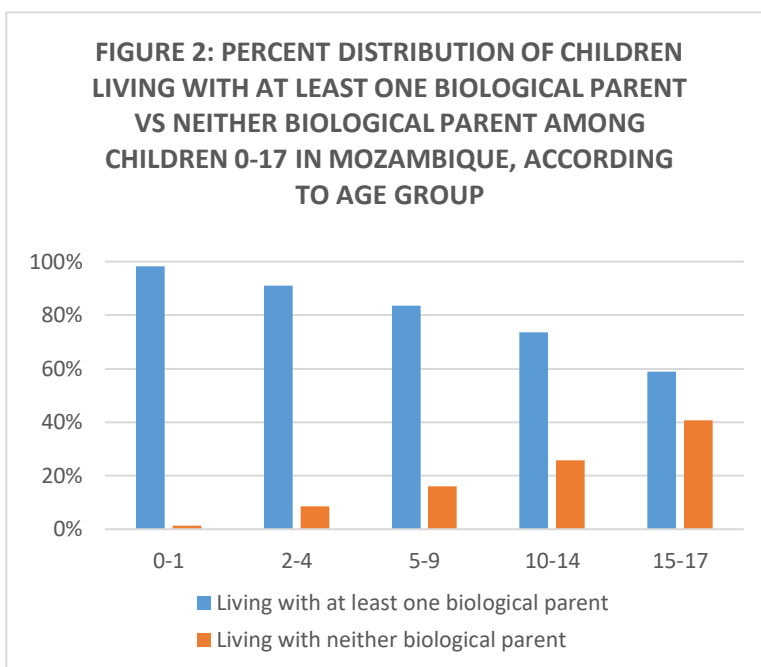
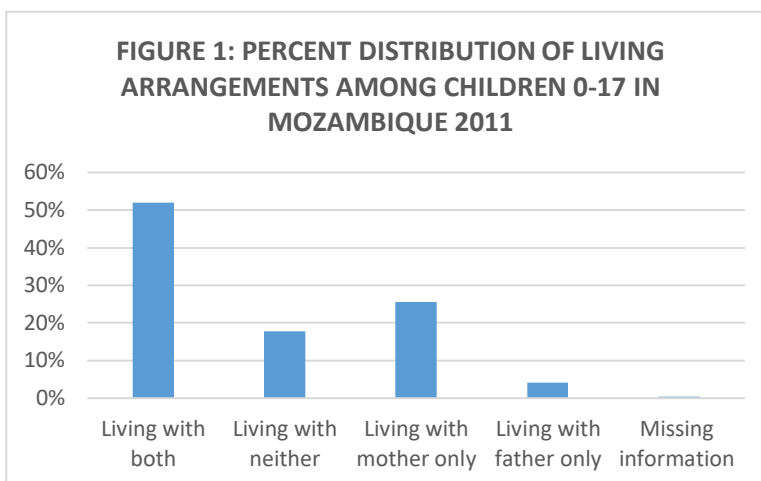
In Mozambique, 52% of children under the age of 18 live in households with both biological parents. Another 18% of children 0-17 live with neither biological parent. More than six times as many children live with only their biological mothers (26%) than with only their biological fathers (4.1%).

When disaggregated by background characteristics, factors such as age, gender, rural/ urban residence, geographic region, and wealth index appear to significantly influence living arrangements among children in Mozambique.

Variations in living arrangements across age groups are evident in Mozambique. At an early age the large majority of children live with both biological parents (70%). This proportion decreases as children age. By age 5-9, 53% of children live with both biological parents and 33% of children age 15-17 live with both biological parents.

The second most common living arrangement for children at an early age is living with only their mothers (28%), although this proportion declines with age. By age 5-9, 26% of children live with only their mother and 20% of children age 15-17 live with only their mothers. Across all age groups, fewer children live with only their father, while more live with only their biological mother. Part of this can be explained by the death of a biological parent. Since more children experience the loss of a parent as they get older, the proportion of children living with their only surviving parent increases with age – where only 1.8% of children in the youngest age group live with their mother only after losing their father, 8% of children 15-17 do the same. A similar, but less pronounced, trend is seen for children living with only their biological father after their mother has passed.

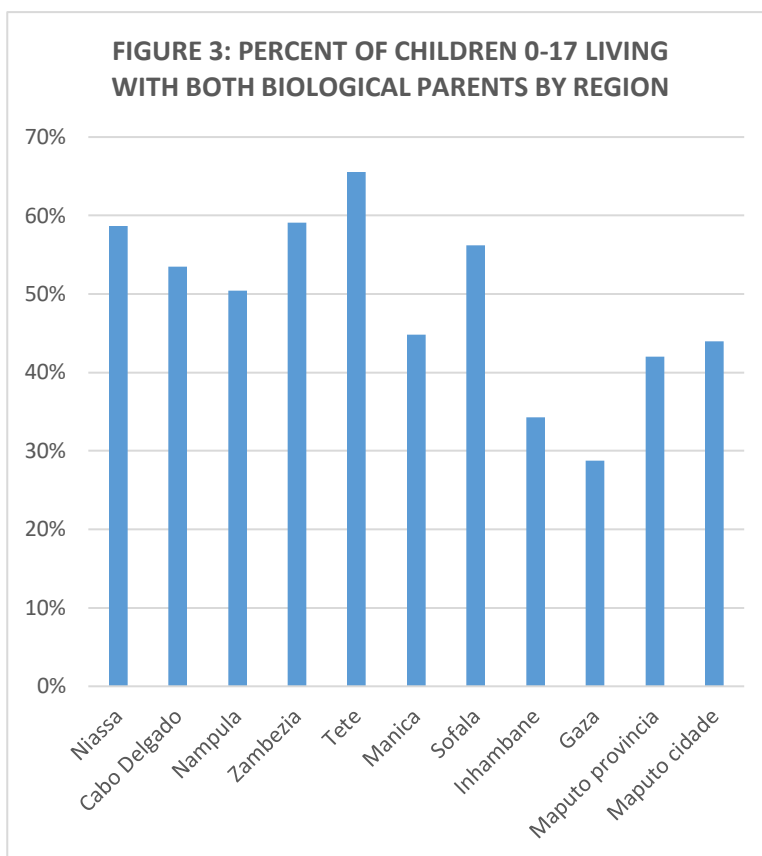
The likelihood that a child will live with neither biological parent increases with age. While only 1.5% of children under 2 live with neither biological parent, as children age the proportion of children living with neither biological parent reaches nearly 41% for children age 15-17 (as seen in Figure 2).



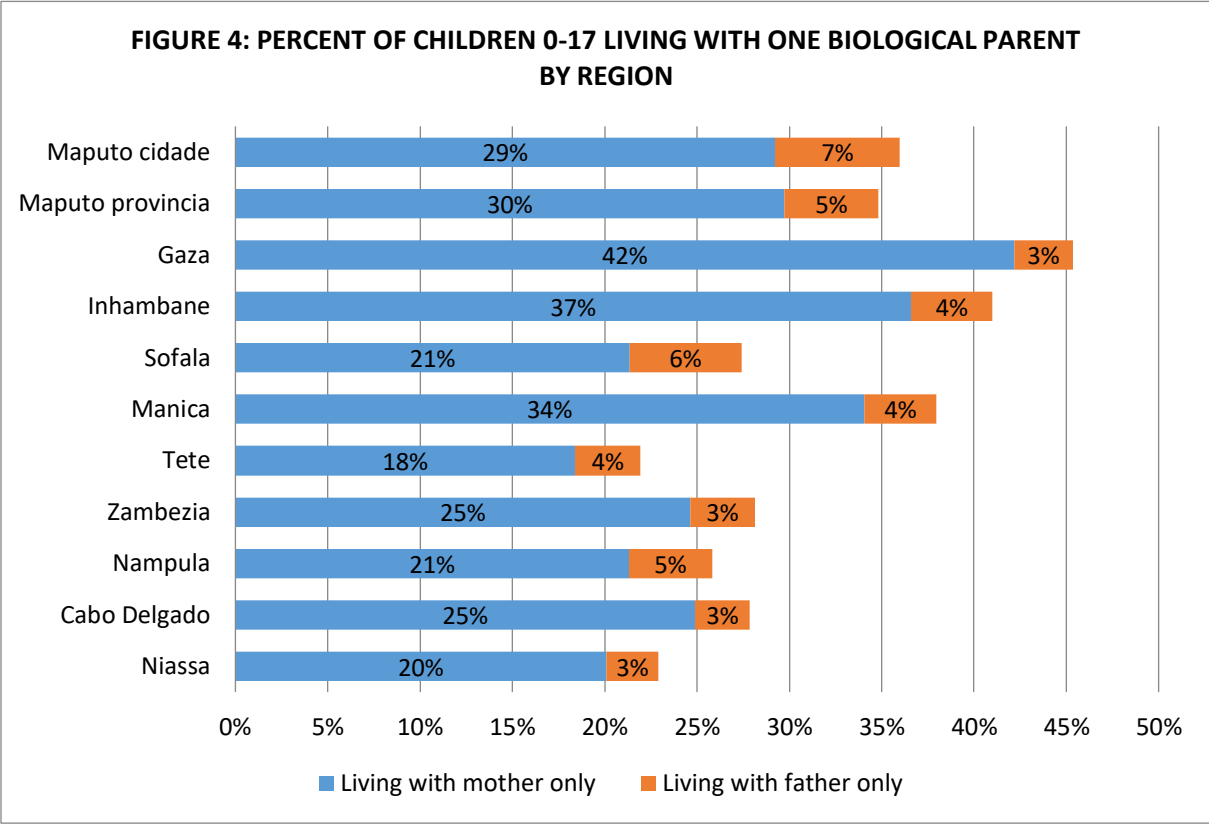
Although less pronounced, gender affects children’s living situations. Boys are more likely to live with both biological parents than girls (53% vs. 51%) Conversely, girls are more likely than boys to live in households without a biological parent (20% vs. 16%). Gender does not seem to influence living with either a biological mother or father. However, girls living in households without a biological parent are more likely than boys to have two living parents (13% vs. 10%).

Mozambique is still predominantly rural with 70% of the population residing in rural areas as of the 2011 DHS. Agriculture continues to be the country’s main economic activity and for local residence subsistence agriculture is a primary livelihood employing 63% of women and 41% of men. Children living in rural regions of Mozambique are more likely to live with both biological parents when compared to children living in urban households (54% vs. 47%). Conversely, more children living in urban areas live in households without a biological parent compared to rural areas (21% vs. 17%). Urban and rural distribution has little effect on the number of children living with only their mothers or fathers.

During the 2011 DHS data collection Mozambique was subdivided into 11 provinces for sampling (Niassa, Cabo Delgado, Nampula, Zambezia, Tete, Manica, Sofala, Inhambane, Gaza, Maputo Province, and Maputo City). As Figure 3 shows, the likelihood of children in Mozambique living with both biological parents is variable by province. While Tete Province sees over 65% of children 0-17 living with both parents, other provinces like Imhambane and Gaza see fewer than 35% of children doing the same. In Maputo City, the nation’s capital, 44% of children live with both biological parents. Gaza Province also has the highest percentage of children living with neither biological parent at 25%. Zambezia and Tete Provinces have the lowest percentage of children living with neither biological parent at less than 13%.



When it comes to children living with one biological parent varied regional landscape is seen across Mozambique. In its 11 provinces, living with a single parent ranges from a low of less than 23% in Niassa and Tete Provinces to a high of 45% in Gaza Province. This variability extends to different living arrangements among those living with only one biological parent as seen in Figure 4.

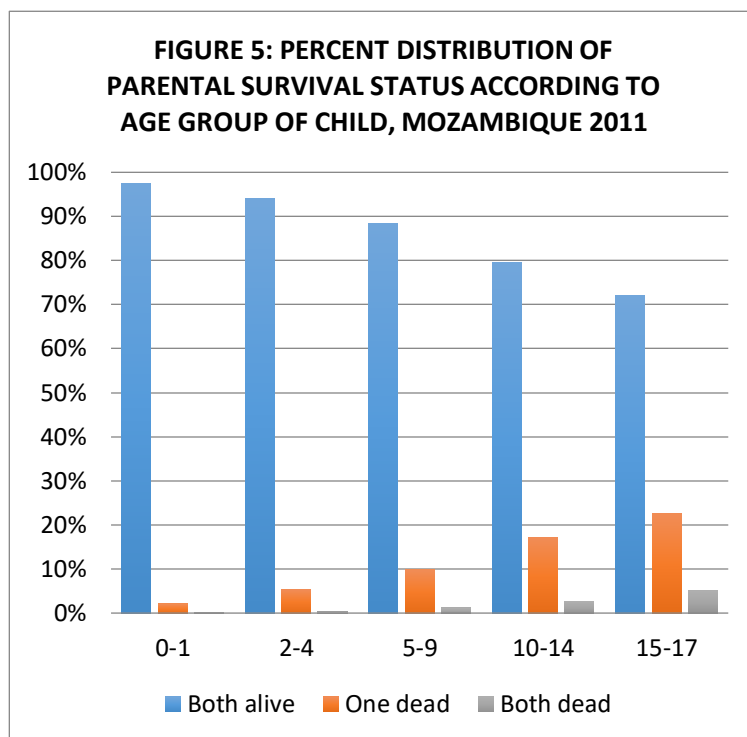


Household wealth quintile appears to be strongly associated with the likelihood of children living with neither biological parent. Among children living with neither biological parent, more children appear to be hosted by families in richer quintiles. Where 15% of children living in the poorest wealth quintile lived in households without either biological parent, more than 23% of children living in the richest quintile lived in households with neither biological parent. Conversely, in the richer households, proportionally fewer children were found to live with both biological parents (44%) when compared to households in the poorest quintile (55%). This association with to wealth is likely conflated with rural-urban and regional characteristics. In Mozambique, wealth is concentrated in urban centers with 80% percent of the two highest wealth quintiles living in city centers; 96% of the Maputo City’s population belongs to the richest wealth quintile.

Regionally, Mozambique sees more children living without both biological parents than do other East African states. Of the twelve countries with data in the region, Mozambique ranks second lowest in percentage of children living with both biological parents among children 0-17 at 52% after Zimbabwe. However, the three countries in Southern Africa with data on children’s living arrangements all see fewer children living with both biological parents.

DEATH OF A PARENT (SINGLE AND DOUBLE “ORPHANHOOD”):

In Mozambique, orphanhood is rare and is experienced only by 1.7% of all children 0-17. Among children 0-14 even fewer - 1.3% - have experienced the death of both parents. As can be expected, loss of a single parent is more frequent – 10% of children lose one parent before the age of 15 and 11% of children lose a mother or a father by age 18. Parental loss is positively associated with age: almost all children living in households (98%) under the age of two have two living parents, while 23% of children age 15-17 have lost one biological parent and 5% have lost both as seen in Figure 5.



The percentage of children in Mozambique who have experienced the death of both biological parents living in

urban areas is 2.1% and in rural areas 1.5%. Similarly, children in urban areas were more likely to have had one parent die before they turned 18 compared to rural areas (12% and 11% respectively). Further research is needed to ascertain whether these children lived in urban areas prior to the death of their parents, or whether they migrated into urban centers after the death(s).

Wealth quintile of the household does not clearly correlate with the likelihood of losing both or one biological parent for children in Mozambique. While the rates of double and single parent death remain fairly unchanged across children 0-17 living in all five wealth quintiles, it appears that children living in the richest wealth quintiles have experienced greater rates of parental mortality.

High variability in parent death is seen when disaggregated by province in Mozambique. Tete Province sees less than 1% of children orphaned, while other provinces like Sofala and Gaza see 3% or greater. Gaza Province also has the highest rate of children who have lost one parent at 17%. More research is needed to understand this geographic diversity found in parental death as well the underlying drivers of child migration.

Regionally, Mozambique ties for second in the East Africa region for most single parent loss with Burundi at 11%, after Zimbabwe (13%). At 1.2% of children 0-17 being orphaned in the country, Mozambique sees comparably low rates of double parent death compared to its neighbors Zimbabwe (4%) and Malawi (2.1%) (as seen in Figure 6). Figure 7 shows the relative rates of both single and double parent death in the region as one combined measure.

FIGURE 6: PERCENT OF PARENT LOSS AMONG CHILDREN AGE 0-17 BY COUNTRY, EASTERN AND SOUTHERN AFRICA

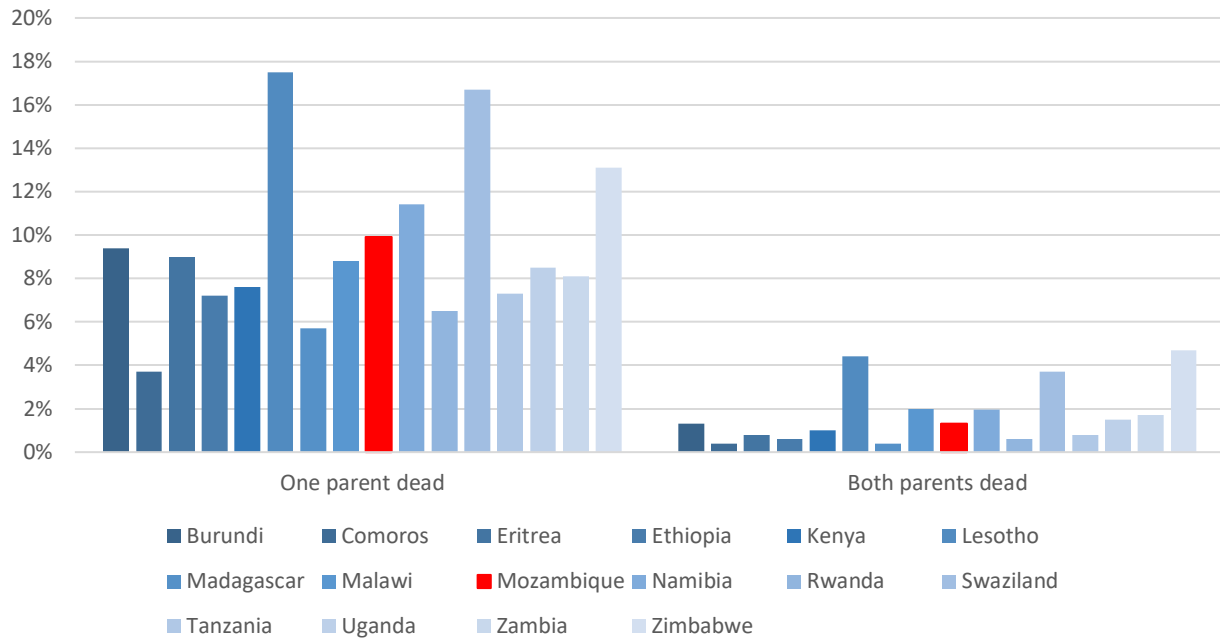
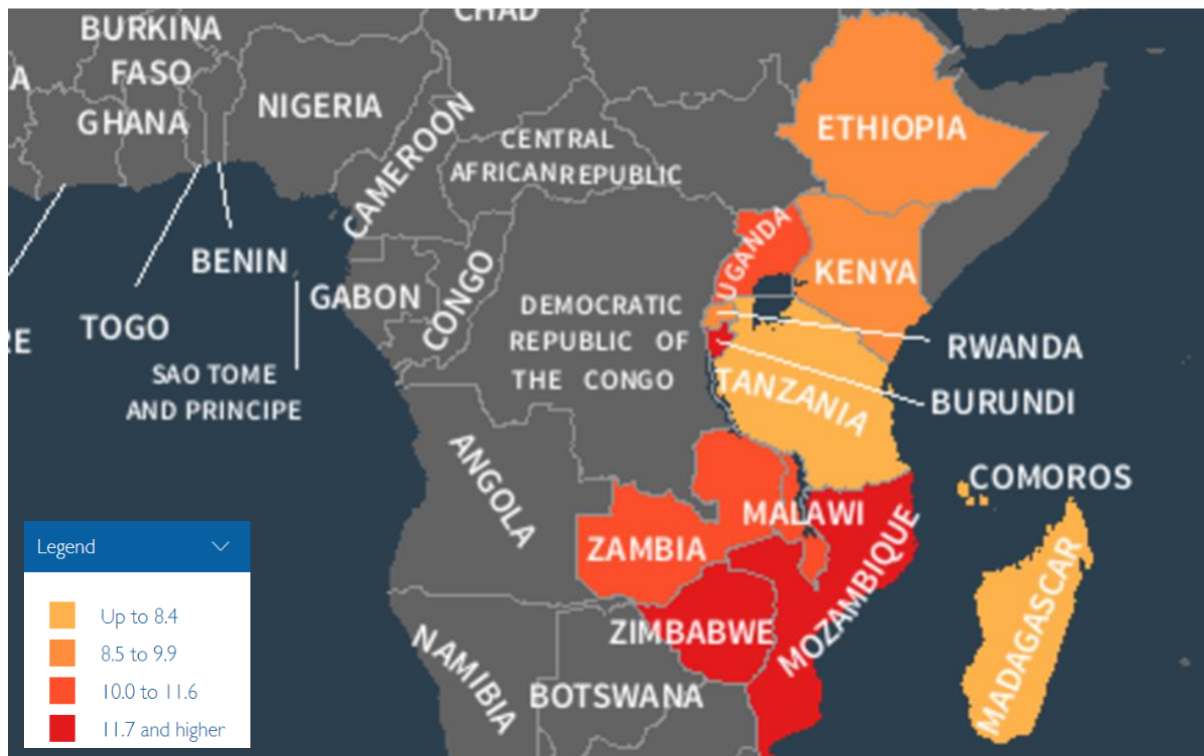
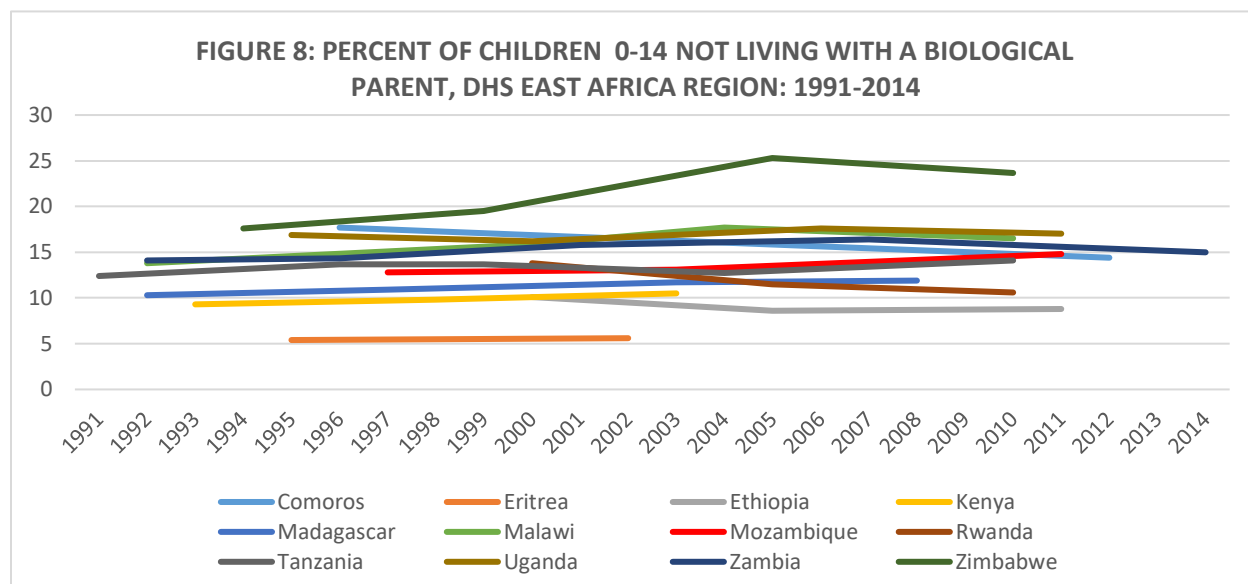


FIGURE 7: PERCENT OF CHILDREN 0-17 WITH FATHER, MOTHER, OR BOTH PARENTS DEAD BY COUNTRY, DHS EASTERN AFRICA REGION



CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT:

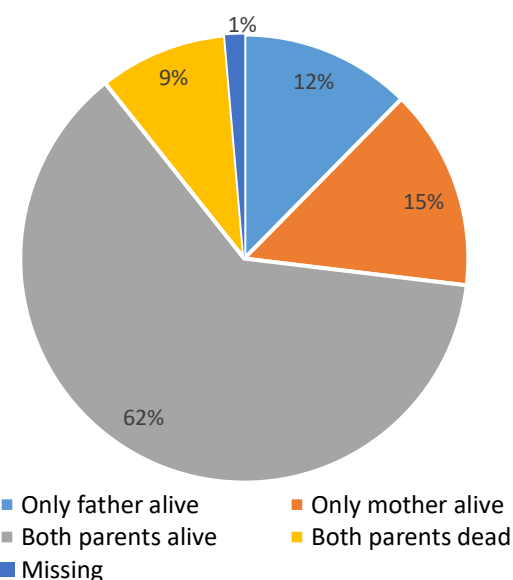
Nearly one in every five children under the age of 18 in Mozambique lives with neither biological parent (18%). In the last two decades, the prevalence of children living with neither parent in Mozambique has slightly increased, inching from 13% in 1997 to 15% in 2011 among children 0-14. As shown in Figure 8, for the majority of East African countries this steady state has been the norm, with only a few outliers like Zimbabwe seeing rapid increases in the number of children not living with a biological parent.



According to the 2011 DHS, the vast majority of these children – 62% - had both biological parents still living, while 15% had a living mother only, 12% had a living father only, and 9% of these children had lost both parents⁸. These realities underline that orphanhood is not the primary factor for children not living with their parents and highlights the need to better understand the true drivers behind children not living with their parents.

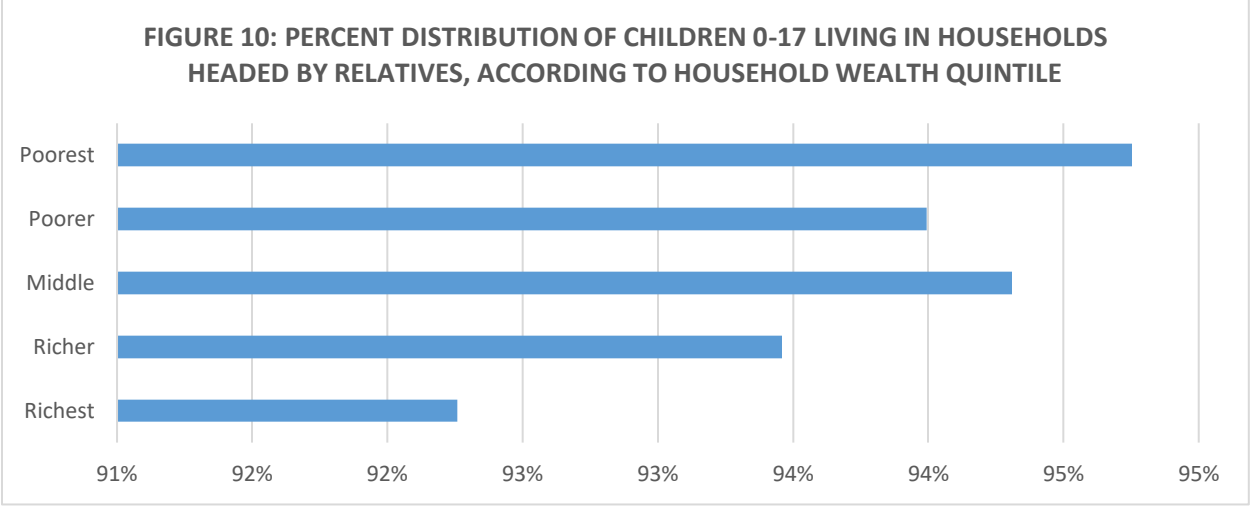
The overwhelming majority of children in Mozambique under the age of 18 who are not living with a biological parent remain in family care, residing instead in households with their grandparents, siblings, and other relatives. Nationwide, 94% of children aged 0-17 live in family care, with only 4% of children living in households headed by an unrelated person.

FIGURE 9: PERCENT DISTRIBUTION OF CHILDREN 0-17 NOT LIVING WITH A BIOLOGICAL PARENT, ACCORDING TO SURVIVAL STATUS OF PARENT



⁸ According to the World Bank, in 2011 46% of the total population in Mozambique was between the ages of 0-14. Therefore, over 1.7 million children under the age of 15 lived with neither biological parent, of which fewer than 145,000 children had lost both biological parents.

The likelihood of living in family care does not seem to be significantly related to gender, age, or difference in urban-rural residence. Instead, there appear to be more significant difference in children living in or out of family care based on the wealth index of the household. Households hosting unrelated children are more likely to be in the richest wealth quintile (6.7%) than the poorest wealth quintile (1.1%). Conversely, the poorest wealth quintiles are more likely to have children living within family care.



In Mozambique, there is large regional diversity found in the number of children not living with a biological parent. As seen in Figure 11, there are double the number of children 0-17 living without either biological parent in Nampula (24%) and Gaza (25%) as are found residing in Tete (12%). The regional diversity found in living arrangements extends to children living outside of related care (Figure 12). Nampula Province sees less than 1% of children living in unrelated households while others like Tete and Sofala Provinces see over 6% of children living with neither biological parent living with no family member. More research is needed to disentangle these regional differences in Mozambique’s 11 provinces.

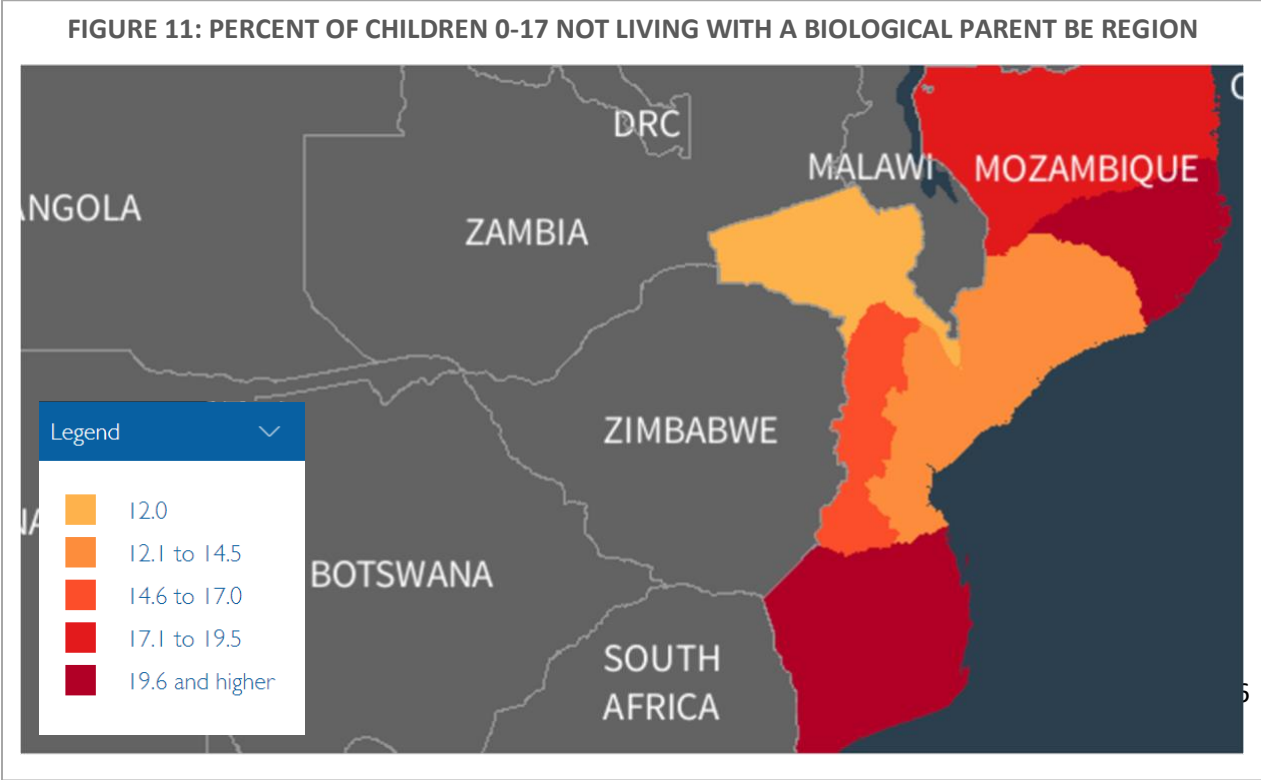
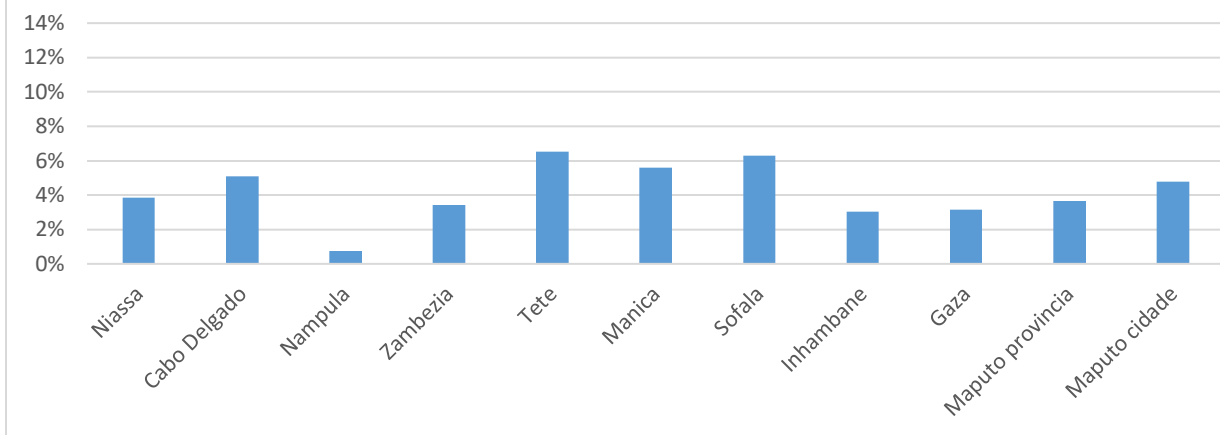


FIGURE 12: PERCENT OF CHILDREN 0-17 LIVING IN UNRELATED HOUSEHOLDS, ACCORDING TO REGION



In Mozambique, 45% of children 0-17 living with neither biological parent live with their grandparents, 32% live in households headed by other relatives, and 8% live with siblings. The full break down can be found in Figure 13.

Children ages 0-14 have a higher likelihood of living with their grandparents at 54%. In fact, living with grandparents seems to be negatively associated with the age of the child – becoming less likely as children get older, while living with other relatives and with unrelated household heads seems to become more common as children age. Children under the age of two have a high likelihood of living with their grandparents, with 70% of all children under 2 who live with neither biological parent living in households headed by their grandmother or grandfather. An incremental decrease is seen in this proportion as children age, coming to a low prevalence of 17% for children 15-17. In fact in the oldest age cohort, there is a higher likelihood that a child lives in a household headed by another relative among those living with neither biological parent. In this oldest age group, 17% live with a grandparent and 30% live in a household headed by some other relative.

One thing to note, early marriage occurs in Mozambique, with 16% of children age 15-17 reporting living with their spouse or parents-in-law (as shown in Figure 14). Across Mozambique, the 2011 DHS reported that by age 19, 40% of young women are already married or in a civil union.

FIGURE 13: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT 0-17 IN MOZAMBIQUE

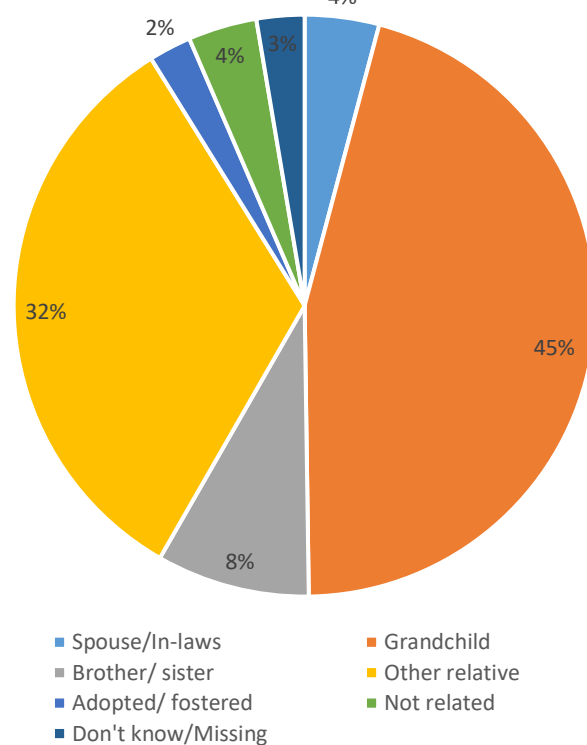
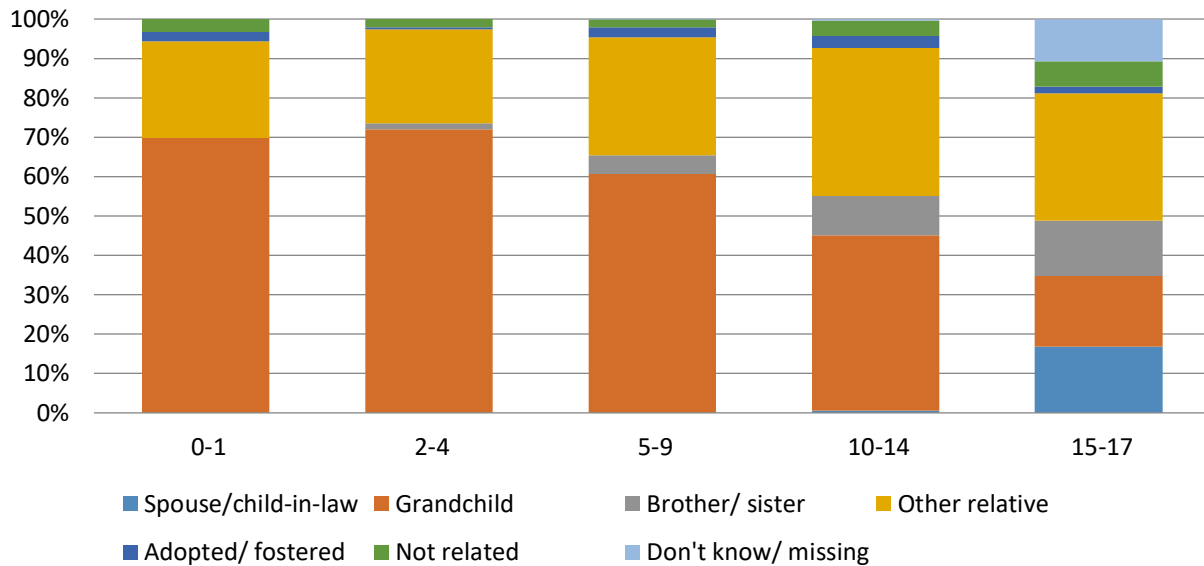


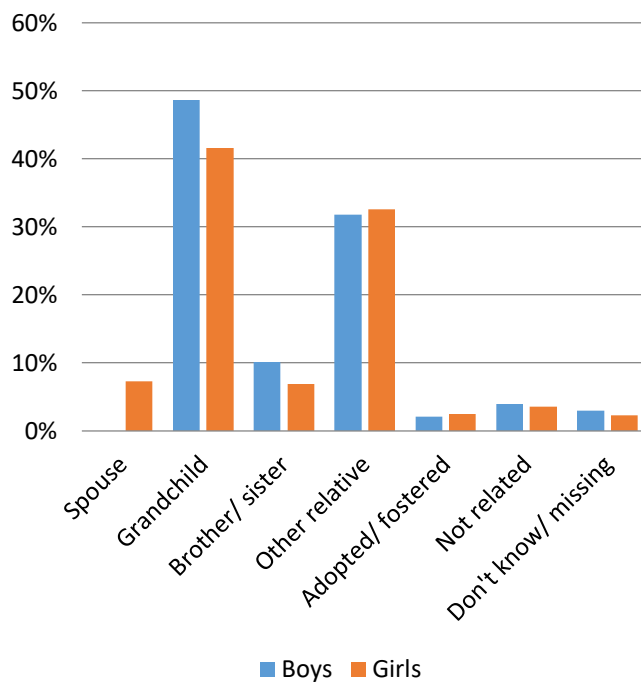
FIGURE 14: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT IN MOZAMBIQUE, ACCORDING TO AGE



Gender also seems to play a role in determining who children live with when living outside of the care of their biological parents. More boys age 0-17 live with their grandparents (49% vs. 42%) and siblings (10% vs. 7%) than do girls. Slightly more girls than boys living with neither biological parent are found to live with relatives other than they grandparents or siblings “other relatives” (33% vs. 32%). Possible explanations might include different reproductive and economic life phases of older and younger generation family members and how these realities intersect with the need for assistance in the house, for example with childcare or manual labor. Additionally, among girls 0-17 not living with a biological parent, 7.3% of girls are living with their husband reflecting the early median age of marriage for Mozambican girls of 18.6 years.

When disaggregated by geographical characteristics, significantly more children 0-

FIGURE 15: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN 0-17 LIVING WITH NEITHER BIOLOGICAL PARENT IN MOZAMBIQUE, ACCORDING TO GENDER

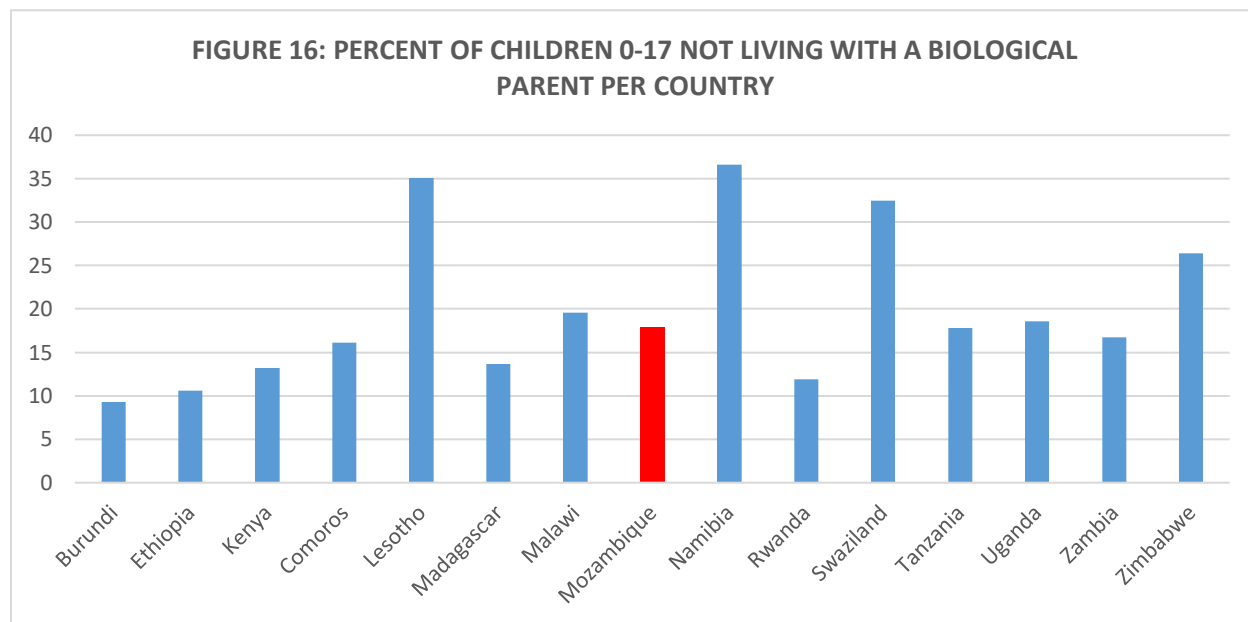


17 in rural areas live in households headed by their grandparents than among children living in urban centers (49% vs 37%). The opposite is true for children living with other relatives wherein nearly twice as many children found in urban areas who are living without a biological parent live with these relatives (42%) compared to in rural areas (27%). This later association where more children live in urban areas is also true for children living in households headed by unrelated individuals (4.5% to 3.3%). Given that children living with other relatives tend to be older, it is possible that these children move to live with their relatives in urban centers in order to access education, work or better services. More research is needed to understand fully the mechanisms behind these living arrangements and their implications in terms of child well-being.

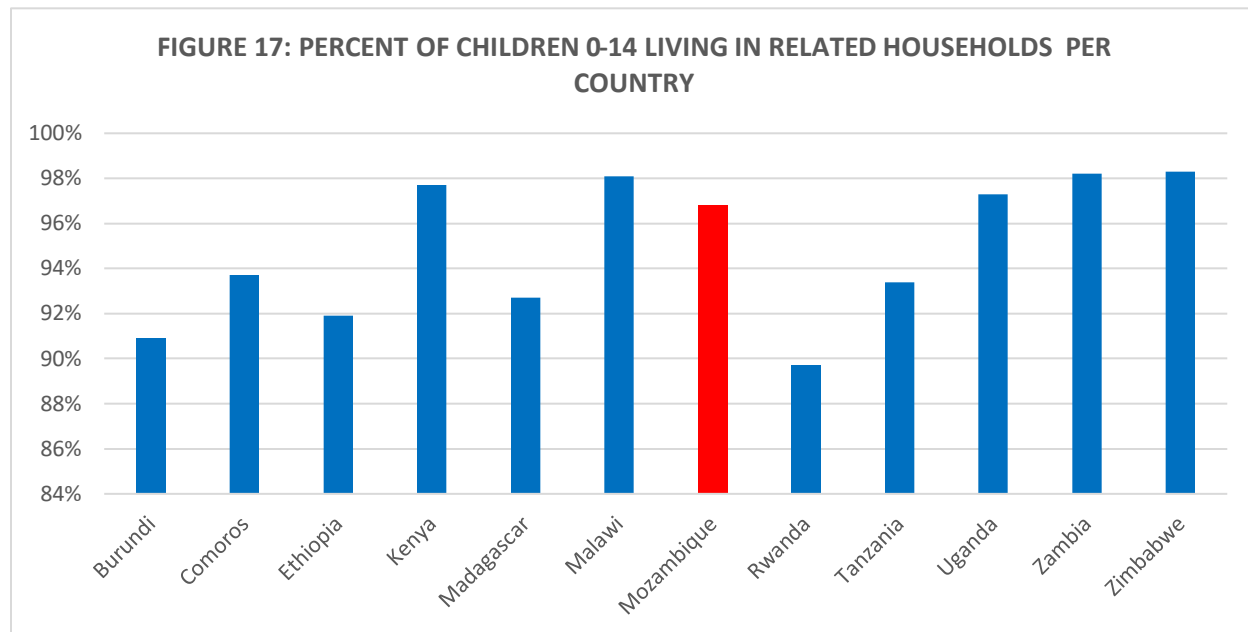
Clear differences are again seen between different regions of the country. Only 29% of children in Manica Province live with their grandparents. However, in Niassa Province (60%) more than twice the percentage of children do the same.

Adoption and fostering appears to occur slightly more frequently for girls than boys and in rural areas compared to urban centers. Nonetheless, caution must be employed when analyzing figures in these categories given the ambiguous definition around fostering within the DHS program. The DHS program defines fostering as “children under age 18 living in households with neither their mother nor their father present.” However, as seen throughout this report, most children living with neither biological parent are not categorized as “fostered.” Therefore, it is difficult to ascertain which children would be classified as “fostered” in the field. Additionally, in many of these settings formal adoption and fostering is quite limited; therefore, these categories may capture some children in informal foster care and adoption arrangements, but the data might be a significant underestimation of the total population of children in those care situations.

Regionally, Mozambique (18%) sees comparable rates of children 0-17 not living with a biological parent when compared to other East African states. Southern African countries like Namibia (37%), Lesotho (35%) and Swaziland (33%) see relatively higher number of children 0-17 living away from both biological parents (as seen in Figure 16).



Mozambique’s prevalence of children 0-17 who are not living with their parent, but live in households in which they are related to the household head (family household) is comparable to other Southern and Eastern African countries. At 97% among children 0-14, Mozambique is slightly lower than its neighbors Zimbabwe (98%) and Malawi (98%).



LIMITATIONS:

The data presented here represent children who were residing in households at the time of data collection. It does not include the most vulnerable cohort of children ages 0-17 who are not living in households. These data look at the relationship between the child and the head of the household. They do not provide information on the primary caregiver of the child. Moreover, it does not capture multigenerational households across children not living with a biological parent; therefore, it is possible that a child who is reported as the grandchild of the household head is also cohabitating with an aunt or uncle, sibling, or other relative. Also to note, the available questionnaire categories that capture relationships to household head do not distinguish between maternal and paternal relatives, an area that may warrant closer attention in further data collection efforts.

Another limitation found in this report is the inflexibility of the structured household. Flows of communication, individuals, and funding that build the networks of each individual household remain hidden. The data cannot uncover whether children living with neither biological parent who have living biological parents communicate with them, are visited by them, or are supported financially by them. It does not capture the stability of the household composition, leaving unknown the timing of when a parent left or whether the parent comes and goes routinely. These limitations highlight areas of study that require additional data in order to uncover children’s care structures in Mozambique.

Mozambique 2011																
Table 1. Percent distribution of children under age 18 by living arrangement and survival status of parents, according to background characteristics, Mozambique 2011 TOTAL N=33227																
	Living with both 52.0%	Living with neither 17.9%				Living with mother only 25.6%		Living with father only 4.1%		Missing information 0.4%	Total Count 100.0%	Summary Figures				
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead			Not living with a biological parent	Both parents dead	One parent dead	Number of children 0-14	Number of children 0-17
Sex																
Male	53.2%	2.3%	2.3%	9.9%	1.7%	20.3%	5.5%	3.3%	1.2%	0.3%	100.0%	16.2%	1.7%	11.2%	14627	16403
Female	50.8%	2.2%	3.0%	12.6%	1.7%	20.2%	5.2%	3.0%	0.8%	0.5%	100.0%	19.5%	1.7%	11.2%	14984	16824
Age																
0-1	69.7%	0.1%	0.1%	1.2%	0.1%	26.3%	1.8%	0.4%	0.1%	0.2%	100.0%	1.5%	0.1%	2.2%	4627	4627
2-4	60.7%	1.1%	0.8%	6.5%	0.3%	24.7%	3.1%	2.1%	0.4%	0.3%	100.0%	8.6%	0.3%	5.4%	6262	6262
5-9	53.0%	2.0%	2.0%	10.8%	1.2%	21.0%	4.9%	3.7%	0.8%	0.5%	100.0%	16.1%	1.2%	9.8%	10013	10013
10-14	43.1%	3.3%	4.1%	15.7%	2.7%	16.5%	8.2%	4.4%	1.5%	0.5%	100.0%	25.8%	2.7%	17.2%	8711	8711
15-17	32.6%	5.1%	7.1%	23.5%	5.0%	11.9%	8.2%	4.0%	2.1%	0.5%	100.0%	40.7%	5.0%	22.5%	0	3613
Residence																
Urban	46.9%	2.2%	3.5%	13.2%	2.1%	20.6%	5.4%	4.8%	0.9%	0.5%	100.0%	21.0%	2.1%	12.0%	8437	9773
Rural	54.1%	2.2%	2.3%	10.5%	1.5%	20.1%	5.4%	2.5%	1.0%	0.4%	100.0%	16.6%	1.5%	10.9%	21177	23454
Region																
Niassa	58.7%	2.4%	2.1%	12.9%	1.1%	17.6%	2.5%	2.1%	0.7%	0.0%	100.0%	18.4%	1.1%	7.6%	1936	2108
Cabo Delgado	53.5%	2.8%	2.1%	12.2%	1.5%	21.7%	3.2%	2.6%	0.4%	0.2%	100.0%	18.5%	1.5%	8.4%	2364	2579
Nampula	50.4%	2.3%	3.0%	17.4%	1.0%	17.9%	3.4%	3.8%	0.7%	0.1%	100.0%	23.7%	1.0%	9.4%	4424	4927
Zambezia	59.1%	3.1%	1.7%	6.4%	1.6%	18.6%	6.0%	2.3%	1.1%	0.0%	100.0%	12.8%	1.6%	12.0%	5862	6505
Tete	65.5%	1.6%	1.9%	7.9%	0.9%	13.7%	4.7%	2.3%	1.3%	0.2%	100.0%	12.3%	0.9%	9.5%	3772	4247
Manica	44.8%	1.4%	3.3%	9.6%	2.6%	25.0%	9.1%	3.3%	0.7%	0.2%	100.0%	17.0%	2.6%	14.5%	2026	2304
Sofala	56.2%	2.1%	3.4%	7.6%	3.2%	15.2%	6.2%	4.2%	1.9%	0.2%	100.0%	16.2%	3.2%	13.6%	2782	3209
Inhambane	34.3%	1.5%	2.9%	16.4%	1.1%	30.9%	5.7%	3.4%	1.1%	2.7%	100.0%	22.0%	1.1%	11.2%	1766	1967
Gaza	28.8%	2.4%	4.1%	15.3%	3.0%	32.4%	9.8%	2.8%	0.4%	1.1%	100.0%	24.8%	3.0%	16.7%	1732	1939
Maputo provincia	42.0%	1.9%	4.0%	14.2%	2.1%	24.5%	5.3%	4.0%	1.1%	0.9%	100.0%	22.2%	2.1%	12.3%	1792	2059
Maputo cidade	44.0%	1.7%	2.4%	13.4%	1.6%	24.0%	5.2%	5.9%	0.8%	1.0%	100.0%	19.1%	1.6%	10.2%	117	1383
Wealth index																
Poorest	54.6%	2.5%	1.6%	8.9%	1.5%	21.8%	6.5%	1.5%	0.9%	0.1%	100.0%	14.5%	1.5%	11.6%	6341	6903
Poorer	58.3%	2.3%	2.1%	9.4%	1.4%	18.7%	5.1%	1.8%	0.7%	0.3%	100.0%	15.2%	1.4%	10.3%	6133	6773
Middle	56.8%	2.1%	2.4%	10.6%	1.6%	16.8%	4.8%	3.1%	1.5%	0.3%	100.0%	16.7%	1.6%	10.7%	5967	6676
Richer	44.9%	2.1%	3.3%	12.5%	2.0%	23.5%	6.1%	4.2%	0.7%	0.7%	100.0%	19.9%	2.0%	12.2%	6090	6865
Richest	44.4%	2.2%	3.9%	15.6%	2.0%	20.6%	4.2%	5.4%	1.0%	0.7%	100.0%	23.7%	2.0%	11.3%	5083	6009
Total < 15	54.3%	1.9%	2.1%	9.8%	1.3%	21.3%	5.0%	3.0%	0.8%	0.4%	100.0%	15.1%	1.3%	9.8%	29612	29614
Total < 18	52.0%	2.2%	2.6%	11.3%	1.7%	20.3%	5.4%	3.1%	1.0%	0.4%	100.0%	17.9%	1.7%	11.2%	29612	33227

Table 2. Living arrangements among children under age 18 not living with a biological parent - the percent distribution of survival status of parent and the percent distribution of relationship to head of household, according to background characteristics, Mozambique 2011																				
Mozambique 2011 TOTAL N=6017																				
	Living with neither					Total	Both parents dead	Only one dead	Relationship to head							Total in family care	Total not in family care	Total number of weighted children 0-14	Total number of weighted children 0-17	Total number of unweighted children 0-17
	Only father alive	Only mother alive	Both alive	Both dead	Missing				Wife/husband	Grandchild	Brother/sister	Other relative	Adopted/fostered	Not related	Don't know/missing					
Sex																				
Male	13.9%	14.0%	60.6%	10.2%	1.3%	100.0%	10.2%	27.9%	0.0%	48.6%	10.1%	31.8%	2.1%	4.0%	3.0%	93.0%	4.0%	2078	2689	2862
Female	11.1%	15.0%	63.9%	8.6%	1.4%	100.0%	8.6%	26.1%	7.3%	41.6%	6.9%	32.6%	2.5%	3.6%	2.3%	94.1%	3.6%	2461	3327	3523
Age																				
0-1	9.8%	3.6%	80.3%	4.8%	1.6%	100.0%	4.8%	13.4%	0.0%	69.8%	0.0%	24.5%	2.4%	3.2%	0.0%	96.8%	3.2%	68	68	71
2-4	12.0%	9.2%	74.2%	3.1%	1.4%	100.0%	3.1%	21.2%	0.0%	72.1%	1.5%	23.8%	0.6%	2.1%	0.0%	97.9%	2.1%	548	548	605
5-9	12.2%	12.5%	66.0%	7.5%	1.8%	100.0%	7.5%	24.7%	0.0%	60.3%	4.6%	29.9%	2.6%	1.9%	0.1%	98.0%	1.9%	1638	1638	1801
10-14	12.7%	15.7%	59.8%	10.3%	1.5%	100.0%	10.3%	28.4%	0.5%	44.2%	9.8%	37.4%	3.0%	4.0%	0.3%	95.7%	4.0%	2284	2284	2366
15-17	12.4%	17.4%	57.4%	12.3%	0.6%	100.0%	12.3%	29.8%	15.7%	17.0%	13.1%	30.3%	1.6%	6.1%	10.0%	83.9%	6.1%	0	1478	1542
Residence																				
Urban	10.6%	16.4%	61.9%	9.8%	1.3%	100.0%	9.8%	26.9%	2.2%	36.5%	10.3%	41.5%	2.0%	4.5%	1.9%	93.6%	4.5%	1504	2075	2540
Rural	13.3%	13.6%	62.7%	9.0%	1.4%	100.0%	9.0%	26.9%	5.0%	49.1%	7.3%	27.3%	2.5%	3.3%	3.0%	93.7%	3.3%	3035	3942	3845
Region																				
Niassa	13.0%	11.3%	69.9%	5.7%	0.0%	100.0%	5.7%	24.3%	5.0%	60.2%	3.9%	21.1%	1.1%	3.8%	4.4%	91.7%	3.8%	307	388	538
Cabo Delgado	14.9%	11.1%	65.6%	8.0%	0.4%	100.0%	8.0%	26.0%	5.4%	48.0%	8.3%	26.8%	2.6%	5.1%	2.7%	92.2%	5.1%	377	479	555
Nampula	9.6%	12.5%	73.1%	4.3%	0.4%	100.0%	4.3%	22.1%	5.7%	45.7%	10.5%	28.7%	1.0%	0.8%	6.1%	93.2%	0.8%	895	1173	650
Zambezia	24.1%	13.4%	50.0%	12.5%	0.0%	100.0%	12.5%	37.5%	5.1%	42.1%	7.2%	37.2%	1.9%	3.4%	1.3%	95.3%	3.4%	625	833	448
Tete	12.9%	15.4%	63.9%	7.2%	0.5%	100.0%	7.2%	28.4%	7.9%	50.5%	8.7%	23.9%	0.7%	6.5%	1.1%	92.4%	6.5%	375	524	407
Manica	8.4%	19.5%	56.3%	15.2%	0.6%	100.0%	15.2%	27.9%	4.0%	29.4%	14.9%	33.5%	5.1%	5.6%	4.8%	89.6%	5.6%	260	394	508
Sofala	13.0%	20.7%	46.6%	19.4%	0.3%	100.0%	19.4%	33.7%	3.5%	31.3%	12.9%	39.0%	1.0%	6.3%	1.4%	92.3%	6.3%	339	522	618
Inhambane	6.5%	12.2%	68.9%	4.6%	7.8%	100.0%	4.6%	18.7%	0.5%	46.9%	4.1%	36.5%	6.3%	3.0%	0.9%	96.1%	3.0%	383	469	647
Gaza	9.4%	16.0%	59.9%	11.8%	2.9%	100.0%	11.8%	25.4%	0.9%	46.7%	6.1%	35.4%	3.4%	3.1%	1.0%	95.8%	3.1%	409	495	801
Maputo provincia	8.6%	17.7%	62.6%	9.2%	2.0%	100.0%	9.2%	26.2%	1.3%	48.6%	5.1%	36.1%	3.3%	3.7%	0.1%	96.3%	3.7%	365	467	651
Maputo cidade	8.6%	12.4%	67.8%	7.9%	3.3%	100.0%	7.9%	21.0%	0.5%	44.0%	7.1%	38.9%	1.7%	4.8%	1.3%	93.9%	4.8%	204	273	562
Wealth index																				
Poorest	16.8%	11.3%	60.9%	10.1%	0.9%	100.0%	10.1%	28.1%	8.4%	56.1%	6.7%	21.3%	0.7%	1.1%	4.1%	94.8%	1.1%	778	1007	749
Poorer	15.2%	13.7%	61.0%	9.0%	1.1%	100.0%	9.0%	28.9%	6.2%	54.8%	5.3%	23.4%	1.8%	2.3%	3.7%	94.0%	2.3%	814	1042	929
Middle	12.3%	14.1%	63.4%	9.5%	0.7%	100.0%	9.5%	26.4%	4.3%	48.4%	11.2%	25.4%	2.3%	2.8%	2.9%	94.3%	2.8%	854	1121	1135
Richer	10.5%	16.0%	61.5%	9.9%	2.1%	100.0%	9.9%	26.5%	2.7%	37.2%	8.3%	39.8%	3.2%	4.4%	2.2%	93.5%	4.4%	1048	1397	1615
Richest	9.1%	16.3%	64.7%	8.2%	1.7%	100.0%	8.2%	25.4%	0.6%	34.1%	9.6%	44.1%	3.0%	6.7%	1.0%	92.3%	6.7%	1044	1450	1957
Total < 15	12.4%	13.6%	64.1%	8.3%	1.6%	100.0%	8.3%	26.0%	0.3%	53.8%	6.8%	32.8%	2.5%	3.0%	0.2%	96.8%	3.0%	4539	4539	4843
Total < 18	12.4%	14.5%	62.4%	9.3%	1.4%	100.0%	9.3%	26.9%	4.1%	44.7%	8.4%	32.2%	2.3%	3.8%	2.6%	93.6%	3.8%	4539	6017	6385