

MOZAMBIQUE

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
By the end of 2021, retention at 3 months among people living with HIV who were newly initiated on antiretroviral treatment (ART) in 29 districts, that make up 70% of the long-term follow up, increased by 30% compared to 2018.	SLOW PROGRESS	By the end of September 2020, the three-months retention on ART among people living with HIV who were newly initiated on antiretroviral treatment was 87%, a 23% increase from September 2018 (PEPFAR, 2020).
By 2021, retention at 12 months among pregnant and lactating women living with HIV enrolled on PMTCT increased from 64% to 80%.	SLOW PROGRESS	In 2019, the 12-month retention on ART among pregnant and lactating women reached 68%, which is a 3% increase from 2018 (Annual HIV Report, 2019).
By 2021, coverage of HIV combination prevention service tailored for adolescent girls and young women, their male partners, and key populations—sex workers, men who have sex with men, and people who inject drugs—in select high-burden districts and fast-track cities increased by 20%.	ON TRACK	2020 data not available. In 2019, an estimated 25.6% of female sex workers, 19% of men who have sex with men, and 6.8% of people who inject drugs accessed HIV prevention, care, and treatment services (UNAIDS Analysis, 2020). By 2020, 62 out of the total 142 districts in Mozambique implemented HIV combination prevention programmes tailored for adolescent girls and young women, and their partners (Global Prevention Coalition Scorecard, 2020).
By the end of 2021, capacity of the relevant stakeholders is enhanced to review and amend laws and policies presenting barriers to HIV prevention, treatment, and care services, and improved laws and policies are implemented to address violations of human rights.	SLOW PROGRESS	The national HIV strategy for faith-based organizations was developed to strengthen community-led HIV response. Networks of people living with HIV and civil society organizations (CSOs) received capacity building support to implement the Stigma Index 2.0 and the Community-led Monitoring strategy.

By the end of 2021, capacities of relevant stakeholders, including humanitarian clusters, are built, and enhanced to prepare for and address HIV in emergencies across the care continuum, including prevention actions.	ON TRACK	The National Strategic Plan 2021-2025 (NSP V) was completed and includes strategic actions to ensure continuity of HIV services during humanitarian crisis.
By the end of 2021, validated strategic information is strengthened and used to inform strategic planning and monitoring of Mozambique's progress in reaching the fact-track targets.	ON TRACK	The creation of a district estimates dashboard, situation room visualization, prevention scorecard and Geographic Information System mapping of prevention interventions in high-burden districts improved the quality of data use.

JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, UNODC, UN WOMEN, ILO, UNESCO, WHO, UNAIDS SECRETARIAT, IOM

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

In Mozambique, the UN Joint Team made critical contributions to improve HIV prevention and treatment services to vulnerable and key populations, including adolescent girls and young women, sex workers, and internally displaced people. Political commitment for prevention was sustained and the new National Condom Strategy 2020-2025 launched. Advances were also made in re-enrolling people living with HIV who were lost to follow up. Integration of support for HIV services in humanitarian settings and migrant-prone areas contributed to improve access of services for vulnerable populations. Mobilizing increased resources for HIV prevention and testing services among groups at high-risk of infection and strengthening strategic information and community-led programme monitoring were other crucial areas of focus of the Joint Team in 2020.

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ADVOCACY; TECHNICAL SUPPORT; FOSTERING PARTNERSHIPS

The Joint Team provided financial and technical support to rollout the national ART literacy campaign (including on the U=U¹ concept, treatment adherence and retention), led by the Ministry of Health, using 26 community radio stations and the public transportation system.

In partnership with the Blue Box Roadside Wellness project, HIV, tuberculosis, and sexually transmitted infections (STI) prevention and treatment services that combined social and behaviour change communication (SBCC) were delivered to truck drivers, female sex workers, adolescent girls and young women, and other community members at the Beira transport corridor. 4447 people were engaged with HIV counselling and testing services and 2391 received HIV testing of whom 17 were diagnosed with HIV and enrolled into ART.

¹ U=U, or Undetectable=Untransmittable is a scientifically proven concept which refers to people living with HIV who achieve and maintain an undetectable viral load—the amount of HIV in the blood— by taking ART daily as prescribed, cannot sexually transmit the virus to others.

Additionally, a patient-centred HIV case management system was implemented in Beira City, to improve HIV testing and treatment adherence among adolescent and young people. Towards the end of 2020, over 32 460 visits and sessions had been provided through eight youth-friendly service centres.

1600 Mozambican miners working in South Africa received HIV testing and counselling at Ressano Garcia border occupational health clinic; and 51 miners who tested positive were linked to treatment and care services and 600 miners living with HIV already on treatment were supported for treatment adherence, both via cross-border referrals and follow-up system.

Finally, a prefabricated container clinic, medical equipment, and furniture were installed within the Special Juvenile Recovery Penitentiary Facility premises, resulting in the provision of primary health care services and integrated HIV, TB, and other health services to approximately 200 prison inmates.

PMTCT COVERAGE

POLICY DIALOGUE; FINANCIAL AND TECHNICAL SUPPORT; PARTNERSHIPS

In August 2020, a costed Triple Elimination of Mother-to-Child Transmission of HIV, Hepatitis B and Syphilis Plan 2020-2024 was completed and launched by the First lady of Mozambique, with technical and financial support from the Joint Team. The plan aims to address the challenges around testing and retaining pregnant and lactating women and their children on treatment.

The Joint Team supported integration of early infant diagnosis (EID) and viral load testing in 34 point-of-care sites and trained 109 operators. By the third quarter of 2020, around 9859 infants were tested at these sites, of whom 142 tested positive for HIV and 139 of them were enrolled on ART. Moreover, 60 preventive medicine technicians were trained on provider-initiated HIV counselling and testing (PICT) and 49 testing spaces were equipped to conduct HIV testing to improve routine quarterly testing among pregnant and breastfeeding women.

In Beira City, 200 community health workers and 20 young female mentors living with HIV were trained to improve community-led eMTCT services. As a result, 750 adolescent girls and young women received youth-friendly services where 30% of the young people tested positive for HIV and 5% were found to be pregnant, all were referred to ART and antenatal care services.

HIV PREVENTION

POLICY ADVICE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

The Global HIV Prevention Coalition scorecard was completed to assess progress against the global target of a 75% reduction of new HIV infections, resulting in increased political commitment and accountability in the national HIV prevention efforts. The National Condom Strategy 2020-2025 was developed and launched to improve uptake and access to prevention commodities.

Between 2018-2020, the government-led Rapariga Biz programme—a peer mentor training initiative intended to improve sexual and reproductive health services and support among secondary school girls—trained 4890 female mentors and provided HIV prevention information to 153 664 girls, and 8155 mentor girls attended youth-friendly SRH services in Nampula and Zambezia provinces. Additional 1345 mentored girls from the Rapariga Biz supported districts were tested for HIV, of whom 5% tested positive and were linked to ART services. Similarly, the Joint Team through its 'Spotlight' initiative reached 40 864 girls with HIV prevention information and trained 1298 mentor girls on ending sexual and gender-based violence and promotion of sexual and reproductive rights for women and girls. The 'SMS BIZ' digital platform also disseminated HIV prevention and SRH messages to 49 873 young people in the country.

Collaboration with a network of 200 change agents reached 108 734 adolescent and young people, female sex workers, and migrants with peer education sessions on HIV and sexual and reproductive health (SRH) through 49 community dialogues promoting safe and healthy decisions across the provinces of Maputo, Tete, and Cabo Delgado. Around 10 300 who attended the dialogues were referred to HIV services, including testing, counselling, and care.

73 prison healthcare staff, guards, and correctional officers were trained in two regional trainings to improve integrated HIV, SRH and tuberculosis services among prison inmates. Similarly, Mozambique's National Harm Reduction Plan is currently under development and three provisional seminars, with a total of 90 participants, were held to strengthen collaboration between the police force, civil society organizations (CSO), and non-governmental bodies to improve services for people who inject drugs.

HUMAN RIGHTS AND GENDER EQUALITY

ADVOCACY; POLICY DIALOGUE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

The Joint Team continues to provide technical and financial support to the National AIDS Council and the Ministries of Health and Justice for the implementation of core human rights interventions supported by the Global Fund, particularly programmes designed to eliminate stigma and discrimination against people living with HIV and key populations. For example, trade unions and labour inspectors received technical support and tools to increase advocacy for the implementation and monitoring of HIV and AIDS laws in the workplace.

Mozambique is now included as a champion country for the 'Education Plus' initiative—a high-level political advocacy initiative that seeks to empower adolescent girls and young women and mobilize resources to attain gender equality in sub-Saharan Africa.

HIV AND HUMANITARIAN RESPONSE

ADVOCACY; POLICY DIALOGUE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

A United Nations Joint Team Humanitarian Technical Working Group was established, and a comprehensive work plan was developed to respond to HIV and humanitarian emergencies swiftly and efficiently. Data on HIV burden and gaps by district informed the Humanitarian Response Plan and a new indicator was included to identify the number of people living with HIV aged 0-15 years on ART.

The Joint Team mobilized US\$ 85 000 to support community organizations and network of people living with HIV in ensuring access to HIV services in the Cabo Delgado province; 1735 people living with HIV who were lost to follow up were identified and 1055 were re-enrolled on treatment. Over 60 community-based activists were also trained to raise awareness around HIV, tuberculosis, SRH and gender-based violence and promote testing and treatment. The trained activists reached 50 685 people through small group sessions and house-to-house visits.

The Joint Team supported efforts in humanitarian settings and migrant-prone areas to improve access of services for vulnerable populations. Between October 2019 and April 2020, in the aftermath of the Cyclone Kenneth, 2400 individuals were mobilized through community dialogues on HIV and tuberculosis prevention and treatment services in Cabo Delgado province.

GOVERNANCE AND SUSTAINABILITY

POLICY DIALOGUE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

The Joint Team provided technical and financial support to the National AIDS Council to develop a comprehensive and evidence-based 5th National Strategic Plan against HIV/AIDS 2021-2025 (NSP V) which will be finalized in early 2021. This included development of strategic information products, mobilization of consultants, support to national and provincial consultations, and peer review. Key features of the NSP V include a comprehensive monitoring and evaluation plan and costing, communication strategy, strengthened multisectoral approach, set of targets informed by the global 2025 targets, and a stronger focus on the HIV response during emergencies.

The Joint Team provided technical support to develop an evidence-based Global Fund grant proposal mobilizing US\$ 573 million for HIV and tuberculosis programmes. This included development of strategic information products; and support to planning, coordination and an inclusive consultation process. As a result, the Global Fund grants included a stronger focus on HIV prevention (US\$ 60 million), an increase in funding for testing services including self-testing, a comprehensive approach to human rights, and a significant investment in health and community systems.

National capacities to enhance strategic information for HIV programmes were built. 15 experts were trained on the effective use of spectrum, acquired drug resistance, shiny90 and Naomi tools leading to the generation of updated Spectrum estimates on HIV testing, diagnosis rates, and knowledge of HIV status by age and sex, as well as district-level estimates using the Naomi estimation model.

In partnership with Georgetown O'Neil Institute of Health Gap, technical assistance was provided to the National AIDS Council and networks of people living with HIV to develop community-led monitoring tools, including community-led monitoring guide, mobile data collection, and advocacy toolkit. 20 community monitors were also trained to pilot community-led monitoring initiatives in five health facilities aimed at improving treatment retention.

Findings of the above activities were used to support national programme planning and implementation, the development of the NSP V, Global Fund 2021-2023 grant application, and PEPFAR Country Operation Plan (COP20).

CONTRIBUTION TO THE COVID-19 RESPONSE

A rapid assessment was completed to identify the needs of people living with HIV during the COVID-19 pandemic and inform subsequent response activities. To ensure service continuity, a personal protective equipment (PPE) distribution campaign delivered 20 000 masks, 300 boxes of bar soap, 290 water buckets to 10 000 women living with HIV in the province of Gaza. Another 20 frontline organizations of women living with HIV received PPE to ensure their safety while continuing to serve their communities in Gaza Province. In partnership with Reckitt Benckiser, 90 000 bars of soap, 30 000 bottles of bleach, and 10 000 cloth face masks were procured and distributed to people living with HIV. COVID-19 infection prevention and PPE were also distributed in 12 prisons in Mozambique resulting in increased control of the pandemic and safety of around 20 000 prison inmates.

The Joint Team provided technical and catalytic funding of US\$ 20 000 to four organizations of people living with HIV to support health facilities and surrounding communities in Maputo City and Matola municipalities. As a result, 80 activists have been trained to ensure continuity of ART services for 13 500 people living with HIV who were transferred from COVID-19 health centres or currently receiving ART in high-volume facilities.

The development of various social and behaviour change communication, and educational materials were supported to increase awareness and promote safe and health seeking behaviour particularly among adolescent and young people. Hence, the Ministry of Education developed 900 brochures, 700, pamphlets, and 3 rollups on COVID-19 transmission and prevention and disseminated in Maputo targeting students from public and community schools and teachers training institutes. In collaboration with the national forum of community radios, COVID-19 prevention and other health messages were broadcasted on community radios in 11 provinces.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team has collectively contributed to the SDG 3, 5 and 10. The approaches applied across all interventions were aimed at reducing inequalities among vulnerable populations especially the adolescent girls and young women, migrants, and key populations to ensure no one is left behind. The Joint Team also contributed to the development of the Country Common Analysis initiated in 2020, which will be a critical input to inform the United Nations Sustainable Development Cooperation Framework (UNSDCF) in 2021.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>At the end of 2020, HIV testing and linkage to treatment services was low among adolescent and young people aged 18-24 years and key population. Stigma, economic migration, low treatment literacy and poor relationships with health facilities resulted in poor retention of ART among people living with HIV.</p>	<p>Provide technical and financial support for the national HIV and tuberculosis literacy campaign.</p> <p>Provide technical assistance to scale-up community-based, public-private pharmacy and workplace HIV self-testing services.</p>
<p>With a vertical transmission rate of 14%, Mozambique is far behind the eMTCT target. In 2019, there were 15 000 new paediatric HIV infections with majority occurring during breastfeeding and mothers dropping off ART during breastfeeding (GAM 2020). In 2020, an estimated 46 000 children did not have access to treatment.</p>	<p>Advocate, develop creative solutions, and mobilize families, communities, and faith-based organizations to identify children living with HIV who are undiagnosed and untreated.</p> <p>Provide technical assistance to the Ministry of Health to analyse vertical transmission among children of mothers aged 15-24 years.</p> <p>Support transition to Dolutegravir based regimen for children living with HIV.</p>
<p>Lack of a comprehensive HIV prevention roadmap, and a national and sub-national results framework.</p> <p>Low condom use is the leading cause of new HIV infections in Mozambique. Lack of data on condom use, limited coverage, and coordination between demand generating programmes exacerbate the challenges.</p>	<p>As part of implementation of the NSP V, provide technical support to develop a national HIV prevention roadmap, strengthen prevention stewardship, and develop, implement and monitor the national condom strategy operational plan.</p> <p>Support expansion of HIV prevention services for key and vulnerable populations focusing on female sex workers at border posts, prisoners, people who inject drugs and migrants.</p> <p>Provide technical support to scale up services for adolescent girls and young women, including comprehensive sexuality education, youth-friendly HIV and SRH services, and implementation of the Education Plus Initiative.</p>
<p>Persistent stigmatizing and discriminatory attitudes towards people living with HIV, men who have sex with men, female sex workers and other key populations within health facilities, family members and social settings continue to discourage uptake of HIV prevention and treatment services.</p> <p>Women of all ages in Mozambique face a disproportionate HIV burden, especially adolescent girls and young women aged 15 to 24 years.</p>	<p>Support the government to implement the Stigma Index 2.0, the Global Partnership for Action to eliminate HIV-related stigma and discrimination.</p> <p>Assist with capacity building of parliamentarians from the Women’s Caucus on the SADC Gender Responsive Oversight Model to ensure equity and equality in the HIV response.</p> <p>Provide technical and financial support to train law makers, members of the law enforcement and CSOs on the national HIV legislation and policies.</p>

<p>Mozambique remains at risk of natural disasters—drought, flooding, and cyclones—often disrupting HIV and other health care services. The ongoing armed conflict in Cabo Delgado resulted in closures of 75 health facilities significantly limiting access to services among 400 000 internally displaced people.</p>	<p>Support the Government to strengthen the humanitarian monitoring system.</p> <p>Advance the integration of HIV services in the national, provincial, and district emergency preparedness and response plans.</p> <p>Provide technical support for planning, resource mobilization, and coordination of HIV services in humanitarian response in Cabo Delgado.</p>
<p>There is concern around the sustainability of the national HIV response as it is 97% dependent on external funding.</p> <p>Poor quality of data and health information system add to the challenges in targeted programme implementation and delivery of quality services.</p>	<p>Provide technical support to complete the PEPFAR's Sustainability Index and Dashboard for 2021 and advocacy for increased domestic investments.</p> <p>Support the roll out of the Integrated HIV Biobehavioural Surveillance (IBBS) survey to capture essential behavioural data linked to HIV infections among key populations.</p> <p>Provide technical support to improve patient tracking systems and unique identifiers, and develop key strategic information, including the spectrum estimates, key population size estimates, geospatial mapping.</p>

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