# STRATEGIC FOCUS

The Centers for Disease Control and Prevention (CDC) has been providing support to Mozambique's public health sector since 2000 in order to help develop the country's response to the dual HIV and tuberculosis (TB) epidemic. CDC supports implementation of key HIV and TB interventions and provides technical assistance (TA) to the Ministry of Health (MOH) in scaling-up evidence-based interventions. CDC works closely with the MOH and implementing partners in addressing the country's immediate needs, and supports building of long-term capacity to mitigate the impact and HIV epidemic control.

Strengthening Health System Capacity: CDC works closely with the MOH to deliver high quality HIV prevention and treatment services to strengthen laboratory, surveillance, infrastructure, and workforce capacity, and to develop operational research in all 11 provinces with intensified efforts where HIV prevalence rates are highest. CDC is supporting the MOH to improve the availability, accessibility, quality, and use of service-delivery data. CDC is conducting HIV surveillance and behavioral surveys, designing and improving systems to support routine program monitoring, and strengthening and expanding the health management information systems (HMIS) infrastructure.

Supporting Integrated HIV Prevention and Treatment Services: CDC supports the delivery of antiretroviral therapy (ART) as part of the national program that reaches 914,000 patients, and is helping to rapidly scale-up viral load (VL) and drug resistance assessments to leverage the country's capacity to reach the United Nations Programme on HIV/AIDS (UNAIDS) 90-90-90 goals in 2020. CDC also supports the provision of HIV counselling and testing, prevention of mother-to-child HIV transmission services in more than 800 health facilities, as well as voluntary medical male circumcisions (VMMC) at over 50 fixed and mobile sites to further increase the control of the HIV epidemic.

Responding to HIV & Tuberculosis (TB) Epidemics: CDC supports the MOH in its response to the national TB burden, the leading cause of death for those living with HIV. CDC provides technical assistance in the development of national policies and strategies, training materials, and mentoring and supervision activities. As a result, our work is dramatically improving the laboratorial and clinical capacity for TB/HIV diagnostics and treatment. CDC implementing partners are also working with key populations - such as miners, prisoners, and health care workers. This collaborative is also working with families of TB patients to improve detection of TB and HIV.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**Increasing Access to Antiretroviral Treatment:** Through the development of national policies, including the National Accelerated Response to HIV, access to treatment has been dramatically increasing. In FY2017, CDC with other USG agencies continued to support the expansion of the Test and Start policy.

**Prevention of Mother-to-Child Transmission of HIV:** Identifying and treating HIV-positive pregnant women is the most effective approach to eliminate new infections among infants. CDC's support for ensuring pregnant women receive HIV treatment makes it possible for thousands of babies to be born HIV-free. CDC supports MOH to make HIV testing and treatment available to all HIV-exposed infants.

**Voluntary Medical Male Circumcision:** With lifelong benefits, this low-cost procedure reduces the risk of female-to-male sexual transmission of HIV by approximately 60%. The service also adds value by connecting men to health care and offering a package of services, including education on safer sex, and HIV testing and counselling services with links to HIV treatment services for those who are HIV-positive.

**Viral Load Monitoring Expansion:** Access to high quality VL monitoring is considered essential for controlling the HIV epidemic, and is a top priority for CDC in Mozambique. Since 2016, according to the Mozambique MOH, CDC's contribution resulted in the expansion of viral monitoring to 12 referral laboratories, and an increase in the national capacity to perform approximately 74,000 VL tests per month. VL monitoring has increased substantially, from under 2,000 tests performed per month in September 2015 to over 50,000 tests performed in December 2017.

**Detection and Access of Miners and Prisoners to HIV and TB Treatment:** Mine workers and prisoners have some of the highest rates of TB, HIV and TB/HIV in Africa. CDC implementing partners are identifying and referring for treatment miners with HIV and TB. Through mid-2018, almost 600 miners were screened with over 30% being found to have HIV and TB. CDC is supporting screening prisoners, identifying 360 persons with TB disease each in 2016 and 2017. This is a three-fold increase compared to 2015.

#### **Key Country Leadership**

President: Filipe Jacinto Nyusi

Minister of Health: Nazira Vali Abdula

U.S. Ambassador: Dean Pittman

PEPFAR Coordinator: Jacky Sesonga

CDC/DGHT Director: Alfredo Vergara

### **Country Quick Facts**

Per Capita GNI: \$580 (2015)

Population: 28.83 million (2016)

Under 5 Mortality: 71 / 1,000 live births (2016)

Life Expectancy: 58 years (2016)

### **Global HIV/AIDS Epidemic**

Estimated HIV Prevalence (Ages 15-49): 12.3% (2016)

Estimated AIDS Deaths (All ages): 62,000 (2016)

Estimated Orphans Due to AIDS: 1,200,000 (2016)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 914,000 (2016)

# Global Tuberculosis (TB) Epidemic

Estimated TB Incidence: 551 / 100,000 (2016)

TB patients with known HIV-status who are HIV-positive: 44% (2016)

TB Treatment Success Rate: 88% (2015)

# **Country Staff:**

Locally Employed Staff: 65 Direct Hires: 20 Fellows: 4





