



**Office of the
United States
Global AIDS
Coordinator**

Providing leadership,
coordination and
oversight to the uni-
fied U.S. Government
effort to implement
the President's
Emergency Plan for
AIDS Relief

Country Profile — *Mozambique*

U.S. President's Emergency Plan for AIDS Relief



HIV/AIDS Situation in Mozambique

HIV Infected: 1.3 million¹
AIDS Deaths: 110,000¹
AIDS Orphans: 470,000¹

Mozambique is facing a severe, generalized HIV/AIDS epidemic, but the impact is not uniformly distributed. Poverty, limited health infrastructure, and corridors of increased population mobility are the primary determinants of high HIV prevalence rates. A civil war restricted movement within and outside the country until 1992, but economic and commercial activity since then has rapidly fueled HIV prevalence to levels nearly as high as those in neighboring countries. Prevalence of HIV infection is estimated to be 15 percent in 2005, with more than 500 new infections each day. Mozambique suffers co-epidemics of tuberculosis (TB) and malaria as well as seasonal cholera outbreaks, all of which exacerbate the impact of HIV/AIDS.

U.S. Government Response

The U.S. is supporting Mozambique's response to HIV/AIDS by:

- ◆ Furthering the implementation of the Ministry of Health's (MOH) strategic plan for scaling up care and treatment services for HIV/AIDS through a network model, and working with other major funding partners to ensure the success of this scale-up.
- ◆ With bilateral and multilateral partners, ensuring the implementation and monitoring of the multi-sectoral national response to HIV/AIDS, coordinated by the National AIDS Council, through direct funding of civil society and private sector partners as well as technical and material support to key government agencies.
- ◆ Strengthening HIV/AIDS prevention, care, and treatment for military and police forces.
- ◆ Developing community-level leadership and support for home care, treatment follow-up, referral to services, psychosocial support, counseling and testing, and prevention of new infections.
- ◆ Linking government partners, international and indigenous nongovernmental organizations (NGOs), academic institutions, community-based organizations, employers, and faith-based organizations.
- ◆ Finding a balance between immediate needs and building longer-term capacity to effectively address HIV/AIDS in Mozambique.

Recognizing the global HIV/AIDS pandemic as one of the greatest health challenges of our time, President George W. Bush announced the President's Emergency Plan for AIDS Relief (the Emergency Plan) in 2003 — the largest international health initiative in history by one nation to address a single disease. Under the leadership of the U.S. Global AIDS Coordinator, U.S. Government (USG) agencies implement the Emergency Plan, working collaboratively as strong, interagency country teams under the direction of the U.S. Ambassador. These teams capitalize on the expertise of each USG agency and leverage partnerships with host governments, multilateral institutions, NGOs and the private sector to implement effective programs for combating HIV/AIDS and ensure efficient use of USG resources.

Mozambique is one of 15 focus countries of the Emergency Plan which collectively represent at least 50 percent of HIV infections worldwide. Under the Emergency Plan, Mozambique received nearly \$37.4 million in FY2004 to implement a comprehensive HIV/AIDS prevention, treatment and care program in line with Mozambique's national strategies. In FY2005, the U.S. is providing more than \$57.2 million to support Mozambique's fight against HIV/AIDS.

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¹ UNAIDS, Report of the Global AIDS Epidemic, 2004.



Emergency Plan Achievements in Mozambique

Challenges to Emergency Plan Implementation

As Mozambique scales up HIV/AIDS programs and more people are reached with prevention, care, and treatment services, it is vital to strengthen the capacity of Mozambican individuals and institutions to manage and deliver these services. There are about 650 physicians in Mozambique, 270 of them in the capital city. This situation leaves some districts of the country with one doctor to serve 70,000 people, sharply limiting the speed of service expansion. Shortages of other health providers (such as nurses, pharmacists, lab technicians) are comparable. Outside of the health system, where the multi-sectoral HIV/AIDS response depends fundamentally on community-based initiatives and volunteers, Mozambique also is severely disadvantaged, with an adult literacy rate of only 40 percent (23 percent among women). In light of these challenges, all USG-funded HIV/AIDS programs in Mozambique incorporate strong training and support components that are intended to improve the efficiency of current service providers, increase the number of providers, and help partner organizations, especially Mozambican partners, to become more efficient at providing quality services.

# of individuals reached with community outreach HIV/AIDS prevention programs that promote Abstinence and Being Faithful	385,000
# of pregnant women receiving PMTCT	36,100
# of pregnant women receiving antiretroviral prophylaxis	2,300
# of individuals receiving counseling and testing	138,800
# of HIV-infected individuals who received palliative care/basic health care and support	27,700
# of Orphans and Vulnerable Children (OVCs) who were served by an OVC program	46,500
# of individuals receiving upstream system strengthening support for treatment ¹	8,300
# of individuals receiving downstream site-specific support for treatment ²	2,000

Prevention and care results reflect accomplishments through September 2004 and combine upstream and downstream support. Treatment results reflect accomplishments through March 2005.

¹ Number of individuals reached through upstream systems strengthening includes those supported through contributions to support national strategies through national, regional, and local activities such as training, laboratory support, monitoring and evaluation, logistics and distribution systems, protocol and curriculum development.

² Number of individuals reached through downstream site-specific support includes those receiving treatment where the Emergency Plan supports programs at the point of service delivery.

Critical Interventions for HIV/AIDS Prevention

- ◆ Thousands of trained volunteers and community agents, many of them mobilized through pastor networks, are working through schools, churches, and community forums, to help young people better understand HIV/AIDS risks, and to mobilize adults and community leaders to support safe behaviors that will protect young people from early sexual debut, sexual coercion, and HIV infection.
- ◆ Targeted programs to address most-at-risk groups, including uniformed services, migrant workers, adults and older youth (including women) living in high-prevalence corridors, and their partners are supported. These programs emphasize partner reduction, faithfulness, and consistent condom use. Condom social marketing is part of these behavior change activities.
- ◆ Technical, training, and commodity support is provided to reorganize the national blood transfusion program and blood banks, as well as to improve standard practices and waste management in all health facilities to reduce the risk of inadvertent medical transmission of HIV.

Critical Interventions for HIV/AIDS Care

- ◆ USG support is enabling Mozambicans to learn their HIV status in growing numbers. This is a first step in preventing new infections and in ensuring that those who are HIV-positive access the care and treatment services they need.
- ◆ Through USG-funded NGOs, trained volunteers work in their own communities to identify and help provide services to families gravely affected by HIV/AIDS. These services include specific support to ensure that orphaned or otherwise vulnerable children eat every day, get to school, have basic shelter and health care, and remain part of their communities.
- ◆ Technical and training support to the MOH and the Ministry of Women and Social Action help create coordinated referral mechanisms for home-based and family-oriented care, to ensure that patients and families in need are reached with the full range of support services available.

Critical Interventions for HIV/AIDS Treatment

- ◆ USG resources continue to help train large numbers of nurses and allied health staff in treatment and care of people living with HIV/AIDS. Working through a network model that incorporates clinical and home-based services, USG support also helps Mozambique to develop a patient follow-up and referral system that can ensure integrated patient care and improve the success of antiretroviral therapy (ART).
- ◆ The essential clinical laboratory capacity needed for successful ART services in Mozambique is being expanded, and service quality improved, with USG support.
- ◆ In 2005, the USG will provide “second-line” and pediatric formulation antiretroviral drugs, and improve supply chain and logistics systems to ensure uninterrupted availability of medicines and supplies essential to ART.