

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) has supported Mozambique’s public health sector since 2000 to help develop and strengthen the country’s response to the dual HIV and tuberculosis (TB) epidemics. CDC is a lead implementing agency of the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) and works closely with the Ministry of Health of Mozambique (MISAU), the Mozambican National Institute of Health, and various implementing partners to help the country achieve HIV epidemic control in seven of the country’s 11 provinces. CDC’s activities include strengthening health systems, including laboratories, surveillance, infrastructure, and human resources for health. CDC is committed to using data to inform program decision-making to improve healthcare service delivery. The agency’s efforts focus on supporting and creating capacity for HIV and TB biological and behavioral surveillance that can inform the national response to these diseases.

Supporting Integrated HIV Prevention and Treatment Services: CDC supports the delivery of HIV prevention and treatment services in 498 health facilities by offering technical and financial assistance to the MISAU to further the country’s capacity to reach the Joint United Nations Program on HIV/AIDS (UNAIDS) global epidemic control targets. With an emphasis on interventions that improve equitable coverage of HIV services among vulnerable and hard-to-reach populations, CDC is committed to strategic HIV case-finding and preventing new HIV infections through voluntary medical male circumcisions, pre and post-exposure prophylaxis, programs for the prevention of mother-to-child transmission, key populations, adolescent girls and young women, and gender-based violence. CDC and the MISAU are committed to scaling up client-centered services, putting all HIV-positive clients on antiretroviral therapy (ART), providing differentiated service delivery models to improve HIV treatment coverage and retention, and ensuring that patients have suppressed HIV viral loads, ultimately reducing morbidity, mortality, and transmission.

Responding to HIV and Tuberculosis Co-infection: To respond to TB, the leading cause of death among people living with HIV (PLHIV), CDC provides technical assistance for developing national policies, strategies, training, communication materials, and mentoring and supervising activities. This work dramatically improves laboratory and clinical capacity for TB/HIV prevention, diagnostics, and treatment. CDC also provides service delivery support for cervical cancer prevention and treatment among PLHIV and screening and treatment of advanced HIV disease and related comorbidities.

Mitigating Impact of the COVID-19 Pandemic: Since the onset of COVID-19, CDC has worked with national health authorities to help monitor and mitigate the impact of the pandemic on HIV and TB programs. This includes funding and technical assistance to develop and implement health policies, guidelines, and tools to ensure services are delivered safely at health facilities and community levels.

KEY ACTIVITIES AND ACCOMPLISHMENTS

HIV Testing and Counseling: Access to HIV testing and counseling is critical for ensuring people receive prompt HIV care and treatment services. During fiscal year (FY) 2022, CDC supported more than 6.1 million HIV tests, leading to the diagnosis and linkage to care of 201,436 PLHIV (PEPFAR data 2022).

Supporting Universal Access to Antiretroviral Treatment: From development to implementation of national policies, CDC’s efforts have contributed to dramatically increased ART access in Mozambique. As of September 2022, 1,195,428 PLHIV received ART at a CDC-supported health facility.

TB/HIV: TB preventive treatment (TPT) is critical to reducing morbidity and mortality among PLHIV. Addressing TB also entails routine TB and HIV screening, follow-up evaluation, and treatment initiation. In FY 2022, 325,642 PLHIV on ART initiated and completed a form of TPT at a CDC-supported health facility.

Prevention of Mother-to-Child Transmission of HIV: Diagnosing and treating pregnant and lactating women with HIV infection is the most effective approach to eliminating new infections among infants. Throughout FY 2022, 68,625 women, representing 100 percent of pregnant women with HIV infection were on ART to prevent mother-to-child transmission of HIV at a CDC-supported facility (PEPFAR data 2022).

Voluntary Medical Male Circumcision (VMMC): With lifelong benefits, VMMC reduces the risk of female-to-male HIV acquisition by approximately 60 percent. Since the program’s inception in Mozambique in 2010, CDC and its partners have safely supported the provision of more than 2.1 million male circumcisions.

Key Country Leadership

President:
Filipe Jacinto Nyusi

Minister of Health:
Armindo Daniel Tiago

U.S. Ambassador:
Peter Vrooman

CDC/DGHT Director:
Irene Benech

Country Quick Facts [\(\[worldbank.org/en/where-we-work\]\(https://worldbank.org/en/where-we-work\)\)](https://worldbank.org/en/where-we-work)

Per Capita GNI:
\$500 (2022)

Population (millions):
32.96 (2022)

Under 5 Mortality:
69.6/1,000 live births (2021)

Life Expectancy:
59.3 years (2021)

Global HIV/AIDS Epidemic [\(\[aidsinfo.unaids.org\]\(https://aidsinfo.unaids.org\)\)](https://aidsinfo.unaids.org)

Estimated HIV Prevalence (Ages 15-49): 11.6% (2022)

Estimated AIDS Deaths (Age ≥15): 40,000 (2022)

Estimated Orphans Due to AIDS: 1,300,000 (2022)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 1,853,466 (2022)

Global Tuberculosis (TB) Epidemic [\(\[who.int/tb/country/data/profiles/en\]\(https://who.int/tb/country/data/profiles/en\)\)](https://who.int/tb/country/data/profiles/en)

Estimated TB Incidence: 361/100,000 population (2021)

TB patients with known HIV status who are HIV-positive: 25% (2021)

TB Treatment Success Rate: 94% (2020)

DGHT Country Staff: 92
Locally Employed Staff: 63
Direct Hires: 20
Fellows & Contractors: 9

Our success is built on the backbone of science and strong partnerships.

