

## UNITED FOR PREVENTION

## MOZAMBIQUE



United for Prevention (U4P) was a Frontline AIDS project which ran from April 2023 to September 2024. It supported civil society and community coalitions in seven African countries to hold their national governments accountable for implementing the commitments outlined in the [Global HIV Prevention 2025 Road Map](#).

The participating coalitions were located in Kenya, Malawi, Mozambique, Nigeria, Tanzania, Uganda and Zimbabwe. In this profile we share highlights from the implementation of the U4P project in Mozambique, which was led by coalition lead, Regional Psychosocial Support Initiative (REPSI).



**THE COALITION DISCUSSES TOPICS THAT STRENGTHEN OUR WAY OF PROVIDING ANSWERS TO WHAT THE COMMUNITIES NEED. WE EXCHANGE EXPERIENCES AND LEARN WHAT OTHERS ARE DOING IN HIV PREVENTION AND HUMAN RIGHTS FOR YOUNG PEOPLE AND WOMEN"**

(Coalition member, Mozambique)

### U4P Coalition in numbers



**12** coalition members\*



**15** significant moments of change recorded in the project advocacy log



**5** advocacy asks



**3** HIV spaces\* in which U4P members participated

\*REPSI (Coalition Lead); together with LAMBDA, PAAJ+, ABEVAMO, UNIDOS, COALIZÃO, TRANSFORMAR, PAAJ+, KUYAKANA, N'WETI, OBSERVATORIO CIDADAO PARA SAUDE and REAJUD. Key spaces: Key Populations National AIDS Council Thematic Working Group, Adolescents and Young People National AIDS Council TWG, National TWGs on harm reduction, KP and adolescents and youth.



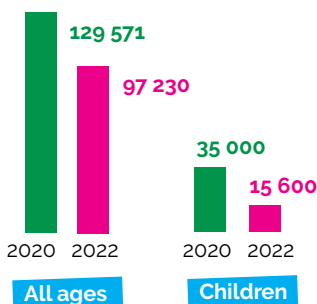
# COUNTRY OVERVIEW

The U4P coalition in Mozambique conducted a PESTLE<sup>1</sup> analysis, which was also later validated and updated following the development of an **HIV Prevention and Accountability** report. Key findings from their analysis and Accountability Report



## New HIV infections.

No recent national data is available on the rate of HIV amongst key populations<sup>2</sup>:



## One in eight adults in Mozambique is living with HIV

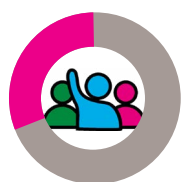
This represents a substantial challenge for the country's health system. There are significant differences in HIV prevalence at the provincial level, as well as by sex and age. HIV incidence remains high, especially among key population and priority groups such as adolescents and young people. These results demonstrate the need to strengthen the implementation of prevention measures at the regional level to reduce the number of new infections.



The Ministry of Health (MoH) and the National AIDS Council (NAC) lead the coordination of the country's HIV response, guided by the National HIV Prevention Roadmap (2022-2025), which is aligned with the National Strategic Plan for HIV and AIDS (2021-2025).



In the field of HIV prevention, Mozambique has **adopted some technologies and tools in accordance with the recommendations of the World Health Organization**, including: Voluntary Medical Male Circumcision (VMMC), HIV treatment as prevention, PrEP, PEP, as well as male and female condoms, as they prove to be an efficient means of prevention. However, Mozambique has not yet made progress in implementing the Dapivirine vaginal ring or CAB-LA.



## 30.5%

youth (aged 15-24) have comprehensive knowledge of HIV  
(Fonte: UNAIDS Laws and Policies Analytics, UNESCO, AIDSinfo)



9% of government budget committed to health expenditure  
(Source: Citizen Observatory for Health).

### LEGAL ENVIRONMENT



#### Criminalised?

Same-sex sexual acts	NOT CRIMINALISED
Sex work	NOT CRIMINALISED
Drug use or possession for personal use	CRIMINALISED
Transgender people	NOT CRIMINALISED
Gender expression	NOT CRIMINALISED
HIV transmission, non-disclosure, or exposure	CRIMINALISED

Source: UNAIDS Laws and Policies Analytics, Human Dignity Trust


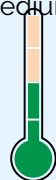
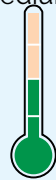
<sup>1</sup> A PESTLE analysis investigates the political, economic, social, technological, legal and environmental context.

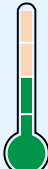


<sup>2</sup> UNAIDS considers gay men and other men who have sex with men, sex workers, transgender people, people who inject drugs and prisoners and other incarcerated people as the five main key population groups that are particularly vulnerable to HIV and frequently lack adequate access to services. [Sourced here.](#)



# ADVOCACY STRATEGIES, ADVOCACY ASKS AND PROGRESS MADE

that informed their advocacy strategy are highlighted below.

Alignment to action in the Global HIV Prevention Road Map	Advocacy asks	Progress achieved	Progress status
<p><b>Action 10:</b> Reinforce the accountability of all stakeholders for progress in HIV prevention</p>	<p>NAC disseminates the HIV Prevention Roadmap at all subnationals by December 2023. Progress monitoring of the roadmap is included in the HIV Prevention Technical Working Group (TWG) agenda by February 2024</p>	<p>The coalition lead advocated the National AIDS Council (NAC) and Ministry of Health (MoH) to disseminate the HIV roadmap to CSOs around the country. The dissemination was conducted virtually. More work is required to embed implementation monitoring into the work of the prevention technical working group.</p>	<p>High</p> 
<p><b>Action 6:</b> Eliminate social and legal barriers to HIV prevention services for key and priority populations</p>	<p>The Human Rights (HR) TWG finalise and validate the National Human Rights Plan by December 2023. The HR TWG and NAC launch the National HR Plan and disseminate widely at all levels by March 2024</p>	<p>U4P coalition members have contributed to the drafting of the National Human Rights plan. The dissemination of the plan is awaiting the approval and signature of the Prime Minister.</p>	<p>Medium</p> 
	<p>Expanded the leadership of TWG of Adolescent and Youth to include one youth organisation as a co-chair by November 2023</p>	<p>The coalition laid the groundwork for the increased representation and influencing of adolescent and youth-led organisations in HIV prevention forums. This included the identification of 12 relevant organisations with national youth representation, the development of a position paper on the meaningful participation of young people and a training session on the topic for TWG members. Three youth-led organisation representatives have been appointed to the South to South Learning Network, of which one of them is currently a HIV Champion (SSLN).</p>	<p>Medium</p> 

<b>Action 8: New technologies</b>	<p>The MoH and National Pharmaceutical Directorate (NPD) approves the Dapivirine vaginal ring (DVR) study protocol to understand the acceptability of the DVR in Mozambique among key population groups and other priority groups by February 2024.</p> <p>MOH and NPD includes DVR in the national list of commodities as one of the HIV prevention options in Mozambique by June 2024.</p> <p>MoH and NPD approves dissemination and roll out of the DVR at all levels (national and sub-nationals) by August 2024.</p>	<p>Little progress has been made due to the government being focused on other priorities (e.g., oral PrEP) and national elections bringing government engagement to a halt. The government did call for coalition members to expand the sample of a survey on the acceptability of the DVR and injectable PrEP, which suggests the introduction of new technologies is being considered, but approval for dissemination and roll out of DVR has not yet been given.</p>	<p>Medium</p> 
	<p>The MoH and Central Office for Drug Prevention and Control (GCPCD) disseminate at large scale the harm reduction health package services at national and sub-national levels by December 2023.</p> <p>The MoH and GCPCD expand methadone delivery services to be taken at home by May 2024.</p>	<p>The Mozambique Ministry of Health (MISAU) set up four containers inside health centres in Maputo Cidade, Maputo Provincia, Beira and Nampula. This decision was made following the advice of the U4P coalition in the centre and north of the country, respectively. One of the clinics has already been opened at Mavalane Health Facility, and the one in Nampula is awaiting the government's green light.</p>	<p>High</p> 
	<p>The National Union of Journalists will take steps to ensure development of articles on HIV prevention focus on harm reduction and methadone to be disseminated across the media by March 2024.</p>	<p>Thanks to the training of journalists, 9 media articles were published profiling methadone as an effective tool in HIV prevention. These stories celebrated the positive experiences of drug users in having their lives improved after taking methadone.</p>	<p>Achieved</p> 

## OUTCOME STORY

### EXPANDING ACCESS TO METHADONE TREATMENT



**Outcome:** Mozambique's Ministry of Health (MISAU) is expanding Methadone Substitution Therapy (MST) coverage by 40% nationwide by the end of 2024. Prior to this, there was a waiting list of 2000 beneficiaries, of which only 262 (13.1% coverage) had access to the therapy. This expansion represents a change in government behaviour, moving from a centralised, limited approach to a proactive, nationwide strategy for addressing the needs of people who inject drugs (PWID).



**Contribution:** MISAU sought out the coalition's expertise, requesting UNIDOS, the coalition's PWID team lead, to conduct a comprehensive mapping of the locations of PWID communities. This invitation to contribute directly to policymaking represents a shift in how the government engages with civil society on drug-related health issues. Following the coalition's awareness-raising efforts, mainstream media outlets proactively reached out to coalition members for expert commentary. Journalists from outlets like EcoNews TV, Jornal Noticias, Radio Moçambique, Africa PRESS, Voz para o Sem Voz now regularly produce in-depth reports on methadone substitution therapy (MST), demonstrating a change in editorial priorities. In response to the coalition's advocacy, health facilities in Maputo Cidade, Maputo Provincia, Beira and Nampula cities, stepped forward to host new methadone clinics, representing a shift in local healthcare providers' willingness to engage with services for drug users. Additionally, the Forum of Community Radios of Mozambique (FORCOM), after participating in coalition-led training, initiated a series of radio programs on MST in a move to actively disseminate information.



**Significance:** The 40% expansion of MST coverage in Mozambique represents a shift in the country's approach to harm reduction and HIV prevention for PWID. Previously, with only one clinic in Maputo serving 200 drug users and a waitlist of 2,000, the need far outstripped availability. The expansion in Maputo Cidade, as well as to Maputo Provincia, Beira City, Nampula City, brings services closer to communities in dire need. This change not only alleviates pressure on the overloaded Maputo facility but also signifies the government's recognition of MST as a critical public health strategy. By improving access, the expansion has the potential to reduce HIV transmission rates and address the broader social and economic impacts of drug use in Mozambique.

**Next steps:** To capitalise on this success and further improve access to MST, the coalition plans to:

- Continue to engage with policymakers, particularly the Minister of Health, to advance this process and advocate for further expansions to reach those still on the waiting list. Continue working with and sensitising the local leadership and communities on harm reduction and the availability of Methadone.
- Continue to advocate for friendly and sensitive services for drug users across different facilities.

# TIMELINE OF OUTCOME STORY

2023



**April**

Launch of U4P coalition in Mozambique



**September**

PESTLE analysis completed



**December**

Mozambique HIV Prevention and Accountability report showcased at the ICASA conference

2024



**January**

Launch of [HIV Prevention and Accountability](#) report  
Coalition members (UNIDOS, REAJUD, ABEVAMO, TRANSformar, and Observatório do Cidadão para Saúde) begin implementing harm reduction advocacy and promoting the need for MST



**March**

13 March 2024, training conducted for journalists and community radios to increase awareness and provide tools on new HIV prevention technologies, with a focus on methadone, organized by the Citizen's Observatory for Health with support from UNIDOS and REAJUD. During the first quarter, the Ministry of Health (MISAU) began setting up containers inside health centres in Maputo City, Maputo Provincia, Beira City and Nampula City to expand the approach to the centre and north of the country, respectively



**April**

Mainstream media outlets like EcoNews TV and Jornal Notícias, Radio Moçambique, Africa PRESS, Voz para o Sem Voz start producing in-depth reports on Methadone Substitution Therapy. Coalition members, including UNIDOS and REAJUD, were involved in implementing harm reduction activities, such as promoting Methadone and the harm reduction program in IDP Community Centers. They also participated in training on Methadone maintenance therapy.

Health facilities in Maputo City, Maputo Provincia, Beira and Nampula agree to host new methadone clinics, expanding the reach of MST services for PWID in other regions across Mozambique.



**April-May**

Forum of Community Radios of Mozambique (FORCOM) initiates independent radio programmes on methadone drawing on training sessions and tools organised by the coalition



**August**

The Republic President, during the 3rd High Level Meeting of the Eastern and Southern African Commission on Drugs, showed his openness to cooperating with countries in the region to exchange experiences in the process of legalising Cannabis sativa in Mozambique



**October**

Official opening of Methadone Clinic in Mavalane Health Facility, in Maputo City



## PROMISING PRACTICES

- **Using data from ongoing trials and implementation research** to advocate for improvements within national HIV prevention responses. Mozambique coalition partners are planning to leverage forthcoming data from the MOSAIC/CATALYST trial to strengthen their advocacy strategies around new prevention technologies.
- The U4P in Mozambique is creating a movement around harm reduction that involves training journalists to create awareness, while working with community-led organisations to advocate for increased access to the Methadone. The use of **shipping containers for Methadone clinics** is an innovative and promising practice.

## KEY LESSONS LEARNT

- **Using established networks to support ongoing advocacy activities enhances the sustainability** of advocacy efforts. Clear alignment with existing CSO forums and national HIV programmes ensures the programme's activities are seen as part of broader missions, which is critical for maintaining momentum beyond the project's lifespan.
- **There is strength in numbers:** joining the U4P coalition has significantly benefited partners in Mozambique, particularly in their work on methadone substitution therapy. The coalition has amplified their collective voice, enhanced their visibility and increased their credibility and influence in advocacy spaces.
- **Tailored advocacy messaging is more effective:** the Mozambique coalition partners used the country's PESTLE and stakeholder analysis to create unified advocacy messages that resonated with their target audiences and desired action.
- **Coalition forming can be challenging,** especially when there is significant diversity in interests and experience. Adaptive management approaches can help keep the coalition running smoothly and harness the skills of its diverse members, which supports shared learning.

### Sources:

The U4P coalition in Mozambique has done incredible work in providing data for this profile, as identified from the following sources:

- Mozambique U4P Monthly MEL Meeting Minutes
- U4P Quarterly Narrative Report - Mozambique
- Mozambique Coalition Accountability Strategy
- Mozambique PESTLE analysis
- U4P advocacy log
- Mozambique U4P Coalition HIV Prevention and Accountability report
- Mid-term review of U4P conducted by Southern Hemisphere, 2024

This profile was written by Elena Mancebo Masa, Zimigonaphakade Sigenu and Dena Lomofsky on behalf of Southern Hemisphere Consultants, with editorial input from Casey Davison O'Brien, Leora Pillay and Libby van Zee of Frontline AIDS, Silvio Macuane and Nelva Ngana of REPSSI. Design by Jaywalk Design for Change.