



MOZAMBIQUE

HIV PREVENTION SHADOW REPORT 2020



Summary of civil society analysis

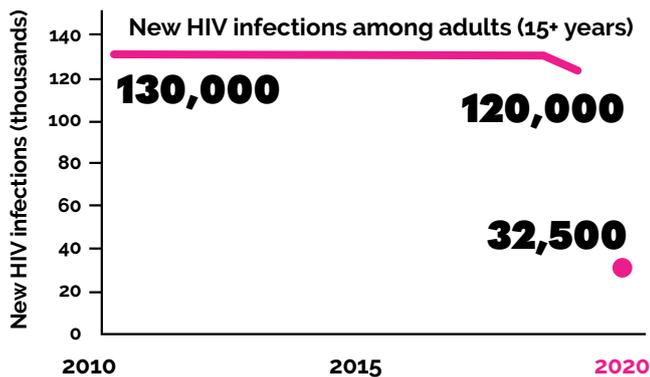
In 2020, Mozambique's HIV prevention response remained inadequate and failed to achieve a substantial reduction in new HIV infections. There are not enough prevention programmes that specifically address the needs of adolescent girls and young women and their male partners. Data shows that only 42% of priority districts offer prevention packages dedicated to them. Key populations face similar challenges: Only 4% of men who have sex with men, 15% of people who inject drugs and 51% of sex workers are routinely reached by prevention services. This situation is now being exacerbated by the COVID-19 epidemic, which has reduced people's access to HIV prevention services and impacted on the livelihoods of the most marginalised groups.

10 ACTIONS: A CIVIL SOCIETY PERSPECTIVE

1	Needs assessment	●
2	Prevention targets	●
3	Prevention strategy & leadership	●
4	Legal and policy reform	●
5	Key population size estimates	●
5b	Defined key population package	●
5c	Adolescent girls & young women size estimates	●
5d	Adolescent girls & young women package	●
6	Capacity development & technical assistance plan	●
7	Social contracting	●
8	Financial gap analysis & strategy	●
9	Strengthen monitoring	●
10	Performance review & accountability	●

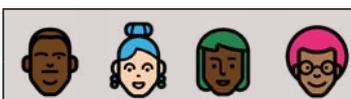


ON TRACK TO MEET THE 2020 TARGET?



Global HIV Prevention Coalition 4th Annual Progress Report

● Good progress ● Partial progress ● No or little progress



KEY POPULATIONS: DATA, SERVICES, STIGMA

	Men who have sex with men	Sex workers	People who use drugs	Transgender people
Latest size estimates	2011	2012	2014	NO DATA
HIV prevention services utilisation	4%	51.1%	15%	NO DATA
Avoidance of health care due to stigma & discrimination	NO DATA	NO DATA	NO DATA	NO DATA

KP Atlas, Global HIV Prevention Coalition 4th Annual Progress Report

LAWS THAT CRIMINALISE

Same-sex activities	NO SPECIFIC LAWS
Sex work	NO SPECIFIC LAWS
Drug use or possession for personal use	CRIMINALISED
Criminalisation of transgender people	NO SPECIFIC LAWS
HIV transmission, non-disclosure or exposure	CRIMINALISED

UNAIDS Laws and Policies Analytics

ADOLESCENT GIRLS AND YOUNG WOMEN

 SRHR services available without parental consent YES	 Intimate partner violence (15-19 years) 10.2%	 HIV prevention service coverage 42%
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Global HIV Prevention Coalition 4th Annual Progress Report

HIV PREVENTION 10-POINT PLAN

A CIVIL SOCIETY ANALYSIS

In 2017, governments, civil society, UN agencies and donors launched the Global HIV Prevention Coalition. The Coalition developed a global HIV Prevention 2020 Road Map, to catalyse action and work towards reducing new HIV infections. The Road Map acknowledges common barriers to progress including lack of political leadership; restrictive laws and policies; insufficient funding, and lack of implementation at scale of combination prevention programmes. Each year the Coalition publishes a report, which tracks each country's progress against these barriers. This shadow report sets out civil society's perspective on how Mozambique performed in 2020.



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STRENGTHENING POLITICAL LEADERSHIP

Civil society organisations (CSOs) in Mozambique report that the National AIDS Commission (NAC) is not strong enough or adequately resourced to lead and coordinate the national HIV response, as it lacks both financial autonomy and adequate human resources. In particular, its staff lack the expertise and knowledge required to address the HIV prevention needs of marginalised groups.

There is also confusion between the roles and tasks of NAC and the Ministry of Health. For example, in September 2020, the Southern African Development Community (SADC) held a meeting to evaluate the regional HIV response in the context of COVID-19, but it was unclear whether NAC or the Ministry of Health were leading the process.

In addition, CSOs are concerned that NAC and the Ministry of Health do not enable meaningful participation from their representatives in planning and decision-making, and that their engagement is tokenistic. For example, government

institutions have sometimes involved CSOs at the end of a process to legitimise it, rather than involving them in the decision-making itself.

Despite these concerns, CSOs believe that HIV prevention at country level benefits from a political environment that is generally open to discussing the most pressing needs of civil society and key populations in particular. In the past few years, some politicians have provided opportunities for CSOs to present their concerns to Parliament. UNIDOS, an organisation led by people who use and inject drugs, were invited twice to share their activities and concerns with the parliamentary cabinet.

Importantly, at an inter-ministerial meeting organised by the Global HIV Prevention Coalition in November 2019, the Minister of Health committed Mozambique to prioritising primary HIV prevention within the next National HIV Strategic Plan 2021 to 2025.



ADDRESSING POLICY GAPS AND LEGAL BARRIERS

In the past year there have been some positive developments in the legal and policy environments.

The Ministry of Health has promised that, by the end of the year, Mozambique will have its first harm reduction framework and consultations to amend existing legislation on narcotic drugs (Law 3/1997) continued throughout 2020. The aim of civil society activists is to regulate the use of methadone for the purpose of drug treatment and to decriminalise possession of drugs for personal use.

There has also been progress on Law 19/2019, which prohibits forced marriages. Although it will take time to change social norms around early and forced marriage, the government is making visible efforts to enforce the law and to disseminate information about it in communities. For instance, Gender Department within the Ministry of Gender, Child and Social Affairs is delivering lectures and workshops on the content of the law.

Another positive development concerns sex workers' rights. The Ministry of the Interior, and the police force in particular, have established a new procedure for responding to cases of violence against sex workers. This is significant because it requires police to be trained on sex workers' rights before they can interact with this key population. The new procedure is being widely promoted and discussed in law enforcement institutions.

With regards the LGBT community, the government has finally committed to including transgender people in the next National HIV Strategic Plan and to conducting a size estimate and needs assessment study to define an intervention package for transgender people. However, the social environment for LGBT people remains very harsh. The LGBT-led organisation LAMBDA is still struggling to register as a non-governmental organisation after 10 years of trying.



ADEQUATE AND SUSTAINABLE FINANCING

Information on the financing of Mozambique's prevention response is not readily available to activists. Most of the information presented here is sourced from UNAIDS' financial dashboard rather than government officials. Budgets for the HIV response have gradually increased in the last 10 years, totalling just over US\$557 million in 2019. Of these funds, only 4% (US\$23.6 million) came from domestic finances, and the remaining 96% was provided by international sources.

In the same year, spending on HIV prevention interventions totalled US\$46 million, which represents only 8% of the total amount available. This is a major source of concern, since the current National AIDS Strategy stated that the anticipated expenditure for the prevention response (excluding HIV testing and preventing mother-to-child transmission) was US\$100 million, or 20% of the total cost, estimated at around US\$500 million for 2019. Even more worrying is the proportion of the prevention budget that

was allocated to key populations in 2019, approximately half a million US dollars, which equals just 0.1% of the total HIV prevention budget.

These imbalances in the way HIV funding is being allocated must be addressed urgently. The government has taken a step in the right direction in the new Global Fund for AIDS, TB and Malaria funding request. Out of US\$433 million requested for the period 2021 to 2023 to support the national HIV response, about US\$60 million (14%) will support HIV prevention interventions, and almost 50% of this amount will be dedicated to key populations.

That said, Global Fund support alone is not enough to cover the full cost of a national prevention response; a similar commitment is required from other donors, including PEPFAR, and the government itself needs to back up its pledge to strengthen HIV prevention by substantially increasing domestic financing for prevention programming.



IMPLEMENTING QUALITY PROGRAMMING AT SCALE

HIV prevention services are not being implemented at scale in Mozambique, especially for the most vulnerable people. Indicators for HIV prevention coverage for key populations and adolescent girls and young women show that the vast majority can't access HIV prevention services tailored to their needs. CSOs also report that, although youth-friendly corners have been established in most health facilities, the type and quality of services provided varies widely – even within the same county – as most health facilities rely on external resources.

On a more positive note, in the last year NAC and the Ministry of Health have been updating population estimates for sex workers and men who have sex with men. The sex workers' study was conducted in collaboration with the sex worker community, although it didn't cover all provinces and results have not yet been shared. The size estimate study

for men who have sex with men is still underway and the community reports that the exercise has been delayed by COVID-19 restrictions.

At country level, condom distribution and promotion still needs strengthening. Although there is a new national condom strategy that aims to increase demand and improve the availability of condoms, CSOs report that this is hampered by insufficient coverage of behaviour change communication initiatives, because CSOs – the main implementers of these interventions – rely on external donor support.

Lastly, the country needs to rapidly expand its oral pre-exposure prophylaxis (PrEP) programming, as there are not enough facilities providing this treatment to cover everyone who is at substantial risk of HIV infection.



THE IMPACT OF COVID-19 ON HIV PREVENTION

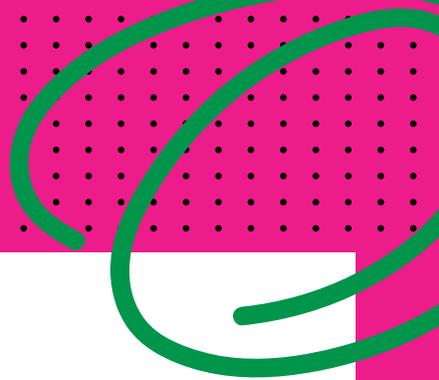
HIV prevention activists all agree that, since the onset of the COVID-19 pandemic, HIV has had less attention and service provision has been affected in various ways. Some health facilities had to temporarily interrupt HIV treatment services to accommodate COVID-19 patients, and some experienced stock outs of antiretroviral treatments. Accessing prevention commodities and services has also been challenging, particularly with social distancing measures and recommendations to avoid health facilities except in

emergencies. Activists also report stock outs of prevention supplies such as condoms and lubricants.

As in other countries, lockdown measures have severely impacted the lives of the most marginalised groups, drastically limiting their livelihoods. Sex workers in particular have been forced to stop working, and many of those who continued working have suffered physical violence from police officers or have been forced to pay to avoid arrest.



RECOMMENDATIONS



IMPACT OF COVID-19

COVID-19 has disrupted HIV prevention services and exacerbated economic and social drivers, with the risk that new HIV infections may begin to increase. Mozambique must commit to sustaining progress on and funding for HIV prevention, and must protect the human rights of the most marginalised communities.

LEADERSHIP

Mozambique must urgently strengthen the National AIDS Commission, ensuring it has the staff, technical skills and financial resources needed to coordinate an effective multi-sectoral HIV prevention response. It must also ensure clear division of roles between the Ministry of Health and National AIDS Commission and insist that both bodies meaningfully engage civil society and community-based organisations.

LAWS & POLICIES

Mozambique must take steps to improve the legal, policy and social environment for key populations, particularly LGBT people. The needs assessment for transgender people should be expedited and the results quickly used to develop service packages tailored to their needs.



FINANCING

The government of Mozambique needs to significantly increase domestic funding for HIV prevention, particularly for adolescent girls and young women and key populations, and must work with donors including PEPFAR to persuade them to invest more in the country's HIV prevention response.

QUALITY PROGRAMMING

Mozambique's Ministry of Health and National AIDS Commission need to dramatically scale up coverage of HIV prevention for key populations and for adolescent girls and young women, and to increase coverage of condom programming, behaviour change communication and PrEP. Community based organisations can support the government in reaching the required coverage, but need to be resourced through social contracting mechanisms.

METHODOLOGY

As a member of the Global HIV Prevention Coalition, Frontline AIDS plays a key role convening civil society and community organisations. After the launch of the Global Prevention Coalition in October 2017, Frontline AIDS supported activists from 22 countries to participate in workshops to learn, share and agree prevention advocacy priorities. As part of this process, activists from different community-based organisations decided to work together to analyse their nation's progress on HIV prevention. The reports are based on responses to a data collection tool developed by Frontline AIDS. In 2020, activists from seven countries agreed to update their reports. These shadow reports voice the priorities of civil society organisations and offer an alternative to the official assessments put forward by governments.

ACKNOWLEDGEMENTS

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OUR PARTNERS

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