

VIRTUAL

FAST-TRACK CITIES 2020

September 9 - 10, 2020

Case Study Maputo City

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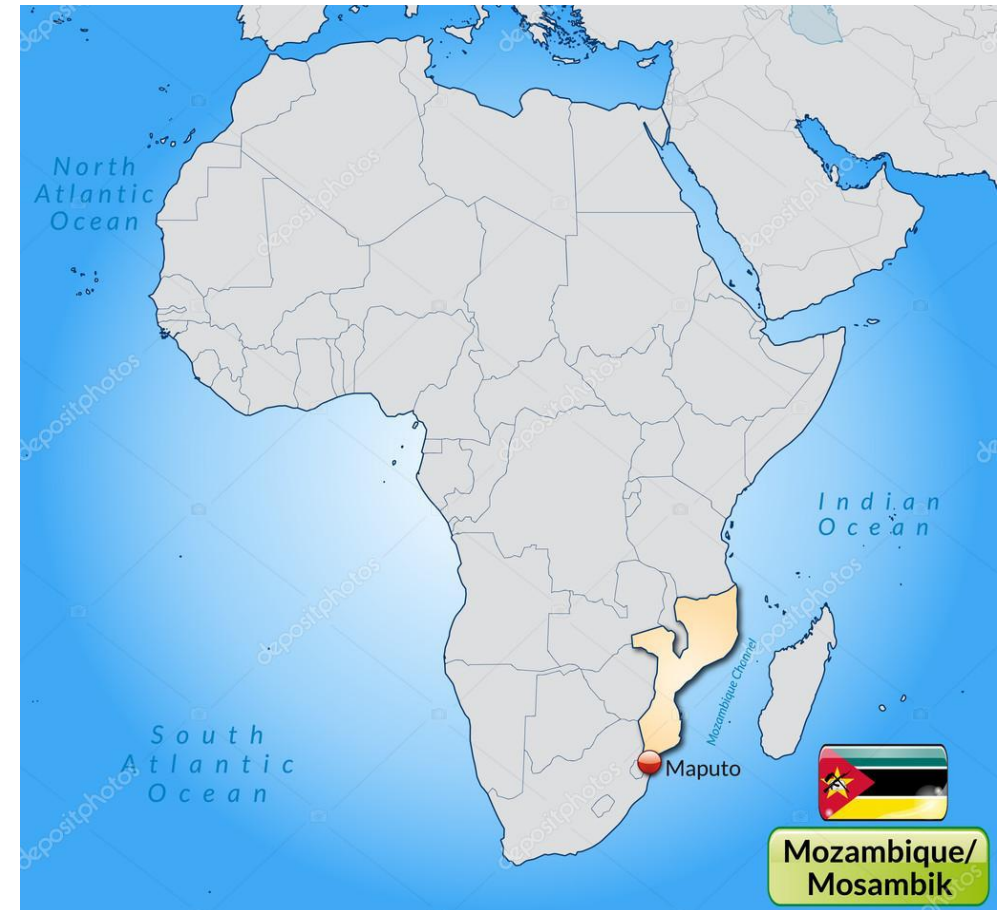
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LOCATION

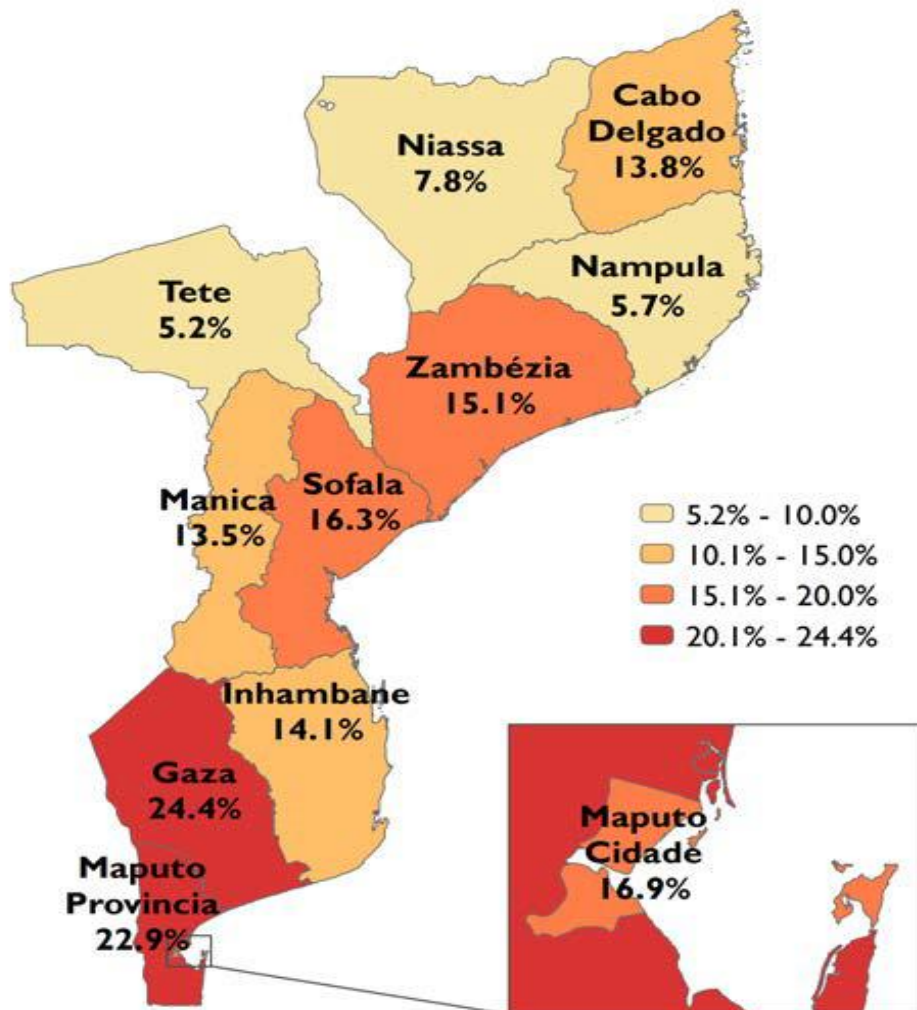
Mozambique is a country on the eastern coast of southern Africa, bounded by:

North – Tanzania to the north;
Northwest – Malawi and Zambia;
West – Zimbabwe, South Africa and Swaziland;
South – South Africa;
East – Indian Ocean, Mozambique Channel

City of Maputo - Capital of the Country



DEMOGRAPHICS



Source: Survey of Indicators on Immunizations, Malaria and HIV/AIDS

Population: 1.120.867 inhabitants (INE, 2017)

Population density: 3.224 inhabitants/Km²

- ❑ 36 Health Facilities (including 6 Hospitals)
- ❑ Doctor/ inhabitant ratio: 1/5559
- ❑ Nurse/inhabitant ratio: 1/754

- ❑ Number of PLWHIV: 144.387
- ❑ New infections estimated/year: 3.700
- ❑ Maputo HIV prevalence: 16,9% (15 - 49Y)
- ❑ National HIV prevalence: 13,2% (15 - 49Y)

Source; IMASIDA 2015 Spectrum version 5.87

CHRONOLOGY OF COVID-19

- 22/03: First COVID-19 case diagnosed
- An imported case
- 30/03: State of Emergency

- 18/06: first death from COVID-19
- June: 92 cases
- July: 223 cases

- Exponential rise in cases
- Currently 1.781 cases and 15 deaths (Sept 9, 2020)



- April: 15 cases; Created a Center for COVID victims
- May: 33 cases; Intensified testing capacity

**Maputo city concentrates
most cases in the country
25%**

- 10/08: community transmission declaration (3rd place in country)
- COVID-19 prevalence study conducted
- August: 951 cases

NATIONAL SUMMARY OF COVID-19



TESTED

CUMULATIVE

LAST 24H

107.758

675

POSITIVE

4.764

58

RECOVERED

2.763

141

DEATH

28

0

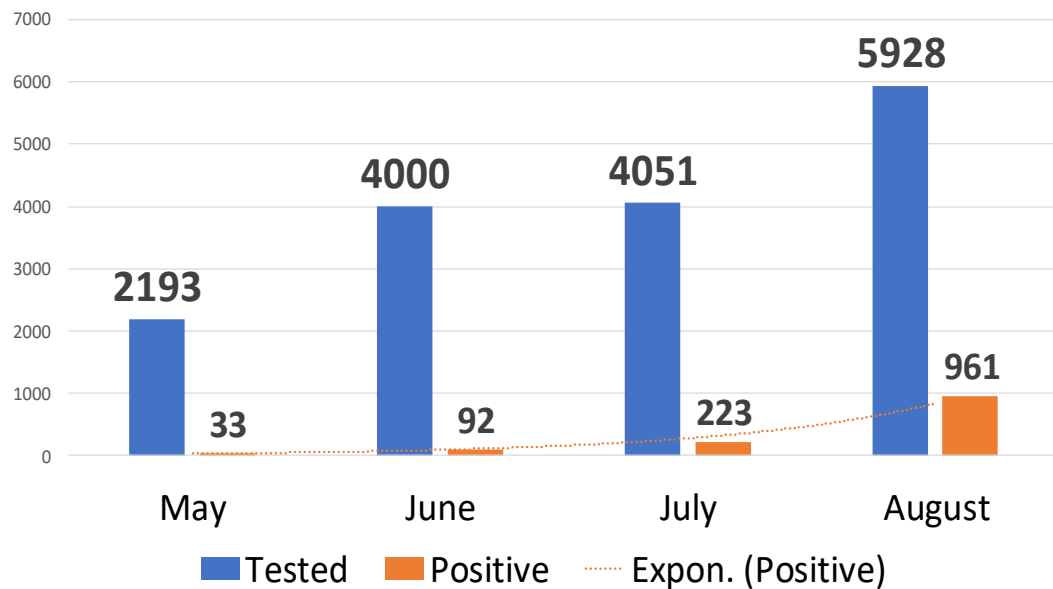
ACTIVE CASES

1.969

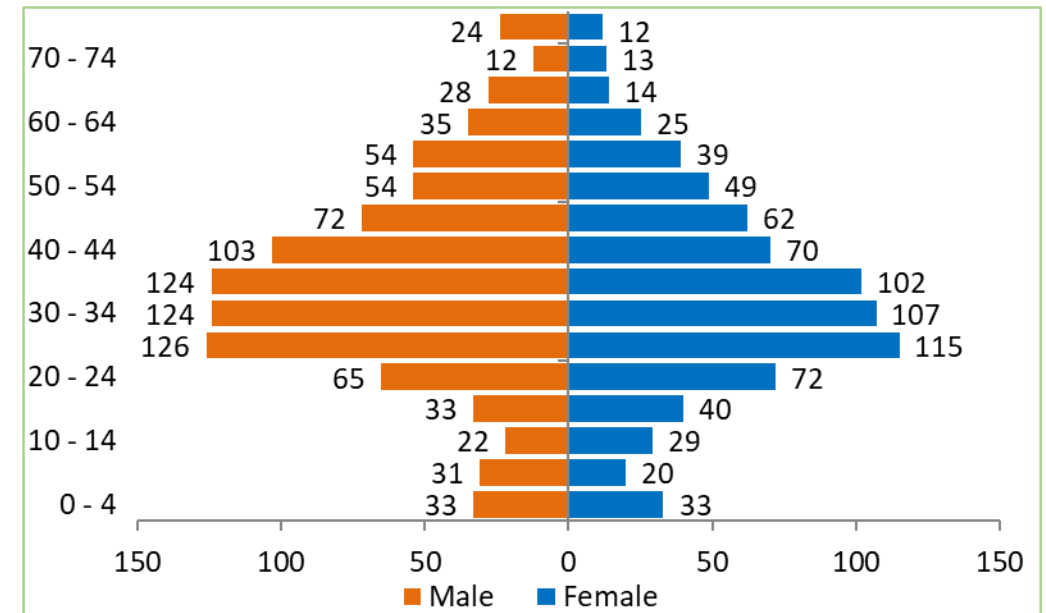
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EPIDEMIOLOGICAL SITUATION

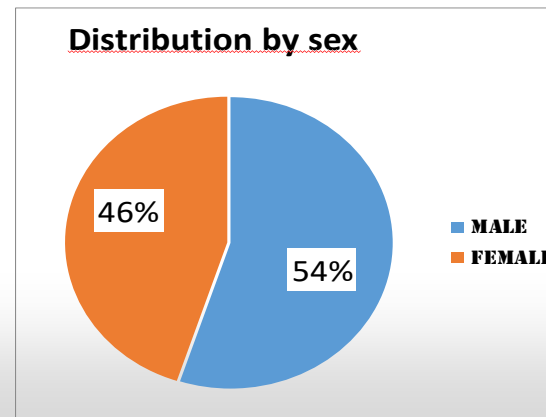
Evolution of COVID-19 in Maputo City



COVID cases by Age groups



COVID cases by Sex



PREVALENCE STUDY

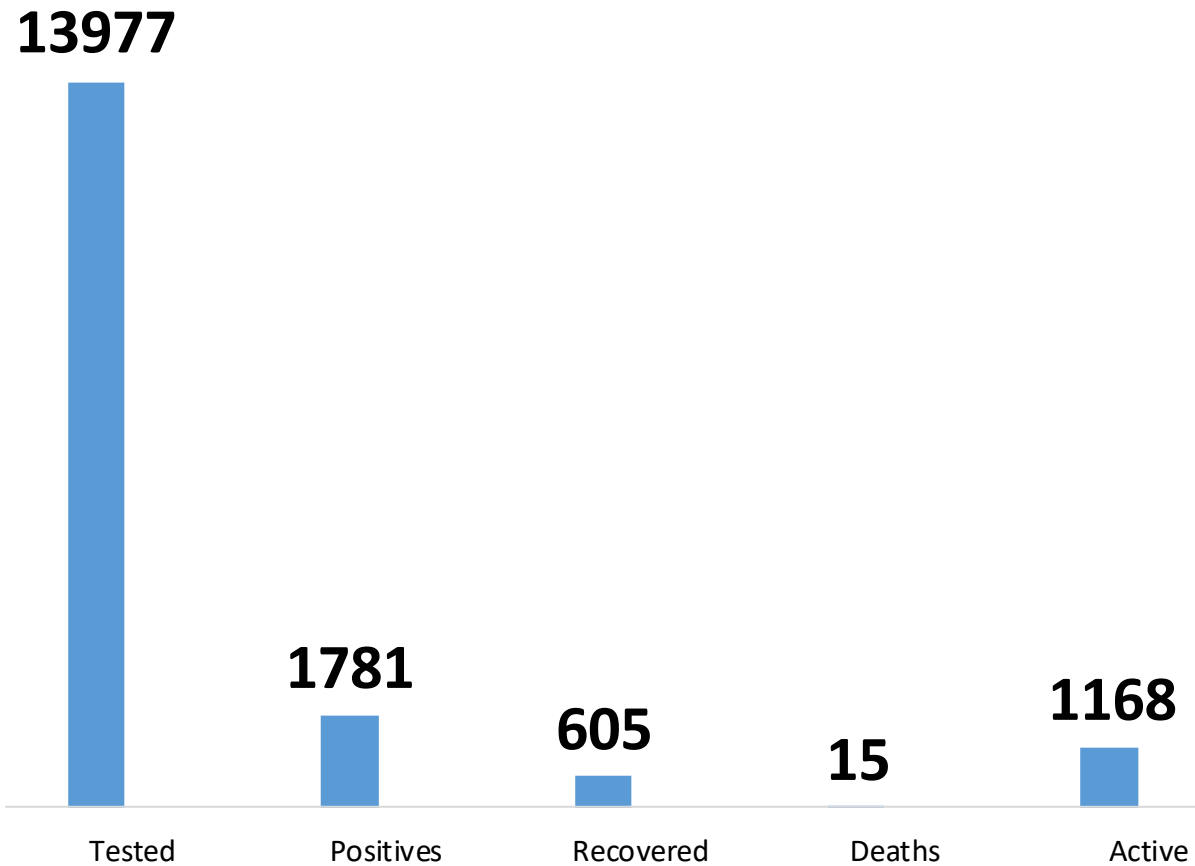
Methodology

- Qualitative Rapid Test (Panbio Abbott)
- Detects the presence of antibodies against the new Coronavirus: IgM and / or IgG
- Participants: 10.237 being
 - Professional groups = 54%
 - Comunity = 46%
- Duration: 19 days (August)

Preliminary results

- Community exposure rate = **3.79%**
- Adolescents / young adults and elderly people are more exposed to Coronavirus \approx **4.4%**
- All professional groups are affected, with market and store vendors most exposed to the New Coronavirus.
- Market employees have the highest SARS-CoV-2 exposure rate = **5.22%**
- Among health professionals, lab technicians have the highest exposure rate = **3.64%**
- Majority of those exposed are asymptomatic = **70.62%**

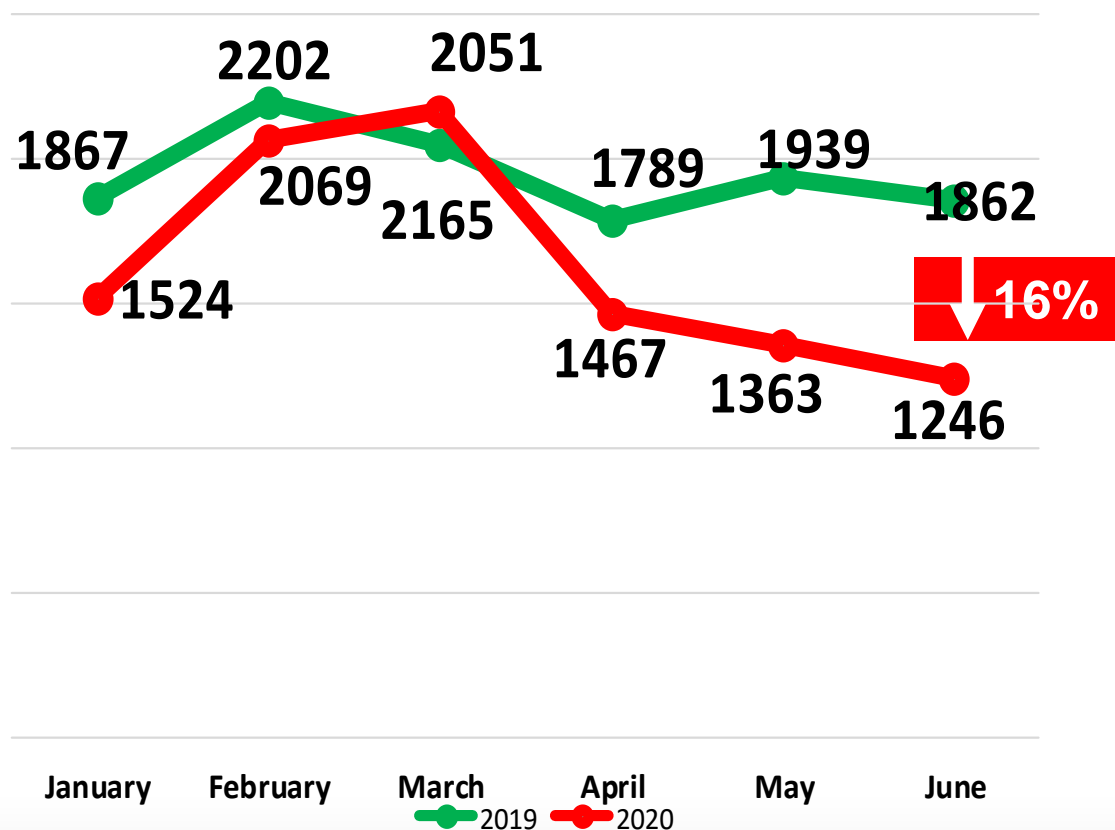
CURRENT SITUATION OF COVID-19 IN THE MUNICIPALITY OF MAPUTO



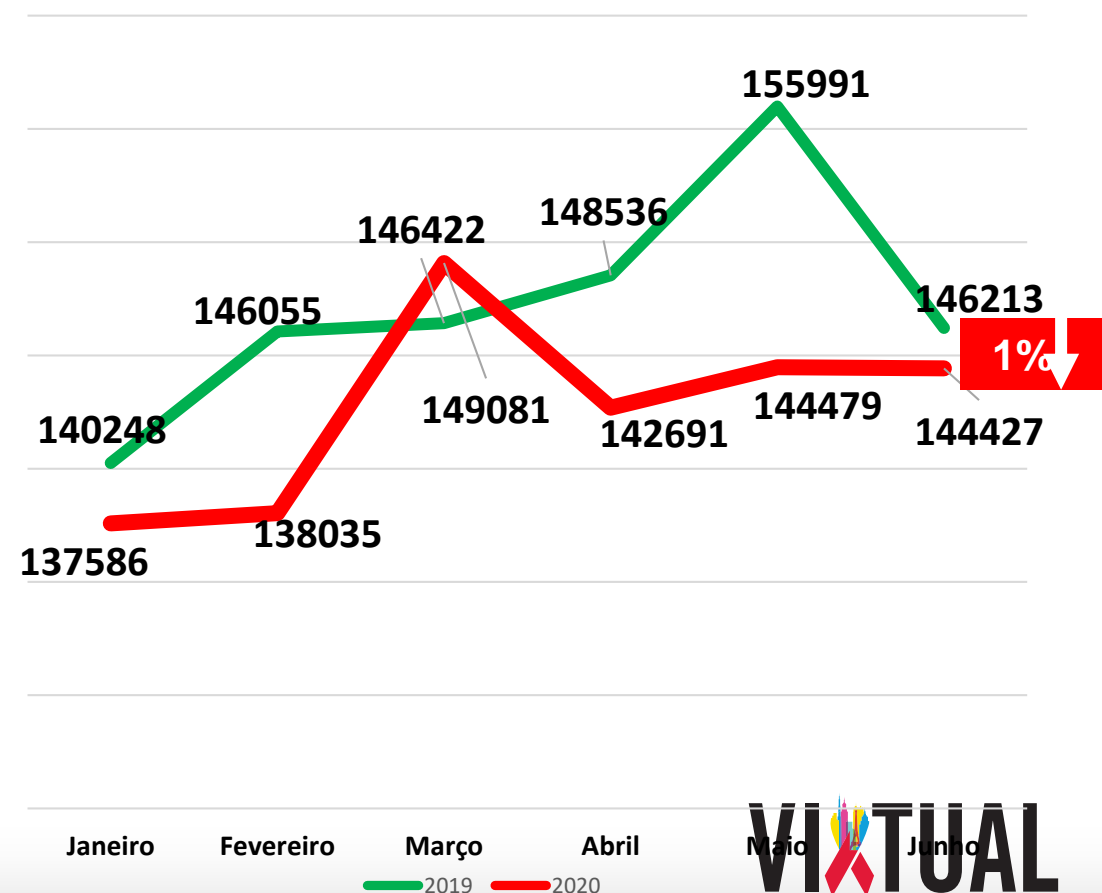
Positivity Rate : 12%

Current Situation of HIV in Maputo City

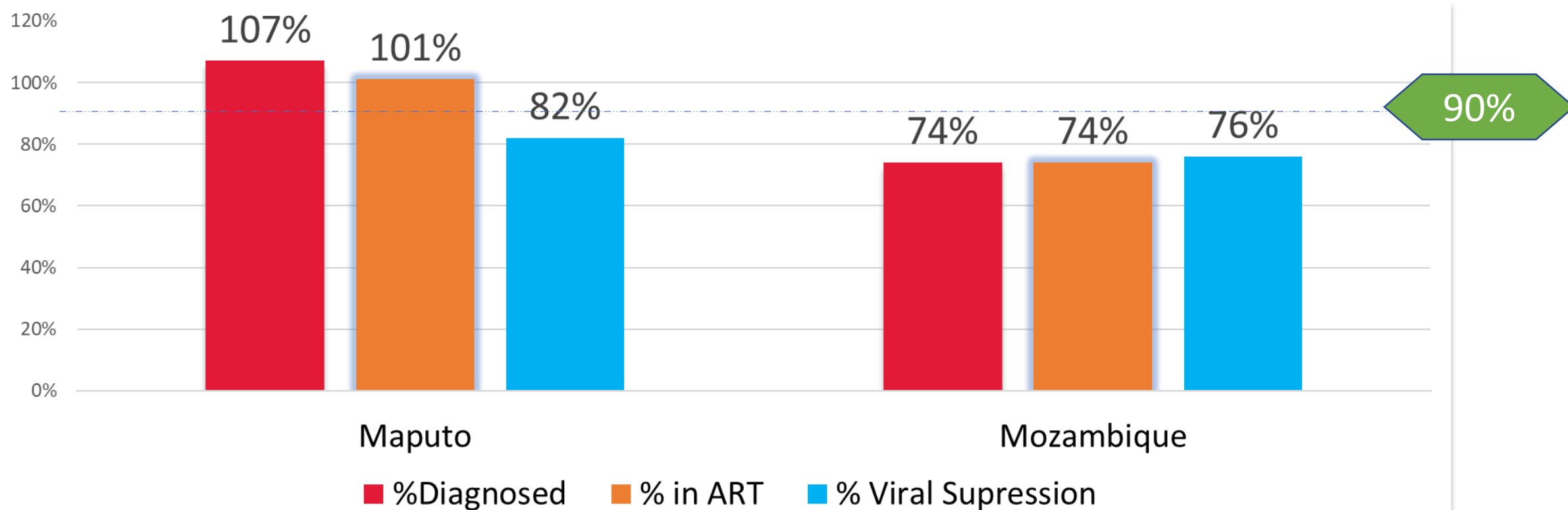
New ART 2019/2020



Active ART 2019/2020



90-90-90 HIV Treatment Cascade



IMPACTS OF COVID-19 ON THE HIV/AIDS PROGRAM

- ❑ Some services for PLHIV were interrupted specially, community activities such as counseling and testing in community as well as household follow up visits.
- ❑ Community visits to support adherence and engagement in care were replaced by phone calls made by care providers and community workers

In order to keep providing care to PLHVIV, the following **Pillars of uninterrupted provision of HIV services** are being observed:

- ❑ Reinforce infection control measures and patient education;
- ❑ Reduce patient visits to health units (3/6 months ART delivery and 6m appointments);
- ❑ Implement the policies and operational norms of the HIV program in the best way in the context of a national emergency.

IMPACT OF COVID-19 ON THE HIV/AIDS PROGRAM (2)

Child at Risk (HIV) Consultations

- ☐ Suspension of home visits to support adherence to ART;
- ☐ Use of telephone calls to reintegrate / re-engage in ART.

Preventive measures adopted:

- ☐ Reinforcement of identification / inclusion in differentiated care models (quarterly dispensation; adhesion clubs);
- ☐ Quarterly ARV dispensation for those on ART for more than 3 months (regardless of CD4 and CV) as long as they are in good clinical condition.
- ☐ Psychosocial telephone support for everyone for more than 3 months of treatment (Support and reintegration interventions)

IMPACTS OF COVID-19 ON THE HIV/AIDS PROGRAM

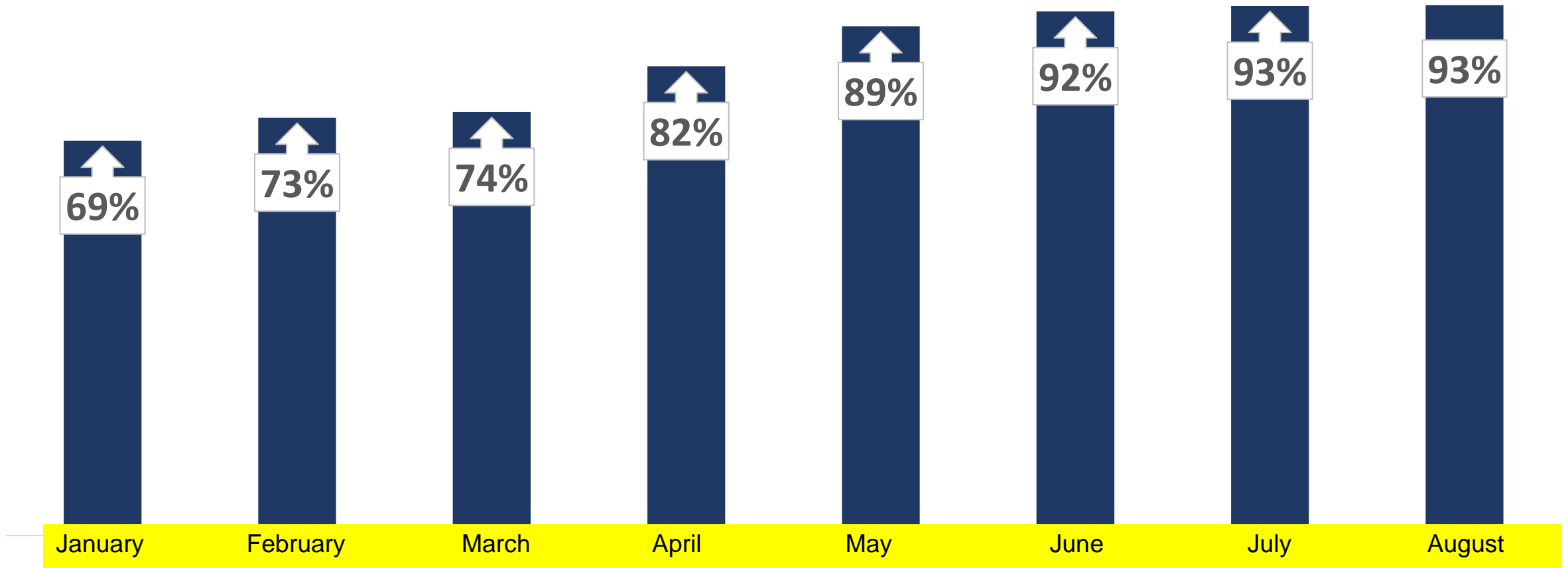
Preventive measures adopted

- ☐ Creation of additional ART pick-up points → reducing high flux of patients in pharmacies/ HF;
- ☐ Management of queues and spaces of health units by administrative assistants
- ☐ Supply chain for drugs and consumables
Intensification of the monitoring of ARV stock, treatment drugs for opportunistic infections and prophylaxis and guaranteed availability of ARV for quarterly delivery

Human Resources

- ☐ Allocation of lay personnel to: Dissemination of educational messages about Covid-19
- ☐ Support the integrated flow of screening for suspicious signs and symptoms of Covid-19

% of Patients in differentiated care models



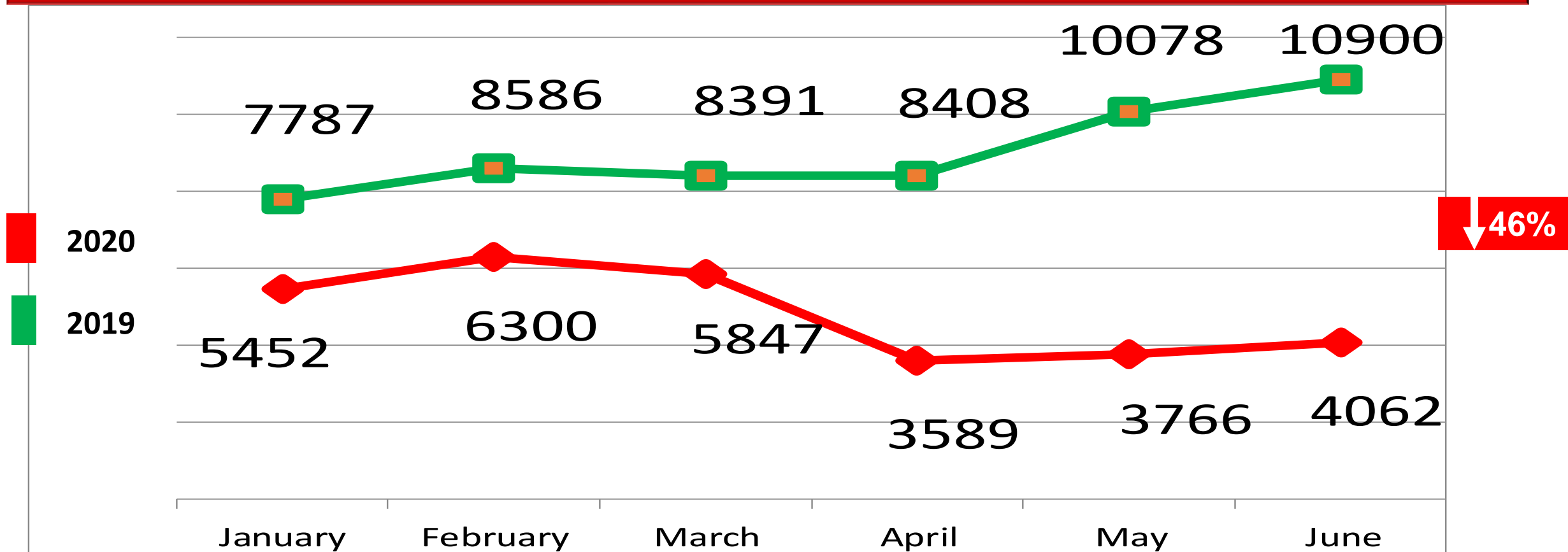
IMPACTS OF COVID-19 ON THE HIV/AIDS PROGRAM

Lessons learned in relation to emerging pandemic preparedness and resilience to response:

- ☐ PLHIV because they already have a chronic pathology, they are the most careful with their health, obeying preventive measures, they serve as a good example for other people
- ☐ Use of the mask has become common
- ☐ Among all, massification of the successful use of virtual platforms for mentorship and patient monitoring.



Impact of COVID-19 on New Users in family planning consultation



IMPACTS OF COVID-19 ON FAMILY PLANNING

Continuity of family planning services

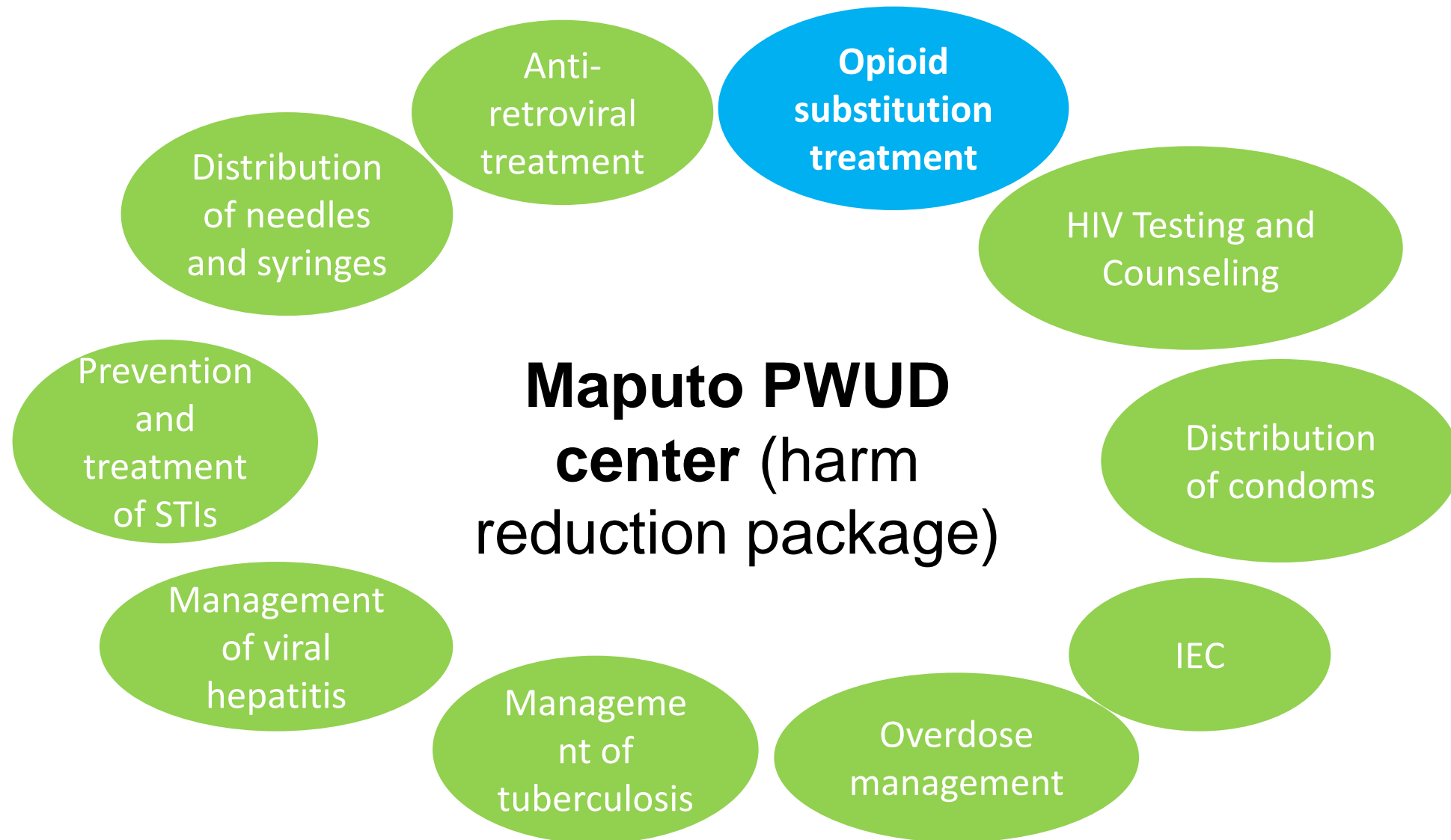
- ☐ Provision of door-to-door family planning methods by Maternal and Child Health nurses, thus avoiding clusters that mobile brigades could cause.
- ☐ Training of other community agents in order to spread the supply of contraceptives in the community.

Maputo PWUD Center



Background Information

- ❑ Integrated Biological and Behavioral Survey Among PWID, 2013/2014 showing 50% and 44% of HIV and HCV prevalence in PWID
- ❑ Mode of Transmission study Moz - 29% of new infections by key population
- ❑ Current law criminalizing PWUD (in revision)
- ❑ Currently no actors providing Harm Reduction services besides Mafalala pilot
- ❑ Willingness from Government to move towards Harm Reduction: MoH, Cabinet for Drugs Prevention and Traffic, National Aids Council
- ❑ WHO current consultancy supporting MoH on Harm Reduction Plan



Achievement, Challenges & Way Forward

Achievements

- 1st Harm reduction intervention in Moz
- High community acceptance
- Harm reduction Plan and Guidelines being drafted
- Law revision being currently revised – aiming to ensure harm reduction

Challenges

- Full Harm reduction package not implemented
- Low women/men ratio
- Prioritizing access to health care to PWUD
- No guidelines or other full harm reduction service available
- Great impact of criminalization of drug use on access to health services
- Utilization of harm reduction services stymied by enforcement of paraphernalia laws

Way forward

- Differentiated Models of Care, including decentralization of care
- Identification and link to services of PWID through a peer led intervention
- Increase needle and syringe distribution coverage
- Harm reduction Guidelines
- Law revision ensuring Harm reduction and decriminalization of PWUD or alternative policies.

Community Interventions – Outreach Environment

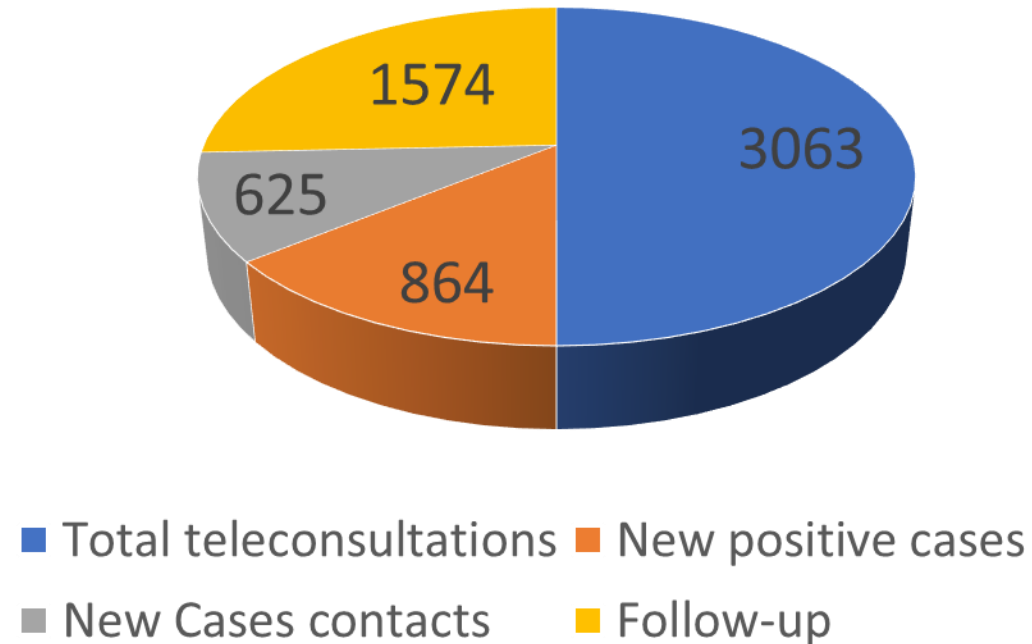


Mental Health and COVID-19

- Some of the most common manifestations of mental disruptions in times of the pandemic are the acute reactions to Stress and the Burn-out Syndrome, especially among health providers.
 - A timely intervention is needed to the prevent a more serious condition/ pathology (depression, alcohol abuse and suicide attempts)
- Preventive measures adopted:**
- Provision of psychological support focused to positive diagnosed patients, their contacts and to health providers;
 - Teleconsultation line with clinicians;
 - Quarterly dispensing of ART for all mentally compensated and stable patients;

Mental Health and COVID-19

Call center for APSS in response to COVID19



10%
Health
Workers



***Thank you from Maputo City Council!
Obrigada!***