Malaria transmission is seasonal in almost all areas of Mozambique. The annual reported number of malaria cases in 2018 was 9,320,557 with 968 deaths.
Malaria
Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women (intermittent preventive treatment in pregnancy). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Mozambique, it will be of vital importance to ensure that the universal coverage campaigns for long-lasting insecticidal nets (LLINs) scheduled for 2020 go ahead in the targeted provinces, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without the LLIN campaigns, planned indoor residual spraying and sustained malaria case management, there will be an increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 24.8% increase in malaria cases, and a 100.1% increase in malaria deaths in Mozambique. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress
Mozambique secured sufficient financing to sustain universal coverage of LLINs and ACTs in 2020 and has carried out sufficient IRS and procured sufficient LLINs to achieve 100% operational coverage of vector control in the targeted at risk population. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. Mozambique has also completed the national insecticide resistance monitoring and management plan. Mozambique has also scaled up implementation of iCCM. Mozambique has responded to the cyclone emergency. The country has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard. Mozambique has launched its Zero Malaria Starts with Me campaign. The country is also showing leadership in malaria control through its participation in the High Burden High Impact Approach.

Impact
The annual reported number of malaria cases in 2018 was 9,320,557 with 968 deaths.

Key Challenges
- There is a need to strengthen cross border collaboration with neighbouring countries.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.
### Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address funding</td>
<td>Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years</td>
<td>Q2 2020</td>
<td>Green</td>
<td>The country submitted the GF malaria application in Q2</td>
</tr>
<tr>
<td>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic</td>
<td>Q4 2020</td>
<td>Yellow</td>
<td>The country has sufficient stocks of the majority of the essential malaria commodities. Planning is on track for the LLIN universal coverage campaign and for IRS</td>
</tr>
</tbody>
</table>

### New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vector Control</td>
<td>Ensure the IRS commodities are procured in time for the 2020 IRS campaigns</td>
<td>Q3 2020</td>
</tr>
</tbody>
</table>

### RMNCAH and NTDs

**Progress**

Mozambique has recently increased coverage of ARTs in children as well as skilled birth attendants. The country has significantly enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn, Adolescent and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Mozambique is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Mozambique is very good for lymphatic filariasis (81%) and below WHO targets for schistosomiasis (60%), soil transmitted helminths (51%) and for trachoma (20%). Overall, the NTD preventive chemotherapy coverage index for Mozambique in 2018 is 47, which represents a very substantial increase compared with the 2017 index value (12).
<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
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<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>RMNCAH Impact</td>
<td>Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities</td>
<td>Q4 2020</td>
<td>Overall, RMNCAH services have been maintained, despite the COVID-19 pandemic. National lockdown measures initially caused disruptions, but services resumed. Precautions put in place to protect health workers and patients include physical distancing; Mandatory mask usage (and masks available at hand washing locations) and to reduce the risk of exposure, the health sector has used appointment scheduling (since April 2020) and reduced medication dispensing to quarterly (as opposed to monthly) where possible. Family planning services continued, but with modifications, including prioritisation of long-term family planning methods to reduce patient turnover. Child health services have continued without significant changes. The public remains afraid, which is reflected in a decline in health seeking but there is an active communications campaign ongoing to correct this. Specific messages have been developed and distributed through radio and TV. Telemedicine and other digital platforms have also been used to offer services without having to leave home. There are no identified stockouts of life-saving commodities at this time. Current stock levels are forecast to be sufficient for the remainder of the year. There was an increase in the quantity of commodities that are considered “normal” to account for the risk of supply disruptions due to global trade or factories shutting down because of the pandemic.</td>
<td></td>
</tr>
</tbody>
</table>

Mozambique has responded positively to the RMNCAH recommended action addressing the lack of data on postnatal care and continues to track progress as these actions are implemented.

**Key**

- **Action achieved**
- **Some progress**
- **No progress**
- **Deliverable not yet due**

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1 RMNCAH metrics, recommended actions and response tracked through WHO