Mozambique has a population of approximately 33.5 million. While malaria is the leading public health concern, accounting for four percent of global cases and deaths, the country is affected by other diseases. Mozambique experiences highly varied burdens of disease across its 10 provinces and Maputo City. Malaria prevalence, for example, ranges from 29–57 percent in the north to one percent in the south — though prevalence in Inhambane province is as high as 35 percent. The effectiveness of long-lasting insecticidal nets against malaria has long been a concern, particularly in light of emerging resistance among vectors to key tools for disease control.

The country began to implement seasonal malaria chemoprevention (SMC) in 2021. Prior to this, SMC had had only been adopted and scaled up in Sahelian countries of West and Central Africa.

Several factors impact on the ability of Mozambique’s health system to respond to diseases effectively, such as minimal local funding, limited government involvement in healthcare at the provincial level and a lack of governance framework for digitisation. An overall drop in the number of institutional donors in the health sector has also resulted in greater reliance on international funding, which is in short supply. Finally, insecurity has limited people’s healthcare access in Cabo Delgado and may expand into other provinces.

The Ministry of Health (MoH) is developing its national Malaria Strategic Plan 2023–2027, which prioritises many of these issues. The MoH additionally seeks to achieve universal health coverage by 2030.
Malaria Consortium in Mozambique

Malaria Consortium has been working in Mozambique since 2005 with an office in Maputo, Mozambique’s capital. We are committed to reducing the burden of malaria and other communicable diseases, with particular focus on those affecting children under five. We work closely with the MoH, the National Malaria Control Programme, the National Community Health Workers Programme, provincial and district health authorities and affected communities.

We provide technical assistance to our partners to strengthen existing health systems by improving the integrated community case management (iCCM) of common illnesses, such as malaria, diarrhoea and pneumonia; deploying functional surveillance mechanisms; developing and scaling innovative community-focused platforms to facilitate data-informed decision-making; filling knowledge gaps through operational research; and organising social and behaviour change activities.

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Our strategic approach

- Lead SMC for all eligible children in eligible districts and work with the government to interpret/implement other chemoprevention options (e.g. delivery to new geographies, wider age-groups, alternative regimens, mass screenings etc.)
- Actively participate in the elimination agenda and action plans in Maputo City
- Develop evidence to support effective stratification and implementation of services through the strategy period
- Support the government with the approach and delivery of a malaria vaccine campaign as this becomes possible
- Continue to be at the forefront of iCCM in eligible areas and lead in the digitisation of community service delivery through the upSCALE digital health platform and its links to the District Health Information System (called the iMISS — integrated malaria information storage system)
- Develop the capacity of all levels of the system in the identification of, and response to, malaria
- Play a leading role in the deployment of data systems to the lowest level of the health system, supported by clear data visualisations
- Maintain leadership on surveillance with a focus on the community level and genotyping, and the implementation of reactive surveillance in the south
- Support the development of a digital governance framework for community data capture and use
- Actively participate in, take on leadership roles in, and advocate within technical working groups and coordination mechanisms to improve effectiveness, and reduce duplication and parallel systems
- Influence the priorities of the national research agenda and develop/maintain an aligned programme of research linked to:
  - chemoprevention and its adjuvants/approach combinations
  - malaria elimination in urban environments
  - genotyping.