# Healthy Adolescents: Fighting HIV in Mozambique





Keywords:

HIV, adolescents, youth activism, urban communities

CUAMM working in Mozambique since **1978** CUAMM working in Beira since **2000** 

## **HIV IN MOZAMBIQUE**

HIV in Mozambique is a crucial public health challenge. In a Country of about 28 million people, approximately 2.1 million were living with HIV (PLHIV) as of 2017, out of which only 57% were accessing antiretroviral therapy (ART). New HIV infections reached 130,000 and 70,000 people died from AIDS-related causes.<sup>1</sup> In its 5-year strategic plan (2014-2019), the Ministry of Health (MISAU) recognizes the weak investment in the health-network development at **urban level** and the priority of the intervention to reduce the burden of communicable diseases.<sup>2</sup> Due to these considerations, CUAMM has decided to reinforce its intervention in the urban setting of **Beira**, second most important city (more than 500.000 inhabitants), in Sofala Province, where 16.3% of the population is HIV+, focusing its work especially on adolescents.<sup>3</sup>

#### Close to ADOLESCENTS -THE SAAJs EXPERIENCE Why adolescents?

AIDS is now the leading cause of death among adolescents in Sub-Saharan Africa (SSA). Globally, every two minutes an adolescent (15-19) is newly infected with HIV.<sup>4</sup> Adolescents represent a particularly fragile category. They are highly sensitive to peer values and opinions, and a positive diagnosis of HIV can cause an overwhelming emotional crisis that youths can be poorly equipped to handle alone. High levels of stigmatization and discrimination against HIV/AIDS can cause panic or depression and shame that can precipitate in isolation. Service barriers can block youths from seeking counselling, testing, and care. Those needing ART may be unable to follow a disciplined drug regimen and have little tolerance for any side effects of ART. In low and middle-income countries (LMIC) with strong inequality, like Mozambique, young people are often affected by unemployment, school drop-out and sexual exploitation, social determinants that increase the risk of HIV infections. Furthermore, health services are often not properly equipped to respond to adolescents' needs.



#### How is CUAMM making a difference?

CUAMM's project is based on three levels of intervention health facilities, schools and communities – creating a strong linkage between counselling, testing and treatment.

#### Health facilities

CUAMM is supporting since 2016 specific ambulatories for adolescents and young people (10-24 years), named SAAJ (Serviços Amigos dos Adolescentes e Jovens – Adolescents friendly facilities). The SAAJ services are located inside health centres and they offer free counselling on reproductive and sexual adolescent health; pregnancies (antenatal and postnatal visits); prevention, test and treatment of HIV and sexually transmitted infections (STIs) and contraceptive methods. SAAJ structures are established to ensure that young individuals receive services in privacy, and that no restrictions are placed on adolescents' access to these out-patients department (OPD). Since 2018, CUAMM has introduced the case management approach: the role of the case manager is to closely follow up the HIV+ adolescents over time, from a socio-cultural perspective (as compared to purely clinical perspective), in order to understand and tackle potential barriers hindering the specific adolescent to stay on treatment.

I used to feel isolated and when I went to the health centre for my treatment, I didn't speak to anyone because I thought I was the only one [with HIV]. Thanks to the youth clubs we can meet and support each other – HIV+ Adolescent

#### Schools

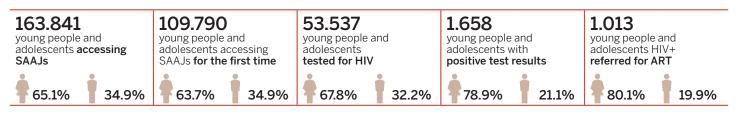
The project supports the *cantinho* escolares or school corners areas in primary and secondary schools, specifically designed to provide information and counselling on sexual and reproductive health and rights for adolescents. Among the organized activities, there are **sensitization sessions** on a weekly basis and **trainings** within the school. These corners count on the daily presence of peer activists, one focal point professor and, periodically, a nurse from the health centre.

I realized that the information I receive are important, they help me growing up. – HIV+ Adolescent



#### ACHIEVEMENTS

From August 2016 to September 2018, in the 7 targeted SAAJ, the following results have been achieved:



#### Community

CUAMM organizes raising awareness activities to make sure people get familiar with HIV prevention, get tested, start treatment if necessary, and stay on treatment. In order to increase effectiveness, CUAMM involves young people themselves, who chose to work in **peer education** activities to cut down fear and stigma and who serve as link between the community and the health centre. Indeed, CUAMM operates in partnership with Geração Saudável Association and ANANDJIRA, two groups of young activists (peer support groups) - some of whom HIV positive who receive and support youths referred from SAAJs and organize events where they meet other peers. Among these events are **youth clubs** (psychological support group for adolescent and youth at SAAJ) and theatre performances to raise awareness on HIV and promote testing at community level.

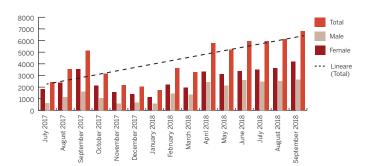
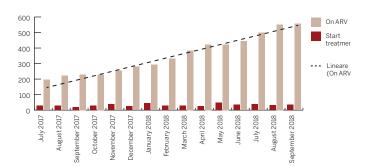


Figure 1: Adolescents and Youth accessing SAAJ







Young people feel the need to stay together when facing difficult situations and I am proud of the impact that my actions as activist have on their lives. – Activist from Geração Saudável Association

From July 2017 to September 2018, the number of adolescents who accessed SAAJs and started ART has increased how shown in the graphs<sup>5</sup>.

### THE WAY FORWARD

Adolescents are key to a society development and investing on their health and well-being is fundamental for a Country like Mozambique, in which the youth population is growing fastest and 34.7% is among 10-24 year old.<sup>6</sup> Acknowledging this and starting from the encouraging results achieved so far in Beira, CUAMM intends to intensify its intervention, in order to achieve a major impact, by:

- Strengthening the case management approach;
- Introducing the family tracing approach: starting from the adolescent, test all family members and consequently provide a tailored support per each case;
- Introducing targeted activities for HIV+ adolescent girls and pregnant adolescents;
- Extending the activities of the youth clubs at community level to reach more adolescents and provide a widespread psychosocial support for youth.

<sup>1</sup> UNAIDS, 2018. Country Factsheet, Mozambique 2017. [Online] Available at http://www.unaids.org/en/regionscountries/countries/mozambique [Accessed 7 January 2019].

<sup>2</sup> República de Moçambique, Ministério da Saúde, 2013. Plano Estratégico do Sector da Saúde (2014-2019). [Pdf] Available at http://www.misau.gov.mz/index.php/ planos-estrategicos?download=132:plano-estrategico-do-sector-da-sade-2014-2019 [Accessed 14 February 2018].

<sup>3</sup> Instituto Nacional de Saúde (INS) & Instituto Nacional de Estatística (INE), 2017. Inquérito de Indicadores de Imunização, Malária e HIV/SIDA em Moçambique (IMASIDA) 2015. [Pdf] Available at https://dhsprogram.com/pubs/pdf/PR85/PR85.pdf [Accessed 14 February 2018].

<sup>4</sup> UNICEF, 2016. For Every Child End AIDS, Seventh Stocktaking Report, 2016. [Pdf] Available at https://www.unicef.org/publications/files/Children\_and\_AIDS\_Seventh\_ Stocktaking\_Report\_2016\_EN.pdf.pdf [Accessed 14 February 2018].

<sup>5</sup> See Ref. V.

<sup>6</sup> CUAMM Internal Report 2018.