It’s not enough to respond to emergencies; a long-term perspective is necessary in our work, with the design of interventions in partnership with local people and organizations to tackle actual needs while also promoting a sense of community and resilience. In Mozambique CUAMM carries out targeted pandemic-related projects alongside non-crisis-related initiatives to support the most vulnerable.

Although it is one of Mozambique’s wealthiest provinces in terms of natural resources, Cabo Delgado suffers from a lack of government investment in services and job opportunities. It became the center of armed clashes in October 2017, with an intensification in the number and brutality of the attacks (kidnappings, houses set on fire and other forms of violence) in the early months of 2020. To date, in a province with 2,320,261 inhabitants (CENSO Mozambique 2015), there have been more than 600 attacks and 2,000 deaths, 1,100 of which were civilian (ACLED, November 2020), generating more than 350,000 internally displaced persons (IDPs), according to United Nations estimates.

In this volatile situation, with the crisis fast turning into a civil war, CUAMM – which has been active in Cabo Delgado since 2014 – has taken a two-pronged approach. First, we are proceeding with our development work, but adapting activities to the new circumstances so as to reach a larger number of beneficiaries, including IDPs; second, we are intensifying our efforts in order to tackle multiple new emergencies (Covid-19, IDPs, and a cholera epidemic). The end goal is to ensure the continued functioning of the national health system, preventing it from collapsing under the weight of the frequent acute emergencies in recent years (cholera and Covid-19 epidemics). Thus our efforts are aimed at ensuring basic health services, such as prenatal and post-natal visits for pregnant women and mothers, vaccination coverage for children, and ongoing treatment for chronic patients.

We are basically working on two fronts, bolstering our human and financial resources while making the most of our presence in the area, which is by now consolidated and recognized by district beneficiaries and authorities. For example, at the moment CUAMM is supporting the Montepuez Rural Hospital not only with drugs and equipment, but also a doctor in charge of neonatology, a surgical health technician in the surgical unit, and two maternal and child health nurses who are providing maternal, infant and neonatal training in health centers associated with the hospital.

Another key role in the provincial health system is played by 300 community health activists who work to raise awareness among the population, providing information and advice on prevention on Covid-19 as well as HIV/AIDS, malaria, cholera and diarrheal diseases.

Recognized officially by health authorities, traditional leaders and the community, these activists play an essential role in connecting the latter with health facilities, helping to create bridges between patients and care centers and ensuring the continuation of treatment plans, for example for HIV patients.

Indeed, HIV is still a major problem in the country: according to WHO data, Mozambique recorded 120,000 new cases of infection in 2019 (4% of all African cases), and the number of HIV/AIDS-related deaths was expected to rise dramatically in 2020 due to patients’ restricted access to health units to begin therapy, an indirect result of the Covid-19 pandemic.

Sub-Saharan African nations are currently experiencing very daunting challenges. In these areas, responding to emergencies is not enough; to avoid jeopardizing the progress made until now we need to do more. That’s why CUAMM takes its more systemic, broad-based approach in close partnership with local health systems – the only way, in the words of the United Nations, to “leave no one behind”.

A FRAGILE TERRITORY

CUAMM’S TWO-PRONGED RESPONSE

ACTIVISM IN THE FARthest CORNERS