Supporting Linkage, retention, and reengagement for PBFW in emergency settings – Cabo Delgado Experience

Cabo Delgado Epi-Demography

- Population of **2.670.078**, 51,3% are women. (INE 2017)
- HIV Prevalence 13.8%, with 167.317 PLHIV .(IMASIDA 2015)
- **HIV VTR 15%** (Spectrum 6.06)

Mozambique





Cabo Delgado context

- Since 2017, Cabo Delgado has been the target of terrorist attacks;
- Estimated internally displaced population 946.508, inside the province but also to other provinces: Niassa, Nampula e Zambézia. (OCHA 07/2022)
- **65.000** of the IDP are PLHIV (3.900 children);
- 38 HF where closed as consequence of the attacks;
- Almost 800 HCW displaced from affected districts;
- 24.000 individuals lost direct access to ART covered by the closed HF, traced and received treatment in the reallocation communities;





Main Interventions

Linkage

- Mobile brigades and mobile clinics for HTC at the IDP's Camps and Communities;
- Military health workers, provide care to local communities;
- Construction of Hf with non-conventional material at the IDP Camps and Communities to Provide HTC;





Main Interventions (2)

Re-engagement, Retention and ART Dispensing

- ART dispensation by community health agents (APE),
 5.408 PLHIV on ART;
- Introduction of 6MMD;
- Mobile brigades and clinics to provide ANC and C&T;
- Health Passport for IDP with chronic disease and in Prophylaxis;
- Mentor mothers at the IDP Camps and communities.

Perspectives

- 3MMD for PBFW, as pilot intervention;
- Include PBF as eligible to ART dispensation by community health workers;



