



Learning brief on public health emergencies in Mozambique

VillageReach Mozambique has released the first Learning Brief documenting lessons learned in the area of public health emergencies in Mozambique. This brief aims to provide decision makers and future Public Health Emergency Operating Center (PHEOC) teams with information that can increase effectiveness and efficiency in responding to public health emergencies.

How the report was compiled

The learning brief is a result of qualitative and comparative (the institutionalization of PHEOCs in Africa) analysis, and a literature review of official and public health emergency documents, activity reports and meeting records.

Key conclusions

- Legal frameworks for emergency, in a broad sense, have received attention from national public authorities. However, although the country has significant experience in responding to outbreaks and epidemics, the specification for public health emergency preparedness and response is still at an embryonic stage. There is no integrated, cross-sectoral multi-stakeholder, functional mechanism capable of addressing public health emergencies.
- The COVID-19 pandemic showed, however, that when the sector prepares and uses collaborative approaches with a multiplicity of actors and sectors, significant results can be achieved and more catastrophic and drastic situations can be avoided. However, even in this context, with a poorly functioning PHEOC, the approaches mobilized relied heavily on informal arrangements and, above all, on the support of senior management, with emphasis on the direct involvement of the President of the Republic and the Minister of Health.
- The approval of the Public Health Law by Parliament is an opportunity to organize the mechanisms for preparing for and responding to public health emergencies, with particular emphasis on COESP, although complementary legislation is still lacking.
- The status of PHEOC within the bureaucratic apparatus will determine its capacity to impact different sectors and actors, as well as to mobilize resources. Currently, without a legal framework that enables the exercise of its functions, and housed in the National Directorate of Public Health, it does not have the capacity to function as a central coordination platform for health emergency preparedness and response. Its administrative powers are too limited to influence health domains, especially in other related sectors of the incident management system.
- A PHEOC with a level of autonomy (both administratively and financially) under the direct tutelage of the Minister who oversees



Emergency in Mozambique

Mozambique is highly **vulnerable to natural disasters**. In the last 30 years alone, it has experienced more than 40 cyclones.

the health sector is suggested as one of the best ways to provide coordination and information sharing capacities during public health emergencies. However, in the first phase, and given the various limitations of the context, it should function more as a virtual platform for receiving information from intersectoral collaboration on public health emergencies. Over time, the learning of the team would allow it to become fully operational.

- For the operationalization of PHEOC, a resource mobilization plan must be made, either from the allocation of funds from the state budget or by attracting funds from development partners. At this point, some partners have expressed interest in supporting the PHEOC. This requires designing and installing not only transparency and accountability mechanisms, but also monitoring and evaluation as roadmaps for implementation. The public health emergency system must be combined with a management system for the assurance of trust and credibility of administrative operations.

Key recommendations



Influence the revision of legislation related to the Incident Management System, to include an integrated public health emergency approach



Clearly define a strategic position that allows the PHEOC to exercise its role in coordinating, preparing for, and responding to public health emergencies from a broad perspective



Accelerate the development of the PHEOC strategic plan and implementation roadmap, including the design of Standard Operating Procedures (SOPs). The PHEOC operationalization tools should enable it to establish Monitoring and Evaluation (M&E) plans



Map and design fund mobilization mechanisms for the operationalization of the PHEOC and improve accountability and transparency mechanisms. This implies designing a clear plan of activities and results.



Identify and equip a physical space for the operation of the PHEOC to ensure greater dynamism. However, in a first phase, and given the material, financial, and human resource limitations, a more virtual operating perspective would be strategic



Design professional qualifiers, recruit and train key human resources to perform the functions defined for PHEOC.



The moment is now

The COVID-19 pandemic created a moment of **institutional collaboration** in Mozambique. We can take full advantage of this moment to institutionalize and empower the PHEOC.

Way forward

A second learning brief will focus on the participation of Civil Society Organizations (CSOs), other government sectors, and the private sector in coordinating Mozambique's response to COVID-19. VillageReach will also create a policy analysis document focused on the process of creating, establishing, and operationalizing PHEOC in Mozambique, exploring entry points for the formulation, redesign, implementation, human and financial resource allocation, for the operationalization of the PHEOC.

To read the full learning brief 1, click here: [Portuguese](#) [English](#)

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