The Journey to Improved **Public Health Emergency Response** in Mozambique

In 2020, Mozambique, like many nations around the world, faced a confluence of public health emergencies (PHE). The COVID-19 pandemic, coupled with outbreaks of polio, cholera and measles, strained the country's health systems. To address these challenges effectively, the Ministry of Health (MISAU) recognized the need for a robust and coordinated response system.

The Public Health Emergency Operations Center

To strengthen its public health response capabilities, MISAU, with the initial support of Dalberg, VillageReach as convener and funding from the Gates Foundation, embarked on a journey to operationalize a national Public Health Emergency Operations Center (PHEOC). As COVID-19 cases increased, VillageReach was invited to provide technical support in coordination and information management, and in designing and operationalizing the PHEOC. The expected outcomes for this initiative include:

Improved stakeholder collaboration and communication across partners, agencies and other non-governmental organizations (NGOs), for better aligning PHE preparedness and response.

Efficient planning and utilization of PHEOC resources during PHE to reduce unnecessary expenses and achieve the best possible outcomes during emergencies.

Strengthened surveillance for early detection of unusual patterns or anomalies in public health to ensure timely activation of response mechanisms and implement mitigation and control measures to prevent further spread of PHE.

We set out to enhance PHE preparedness and response by facilitating stakeholder coordination, collaboration, streamlining the use of resources and aligning with national and international standards.

The Long-Term Mission: **Reduced morbidity and mortality** minimizing the number of people affected or deceased during a PHE, demonstrating the effectiveness of PHEOC interventions.

Visit to a cholera camp during a simulation course in Zambezia province. Photo credit: VillageReach

Planning for Impact

The Mozambique PHEOC is designed to strengthen national preparedness and response to PHE by ensuring a collaborative, resource-efficient and standards-driven approach. It will enhance the capacity for quick, coordinated responses to emerging threats, saving lives and improving public health outcomes.

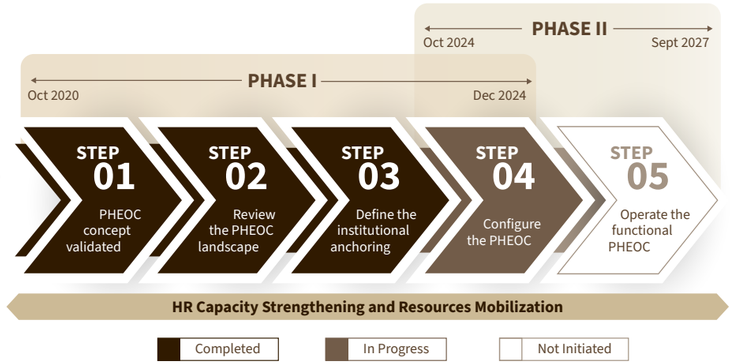
Though the journey to operationalization is not yet complete, outbreak simulations are already refining strategic plans and building capacity among health care workers. By conducting table-top outbreak simulations in Maputo and cholera drills in Zambezia, the PHEOC supports a well-coordinated and effective response to public health threats, positioning Mozambique to safeguard its citizens during future PHE.

Aerial view of Quelimane, Zambezia in Mozambique.
Photo Credit: Denis Onyodi

The Journey to PHEOC

VillageReach collaborated with MISAU leadership to gain insights into the PHE environment and identified essential support, paving the way for Phase I activities. These activities were executed between 2020 and 2024 to build upon the insights gathered and strengthen the PHE environment. Key steps included concept validation, landscape evaluation and anchoring the institution.

Figure 1: *The operationalization of PHEOC follows a two-phase roadmap*



2020

VALIDATED THE VISION:

A crucial milestone was reached with the validation and approval of the PHEOC concept. This began a strong partnership with the Ministry of Health (MISAU).

2021

LEARNED FROM THE PAST:

- A comprehensive review was undertaken to assess the current state of PHEOCs across Africa. This included documenting stakeholders' experiences in public health emergency preparedness and response, analyzing the initial functions of PHEOCs, including their challenges and studying case studies from Senegal, Nigeria, Burkina Faso, Mali and Ethiopia.

While existing PHEOCs varied in their physical and legal structures, they shared a common goal: improving emergency response preparedness and response. This understanding informed the Mozambique PHEOC's mission, vision and strategic objectives.

2022

BUILT STRONG FOUNDATIONS:

During this time, we worked with MISAU to build the foundation by:

- **Defining the Structure -** A clear organizational structure was established to ensure efficient operations.
- **Centralizing the Role -** PHEOC was a central department within the Public Health Directorate (DNSP).
- **Developing the Team -** Job descriptions were created for PHEOC staff at national and provincial levels, ensuring a skilled workforce.

2023

ESTABLISHED A PHYSICAL PRESENCE:

- A provincial PHEOC was established in Tete province with support from the Gates Foundation Polio Response Team. This inauguration, led by the Deputy Minister of Health, highlighted the PHEOC's pivotal role in coordinating preparedness and response efforts.

2024

FORMED THE OPERATIONAL MACHINE: (2023 - 2024)

The roadmap was operationalized and secured necessary resources for Phase II by:

- **Strengthening Legal Frameworks -** The publication of the Public Health Emergency Committee Act in the Official Gazette provided temporary legal basis for PHE preparedness and response, including PHEOC operations, while legislation is worked on.
- **Building Physical Infrastructure -** The identification and approval of a physical location for the National PHEOC (NPHEOC) marked a significant step towards establishing a dedicated space for emergency response.
- **Preparing for Standardizing Response -** The officialization of the Incident Management System (IMS) model provided a structured approach to managing public health emergencies.

STAFFED THE TEAM:

- The permanent appointments at the national PHEOC and the regional PHEOC in Tete province ensured a dedicated team to drive the center's operations. In collaboration with WHO, Africa CDC and USAID, a comprehensive capacity-building plan was developed and implemented, equipping staff with the skills needed to respond to crises effectively.

STRENGTHENED THE WORKFORCE:

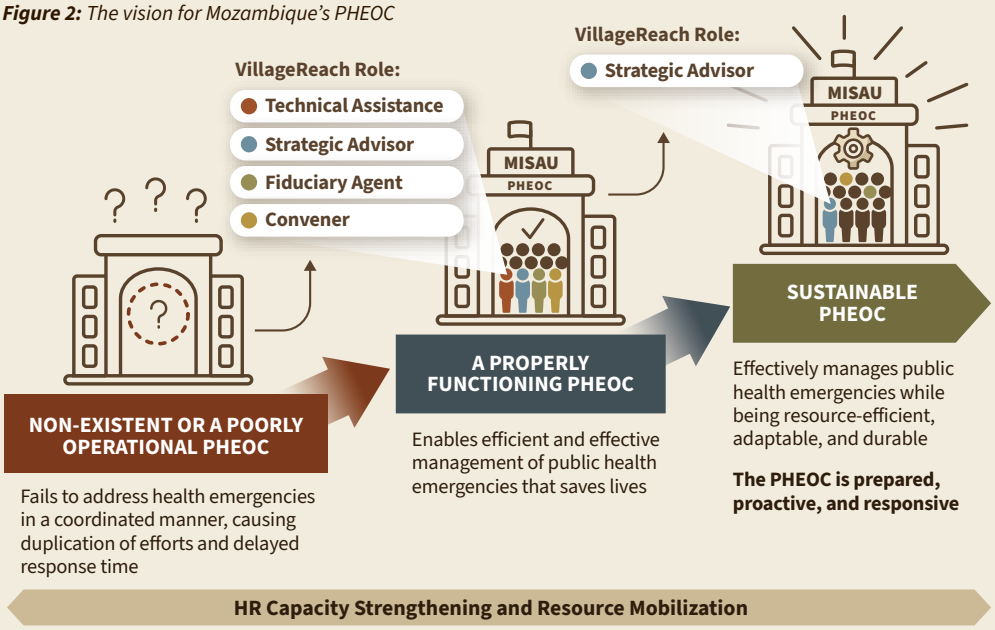
- The Ministry of Health prioritized capacity building to ensure a well-prepared workforce. A series of public health emergency management (PHEM) trainings and simulations, such as tabletop and drill exercises, were conducted to test the National PHE Preparedness and Response Plan. These exercises focused on real-world scenarios, including cyclones, cholera outbreaks, mpox and Marburg outbreaks.

By investing in training and simulation, the PHEOC has empowered hundreds of health care professionals, including medical chiefs and managers. This skilled workforce is essential to effectively implement preparedness and response plans, safeguarding public health in Mozambique.

Foundations for Tomorrow

In December 2023, the operational groundwork for Phase II was laid. This phase aims to fully operationalize the PHEOC network, both centrally and regionally, across all provinces. By equipping the PHEOC with the necessary resources and expertise, MISAU will transition from the partially functional center, developed in Phase I, to a robust and sustainable system capable of effectively coordinating preparedness and response efforts.

Figure 2: *The vision for Mozambique's PHEOC*



Next Steps:

1. **Improve the Workforce:** Up-skilling PHEOC staff through comprehensive training and mentorship to ensure they are well-equipped to fulfill their roles and responsibilities.
2. **Strengthen Infrastructure:** Supporting the establishment of physical infrastructure at the national and provincial levels, and exploring the potential of adopting virtual PHEOCs to enhance efficiency and effectiveness.
3. **Reinforce Key Areas of the PHEOC Ecosystem:** Including information systems, supply chain and surveillance, to ensure timely, informed decision-making and effective allocation of medical products during public health emergencies. Additionally, strengthening PHEOC surveillance through seamless data exchange across platforms with stakeholders such as agriculture and meteorology.
4. **Foster Collaboration:** Mapping out roles and responsibilities among key government stakeholders to ensure seamless coordination.
5. **Develop Strategic Frameworks:** Implementing strategic and operational documents, including a five-year strategy, a PHEOC handbook and standard operating procedures (SOPs).
6. **Secure Resources:** Mobilizing the necessary resources to sustain the PHEOC network and its operations.

By building on the successes of Phase I and implementing these key activities together, we can move from a disjointed response relying on an unstable coalition to a robust and centrally coordinated response mechanism, creating a resilient public health system that protects Mozambicans during future health emergencies.

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