

## Field Epidemiology Training Program

FETP-Mozambique: a pillar of surveillance and public health response



### PRESENTATION

The Annual Informative Bulletin of the Field Epidemiology Training Program (FETP-Mozambique) is a publication of the National Institute of Health (INS), in coordination with the Ministry of Health (MISAU).

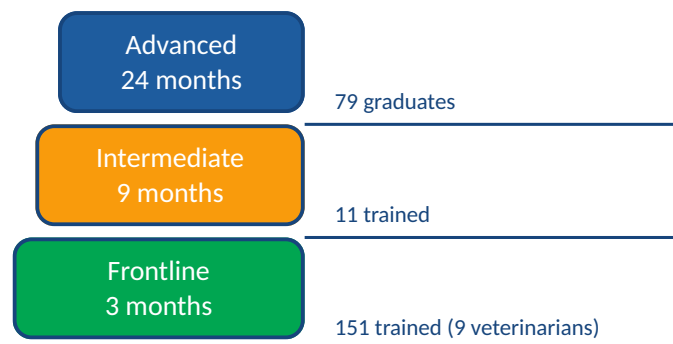
This first edition, launched at a special moment in which FETP-Mozambique celebrates 15 years of existence, represents an important milestone in the consolidation of the program's scientific and institutional communication. The bulletin presents the main results, milestones and lessons learned of 2025, highlighting the training courses carried out, the investigations conducted in the field, the evaluations of surveillance and information systems, and the scientific output of the program's residents and graduates.

More than a record of activities, this publication celebrates the role of FETP-Mozambique as an essential pillar in strengthening the country's epidemiological capacities and reaffirms the continued commitment to training professionals capable of transforming data into action, contributing to more integrated surveillance, a faster response and a more resilient public health system in Mozambique.

### ABOUT FETP-MOZAMBIQUE

- Implemented in 2010;
- Three levels of training: **Advanced** (accredited by the global network of Field Epidemiology Training Programs – TEPHINET), **Intermediate** and **Frontline**;
- “**Learning by Doing**” approach with continuous mentorship;
- Present in almost all provinces of the country.

### INDICATORS SINCE IMPLEMENTATION



### HIGHLIGHTS OF 2025



#### Training and Graduation

- 8th, 9th and 10th Frontline cohorts
  - 55 trained
- 7th Advanced cohort
  - 11 graduates
- Integration of the One Health approach into the Frontline level training package



#### Emergency Response

**Cyclones:** Chido in Cabo Delgado and Dikeledi in Nampula

**Outbreaks:** Cholera, Malaria, Meningitis and Mpox



#### Events and Partnerships

- 3rd Scientific Conference of FETP-Mozambique
- Participation in AFENET events
- Molecular epidemiology course in Brazil
- Epidemiology Conference in Cape Verde

### INDICATORS ■

#### Advanced

**11** professionals graduated to work in the **provinces of Maputo, Inhambane, Gaza, Tete and Cabo Delgado**, strengthening public health response capacity.

#### Frontline

**13** professionals trained (2 veterinarians) in the **Province of Maputo**, focusing on strengthening surveillance at the main points of entry and on the integration of the *One Health* approach.

**19** surveillance technicians from the **City of Quelimane** with prior *BED Plus* training, to improve the timely entry of quality surveillance data.

**23** technicians acting as surveillance focal points in the districts of the **Province of Zambézia** were trained to improve the detection and monitoring of public health events.

## SURVEILLANCE SYSTEM EVALUATIONS

**Neonatal Tetanus (2019–2023)**

**Main results:** Representative, stable and useful.

**Point of attention:** Low acceptability; need to strengthen feedback and district-level supervision.

**Sentinel Surveillance of Severe Acute Respiratory Infections (SARI/RSV) (2022–2023)**

**Main results:** Good data quality, acceptability and timeliness.

**Point of attention:** Need for stable funding; absence of testing thresholds.

**Modelling of the HIV Care and Treatment Cascade (Spectrum) (2018–2023)**

**Main results:** Useful and timely tool for HIV policies.

**Point of attention:** Limitations in flexibility and interoperability with national systems.

## SCIENTIFIC COMMUNICATION AND ACADEMIC OUTPUT

- 12 abstracts presented (national and international conferences);
- 5 articles published (BMC and JIEPH);
- 2 workshops on scientific writing and data analysis;

The publications and presentations reinforce the role of FETP as a producer of evidence for public health policies.

## GENERAL RECOMMENDATIONS

- Strengthen supervision and feedback between the district, provincial and central levels.
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- Increase interoperability between digital platforms (SISMA, SESP, DISA, Spectrum and DHIS2).

## 3rd SCIENTIFIC CONFERENCE OF FETP-MOZAMBIQUE

**Best Oral Presentation Award: Fernando Padama highlights the occurrence of Noma cases in Zambézia Province**

The epidemiologist Fernando Padama, a graduate of the 2nd cohort of the Advanced FETP, received from Dr. Áuria Banze (FETP Coordinator) the Best Oral Presentation Award for the study on the Prevalence of people with sequelae of Noma in the Province of Zambézia, 2024. The study brought to light unprecedented data on a neglected tropical disease which, despite being preventable and treatable, still causes high mortality among children living in poverty, due to the lack of diagnosis and adequate care. Carried out in 11 districts, the study identified 23 survivors, of whom 52% were women. Of the survivors, 43% had Noma at the age of  $\leq 2$  years, and 62% experienced social stigma.

Among 41 health technicians assessed, only 12% correctly diagnosed Noma at the initial stage. The work highlights the urgent need for capacity-building of health professionals and community awareness-raising, providing unprecedented evidence on a neglected disease in Mozambique.

Read more about the conference at: <https://www.tephinet.org/news/mozambique-fetp-celebrates-graduation-its-7th-advanced-cohort-and-3rd-national-scientific>



### GLOSSARY

**AFENET:** African Field Epidemiology Network — Pan-African network that supports Field Epidemiology Training Programs (FETP) in several African countries, strengthening capacities in surveillance, detection and outbreak response.

**Health Surveillance System Evaluation:** Systematic analysis of the performance and quality of a public health surveillance system, based on the guidelines of the Centers for Disease Control and Prevention (CDC), to assess its usefulness and its capacity to guide prevention and response actions.

**BED PLUS:** Integrates real-time data systems and connects surveillance to laboratory and health information networks, promoting faster and more effective outbreak detection and response.

**BMC:** BioMed Central — International open-access scientific publisher that publishes peer-reviewed articles in various areas of health, biomedicine and social sciences

**DHIS2:** District Health Information Software 2 — Open-source platform developed for health data management and analysis.

**Noma Disease:** Severe and rapidly progressive gangrenous infection that destroys the tissues of the face, caused by opportunistic bacterial infection in individuals with malnutrition, poor oral hygiene or immunosuppression. Diagnosis is clinical, based on the observation of characteristic oral and facial necrosis.

**ARI (IRAS):** Acute Respiratory Infections — infections of the respiratory tract with rapid onset and short course, characterised by symptoms such as cough, fever, sore throat, nasal congestion or difficulty breathing.

**JIEPH:** Journal of Interventional Epidemiology and Public Health — Open-access scientific journal, published by AFENET, focused on applied epidemiology, surveillance, outbreak investigation and public health interventions in Africa.

**SESP:** Sistema Eletrónico de Seguimento do Paciente (Electronic Patient Follow-up System) — electronic platform for the clinical registration and follow-up of patients in health facilities.

**SISMA:** Sistema de Informação de Saúde para Monitoria e Avaliação (Health Information System for Monitoring and Evaluation) — National platform for the registration and management of health data in Mozambique.

**RSV (VSR):** Respiratory Syncytial Virus — Common virus that causes respiratory infections, especially severe in infants and the elderly. It is the main agent of bronchiolitis and pneumonia in infants. Transmission occurs through respiratory droplets or contact with contaminated surfaces.

### TECHNICAL SHEET

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**Approval:** Denise Langa – Coordinator of the Division of Surveys and Health Observation.

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