

Addressing Health Inequalities: Capacity-Building Initiatives as a Strategy for Developing a Workforce Responsive to Community Needs

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- Basic health Indicators
- Health Inequalities
- INS mandate and actions to reduce Inequalities
- Training initiatives to reduce Inequalities
- INS Human Resources Development Plan (HRDP)
- Perspectives



### **Basic Health Indicators**

Indicator	Mozambique (2022–2023)	WHO Standard (2023) N/A		
Maternal mortality	233 deaths per 100,000 live births			
Life expectancy	59.3 years	≥70 years		
Under-5 mortality	71/1,000	≤25/1,000		
Universal Health Coverage	47%	≥80%		
Physician density (including public health specialists)	0.04/1,000	1.0/1,000		
Epidemiologist	1 per 660,000	At least 1 per 200,000 population		

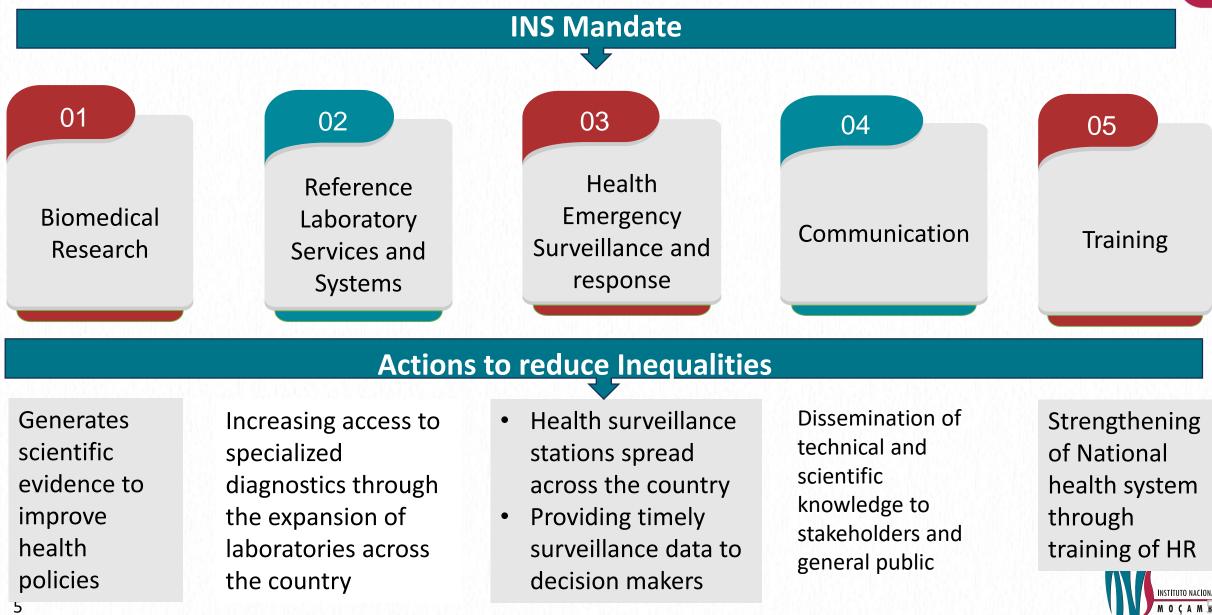


### **Health Inequalities: Geographic Disparities**

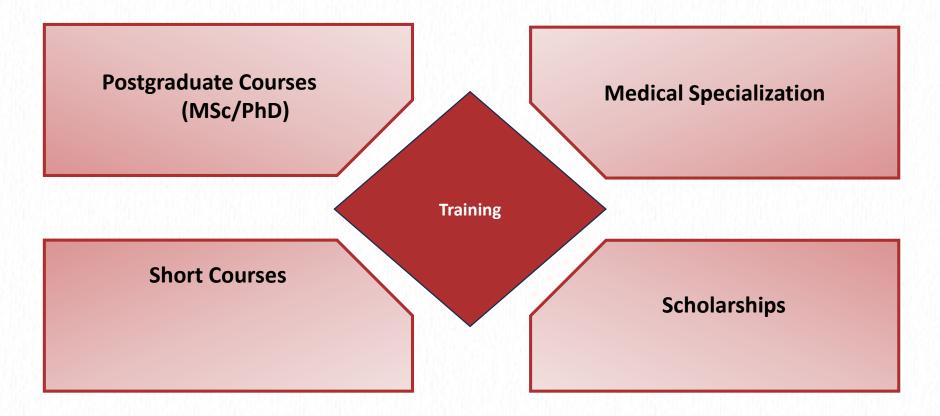
Indicators	Rural	Ubarn			
Population: ~33 million (INE, 2024)	70%	30%			
Healthcare workers (WHO, 2019)	30%	70%			
Uneducated women (IDS, 2022-23)	35.6%	13.8%			
Women receiving skilled attendance at delivery (IDS, 2022-23)	60%	90%			
Children with a complete vaccination schedule (IDS, 2022-23)	29,4%	61,2%			



### **INS Mandate: Actions to Reduce Inequalities**

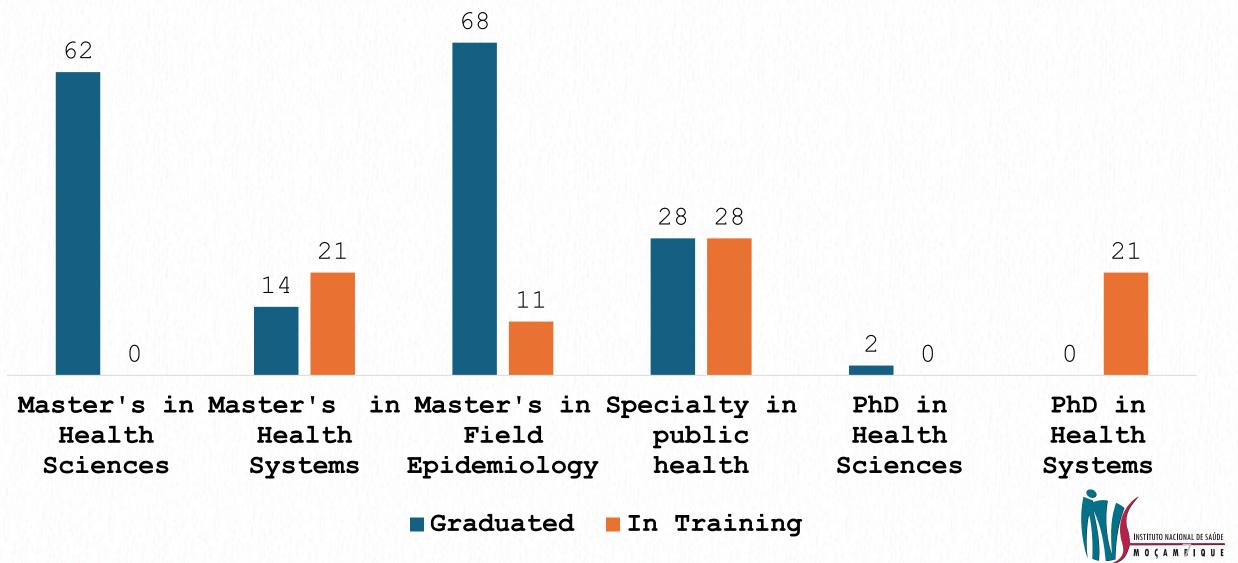


### **Training Initiatives to Reduce Inequalities**





### Postgraduate at INS: Health Professionals from National Health System in Training and Graduated



### Master's and Doctorate Program in Health Systems INS-FioCruz



#### SIS-SAÚDE BRASIL/MOÇAMBIQUE

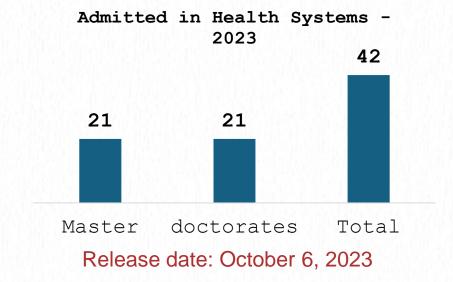
Programa Educacional em Sistemas de Saúde para Moçambique

Instituições parceiras:











### **Field Epidemiology Program**

#### Front Line



- Since 2021
- 3 months
- Distrital Level
- 6 coortes completed (Central level, Maputo city, Maputo Province, Nampula and Gaza)
- One health approach
- 80 graduated students

#### Intermediate Level



- Since 2023
- 9 months
- Provincial Level
- 11 residents on training
- Started at central region (Manica, Sofala and Zambézia)

#### Advanced Level

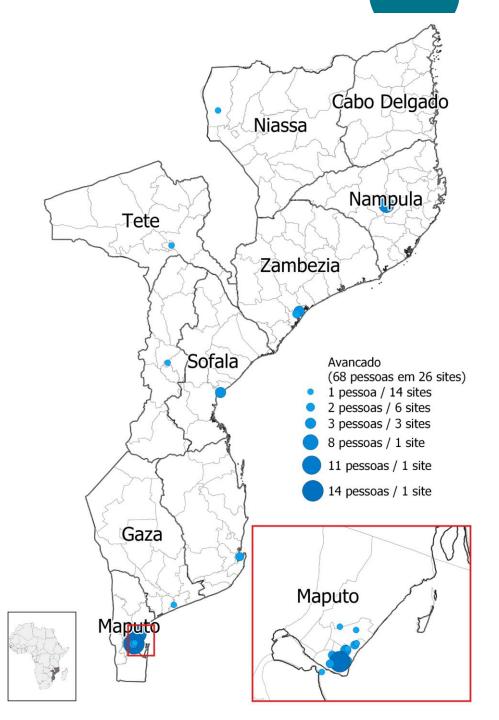


- Since 2010
- National level
- 7 coortes completed
- 68 graduated
  - 2 International residents (Guiné-Bissau)
- 11 residents on training
- Perspective:
  - 1 epidemiologist per 200,000 inhabitants

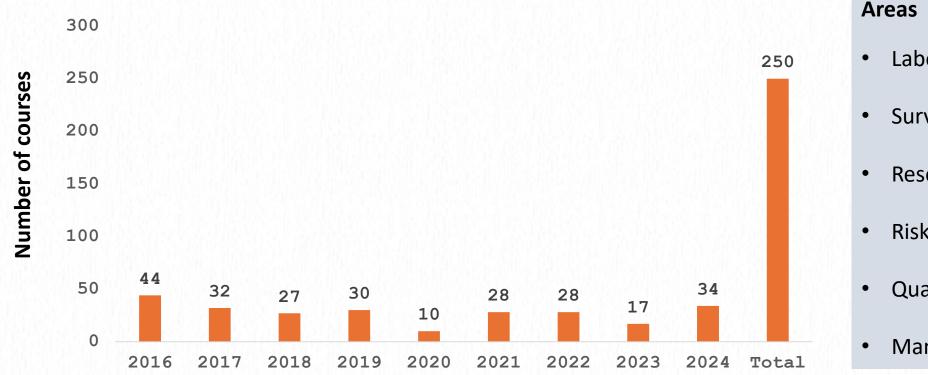


## FETP – Advanced Level: distribution by province

- 6 cohorts implemented
- 68 graduates
- 7<sup>th</sup> cohort ongoing
  - 11 Residents
- PEPFAR, PMI and Global Fund
- Target: 1 epidemiologist/200,000 inhabitants



#### **Short Courses**



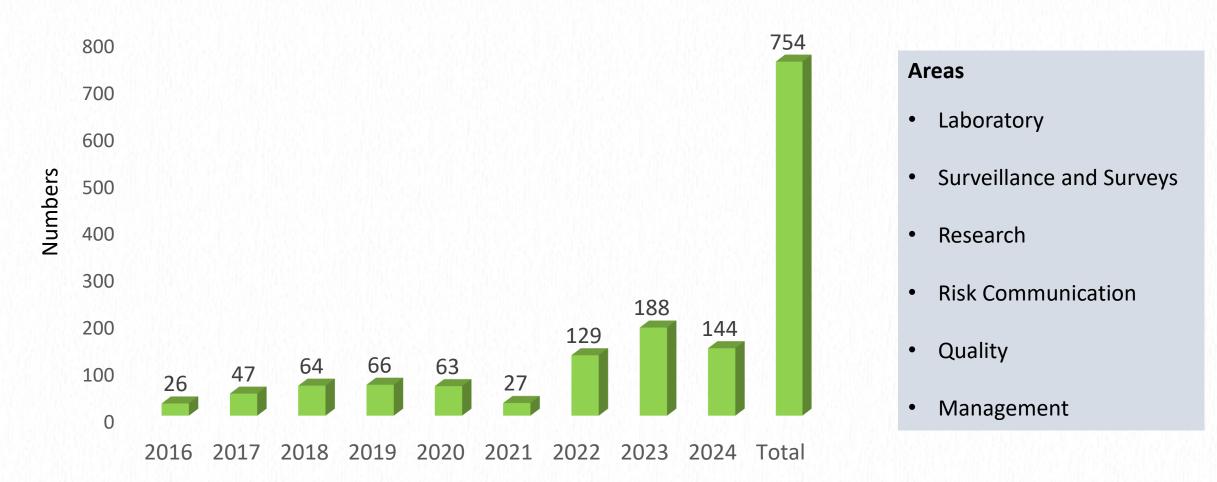
#### Areas

- Laboratory
- Surveillance and Surveys
- **Research Methodologies**
- **Risk Communication**
- Quality
- Management and Leadership

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	Total
Number of beneficiaries	213	831	1199	561	2853	2164	624	351	904	9700



### **Internships at INS**



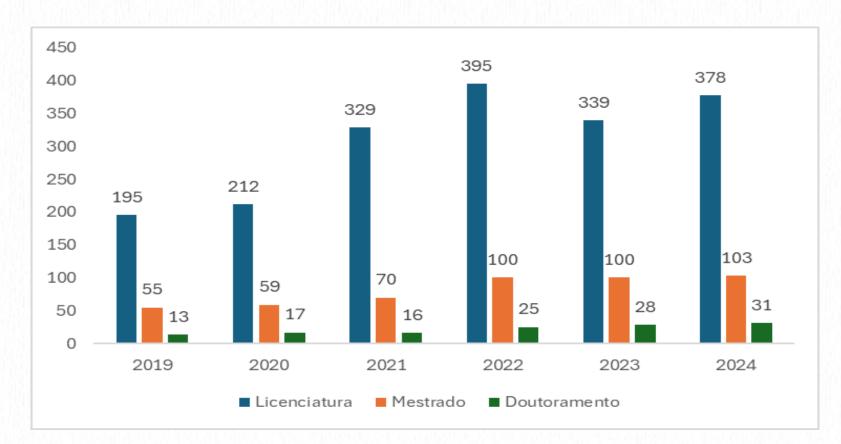


### **INS Scholarships**

- Scientific Iniciation Grant
- Full Masters Scholarship
- Complementary Masters Scholership
- Full Doctoral Scholership
- Complementary Doctoral Scholership
- Postdoctoral Grant



### **INS Human Resources Development Plan (HRDP)**

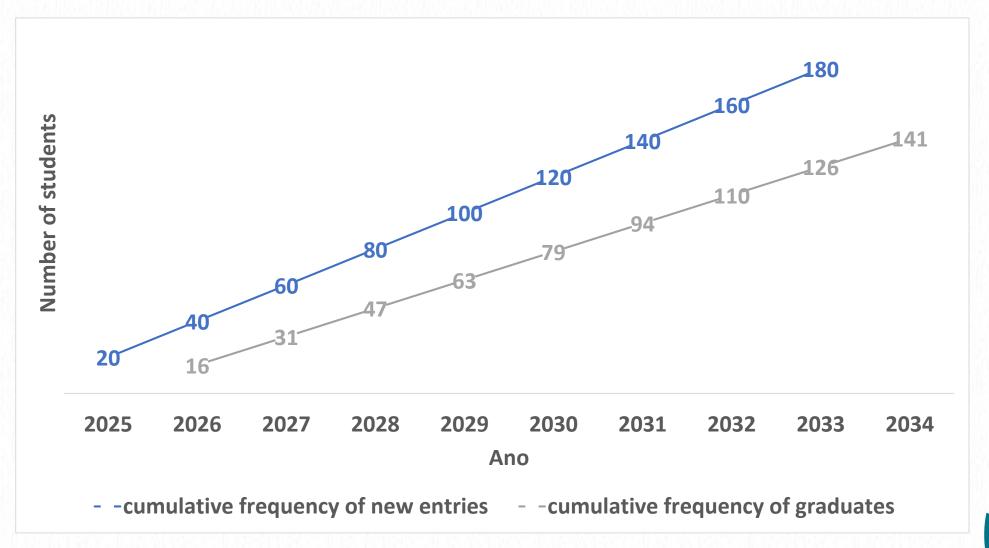


#### Currently, 40 researchers are in PhD Training programs

• INS approved, recently the Human Resources Development Plan (HRDP)

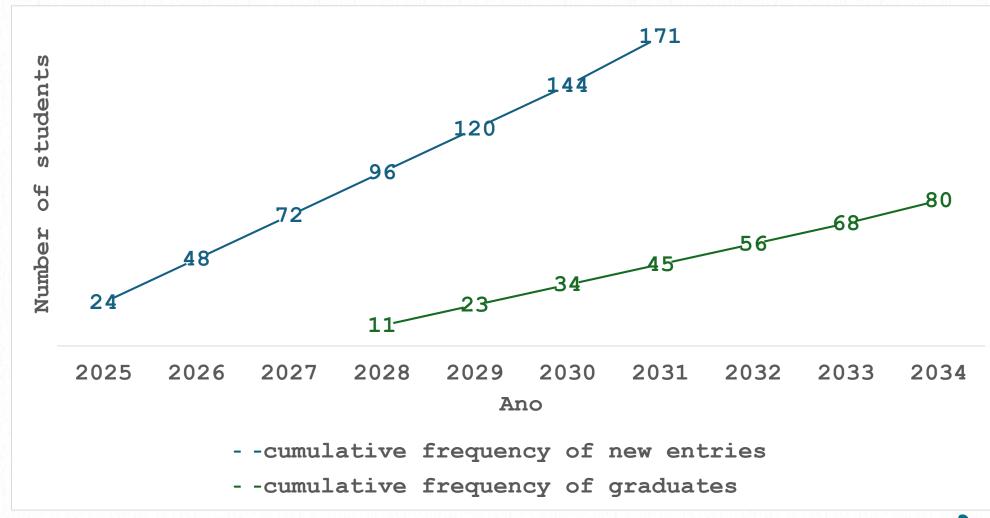


#### **INS HRDP 2025-2034: Masters Projections**



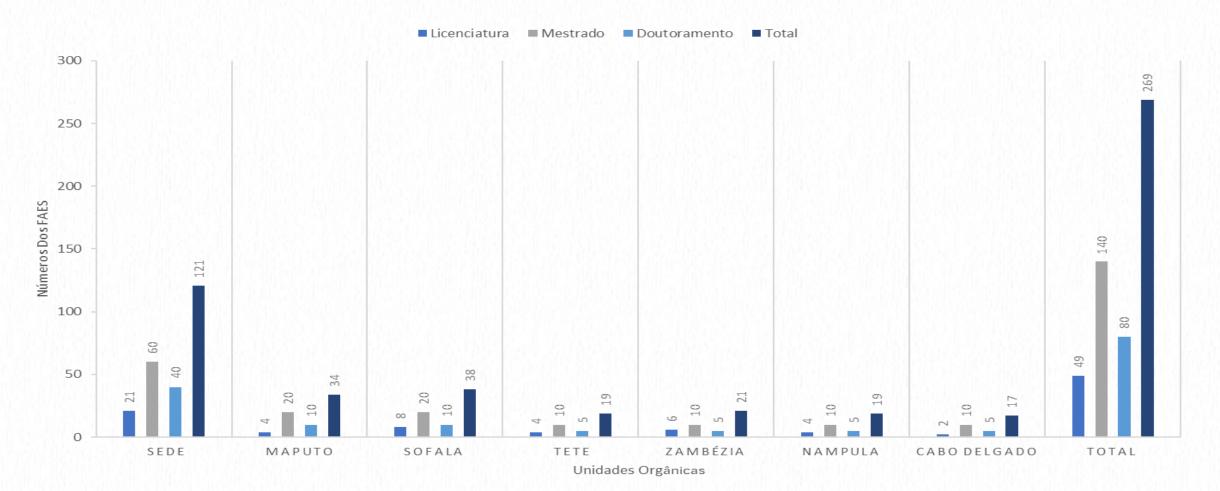


#### **INS HRDP 2025-2034: PhD Projections**





#### **General Training Plan: Geographical Distribution**





### Perspectives

• Establishment of the National School of Public Health (ENSP);

 Resources mobilization for the implementation of the INS Human Development Plan;

• Operationalization of the Africa CDC Center of Excellence for PALOP.



# Thank you!