**Providing lifesaving HIV care amid conflict in Mozambique**

“I have always been passionate about medicine, but that passion deepened when my mother was diagnosed with diabetes and also contracted HIV,” says HIV specialist Dr Filomena Januário, who works for Doctors Without Borders (MSF) tackling HIV in Mozambique . Fearful of other people’s judgement, her mother did not seek treatment for HIV and eventually died from complications associated with the disease.

“She struggled to accept her diagnosis and, sadly, she eventually lost her life,” says Dr Januário. “That loss became my turning point. I promised myself: I will change this reality. I will dedicate my life to health so that I can care for my own family. Maybe if I had been a doctor [at the time], my mother’s life could have been saved.”

Dr Januário’s commitment to tackling HIV is deeply personal. Through her work at the rural hospital in Mocímboa da Praia, Cabo Delgado province, she strives to ensure that no one else faces the same barriers her mother did to receiving lifesaving HIV care.

Mozambique faces one of the highest HIV prevalence rates in the world; 11.5 per cent of adults and children aged between 15 and 49 live with the virus. More than two million people are currently receiving antiretroviral (ARV) treatment, which has been instrumental in reducing HIV-related transmission and deaths. However, many challenges persist, particularly in provinces like Cabo Delgado, where armed conflict has disrupted people’s access to medical care since 2017.

The ongoing violence in Cabo Delgado province has forced thousands of people to flee their homes. Many live in precarious conditions, with inadequate shelter, too little to eat and poor sanitation – factors that exacerbate their vulnerability to infections, particularly for those people whose immune systems are already weakened by HIV. Even when HIV care is available, stigma and discrimination deter many people from seeking treatment. For those who are on treatment, a lack of integrated care can make it hard for patients to stick to their ARV medication, which needs to be taken daily.

"One day, a patient is treated here, and the next day in another hospital, so the care is not integrated,” says Dr Januário. “Many don't have a healthcare card, don’t know what medication they were taking or how long they had been taking it.”

Since 2019, MSF has been working to bolster medical care and humanitarian aid for people in Cabo Delgado province. In partnership with the local Ministry of Health, MSF deploys medical staff, donates medications, and offers mental health support.

One focus of MSF’s work in Cabo Delgado is HIV care, which poses two major challenges, according to Dr Januário: ensuring consistent follow-up care for patients displaced from their homes by violence and addressing stigma within the community.

“[Typically, patients] come to us because they relapsed,” says Dr Janúario. “We treat them, stabilise them and restart their ARV treatment, but we don't know if they return to their place of origin or not. These patients are rarely retained in the programme. Once in the advanced stages of HIV, patients without continuous treatment progress are more susceptible to stage-three and stage-four [major] infections.”

Working together, healthcare workers like Dr Januário and Cristina Virgílio are making strides toward breaking down stigma and creating a safe environment for people affected by HIV. Their work highlights the importance of community-driven solutions in addressing both the medical and social challenges of HIV care in conflict settings.

However, Dr Januário stresses that there is a critical need for broader support. To ensure that every HIV-positive person affected by the conflict in Cabo Delgado can access consistent, lifesaving treatment, more resources and collective action are essential.

Dr Januário has her own personal goal. “My work comes with challenges,” she says. “It's not just about treatment, but also about improving the lives of patients living with HIV and [other diseases such as] tuberculosis. I won’t be satisfied until we achieve a retention rate of over 80 per cent [of patients staying on treatment]. I’m committed to doing everything possible to make that happen. Only then will I feel ready to leave Mocímboa da Praia, knowing I’ve reached my goal.”