

**Second year report on the support from Diabetes UK to Mozambique within the framework of the International Diabetes Federation Twinning Programme**



**Prepared by David Beran**

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## **Introduction**

This current report highlights the progress made during 2008 with regards to the different objectives established as part of Diabetes UK's Twinning project with Mozambique. This report details progress made in 2008, the completion of the objectives set, expenditure and proposed course of action for 2009 with the appropriate budget.

Following a first successful year the Twinning Project between Diabetes UK and Mozambique continued its progress with the completion of two of its main objectives and progress in all others. One of these objectives was Dr. Carla Silva-Matos's visit to the UK. Mozambique had two other opportunities to participate in International discussions about diabetes, and therefore increase the visibility of the Twinning Project, in Tanzania and London.

With the approval of the National Plan for Non Communicable Diseases, Mozambique has become the first country in sub-Saharan Africa to have a comprehensive and integrated plan for Non Communicable Diseases.

Challenges remain especially in increasing AMODIA's autonomy in Maputo and development in Beira and Quelimane and developing a wider coalition of people involved in diabetes, but Diabetes UK's support remains an important catalyst in improving the overall management of diabetes.

## **Main positive aspects from 2008**

The training of healthcare workers throughout the country, to date only Nampula has not had a training course, is having a direct impact on clinical practice. For example following training on Diabetic Ketoacidosis at the Paediatric Department in Maputo Central Hospital 3 children were diagnosed with diabetes who most likely would not have been diagnosed with out this training. A similar increase in diagnosis of children with Type 1 diabetes has occurred in Beira as well as an overall improvement in clinical care for Type 2 diabetes.

10 patients have been trained as diabetes educators following the training two doctors received in Tanzania. They will now use this to expand the education sessions at AMODIA, in the community and hopefully train their colleagues in the other AMODIA branches.

In developing the educational material for AMODIA a collaborative approach was taken in Maputo between the Ministry of Health, clinicians and AMODIA members. This led to the development of materials that will be used in training sessions and provides interactive education. These materials will be piloted in 2009. These materials are included as Appendix 1.

AMODIA Maputo continues to increase its numbers of members with over 2,000 active members (versus in 1,000 at the end 2007). Education and its support role have increased as well as now having a doctor present almost every day of the week.

From a policy and care perspective the approval of the National Plan will provide a framework for these aspects to be dealt with.

## **Challenges that remain**

Development of AMODIA branches in Beira and Quelimane has been problematic over this year.

In Beira the main challenge remains a lack of leadership and concrete activities that show a clear benefit to patients. The nomination of a Non Communicable Disease focal point in Beira for the whole Province of Sofala will hopefully help in improving this situation.

The branch in Quelimane is developing slowly and has had some problems since the consultation was moved from the association to the hospital. The main reason for this is that members viewed their main benefit from the association as a “special” consultation. Work will need to be done to ensure proper collaboration between the association and the hospital.

In all branches of AMODIA the main challenge remains their management capacity and ability to develop their own programmes and projects independently.

One objective that is going to be hard to directly achieve is the development of a core group of people active in diabetes. This already happens in Maputo and is a result of:

- Training of healthcare workers
- Strong association with a core (and increasing core) of active patients
- Members of AMODIA seeing benefit of non-care activities, e.g. education, psychological and social support, etc.
- National and local government support – which resulted from the diabetes training courses, organisation of World Diabetes Day Activities and seeing the benefits of having a strong diabetes association
- As this is the main urban the higher prevalence of diabetes may also be a factor as doctors have to deal with it more frequently than in other areas of the country

In Beira and Quelimane this is also happening, but needs to be strengthened. In the other provinces the Minister of Health’s decision to have a focal point for Non Communicable Diseases will help in this, but this objective requires that the training, association and benefits of addressing diabetes becomes seen as a benefit rather than yet another task for local authorities and doctors to deal with.

This recommendation had as its aim to promote a sustainable solution to diabetes in Mozambique that was not 100% reliant on any one individual. Success of the work on diabetes is still very much due to Dr. Carla Silva-Matos’ dedication and hard work, but every time a training course and other activity is organised the number of people involved increases and therefore lessens the reliance on Dr. Silva-Matos. By assisting Mozambique in organising activities such as World Diabetes Day that are visible to important stakeholders outside the direct “diabetes environment” and increasing knowledge of diabetes (both for patients and healthcare workers) Diabetes UK is helping build the foundations of a wide network of people involved in diabetes. This foundation also feeds into the National Plan on Non Communicable Diseases, which provides the political background and strategy, and sets the government's role and responsibility with regards to dealing with diabetes.

All these factors help decrease the reliance on one individual, but the reality of Mozambique needs to always be kept in mind, where Non Communicable Diseases are not a priority, there

is a chronic shortage of healthcare workers and the concept of patient associations fighting for their rights is still new. This means that unfortunately the role of a local champion is essential to get things running before a wider network of individuals can be established. One of the indirect results of all of Diabetes UK's support to Mozambique will be the creation of this network, but this will take time.

### **Progress Report 2008**

This section of the report is structured around the 9 points that form the basis of Diabetes UK's aims for Twinning in Mozambique and highlights the main progress made in the different periods of the first year's activities. More detailed progress from the first 3 interim reports as well as a description of the activities from September to December 2008 is detailed in Appendix 4.

- 1. Support for the training of trainers programme initiated by the Ministry of Health**
  - A total of 89 healthcare workers have received training in diabetes and hypertension (2007-2008)
  - All provinces, except for Nampula, have trained healthcare workers in diabetes management
  - This includes 16 trained healthcare workers from Gaza, at least one from every District and the Provincial Hospital
- 2. Further training of healthcare workers through different options e.g. sending them to Tanzania, training organised in Mozambique by someone external, specialised training.**
  - Two healthcare workers trained in Tanzania on diabetes education
- 3. Invitation to Dr. Carla Silva-Matos to deliver a talk at the Annual Professional Conference in 2008 coupled with talks to voluntary and lay groups**
  - Outcomes/lessons learnt for Mozambique:
    - Importance of close collaboration between Ministry of Health and diabetes association as well as other NGOs and volunteer groups and the role they can play in the prevention and management of diabetes
    - Importance of screening programmes
    - Organisation care to improve follow-up and adherence
    - Need to increase investment in medicine supply
    - Investment needed in training (short and long term) – especially with regards to the management of chronic conditions
  - This objective is now complete at 100%
- 4. Diabetes UK literature made available to AMODIA with appropriate adaptation and translation**
  - Training tools have been developed and will be piloted in 2009 (see Appendix 1)
- 5. Organisation of World Diabetes Day events**
  - A total of approximately 6,000 people participated in activities organised in Maputo, Gaza, Sofala and Zambezia.
  - Activities included evaluation of risk factors, counselling on nutrition, physical activity, television and radio programmes and media coverage (See Appendix 2), production and distribution of pamphlets (see Appendix 3) and education sessions on diabetes.

- 6. Advocacy and policy support to Dr. Carla Silva-Matos by David Beran**
- The National Plan for Non Communicable Diseases received Ministerial approval on 22 October 2008
  - Visit to Nampula Central Hospital with Dr. Carla Silva-Matos to assess situation of diabetes management there
    - i. Situation analysis with regards to access to medicines
    - ii. Situation analysis with regards to diabetes management
    - iii. Establishment of data collection tools
  - With the approval of the National Plan the first aspect of this objective is now complete at 100%, ongoing support has been requested
- 2. Develop core group of people involved in diabetes**
- Focal points now exist in Gaza, Zambezia and Sofala
  - Involvement of different departments in Ministry of Health in organisation of World Diabetes Day
- 3. Development of AMODIA**
- In all branches of AMODIA the main challenge remains their management capacity and ability to develop their own programmes and projects independently.
  - Maputo – continues to increase its numbers of members with over 2,000 active members (versus in 1,000 at the end 2007). Education and its support role have increased as well as now having a doctor present almost every day of the week.
  - Beira – the main challenge remains a lack of leadership and concrete activities that show a clear benefit to patients. The nomination of a Non Communicable Disease focal point in Beira for the whole Province of Sofala will hopefully help in improving this situation.
  - Quelimane – is developing slowly and has had some problems since the consultation was moved from the association to the hospital. The main reason for this is that members viewed their main benefit from the association as a “special” consultation. Work will need to be done to ensure proper collaboration between the association and the hospital.
  - Gaza and Nampula – initial steps in seeing how new branches could be established
- 4. Long term research programmes in Mozambique in Health Services and Basic Science**
- Professor Armindo Tiago collaborated with Professor Ayesha Motala from the University of Kwa Zulu Natal in preparing a report on the follow-up of a cohort of patients with diabetes from Maputo and developing a research proposal for diabetes and its complications in Mozambique

In addition to the above mentioned activities the following publications have been prepared based on this work or mentioning the support of Diabetes UK.

1. An article about the Diabetes UK Twinning project was published in the Institute of Child Health Bulletin (Appendix 7)
2. An article in the Mozambique World Health Organization Office Bulletin about Non Communicable Diseases and diabetes (Appendix 8)

3. An article by Dr. Carla Silva-Matos and David Beran entitled “Improvements in care for people with diabetes in Mozambique” was published in the June edition of Diabetes Voice (Appendix 9)
4. An article by David Beran and Professor John S. Yudkin on the issue of access to insulin and diabetes care was published in the August edition of the Bulletin of the World Health Organization (Appendix 10)
5. An article by Professor John S. Yudkin, David Beran, Dr. Carla Silva-Matos and Dr. Richard Holt has been accepted for publication in the Postgraduate Medical Journal. The article is entitled “Twinning for Better Diabetes Care A Model For improving Health Care For Non-Communicable Diseases In Resource-Poor Countries”
6. A piece on the Twinning Project will be included in the March-April issue of Balance.

### **Achievement of 2008 objectives**

In looking at the Objectives established by Diabetes UK following Dr. Richard Holt and Jill Steaton’s visit to Mozambique in October 2006, the following results can be observed:

#### **1. Training of healthcare workers**

- ***5 trained healthcare workers at each Central Hospital – 2007***
  - 720% based on numbers of healthcare workers trained
  - 66% based on training at 3 Central Hospitals (only Maputo and Beira healthcare workers trained)
- ***Organisation of training days at Provincial Hospitals with 1-3 healthcare workers trained – 2008***
  - 405% based on numbers of healthcare workers trained
  - 91% based on Provinces

#### **2. Further training of healthcare workers**

- ***Assessment of feasibility and what option would work best with local partners – 2007***
  - 100%
- ***Start of training if viewed as necessary – 2008***
  - 0% - based on courses defined in 2007
  - 100% - Training course in diabetes education in Tanzania
- ***Organise how this training would be cascaded and these “trainers” could train new trainees – 2008***
  - 100% - Training already cascaded to member of diabetes association

#### **3. Invitation to Dr. Carla Silva-Matos to deliver a talk at the Annual Professional Conference in 2008**

- ***Invitation extended to Dr. Carla Silva-Matos – 2007***
  - 100%
- ***Actual visit – 2008***
  - 100%

#### **4. Diabetes UK literature made available to AMODIA with appropriate adaptation and translation**

- ***Selected Diabetes UK documents presented to local stakeholders and specific documents selected for adaptation and translation – 2007***
  - 100%
- ***Adaptation and translation of documents – 2008***
  - 100%

#### **5. Organisation of World Diabetes Day events**

- *Production of posters, leaflets and t-shirts for World Diabetes Day and activities organised in the 3 existing branches of AMODIA – 2007*
    - 100%
  - *World Diabetes Day events organised in the 3 existing branches of AMODIA – 2008*
    - 100%
  - *World Diabetes Day events in 6 provincial hospitals in Mozambique – 2008*
    - 17%
- 6. Advocacy and policy support to Dr. Carla Silva-Matos by David Beran**
- 2007 – 90%
  - 2008 – 50%
- 7. Develop core group of people involved in diabetes. This should include people from the Ministry of Health, Clinicians and people with diabetes.**
- *Identify 3 people for training/encouragement in the area of diabetes in Maputo – 2007*
    - 100%
  - *Identify 3 people for training/encouragement in the area of diabetes in Beira, Nampula and another province – 2008*
    - 0% - based on Beira and Nampula
    - 150% based on number of people
- 8. Development of AMODIA**
- 2007 – 85%
  - 2008 – 60%
- 9. Long term research programmes in Mozambique in Health Services and Basic Science**
- *Explore feasibility of different research project*
    - 100%
  - *Establish research links*
    - 200% - research project actually started and in the process of being reported on

A more detailed description of the completion of the 2008 objectives can be found in Appendix 11 as well as a table detailing progress of the priority activities were established in the 2007 progress report.



## Appendices

### Appendix 1 – Examples of materials developed for patient education



These materials deal with treatment of Type 1 and Type 2 diabetes, diet, exercise, complications, etc. The patients who have received training have learnt how to use these. These are A4 sized cards with pictures and words and will be used interactively with a group of people receiving the education session in discussing healthy foods, symptoms of diabetes, how to inject insulin, etc. A pilot of these materials will be organised in 2009.

## **Appendix 2 – World Diabetes Day Media Coverage**

### **Appendix 3 – Pamphlets distributed during World Diabetes Day**

## **Appendix 4 – Detailed activities for 2008**

### **1. Support for the training of trainers programme initiated by the Ministry of Health**

#### ***1.1. January – March 2008***

- Organisation of a training course in the North of the country has been started.

#### ***1.2. April – June 2008***

- The training course in the North of the country was held on the week of 21 April 2008 (Total of 13 participants, 7 doctors and 6 technicians, from Niassa, Cabo Delgado and Zambezia)
- A Provincial training course was organised by one of the participants from last year's course in Maputo in Gaza Province. There were 16 participants from the 12 districts of the province and the Provincial Hospital.
- Training in Beira for doctors and medical technicians has taken place with a total of 24 participants (14 doctors, 12 medical technicians from 3 different provinces)

#### ***1.3. July – September 2008***

- To date training of healthcare workers from 9 Provinces and Maputo City (every Province in Mozambique, except for Nampula) has taken place (2007-2008)
- Planning for training in Nampula is taking place
- Training organised by participants in these courses is being planned

#### ***1.4. October – December 2008***

- During visit to Nampula organisation of a course there was discussed with the Director of Central Hospital

### **2. Further training of healthcare workers through different options e.g. sending them to Tanzania, training organised in Mozambique by someone external, specialised training.**

#### ***2.1. January – March 2008***

- No specific activities with regards to this Objective.

#### ***2.2. April – June 2008***

- Discussion with Dr. Ramaiya about this training
- Initial exploration of organising foot care training in Mozambique
- Participation of 2 doctors from Mozambique in a diabetes educators course in Zanzibar in July 2008
- Mozambique has received an invitation to apply for a scholarship for a Paediatric Endocrinology training course in Kenya

#### ***2.3. July – September 2008***

- Participation of 2 doctors from Mozambique in a diabetes educators' course in Zanzibar in July 2008
  - Following this a training course on Diabetic Ketoacidosis was organised in the Paediatric Department at Maputo Central Hospital
    - 3 new cases of Type 1 diabetes were diagnosed following this
    - Doctors in the Department have asked for more training (Possible link with Point 2.b.)
- No suitable candidate was found for the Paediatric Endocrinology course in Kenya due to language problems
  - This option will be kept open to see if future candidates can meet both the language and qualification requirement

#### **2.4. October – December 2008**

- No specific activities

### **3. Invitation to Dr. Carla Silva-Matos to deliver a talk at the Annual Professional Conference in 2008 coupled with talks to voluntary and lay groups**

#### **3.1. January – March 2008**

- Dr. Silva-Matos gave a presentation at the APC on “The challenge of Non Communicable Diseases in Mozambique”. This presentation was part of a session on the Mozambique Twinning Project. David Beran and Richard Holt also gave presentations and the session was chaired by John Yudkin. The session was well attended and the audience was extremely interested in the project.
- Dr. Silva-Matos visited and met with the following people and organisations:
  - Department of Health – diabetes policies and programmes in the UK
  - Mozambique High Commission
  - Whittington Hospital Pharmacy – medicine procurement
  - Visit to Bradford satellite diabetes clinic and PCT
  - Visit to Whittington Hospital diabetes clinic
  - Q&A session with 5<sup>th</sup> year medical students on Non Communicable Diseases in Mozambique
  - Visit to UCLH
  - Visit to GP practice in East London
  - Visit to Southampton – Southampton General Hospital and specialist diabetes clinic
  - Meetings with Diabetes UK
  - Meeting and presentation to Diabetes UK volunteers from London and the South-East
- Outcomes/lessons learnt for Mozambique:
  - Importance of close collaboration between Ministry of Health and diabetes association as well as other NGOs and volunteer groups and the role they can play in the prevention and management of diabetes
  - Increase in screening programmes
  - Organise care to improve follow-up and adherence
  - Need to increase investment in medicine supply
  - Investment needed in training (short and long term) – especially with regards to the management of chronic conditions
- This objective is now complete at 100%

### **4. Diabetes UK literature made available to AMODIA with appropriate adaptation and translation**

#### **4.1. January – March 2008**

- More materials were obtained during Dr. Silva-Matos’ visit
- During David Beran’s visit in April more planning for this will be done

#### **4.2. April – June 2008**

- Priority has been given to materials for Type 1 diabetes, Type 2 diabetes and Nutrition
- All materials are being developed by doctors, member of AMODIA and different departments from the Ministry of Health based on materials from Diabetes UK, Mali, Brazil and Portugal
- It has been decided that instead of pamphlets education booklets will be prepared

#### **4.3. July – September 2008**

- Different materials have been prepared and used as a basis for the training of 10 members of AMODIA (see point 6)

#### **4.4. October – December 2008**

- Draft versions of these materials have been prepared and will be piloted in 2009 (See Appendix 1)

### **5. Organisation of World Diabetes Day events**

#### **5.1. January – March 2008**

- No activities to date

#### **5.2. April – June 2008**

- Initial planning

#### **5.3. July – September 2008**

- Organisation and planning has started
  - Activities will include a cooking class as well as the same activities as last year (education, testing, exercise)
  - As of now activities will be organised in Maputo, Beira and Quelimane
  - Investigation of possibility of activities in Gaza and Nampula Provinces
  - Other Ministries including the Ministry of Education and Culture and Ministry of Sports and Youth will be included in the activities

#### **5.4. October – December 2008**

- Organisation and planning of activities
  - Events were organised in Maputo, Beira, Quelimane and Gaza
  - Maputo:
    - About 3,000 participants
    - 800 blood pressure measurements
    - 400 blood glucose measurements
    - 100 people received nutritional counselling
    - Cooking demonstration
  - Beira:
    - About 1,500 participants
    - Radio programmes
    - Education sessions
  - Quelimane:
    - About 750 participants
    - Diabetes walk
    - Evaluation of risk factors
  - Gaza:
    - About 750 participants
    - Participation of the Governor
    - Radio programmes
    - Education sessions

### **6. Advocacy and policy support to Dr. Carla Silva-Matos by David Beran**

#### **6.1. January – March 2008**

- The National Plan on Non Communicable Diseases finalised in December with David Beran's support and has received approval by the Minister of Health
- The World Health Organization has also approved the National Plan
- Budgeting of the report is on-going

- A meeting was organised by the World Health Organization where Dr. Silva-Matos presented the report to local stakeholders and donors

#### **6.2. April – June 2008**

- The Minister of Health has laid out his priorities from now until 2009 (end of his term, see Appendix 5)
- The national plan is currently being budgeted for
- A Monitoring and Evaluation plan is also currently being developed
  - One of the tools to be used will be the Rapid Assessment Protocol for insulin Access (RAPIA) developed by the International Insulin Foundation and initially implemented in Mozambique in 2003
- Presentation by Dr. Carla Silva-Matos and David Beran about their experiences in diabetes and developing a National Non Communicable Disease Plan at the meeting to develop a Tanzanian National Plan on Non Communicable Diseases

#### **6.3. July – September 2008**

- The National NCD Plan is being finalised
- It will then be prepared into an official document and disseminated widely to local and international partners

#### **6.4. October – December 2008**

- With Diabetes UK support AMODIA and Diabetes UK were official partners for an event to promote physical activity (See Appendix 6)
- The National Plan on Non Communicable Diseases received Ministerial approval on 22 October 2008
- The plan will be presented to all the Provinces during an annual meeting of health authorities in Mozambique in early 2009
- The plan is now being translated into English and will be presented to donors in the first half of 2009

### **7. Develop core group of people involved in diabetes. This should include people from the Ministry of Health, Clinicians and people with diabetes.**

#### **7.1. January – March 2008**

- No specific activities with regards to this Objective.

#### **7.2. April – June 2008**

- No specific activities with regards to this Objective
- Linked with one of the priorities from the Minister of having a focal point for NCDs in each Province (Appendix 5)

#### **7.3. July – September 2008**

- 2 Mozambican doctors were trained in patient education at an IDF course in Tanzania
- 10 members of AMODIA Maputo have received training using the materials developed in Mozambique.
- The aim is for them to assume some of the responsibilities that healthcare workers and Dr. Carla Silva-Matos have with regards to education and development and extension of AMODIA and its activities

#### **7.4. September – December 2008**

- Participation of Dr. Paula Santos at the IDF meeting in London on increasing access to diabetes care for children

## **8. Development of AMODIA**

### ***8.1. January – March 2008***

- There is the possibility of creating a new branch of the association in Gaza due to the enthusiasm of one of the health workers present at the Diabetes UK training held in Maputo in December

### ***8.2. April – June 2008***

- Investigating ways of creating new branches in Gaza and Nampula
- AMODIA Maputo continues to grow and play a more important role in supporting people with diabetes
- In Beira care is improving due to more doctors being present at the hospital
- In Quelimane the diabetes consultation has now been integrated into the Provincial Hospital

### ***8.3. July – September 2008***

- See point 7.3

### ***8.4. September – December 2008***

- See point 7.4
- Visit to Nampula by Dr. Carla Silva-Matos and David Beran to investigate needs to create AMODIA there

## **9. Long term research programmes in Mozambique in Health Services and Basic Science**

### ***9.1. January – March 2008***

- No specific activities with regards to this Objective

### ***9.2. April – June 2008***

- An initial project on the follow-up of the diabetes patients at AMODIA Maputo will be supported. This will run for 2008-2009. The research project will be carried out by Professor Armindo Tiago (main physician working at AMODIA). He will work with Professor Ayesha Motala, University of Kwa Zulu Natal for a few months to develop his research skills, prepare some publications and develop a more detailed research proposal for 2009.

### ***9.3. July – September 2008***

- This project has started and is being carried out by Dr. Armindo Tiago with the supervision of Professor Ayesha Motala at the University of Kwa Zulu Natal. It has its aim:
  - For Dr. Tiago to develop his knowledge in diabetes management and research approaches
  - To get assistance in developing a database for the patients followed at AMODIA in order to assist in clinical management and for research purposes with a view of preparing papers for publication
  - To possibly develop research links between the University of Kwa Zulu Natal and Mozambique

### ***9.4. September – December 2008***

- A report is being prepared on the follow-up of a cohort of patients with diabetes from Maputo
- A research proposal is being prepared in collaboration with Professor Motala (see **Error! Reference source not found.**)



## Appendix 5 – Priorities of the Minister of Health

The table below presents the priorities of the Minister of Health and how these are linked to the objective developed by Diabetes UK.

<b>Priority Minister of Health</b>	<b>Diabetes UK Objective</b>
Presentation of National NCD Plan to partners	5
Nominate provincial focal points for NCDs	6
Organise health days taking advantage of different existing “World Days” e.g. World Heart and Diabetes Days	4
Create specialised consultations in the 3 Central Hospitals	1, 2
Expand Cancer register and integrate surveillance system for NCDs with Communicable Diseases	X
Create a reference centre for victims of violence	X
Explore opportunities to collaborate with different institutions for the management of large disasters	X

## Appendix 6 – Support for promotion of exercise event

**GYM**  
(Comunidade Brasileira)

**INTERCÂMBIO DESPORTIVO  
MOÇAMBIQUE - DINAMARCA**

**CONVITE PARA EXIBIÇÃO**  
**National Danish Performance Team**  
(Companhia Nacional de Ginástica da Dinamarca)  
**19 DE OUTUBRO**  
**15.00 H**  
**PAVILHÃO DO MAXAQUENE**

**Parceiros:**  
Gabinete da 1ª. Dama, MS Moçambique, Associação dos Diabéticos de Moçambique,  
Embaixada Dinamarca, Diabéticos UK, DANIDA, SAGF, FCEFD – UP, FPD, MJD-DND, ADECM

**For the NATIONAL DANISH PERFORMANCE TEAM**

*na calha 4805*

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