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The research model is suitable to populations living in fragile state-provided support, as it happens in many developing low-income countries, also with large discriminated and stigmatised populations (with HIV or TB infection). In Mozambique, with few cases of SARS-CoV-2 infection, the governmental restrictive measures declared on the “Emergency State”, decreased access to health services, with negative impact on patients with chronic diseases and health services preventative activities (vaccination, ante-natal care, institutional deliveries).

Mozambique has not developed yet a substance abuse program, although there is a high alcohol abuse rate. In the HIV program, with antiretroviral treatment, patients were allowed to collect their ARV drugs once every three months, instead of monthly.

The study method is suitable for this research; but there was a small number of participants, and it does not mention the usual “sample saturation” applied in qualitative studies.

The conclusions are useful to better national health service information and education campaigns, targeting patients with chronic diseases and population using preventative services.