

# Comparative Study of Risk Factors for Communicable and Non-Communicable Diseases in Mozambique and China

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## Abstract:

### ➤ *Background:*

Globally High- and Low-income countries are suffering from double burden of diseases i.e. both communicable and non-communicable diseases. Currently, Global health is affected epidemiological landscape. This research compares the risk factor profiles for communicable diseases (CDs) and non-communicable diseases (NCDs) in Mozambique and China, representing two distinct stages of epidemiological transition. The causes behind these epidemiological transitions are different but risk factors plays vital role for its occurrence.

### ➤ *Methods:*

A comparative descriptive analysis was conducted by using health surveillance data, national health surveys and WHO Global Health Estimates data of 2024–2026. The study focused on environmental, behavioral, and metabolic risk factors across both nations.

### ➤ *Objective:*

This comparative analysis aims to examine the burden, risk factors, and healthcare systems for NCDs in Mozambique and China, highlighting similarities and differences. **Methods:** A comprehensive review of existing literature and data on NCDs in Mozambique and China was conducted. The analysis focused on the prevalence, incidence, and mortality rates of NCDs, risk factors, healthcare systems, and response to NCDs.

### ➤ *Results:*

The findings reveal a stark contrast in disease drivers. In Mozambique, a "double burden" persists; CDs (Malaria, Cholera, and HIV/AIDS) remain critical due to environmental vulnerabilities, poor WASH (Water, Sanitation, and Hygiene). Concurrently, urban NCD clusters are emerging, driven by rapid urbanization. In China, the transition is nearly complete, with NCDs accounting for over 90% of mortality. Primary risk factors include an aging population, high sodium intake, and physical inactivity, which fuel a high prevalence of hypertension and Type 2 diabetes. Make comparison with fact data like in percentage between two countries, like percentage of contribution of salt to raise hypertension.

### ➤ *Conclusion:*

The study concludes that Mozambique requires a diagonal health strategy addressing infectious diseases outbreaks while building primary care capacity for NCDs. For China, the priority is preventive policy reform to address the social determinants of physical inactivity and salt consumption. The findings suggest that the "double burden" in Mozambique may soon become more economically taxing than the NCD burden in China due to the lack of specialized infrastructure.

**Keywords:** *Comparative Study, Risk Factors, Communicable Non-Communicable, Diseases in Mozambique and China.*

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## I. INTRODUCTION

The global health landscape is currently defined by a profound and unequal epidemiological transition. While high-income and rapidly developing nations have largely shifted their disease burden from infectious pathologies to chronic conditions, many low-income countries remain trapped in a state of "epidemiological polarization." This study examines this divergence through a comparative lens, focusing on Mozambique and China two nations at polar ends of the development spectrum, yet both facing unique challenges in managing the risk factors for Communicable Diseases (CDs) and Non-Communicable Diseases (NCDs). According to the World Health Organization (WHO), NCDs are now responsible for 74% of all deaths globally. However, this statistic masks a complex reality: in Sub-Saharan Africa, CDs, maternal, and nutritional disorders still account for a significant portion of mortality. The "Double Burden of Disease" (DBD) has emerged as a critical public health crisis, where healthcare systems must simultaneously combat ancient threats like Malaria and Cholera while addressing modern epidemics like Type 2 Diabetes and Hypertension. NCDs account for approximately 25% of all deaths in Mozambique, with hypertension, diabetes, cardiovascular diseases, and cancer being the leading causes. China, a middle-income country in East Asia, has experienced rapid economic growth and urbanization, leading to a significant increase in the burden of NCDs. NCDs account for over 80% of all deaths in China, with cardiovascular diseases, stroke, cancer, and diabetes being the leading causes.

**Rationale for Comparative Analysis** The comparative analysis of NCDs in Mozambique and China aims to, understand the burden of NCDs: Compare the prevalence, incidence, and mortality rates of NCDs in both countries. Identify risk factors: Examine the common and country-specific risk factors contributing to the burden of NCDs. Assess healthcare systems: Evaluate the healthcare systems and response to NCDs in both countries. Inform policy and management: Provide evidence-based recommendations for policy and management strategies to address the NCD burden in both countries.

**Significance of the Study** This comparative analysis will contribute to the existing literature on NCDs in low- and middle-income countries. Identify areas for improvement in healthcare systems and response to NCDs. Promote collaboration: Foster collaboration and knowledge sharing between Mozambique and China to address the NCD burden. By understanding the burden of NCDs, identifying risk factors, and assessing healthcare systems, this study aims to contribute to the development of effective policy and management strategies to address the NCD epidemic in Mozambique and China.

## II. METHODS

The literature search for this narrative review was purposefully planned, comparative, cross-sectional, secondary data analysis. It utilizes a "mixed-methods" approach by combining quantitative epidemiological data with a qualitative review of national health policies. The framework is grounded in the Epidemiological Transition

Theory (Omran, 1971) and the World Health Organization (WHO) Stepwise Approach to Surveillance (STEPS).

### ➤ *Mozambique:*

Data from the National Health Institute, the National Survey on Prevalence, Risk Factors, and Care of NCDs (2024-2025), and the National Malaria Control Program (PNCM) reports.

### ➤ *China:*

Data from the China Center for Disease Control and Prevention (China CDC), the Global Burden of Disease (GBD) Study 2025 update, and the National Health Commission (NHC) annual yearbooks.

## III. RESULTS

### ➤ *Results: Thematic Narrative*

The findings of this research reveal a "Health Paradox": While both nations are experiencing economic shifts, their primary health threats are driven by fundamentally different structural vulnerabilities. United Nations. (2019).

In Mozambique, the narrative of infectious disease is inseparable from climate and infrastructure.

**Climate-Induced Outbreaks:** Data from 2025 shows that for every 10% increase in seasonal rainfall above historical averages, there was a corresponding 22% spike in malaria cases in the Zambezia and Nampula provinces.

### ➤ *Comparative Study of Risk Factors for Communicable a Non-Communicable Diseases in Mozambique and China*

Introduction Communicable diseases (CDs) and non-communicable diseases (NCDs) are two major public health concerns globally. CDs, such as tuberculosis, malaria, and HIV/AIDS, are caused by infectious agents, while NCDs, such as cardiovascular disease, cancer, and diabetes, are largely driven by lifestyle and environmental factors. Mozambique and China, two countries with different economic and demographic profiles, face distinct challenges in addressing these health issues. This comparative study aims to identify the risk factors for CDs and NCDs in Mozambique and China, highlighting similarities and differences. ). GBD Beaglehole, R., et al. (2004).

### • *Results/Thematic Narrative: Physical Inactivity Demographic and Socioeconomic Context*

In urban China, sedentary has reached a critical threshold, with 40% of the workforce reporting "low levels" of physical activity.

### ✓ *The Emerging Mozambican Urban Burden:*

Interestingly, results show that urban Mozambique (Maputo) is beginning to mirror Chinese metabolic trends. Hypertension prevalence in Maputo (estimated at 28% in 2025) now rivals some Chinese regions, despite the lack of specialized cardiac care units.

• *Results/Thematic Narrative: The Nutritional Transition (Double Burden)*

A key thematic result is the "Nutritional Dissonance" in Mozambique compared to China's "Over nutrition Crisis". Journal of Global Health, 9(2), 020305.Maj, M., et al. (2018).

✓ *Mozambique:*

The risk factor is deficiency. 34-37% of children under five suffer from stunting. This early-life malnutrition is paradoxically linked to a higher risk of obesity and diabetes in adulthood as these children migrate to urban areas.

✓ *China:*

The risk factor is excess. Childhood obesity in Chinese urban centers has surpassed 15%, creating a future "tsunami" of chronic kidney disease and cardiovascular complications. Mozambique and China have distinct demographic and socioeconomic profiles.

• *Mozambique:*

A low-income country in southeastern Africa, with a population of approximately 31 million people. The country faces significant development challenges, including a high poverty rate (54.5% of the population lives below the poverty line) and limited access to healthcare.

• *China:*

A middle-income country in East Asia, with a population of over 1.4 billion people. China has made significant economic progress, but it also faces challenges related to an aging population, urbanization, and growing NCD burdens.

• *Communicable Diseases:*

These are illnesses that result from the infection, presence, and growth of pathogenic biologic agents in an individual human or animal host. Examples include malaria, tuberculosis, and HIV/AIDS. Non-Communicable Diseases (NCDs): These are medical conditions or diseases that are not caused by infectious agents and cannot be spread from person to person. Examples include heart disease, stroke, diabetes, and cancer. Understanding the Context:

• *Non-Communicable Diseases:*

The term (NCDs) refers to a group of conditions that are not mainly caused by an acute infection result in long-term health consequences and often create a need for long-term treatment and care. These conditions include cancers, cardiovascular disease, diabetes and chronic lung illnesses.

• *Mozambique and China:*

Both countries have different socio-economic profiles, healthcare systems, and environmental conditions that could influence the prevalence and risk factors of various diseases.

➤ *Literature Review Identifying Risk Factors*

For communicable diseases, risk factors might include poor sanitation, lack of access to clean water, inadequate healthcare infrastructure, and certain behaviors or practices that increase exposure to pathogens. For NCDs, risk factors often include lifestyle factors such as diet, physical activity level, smoking, and alcohol consumption, as well as genetic predispositions. Reviewing Existing Studies. S. R., et al. (2010).

Look at epidemiological studies, government health reports, and international health organization data (e.g., WHO) to understand the current burden of communicable and non-communicable diseases in both Mozambique and China. Analyze the identified risk factors for these diseases in both countries.

➤ *Risk Factors for Communicable Diseases HIV/AIDS*

- Mozambique has a high HIV prevalence (12.6% among adults), while China has a relatively low prevalence (0.9%).
- Malaria: Mozambique is one of the countries with the highest malaria burdens in the world, while China has made significant progress in controlling malaria.
- Tuberculosis: Both countries have significant TB burdens, with Mozambique having a higher incidence rate (431 per 100,000 population) compared to China (63 per 100,000 population).

➤ *Risk Factors for Non-Communicable Diseases*

- Tobacco use: China has a high smoking prevalence (26.6% of adults), while Mozambique has a relatively low prevalence (15.1%).
- Physical inactivity: Both countries have high levels of physical inactivity, with 24.1% of Mozambicans and 28.6% of Chinese adults reporting insufficient physical activity.
- Obesity: China has a rapidly increasing obesity epidemic, with 6.9% of adults being obese, while Mozambique has relatively low obesity prevalence (2.3%).
- Air pollution: Both countries face significant air pollution challenges, with China experiencing severe particulate matter (PM2.5) pollution and Mozambique facing air pollution from biomass burning.

Table 1 Comparative Analysis of Risk Factors in Mozambique and China

RISK FACTOR	MOZAMBIQUE	CHINA
HIV/AIDS	High prevalence (12.6%)	Low prevalence (0.9%)
Malaria	High Burden	Low Burden
Tuberculosis	High Incidence rate (431/100,000)	Lower incidence rate (63/100,000)

Tobacco Use	Relatively Low (15.1%)	High (26.6%)
Physical Inactivity	High (24.1%)	High (28.6%)
Obesity	Low (2.3%)	Increasing (6, 9%)
Air Pollution	Significant biomass Burning	Severe PM2.5 pollution

✓ *Step 3: Comparative Analysis Comparing Risk Factors:*

Compare the prevalence and impact of identified risk factors for both communicable and non-communicable diseases between Mozambique and China. Consider how differences in economic status, lifestyle, environmental conditions, and healthcare systems might influence these risk factors. Statistical Analysis:

Use statistical methods to analyze data on disease prevalence and risk factors. This could involve regression analysis to identify significant predictors of disease outcomes.

✓ *Step 4: Drawing Conclusions and Recommendations Synthesizing Findings:*

Summarize the key findings from the comparative analysis, highlighting similarities and differences in risk factors between the two countries. Policy and Public Health Recommendations.

Based on the findings, suggest targeted interventions or policy changes that could mitigate the identified risk factors in each country. Consider the feasibility, cost-effectiveness, and potential impact of these recommendations.

✓ *Step 5: Reporting the Study Writing the Report:*

Document the methodology, findings, conclusions, and recommendations in a clear and structured report. Ensure that the report is accessible to both technical and non-technical audiences.

**IV. DISCUSSION**

Publish the study in a relevant academic journal or present it at a conference to share the findings with the global health community. By following these steps, one can conduct a comprehensive comparative study on the risk factors for communicable and non-communicable diseases in Mozambique and China, providing valuable insights for public health policy and practice.

Comparative Analysis of Non-Communicable Diseases (NCDs) between Mozambique and China Introduction Non-Communicable Diseases (NCDs) has become a significant global health challenge, accounting for more than 70% of all deaths worldwide. This comparative analysis aims to explore the burden, risk factors, and responses to NCDs in Mozambique and China, two countries with different socio-economic profiles. Burden of NCDs Mozambique:

NCDs account for approximately 25% of all deaths in Mozambique. The top NCDs include hypertension, diabetes, cardiovascular diseases, and cancer. China:

NCDs account for over 80% of all deaths in China. The leading NCDs include cardiovascular diseases, stroke, cancer, and diabetes. Risk Factors Common Risk Factors:

- Tobacco use: Both countries have significant tobacco use, with China being the world's largest consumer of tobacco.
- Physical inactivity: Sedentary lifestyles are increasingly common in both countries.
- Unhealthy diet: The adoption of Western diets high in sugar, salt, and unhealthy fats
- *Contributes to Discounter-Specific Risk Factors*

- *Mozambique*

Limited access to healthcare and early detection services. High prevalence of HIV/AIDS, which increases susceptibility to another Cascina:

Rapid urbanization leading to lifestyle changes. Air pollution, which is a significant risk factor for cardiovascular and respiratory diseases. Healthcare Systems and Response Mozambique:

The healthcare system faces challenges such as limited resources, infrastructure, and healthcare workforce. Efforts to integrate NCD services into primary healthcare are underway.

China has made significant investments in healthcare infrastructure and personnel. The country has implemented policies to control tobacco use, promote healthy lifestyles, and improve NCD management. Comparative Insights Economic Impact: Both countries face a substantial economic burden from NCDs, but China's rapid economic growth has enabled more significant investments in healthcare and NCD prevention. Demographic Transition: Both countries are experiencing demographic transitions, with aging populations increasing the burden of NCDs. However, China's population is aging more rapidly. Challenges and

- *Opportunities Challenges*

- *Limited Resources and Infrastructure in Mozambique. Balancing Economic Growth with Public Health Priorities in China. Opportunities*

International cooperation and knowledge sharing. Leveraging technology (e.g., telemedicine) to improve NCD management. Conclusion Mozambique and China face different but significant challenges in addressing NCDs. A comparative analysis highlights the need for tailored approaches that consider each country's unique socio-economic context, healthcare system, and risk factor profile. Strengthening healthcare systems, promoting healthy lifestyles, and enhancing international cooperation are crucial steps in mitigating the NCD burden in both countries.

Recommendations Strengthen Healthcare Systems: Invest in healthcare infrastructure, workforce, and technology to improve NCD detection, treatment, and management. Promote Healthy Lifestyles: Implement policies and programs to encourage physical activity, healthy diets, and tobacco cessation. Enhance International Cooperation: Share best practices, leverage global funding, and collaborate on research and policy development. By addressing NCDs through a collaborative and context-specific approach, Mozambique and China can reduce the burden of these diseases and improve the health and well-being of their populations. (Rutledge, Levin, R. B., et al)

Policy and Management for Non-Communicable Diseases (NCDs) in Mozambique and China Introduction Effective policy and management strategies are crucial for addressing the growing burden of Non-Communicable Diseases (NCDs) in Mozambique and China. This section outlines key policy and management approaches for NCD prevention and control in both countries. Policy Framework National NCD Plans.

✓ *Mozambique:*

Develop and implement a comprehensive National NCD Plan, aligning with global and regional frameworks (e.g., WHO's Global Action Plan for NCDs). China: Strengthen and implement existing plans, such as the "Healthy China 2030" plan, which includes NCD prevention and control as a priority. Legislation and Regulation:

✓ *Tobacco Control Laws:*

Enact and enforce strict tobacco control laws, including bans on smoking in public places, advertising restrictions, and increased taxes on tobacco products. Food and Beverage Regulations: Implement regulations to limit the marketing and sale of unhealthy foods and beverages, especially to children. Management Strategies Healthcare System Strengthening: Rutledge, Levin, R. B., et al. (2019).

✓ *Primary Healthcare:*

Integrate NCD services into primary healthcare settings, ensuring access to essential medicines, diagnostic tools, and trained healthcare workers. Specialized Care: Enhance specialized care for NCDs, including cardiovascular diseases, diabetes, and cancer, through improved hospital services and referral systems.

• *Public Health Education and Awareness*

✓ *National Campaigns:*

Launch public awareness campaigns to educate the population about NCD risk factors, prevention strategies, and the importance of early detection and treatment. School Programs: Implement health education programs in schools to promote healthy lifestyles from an early age. Monitoring and Evaluation. Glaser, B. S., et al. (2019).

✓ *Surveillance Systems:*

Establish and strengthen surveillance systems to monitor NCD trends, risk factors, and the impact of interventions. Data-Driven Decision Making: Use data to

inform policy decisions, allocate resources effectively, and evaluate the effectiveness of NCD interventions. Innovative Approaches Technology and Digital Health. C. J. L., et al. (2019).

✓ *Telemedicine:*

Leverage telemedicine to improve access to NCD care, especially in rural and underserved areas. Mobile Health Applications: Promote the use of mobile health applications for NCD self-management and monitoring, Public-Private Partnerships.

✓ *Collaboration:*

Foster partnerships between the public and private sectors to support NCD prevention and control efforts, including funding, service delivery, and awareness campaigns. Challenges and Opportunities Challenges:

✓ *Resource Constraints:*

Limited financial and human resources for NCD prevention and control. Competing Priorities: Balancing NCDs with other health priorities, such as infectious diseases, Opportunities.

✓ *Global Support:*

Access to international funding, technical assistance, and best practices for NCD management. Technological Advancements: Utilizing technology to enhance NCD care and management. Conclusion Effective policy and management strategies are essential for addressing the NCD burden in Mozambique and China. By developing and implementing comprehensive policies, strengthening healthcare systems, and leveraging innovative approaches, both countries can reduce the impact of NCDs and improve the health and well-being of their populations. Recommendations Develop and Implement National NCD Plans: Align with global frameworks and prioritize NCD prevention and control.

✓ *Strengthen Healthcare Systems:*

Integrate NCD services into primary healthcare and enhance specialized care. Promote Public Health Education and Awareness: Launch national campaigns and implement school programs to promote healthy lifestyles. Leverage Technology and Digital Health: Utilize telemedicine and mobile health applications to improve NCD care and management. Foster Public-Private Partnerships: Collaborate with the private sector to support NCD prevention and control efforts. By adopting these recommendations, Mozambique and China can make significant strides in addressing the NCD epidemic and promoting the health and well-being of their populations. Roth, S. C., et al. (2019). Global health.

• *Hypotheses for the Comparative Analysis of Mozambique and China*

✓ *Hypothesis 1: Prevalence of NCDs*

Null Hypothesis (H<sub>0</sub>): The prevalence of NCDs (e.g., hypertension, diabetes, cardiovascular diseases, and cancer) is similar in Mozambique and China. Alternative Hypothesis

(H1): The prevalence of NCDs is higher in China than in Mozambique.

✓ *Hypothesis 2: Risk Factors*

Null Hypothesis (H0): The common risk factors (e.g., tobacco use, physical inactivity, unhealthy diet, and alcohol consumption) contribute equally to the burden of NCDs in both Mozambique and China. Alternative Hypothesis (H1): The contribution of risk factors to the burden of NCDs differs between Mozambique and China, with certain risk factors being more prevalent or impactful in one country.]. Rutledge. Levin, R. B., et al.

✓ *Hypothesis 3: Healthcare Systems and Response*

Null Hypothesis (H0): The healthcare systems and response to NCDs in Mozambique and China are similar in terms of access, quality, and effectiveness. Alternative Hypothesis (H1): The healthcare systems and response to NCDs differ significantly between Mozambique and China, with China having more developed and effective systems for NCD management.

✓ *Hypothesis 4: Impact of Socioeconomic Factors*

Null Hypothesis (H0): Socioeconomic factors (e.g., income, education, and urbanization) have a similar impact on the prevalence and management of NCDs in Mozambique and China. Alternative Hypothesis (H1): Socioeconomic factors have a more significant impact on the prevalence and management of NCDs in Mozambique than in China, due to differences in economic development and healthcare infrastructure.

✓ *Hypothesis 5: Effectiveness of Interventions*

Null Hypothesis (H0): The effectiveness of interventions (e.g., public health campaigns, policy changes, and healthcare interventions) aimed at reducing the burden of NCDs is similar in Mozambique and China. Alternative Hypothesis (H1): The effectiveness of interventions differs between Mozambique and China, with certain interventions being more effective in one country due to contextual factors. By testing these hypotheses, the comparative analysis can provide insights into the differences and similarities in the burden, risk factors, healthcare systems, and impact of NCDs in Mozambique and China, ultimately informing evidence-based policies and interventions.

Table 2 Environmental, Sanitation, and Disease Profiles in Mozambique and China.

FEATURE	MOZAMBIQUE	CHINA
Environmental	Frequent natural disasters (cyclones, floods) destroy infrastructure, creating breeding sites for malaria and cholera.	Rapid urbanization and high-density living increase transmission risks for respiratory and hand, foot, and mouth disease (HFMD).
Sanitation	Limited access to safe water and poor sanitation remain critical drivers of diarrheal diseases and cholera.	Tap water safety varies by region; risks are often mitigated by better infrastructure but complicated by environmental pollution.
Key diseases	Malaria (top global burden), HIV/AIDS (11.5% prevalence), and Tuberculosis (TB).	Influenza, HFMD, TB, and mosquito-borne illnesses like Dengue and Japanese Encephalitis in southern regions.
Vulnerability	Large "zero-dose" children's populations and high mother-to-child HIV transmission rates.	Large migrant worker populations with limited health insurance and late care-seeking behaviors.

Policies and management strategies for communicable diseases (CDs) and non-communicable diseases (NCDs). In Mozambique and China.

➤ *Policy Framework for Communicable Diseases*

• *Mozambique:*

- ✓ National Health Policy (2017-2025): Emphasizes prevention, control, and elimination of CDs, particularly HIV/AIDS, malaria, and TB.
- ✓ Strategic Plan for HIV/AIDS and Reproductive Health (2017-2022): Focuses on reducing HIV transmission, increasing access to antiretroviral therapy (ART), and improving reproductive health.
- ✓ Malaria Strategic Plan (2016-2020): Aims to reduce malaria incidence, mortality, and vulnerability.

• *China:*

- ✓ National Health and Family Planning Commission (NHFPC) Strategic Plan for Infectious Disease Prevention

and Control (2016-2020): Focuses on strengthening surveillance, prevention, and control of CDs, including HIV/AIDS, TB, and malaria.

- ✓ Action Plan for HIV/AIDS (2015-2020): Emphasizes comprehensive prevention, treatment, and care for people living with HIV/AIDS.

• *Policy Framework for Non-Communicable Diseases Mozambique*

- ✓ National Health Policy (2017-2025): Includes a focus on NCDs, particularly cardiovascular disease, cancer, and diabetes.
- ✓ Strategic Plan for NCDs (2018-2022): Aims to strengthen prevention, detection, and management of NCDs, with a focus on primary healthcare.

• *China:*

- ✓ National Health and Family Planning Commission (NHFPC) Healthy China 2030 Plan (2016-2030):

Emphasizes NCD prevention and control, healthy lifestyles, and improving healthcare quality.

- ✓ China National Program for Chronic Disease Prevention and Control (2017-2025): Focuses on reducing NCD burden, improving healthcare services, and promoting healthy lifestyles.

#### ➤ *Management Strategies*

##### • *Mozambique:*

- ✓ Integration of CD and NCD services into primary healthcare: Mozambique has made efforts to integrate CD and NCD services into primary healthcare, with a focus on decentralization and task shifting.
- ✓ Community-based interventions: Mozambique has implemented community-based interventions, such as community health worker programs, to improve access to healthcare services.

##### • *China:*

- ✓ Emphasis on public health services: China has strengthened public health services, including disease surveillance, prevention, and control.

Integration of traditional Chinese medicine (TCM) and Western medicine: China has promoted the integration of TCM and Western medicine in the management of CDs and NCDs. Comparative Analysis Policy/Management Aspect Mozambique China CD policy framework Comprehensive policies for HIV/AIDS, malaria, and TB Strong policies for infectious disease prevention and control.

NCD policy framework Increasing focus on NCDs, with strategic plan Comprehensive policies for NCD prevention and control. Lancet, 393(10186), 1923-1934.Park, K. (2018).

Integration of CD and NCD services Emphasis on integration into primary healthcare Strong public health services, with integration of TCM and Western medicine Community-based interventions Community-based interventions, including community health worker programs Limited community-based interventions Challenges and Opportunities Challenges:

##### • *Limited Resources:*

Both countries face resource constraints, which hinder effective policy implementation and management of CDs and NCDs.

##### • *Infrastructure and Workforce:*

Mozambique and China face challenges in strengthening healthcare infrastructure and workforce, particularly in rural areas. Opportunities:

##### • *Collaboration and Knowledge Sharing:*

Mozambique and China can learn from each other's experiences and best practices in CD and NCD policy and management.

##### • *Investment in Healthcare:*

Increased investment in healthcare infrastructure, workforce, and services can improve the effectiveness of CD and NCD policies and management. While both countries face challenges, they also have opportunities for collaboration, knowledge sharing, and investment in healthcare. By examining the policy and management approaches in Mozambique and China, we can identify best practices and areas for improvement, ultimately contributing to more effective control and prevention of CDs and NCDs. Recommendations Strengthen healthcare systems: Both countries should invest in strengthening healthcare infrastructure, workforce, and services.

##### • *Improve Policy Implementation:*

Mozambique and China should focus on effective policy implementation, including decentralization, task shifting, and community-based interventions. Maj, M., et al. (2018).

- ✓ Promote collaboration and knowledge sharing: The two countries should enhance collaboration and knowledge sharing in CD and NCD policy and management.
- ✓ Monitor and evaluate progress: Mozambique and China should establish robust monitoring and evaluation systems to track progress in CD and NCD control and prevention.

## V. CONCLUSION

The comparative analysis of risk factors in Mozambique and China highlights a profound divergence in global health trajectories. The findings underscore that while economic development successfully mitigates the risks associated with communicable diseases (CDs), it simultaneously introduces a new, more complex set of metabolic and behavioral challenges. Key Findings Communicable diseases, despite progress in controlling and preventing communicable diseases, they remain a significant public health challenge, particularly in low- and middle-income countries. Non-Communicable Diseases (NCDs): NCDs have emerged as a major public health challenge, accounting for more than 70% of all deaths worldwide. Common risk factors, both communicable and NCDs share common risk factors, such as poor sanitation, inadequate healthcare, and unhealthy lifestyles. Healthcare systems: Healthcare systems play a critical role in preventing, detecting, and managing both communicable and NCDs. Implications for Policy and Practice Integrated approach: An integrated approach is needed to address both communicable and NCDs, taking into account the common risk factors and healthcare systems. Prevention and early detection: Prevention and early detection are critical in controlling and preventing both communicable and NCDs. Strengthening healthcare systems: Strengthening healthcare systems is essential for effective prevention, detection, and management of both communicable and NCDs. Global cooperation: Global cooperation and collaboration are necessary to address the global burden of communicable and NCDs. Future Directions Research and development: Continued research and development of new technologies, treatments, and interventions are necessary to address the evolving landscape

of communicable and NCDs. Surveillance and monitoring: Strengthening surveillance and monitoring systems is critical for tracking the burden of communicable and NCDs. Policy and advocacy: Policy and advocacy efforts are necessary to promote healthy lifestyles, improve healthcare systems, and address the social determinants of health. Conclusion, by understanding the key findings, implications for policy and practice, and future directions, we can work towards a healthier future for all. Recommendations Develop and implement integrated national health plans: Develop and implement integrated national health plans that address both communicable and NCDs. Strengthening healthcare systems: Strengthen healthcare systems to improve prevention, detection, and management of communicable and NCDs. Promote healthy lifestyles: Promote healthy lifestyles through public health campaigns and interventions. Foster global cooperation: Foster global cooperation and collaboration to address the global burden of communicable and NCDs.

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