HEALTH ISSUES EMERGING AND INFECTIOUS DISEASES

HIV

Despite significant progress, the HIV context remains concerning in West and Central Africa. Many countries with fragile health systems are affected by conflict, humanitarian crises and climate change.

In 2023, the numbers were stagnating - an estimated 81% of adults living with HIV were aware of their status, 76% were accessing ARV treatment, and 70% had an undetectable viral load.

The situation for children and adolescents living with HIV remains catastrophic - 40% know their status and 35% are accessing ARV treatment.

In 2023, there were 190,000 new infections in the region, which represented 14% of new infections globally. Although the number of new infections has fallen by 46% since 2010, the decline has been much faster among men (49%) than among women (38%). Women and girls account for 43% of new infections and poor sexual and reproductive health services contribute to the disproportionate burden the epidemic places on them.

Coverage of HIV vertical transmission prevention programmes increased from 29% in 2010 to 53% in 2022 but has stagnated since 2016. The region is home to 20% of pregnant women living with HIV worldwide, but accounts for 52% of all pregnant women living with HIV who are not on treatment.

In addition, key populations, together with their partners, represent 34% of new infections and contribute to new infections due to difficulties they face accessing care as a result of stigma and, in some countries, criminalisation.



40%

of children and adolescents living with HIV know their status and 35% are accessing ARV treatment in West and Central Africa.



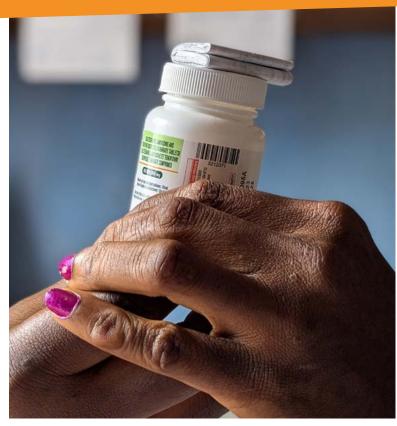
34%

of new infections are among key populations and their partners, in West and Central Africa

(Source: UNAIDS)

PROJECT NFM 3

Building the capacity of health workers to accelerate the response to HIV in Sierra Leone



Solthis supported **35 health centres** with various activities, such as **capacity strengthening for health workers** (5 classroom-based trainings, 35 ongoing training sessions, 812 coaching sessions and 28 health workers doing work shadow placements in other facilities through peer learning), **ongoing support for health districts and health centres on optimal health product management** (training, last mile delivery, stock management, monitoring) and **data collection for the health information system (HIS).**

As part of project implementation, **296 mentoring and coaching** sessions were carried out in all **35 health facilities.** Three trainings took place with a focus on, in particular, the revised national HIV tools and the consolidated HIV treatment guidelines. Finally, formative supervision was provided to all **35 health facilities.**

 KEY INFOS

 Timeframe:

 July 2022 - June 2024

 Funding: Global Fund

 Partners: National Aids Control

 Program (NACP)

 Find out more

Sierra Leone

HEALTH ISSUES

EMERGING AND



beneficiaries supported in the 35 health centres

for HIV 2.860

people tested

people testing positive initiated on ARV treatment (92.2%)

66

There have been changes to strengthen my capacity and help me to provide quality services to communities. This helped me to improve my knowledge around HIV. Another advantage of learning these tools is that I will be able to pass them on to others. Health worker in Port Loko



PROJECT Share

Sharing interventions, results and experience on HIV to support decision making



The SHARE project aimed to contribute to improving the health of populations and people infected and affected by HIV and AIDS in particular, through documenting and disseminating knowledge based on the previous experience and practices of Solthis and its partner NETHIPS in two areas:

- capacity strengthening for service delivery;
- community engagement.

They looked at experience under Empower (2016-2021), technical assistance to the National AIDS Control Programme (NACP) in the context of the Global Fund NFM3 grant (2022-2024) and PROSSAN 1 and 2 (2019-2024). All components of HIV service delivery in health centres, from a technical perspective (testing, treatment, PMTCT, differentiated care, STIs, etc.), procurement, laboratories, health information systems or related to community engagement (link to support groups), were covered by capacity strengthening activities.

Through twenty-five focus groups with health professionals, patients and health authorities, qualitative data (quality score, analysis of health centre performance) was gathered, that went beyond purely quantitative data.

Improved knowledge and ability to provide quality services, including better communication with patients and greater self-confidence, were cited by the majority of participants interviewed as a positive individual impact of Solthis' capacity strengthening activities.



Under EMPOWER 1 and 2, then PROSSAN 1 and 2, and NFM3, the trainings organised for the centres Solthis supports helped the programme to support other centres that do not have partner support. This has had a huge impact in terms of strengthening the capacity of health workers. District HIV Supervisor



Sierra Leone





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Capitalization papers produced



policy briefs validated with the Ministry of Health and Public Hygiene



capitalization video



C national knowledge-sharing workshops (around 50 participants)

PROJECT TPF-ADVI



HIV self-testing in Côte d'Ivoire: nationwide roll-out of an innovative tool to improve access to testing for most-at-risk populations

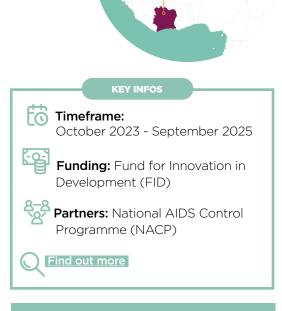


Technical assistance provided to the National AIDS Control Programme (NACP) enabled the development, validation and implementation of the national HIV self-testing transition plan. This plan outlines the NACP's ambitions to diversify target populations, distribution channels and geographic coverage of provision.

In terms of performance, HIV self-testing distribution doubled between 2023 and 2024. Despite the overall objectives not being met (70% expected performance), this demonstrates a positive dynamic and the growing role of self-testing in national testing strategies.

Formative supervision was one of many activities the project carried out, in 13 health districts with 19 community facilities and 10 public facilities. This enabled 100 people to receive coaching at the various sites to improve service access and quality.

Through the development of public/private partnerships, 70 dispensing pharmacists were trained in the regions of Abidjan 1 and 2, which was coupled with a national campaign to promote self-testing (TV, radio) to make it accessible to the general public.



Côte d'ivoire



The TPE-ADVIH project enabled the NACP to improve coordination of interventions related to HIV self-testing through meetings with all stakeholders (public sector, private and community sector) to overcome any scale-up bottlenecks. Head of Testing Department, NACP



PROJECT TRIO

HEALTH ISSUES EMERGING AND INFECTIOUS DISEASES

Pilot project to operationalize triple elimination of HIV, HBV and syphilis in Guinea



In Boké prefecture, combined syphilis-HIV screening coverage was 98% in 2023 (data collected during an appraisal at PMTCT sites) and HBV vaccination at birth is not yet integrated into the national strategy.

Against this backdrop, the TRIO project, whose objective is **to contribute to reducing mother-to-child transmission of HBV, syphilis and HIV,** began interventions in 2024. Key interventions:

- 12 members of the cross-organisational collective attended a workshop to prioritise their needs;
- the research protocol developed jointly by CEA-PCMT and Solthis submitted to the National Committee for Ethics in Health Research. This research has 5 components:
 - a knowledge, attitudes and practices survey with care providers;
 - 2. a survey on barriers to triple elimination, expanded to include a situational analysis of home births;
 - 3. an acceptability study for this intervention;
 - 4. a feasibility and effectiveness study for this intervention;
 - 5. a cost effectiveness study and cost effectiveness modelling.
- project launched in Boké with 66 participants;
- the Technical Advisory Group on Vaccination in Guinea approved the introduction of HBV vaccine at birth through the TRIO project.

Through this triple elimination strategy, our vaccine provision will improve by introducing the HBV vaccine from birth. Expanded Programme on Immunisation health worker



Guinea

The appraisal highlighted:

98% of women in ante-natal

consultations received the Syphilis HIV DUO test, (1.33% of results HIV positive and 0.2% syphilis positivity rate)

95% of pregnant women living with HIV were receiving ARV treatment

83% of pregnant women with a positive syphilis test were referred for treatment

4% of HIV-exposed newborns received early HIV diagnosis results

97% of HIV-exposed newborns received preventive treatment

PROJET PHASE 2 PROSSAN || Programme for strengthening

health systems and services



Sierra Leone



The project objective was to strengthen the quality of and access to health services and to ensure the active participation of communities, especially women and young people.

At the end of the project, the 10 health centres supported obtained a quality-of-care score in terms of access to antiretroviral therapy, screening and care for mothers and children of more than 80%, and improvements were observed for 11 of the 13 indicators evaluated. **The overall quality of care score increased from 68% to 85%.**

Quality scores for screening and mother/child care improved in 9 of the 10 centres supported. **Overall scores improved, increasing from 47% to 78%.**







10 health facilities supported

374

engaged



1,416 patients provided <u>with care</u>

health professionals

66

I think that all capacity strengthening activities complement each other in order to provide quality services to patients. Health Assistant in the Western Rural Area



PROJECT **IMPULSE**

Empowering healthcare systems by involving users

HEALTH ISSUES EMERGING AND INFECTIOUS DISEASES



The IMPULSE project aims to strengthen health services and systems and to have a greater focus on users and their rights. In this first year of intervention, the main focus was on:

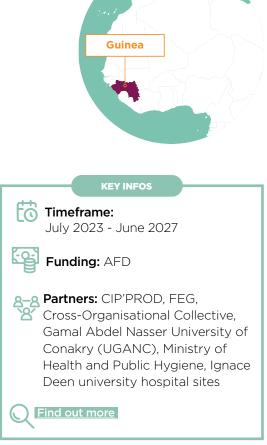
- conducting a collective participatory assessment of HIV care and developing a roadmap for improving the quality of the 6 project partner sites;
- co-creation of tools for psychosocial support workers, taking into account the needs of women and the rights of patients living with HIV:
- conducting a study on legal barriers to promoting the rights of users and PLHIV.

In addition, the various project activities enabled:

- 30 psychosocial support workers to be trained on implementing innovative patient support services, including 15 mentors;
- 14 awareness-raising sessions (i.e., 56 meetings) on patient rights, which helped to strengthen the skills of 903 patients on their rights;
- **32 professional practice analysis groups** to strengthen the capacity of 80 care providers on care provider / patient relationships;
- training and support for 12 CSO members on implementing advocacy interventions.

Through awareness-raising activities on patient rights, I have gained a lot of knowledge that means I can now defend my choices with care providers. It was this knowledge that led me to join the organisation FEG, where I campaign for my peers to know and claim their rights. **FEG member**







903 patients (F 603 /

M 300) have strengthened their skills around their rights



care providers assessed their professional practices and strengthened the care provider / client relationship

PROJECT IMPAACT4HIV

Improving access to treatment and care for advanced HIV



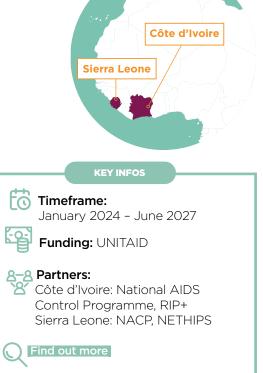


Despite significant progress in access to antiretroviral treatment, the number of HIV and AIDS related deaths remains well above the targets set. Advanced HIV disease (AHD), which is associated with a large number of opportunistic infections, is a leading cause of HIV and AIDS related deaths. It is therefore a major challenge in the global fight against HIV, especially in sub-Saharan Africa. In Côte d'Ivoire and Sierra Leone, Solthis is implementing the Impaact4HIV project, which is also implemented in four other countries as part of a consortium led by Aurum.

In 2024, the project began by:

- developing a dedicated implementation strategy for each country to pilot a model to decentralise AHD care, in conjunction with the national programmes and networks of people living with HIV;
- identifying pilot sites (15 in Côte d'Ivoire's South Comoé region and 8 in Sierra Leone's Western Rural and Urban Areas) following an appraisal process;
- adapting training and monitoring tools.

In parallel, support has been provided to national AIDS programmes to update national guidelines, recommendations and tools related to the management of AHD to align with WHO guiding recommendations.







Data analysis shows that a large proportion of patients who present late to health facilities already have opportunistic infections due to social barriers, especially stigma. Despite ARV treatment being available and the benefits being proven. Dr. Kouadjalé Mathurin, Deputy Director Coordinator of the NACP



PROJECT PHASE 2 TA PMTCT

Support for strengthening PMTCT/Triple Elimination activities in Niger

As part of the scale up of the differentiated HIV service delivery strategy, Solthis is working in collaboration with the Ministry of Public Health, Population and Social Affairs in 75 integrated health centres, including 42 new ones added in 2024. To support the triple elimination of HIV / syphilis / HBV among pregnant women in health facilities, ARVs were administered to HIV-positive pregnant women and early diagnosis activities were carried out throughout the year:

- 24 focal points and 44 service providers identified and trained in the selected sites;
- simplified roadmap developed and validated, serving as a support tool and guide for mentors;
- health information gathered from national registries to inform roadmaps;
- data on exposed newborns followed up telephone calls to integrated health centres and districts involved, to fill gaps in indicators related to: the number of cases, initiation of ARV prophylaxis (oral suspension), administration of cotrimoxazole, performance of PCR tests and sharing of results;
- quarterly performance reviews organised at regional level, resulting in personalised recommendations and adjustments.

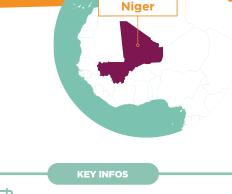
These activities have made it possible to:

- put 95% of pregnant women tested positive for HIV on ARV treatment in the 33 old sites and 92% in the 42 new sites;
- provide treatment to 87% of pregnant women with syphilis;
- provide tenofovir disoproxil fumarate (TDF) treatment to 45% of pregnant women with HBsAg;
- screen 71% of newborns exposed to HIV;
- put 100% of newborns exposed to HIV on ARVs and 75% on cotrimoxazole at the 33 old sites;
- put 92% of HIV-exposed newborns on ARVs and 93% on cotrimoxazole in the 42 new sites.

Triple elimination testing for me and HIV testing done early for my baby, are a priority and this project met

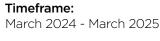
my expectations. Project beneficiary mother

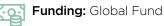




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10

Partners: Ministry of Public Health, Population and Social Affairs (National AIDS and Hepatitis Control Programme)

Find out more





128,790 pregnant women reached

75 sites in 33 districts of 5 the regions supported

