

## HEALTH ISSUES INFECTIOUS AND EMERGING DISEASES

### HIV

Despite significant progress, the context for HIV remains concerning in West and Central Africa. In 2024, numbers were stagnating: an estimated 81% of people living with HIV (PLHIV) were aware of their status, 76% had access to ARV treatment and 70% had an undetectable viral load. The context for children and adolescents living with HIV is dire - only 43% know their status and 37% are accessing ARV treatment.

In 2024, 160,000 new infections were recorded in the region, accounting for more than 12% of new infections globally. Women and girls account for 63% of new infections and poor sexual and reproductive health services contribute to a disproportionate burden of the epidemic sitting with them. Coverage of HIV vertical transmission prevention programs increased from 29% in 2010 to 56% in 2024, but this has stagnated since 2016 and since 2021 has decreased. In 2022, the region accounted for 20% of pregnant women living with HIV worldwide, yet accounted for 52% of all pregnant women living with HIV not on treatment.

In addition, key populations and their partners, account for 34% of new infections and contribute to infections due to difficulties accessing care as a result of stigma and, in some countries, criminalization..

### TUBERCULOSIS

Despite a 27% decrease in incidence and 38% decrease in mortality between 2015 and 2023 in sub-Saharan Africa, TB remains the leading cause of death by infectious disease. In 2023, about 10.8 million people contracted the disease and 8.2 million people were diagnosed worldwide. 1.25 million people died as a result of TB, including 161,000 PLHIV, making it the leading cause of death for this group.

In addition to the challenges posed by weaknesses in health care systems, malnutrition, aggravated by climate change and vola-

tile living conditions, and by population displacement as a result of crises and conflict, which fuels the transmission of tuberculosis.

Access to testing remains a challenge, with a quarter of cases still missing from diagnosis, which often happens late. There are many reasons for this but low level access to X-rays, rapid urine tests for PLHIV and rapid molecular tests (48%) limits the identification of multi-drug-resistant forms of tuberculosis.

Young children are particularly affected. It is estimated that 96% of the 191,000 annual TB deaths are cases that have not been diagnosed and treated. This is despite the existence of new diagnostic tools, because they are being implemented too slowly.

### HEPATITIS B

Hepatitis B is a major public health issue. An estimated 254 million people suffer from chronic hepatitis B, resulting in 1.2 million deaths each year from cirrhosis and liver cancer. A quarter of people with hepatitis B live in West and Central Africa, where the average prevalence among adults is estimated to be between 8% and 12% - one of the highest in the world. Although immunization through expanded programs represents a real breakthrough, immunization coverage is increasing slowly and still too few countries in West and Central Africa are achieving coverage at birth, which is crucial for reducing transmission of hepatitis B among newborns. This is all the more crucial because 90% of hepatitis B-related deaths result from infection at birth or in early childhood. Triple elimination programs, which aim to reduce vertical transmission of HIV, syphilis and hepatitis B, are an opportunity to really tackle hepatitis B.


## IMPULSE PROJECT

Empowering Healthcare  
Systems by Involving Users


## HEALTH ISSUES INFECTIOUS AND EMERGING DISEASES

Guinea

KEY INFO

 **Date:**  
July 2023 - June 2027

 **Funders:** AFD

 **Partners:** Ministry of Health and Public Hygiene (DNEHPP, SNPS, PNLISH), Espoir Guinée Foundation (FEG), CSO members of the cross-organization collective for the promotion of patients' rights, CEA-CMPT/ UGANC

 [Find out more](#)



#### ► Structuring quality psychosocial support.

IMPULSE supported learning from psychosocial support practices, leading to the development of a policy brief for the National AIDS and Hepatitis Control Program (PNLSH). The brief was used as the basis for developing a national roadmap to improve the quality of psychosocial support, therefore strengthening how it is embedded institutionally and recognition of the role of psychosocial support workers in the health system, particularly in connection with developing the next country request to the Global Fund to Fight AIDS, Tuberculosis and Malaria.

#### ► Promoting patient rights

Following the adoption of the National Charter of the Rights of Patients and Users in Guinea, IMPULSE supported the development of awareness-raising tools, training and support for healthcare teams and facilitated translating principles of the charter into concrete practices, for the direct benefit of users.

#### ► Dual approach for sustainable change

- **Empowerment of patients:** series of empowerment workshops with 80 people living with HIV, strengthening their self-esteem, self-expression and critical awareness.
- **Strengthening the skills of psychosocial counsellors:** implementing psychosocial mentoring between peers and co-creating an operational guide to improve practices.

“Through institutionalizing a university diploma on humanizing care and care provider - patient relationships, IMPULSE has responded to a key need in Guinea and has initiated a paradigm shift: training people differently to sustainably transform practices.


Prof. Tounkara, UGANC

 **17 facilitators trained**  
to independently carry out rights awareness sessions

 **24 facilitation sessions** carried out

 **3,308 patients and users reached**, with noticeable improvements in knowledge of their rights and access to services

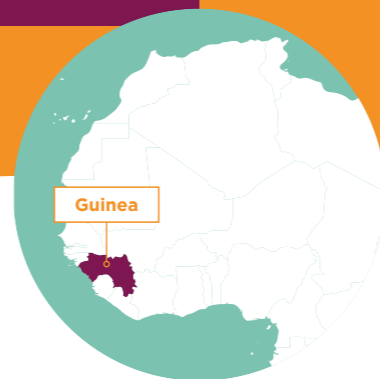
 **38 care providers benefited from mentoring on psychosocial support**, structuring care provision and strengthening interpersonal practices

 **2 normative documents produced with support from the project**

# TRIO PROJECT

TRiple elimination of HIV, syphilis, hepatitis B, Operationalization of the approach

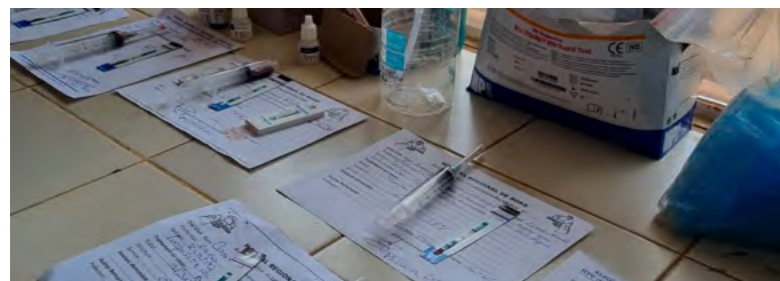
HEALTH ISSUES  
INFECTIOUS AND EMERGING DISEASES



Launched in April 2024, the TRIO project began operational activities in 2025. During this year the project enabled:

- ▶ **the introduction of hepatitis B vaccination at birth.** This national and sub-regional innovation, in 16 health centers in Boké prefecture, has enabled nearly 2,500 newborns to receive their birth dose;
- ▶ **the introduction of antenatal hepatitis B testing in maternity wards, integrated with combined HIV and syphilis testing, and hepatitis B treatment** for pregnant women to reduce vertical transmission;
- ▶ **capacity strengthening** of 231 health workers, including 15 members of the cross-organization collective, on the triple elimination approach;
- ▶ **a survey to be conducted on the knowledge, attitudes and practices of care providers around triple elimination** and a survey to assess home birth rates.

“ My baby was given the hepatitis B vaccine at birth. This vaccine protects him from serious liver disease, and it gives me reassurance. I wish all babies could receive this vaccine at birth. **Kadiatou Mamie Bangoura, mother** ”



## KEY INFO

- Date:** April 2024 - March 2028
- Funders:** L'Initiative - Expertise France, Orange Foundation Guinea and Paris City Hall
- Partners:** RAES, CEA-PCMT, PNLSh, PEV, DNSCMT

[Find out more](#)



**18** health facilities covered (16 health centers, 2 regional hospitals)



**231** trained health workers (care workers, midwives, center managers and 15 members of the cross-organization collective)



Nearly **2,500** newborns vaccinated for HBV (birth dose)



**25 750** pregnant women seen in ANC1

# TPE-ADVIH PROJECT

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

HEALTH ISSUES  
INFECTIOUS AND EMERGING DISEASES



## KEY INFO

- Date:** October 2023 - March 2026
- Funders:** Fund for Innovation in Development (FID)
- Partners:** National AIDS Control Program (PNLS)

[Find out more](#)

In 2025, 94,288 oral HIV self-test kits were distributed by the National AIDS Control Program (PNLS) through its partners. Community distribution was impacted by US aid cuts in early 2025.

**Public sector distribution experienced a large increase over the period with a total of 40,000 kits dispensed thanks to significant investment in training at the national level** by the PNLS, with support from technical and financial partners, to integrate provision into public services.

**A public-private partnership with several actors** (suppliers/distributors, national order of pharmacists, pharmacies and several ministries) was established in order to create and stimulate HIV-testing provision within companies/public ministries and in private pharmacies where finger-prick HIV self-tests have been introduced.

“ The involvement of sectoral HIV/AIDS committees and public ministries to promote HIV self-testing to their employees and families makes it possible to ensure finger-prick self-tests are available in addition to oral HIV self-tests and conventional testing. ”

**Prof. Eboi Ehui, PNLS Coordinating Director**



**1** national scale-up and resource mobilization plan developed and validated for 2026-2028



**94,288** self-tests provided by the PNLS through its partners



**2** joint supervision assignments in 8 regions, 17 health districts, 12 community-based facilities and 25 public facilities

**225** people provided with on-site coaching by supervisory teams

**34** private pharmacists trained in the regions of Abidjan 1 and 2 to boost sales in private pharmacies for the general population

**20** focal points from sectoral committees to combat AIDS in 4 public ministries trained

**1** online training developed for private pharmacists (Q1 2026) with a view to subsequently training about 1,000 people

# IMPAACT4HIV PROJECT

Improving access to AHD care and treatment for HIV in Côte d'Ivoire

HEALTH ISSUES  
INFECTIOUS AND EMERGING DISEASES



KEY INFO

**Date:** January 2024 - June 2027

**Funders:** UNITAID

**Partners:** Aurum, CIHP, DNDi, MAA, PATA, PNLs, RIP+

**Implementation area:** South Comoé Region: 3 health districts, 15 pilot sites

[Find out more](#)



Advanced HIV Disease (AHD) is associated with large numbers of opportunistic infections, and is a leading cause of HIV- and AIDS-related deaths. The IMPAACT4HIV project aims to prevent deaths among adults and children by simplifying advanced management of HIV-related diseases. Activities carried out during this year include:

- ▶ **development of training modules for HIV health providers on AHD**, data collection tools and checklists in line with WHO recommendations;
- ▶ **training and coaching of 82 health providers** from the 15 pilot sites;
- ▶ **initiating implementation of care provision intervention to identify 117 AHD patients** at the 15 sites between June and December 2025;
- ▶ **establishing quality teams at the 15 sites** to monitor performance indicators and promote the implementation of appropriate corrective actions;
- ▶ **approval by the ethics committee of evaluation protocols for the implementation and situational analysis of severe bacterial infections;**
- ▶ **evaluation and monitoring of the AHD product supply chain** (CrAg test, TBLam, Pima CD4 cartridges);
- ▶ **establishment of intervention coordination meetings** with the various stakeholders.

“ This project has allowed us to better assess PLHIV and has highlighted a worrying situation: a significant proportion of PLHIV are reaching an advanced stage of the disease. **Dr. AKA Kophys, Chief physician at Adiaké General Hospital** ”

# IMPAACT4HIV PROJECT

Improving access to AHD care and treatment for HIV in Sierra Leone

HEALTH ISSUES  
INFECTIOUS AND EMERGING DISEASES



KEY INFO

**Date:** January 2024 - June 2027

**Funders:** UNITAID

**Partners:** NETHIPS, NACP/NTLCP/NPHA/MoH, NMSA, Aurum, CIHP, DNDi, MAA, PATA

[Find out more](#)



Activities carried out during the second year of project implementation include:

- ▶ **developing a dedicated implementation strategy for each country to pilot a model to decentralize AHD care, in conjunction with the national programs and networks of people living with HIV;**
- ▶ **68 health professionals trained on AHD management and care protocols;**
- ▶ **32 health professionals trained on HIV and monkeypox testing and management** to strengthen prevention and surveillance systems;
- ▶ **initiation of AHD testing, management protocols and data collection at all sites;**
- ▶ **supported the NACP (National HIV/AIDS Control Program) to develop the National HIV Strategic Plan for the 2026-2030 period.** AHD is one of the priority interventions;
- ▶ **preparation and approval of research protocols on evaluating AHD service package implementation strategies, situational analysis of the management of severe bacterial infections in people living with HIV (PLHIV) and the prevalence of histoplasmosis among PLHIV with AHD;**
- ▶ **evaluation of procurement and supply management and recommendations for improvements.**

“ The advanced HIV disease training organized by Solthis helped me to correctly identify AHD cases among people living with HIV through testing using the CD4 test kits provided. This has helped improve management of AHD. **Salamatou Jawara - Health personnel, Kissy CHC, Western Area Urban District** ”



**Training 19 data managers, 22 community workers, 19 medical biology technicians and 22 prescribers of care packages provided to AHD patients**



**1/3 of new eligible patients were identified as having AHD** (ratio of 1.6 women : 1 man)



**40% of AHD patients had some form of tuberculosis, identified mainly through TB-Lam.** They have all been put on treatment.



**981 PLHIV (327 M, 654 F) assessed for AHD**



**431 PLHIV (192 M, 239 F) identified with AHD** of which 336 were tested for TB and the 135 that tested positive were put on treatment



**153 and 319 PLHIV with AHD were tested for cryptococcal infection and monkeypox respectively,** and no positive cases were detected



**401 PLHIV (174 M, 227 F) people with AHD were put on optimal treatment**

# FREE TB PROJECT

Freeing children from the burden of tuberculosis

HEALTH ISSUES  
INFECTIOUS AND  
EMERGING  
DISEASES



The first few months of the FREE TB project made it possible to consolidate and go deeper into preliminary analyses and findings and to strengthen collaboration with the National Leprosy and Tuberculosis Control Program (NLTCP).

- ▶ Assessments in 58 health facilities to identify gaps and needs in the provision of child TB services.
- ▶ Participation in the end-of-period review of the National Tuberculosis Strategic Plan 2021-2025, which aimed to assess the country's progress in the response to tuberculosis, to identify current challenges and to provide data to serve as a basis for developing the next National Strategic Plan for Tuberculosis 2026-2030 and setting out priorities for the next strategic phase.
- ▶ Contributing to the development of the National Strategic Plan for Tuberculosis 2026-2030.

“With support from Solthis, our staff are better equipped to test for and manage pediatric TB. Working with the district health management team will strengthen services, making TB care faster and more accessible for children in our community.”  
**Bo District TB Supervisor**

## KEY INFO

**Date:**  
March 2025 - March 2028

**Funders:** L'Initiative -  
Expertise France

**Partners :** National Leprosy and  
Tuberculosis Control Program  
(NLTCP) Civil Society Movement  
Against Tuberculosis-Sierra Leone  
(CISMAT-SL), Lincoln Institute for  
Rural and Coastal Health (LIRCH)

[Find out more](#)

## PROJECT OBJECTIVES



**78,750**  
children under five  
tested for TB



**241** children  
treated and 1,337  
provided with  
prevention support  
to reduce TB  
mortality in Sierra  
Leone

