

Country progress report - Sierra Leone

Global AIDS Monitoring 2017



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Overall

Fast-track targets

Progress summary

Sierra Leone is located in Western Africa, surrounded by Guinea, Liberia, and the Atlantic Ocean. It has four provinces (Western Area, Northern, Eastern and Southern) which are divided into 14 districts. The capital city is Freetown which is located in the Western district. It has a population of 7 million people (Census 2015). Sierra Leone is recovering from a civil war which spanned a decade and an Ebola epidemic which spanned two years.

Sierra Leone has a mixed and generalized HIV epidemic with an HIV prevalence of 1.5% since 2005. The 2013 Demographic and Health Survey (SLDHS, 2013) indicates that some districts have significantly higher HIV prevalence than others.

Please find attached, a comprehensive country report

Commitment 1

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Progress summary

Sierra Leone has significantly scaled up its treatment efforts by increasing eligibility to treatment, increasing outreach testing points, and strengthening defaulter tracing programmes. To increase HIV testing volume, Sierra Leone adopted the following HIV testing approaches in 2016; client-initiated, provider initiated, key populations targeted testing, and routine antenatal care and community based testing. The number of people tested and received results in 2016 was 564,403, including general population and pregnant women attending ANC and PMTCT services. According to DHS 2013, 33% of PLHIV know their status.

Policy questions

Is there a law, regulation or policy specifying that HIV testing:

a) Is solely performed based on voluntary and informed consent

Yes

b) Is mandatory before marriage

No

c) Is mandatory to obtain a work or residence permit

No

d) Is mandatory for certain groups

No

What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?

≤500 cells/mm³; Implemented countrywide

Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?

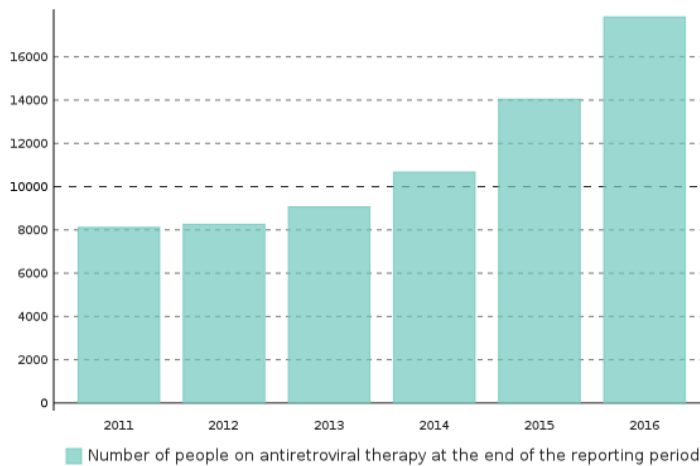
a) For adults and adolescents

Yes, fully implemented

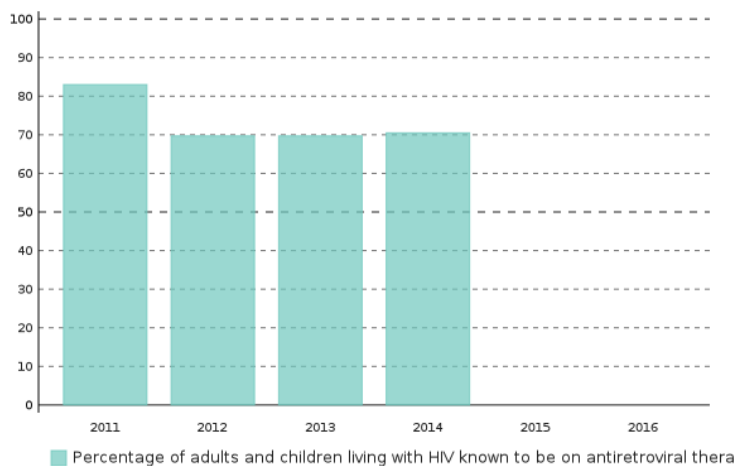
b) For children

Yes, fully implemented

1.2 People living with HIV on antiretroviral therapy, Sierra Leone (2011-2016)



1.3 Retention on antiretroviral therapy at 12 months, Sierra Leone (2011-2016)



Commitment 2

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Progress summary

Sierra Leone has a national plan to eliminate Mother-To-Child Transmission (eMTCT) of HIV, with a target of 95% PMTCT coverage by 2020. According to Spectrum 2016, Sierra Leone had 95% PMTCT coverage in 2016. There are 691 health facilities Country wide providing PMTCT services. The country has continued to roll out Option B+ approach to treat all positive pregnant women and to provide lifelong antiretroviral medication to mothers. Breast feeding is recommended for low resource countries like Sierra Leone, but it is common practice to cease by 6 months. Despite the lack of national policy for syphilis testing at ANC, Duo HIV/Syphilis test kits were utilized countrywide to ensure all pregnant women have the opportunity to be tested. As per national guideline, infants of HIV infected mothers are tested for HIV at 2 months and 6 months. In 2016, 251 infants were tested under the EID program; 8% were HIV positive.

Policy questions

Does your country have a national plan for the elimination of mother-to-child transmission of HIV?

Yes

Target(s) for the mother-to-child transmission rate and year: 95%

Year: 2020

Elimination target(s) (such as the number of cases/population) and Year: 95%

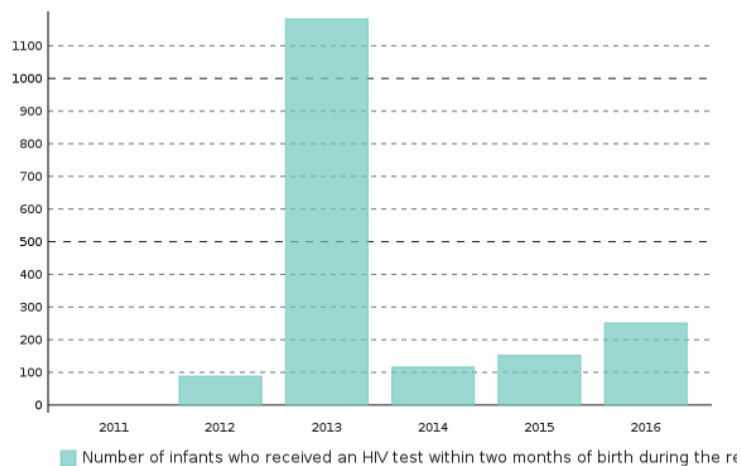
Year: 2020

Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?

Treat All

Not implemented in practice

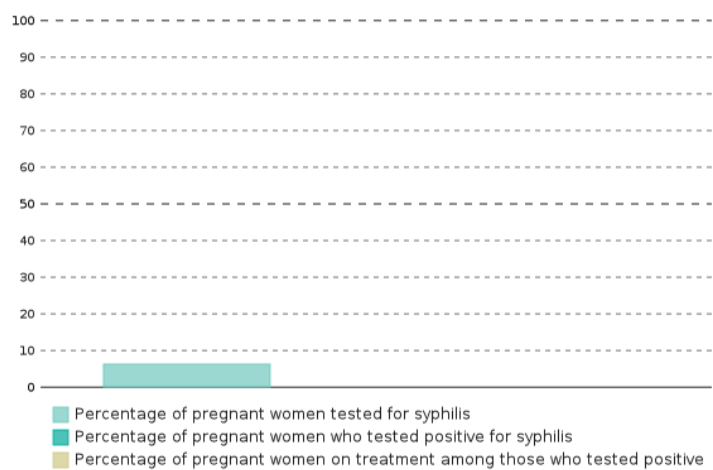
2.1 Early infant diagnosis, Sierra Leone (2011-2016)



2.3 Preventing the mother-to-child transmission of HIV, Sierra Leone (2011-2016)



2.4 Syphilis among pregnant women, Sierra Leone (2016)



Commitment 3

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Progress summary

The National Strategic Plan 2016-2020 makes provision of services to Key Populations in the absence of a national policy on HIV prevention, diagnosis, treatment and care for Key Populations. In 2016, Sierra Leone implemented basic prevention packages for Key Populations; testing and counselling, condom promotion and distribution, sensitization on prevention strategy, and linkages to treatment services for positive clients. Limited services are offered for those in correctional centres and people who inject drugs as there is no distribution of condoms in prison settings, no needle and syringe program, and no opioid substitution therapy. Key Populations participates in the development of strategies for services provision to the constituents. Pre-exposure prophylaxis is not yet available in Sierra Leone.

Policy questions: Key populations

Criminalization and/or prosecution of key populations

Transgender people

Criminalized

Sex workers

Other punitive regulation of sex work

Men who have sex with men

Yes, imprisonment (up to 14 years)

Is drug use or possession for personal use an offence in your country?

Drug use or consumption is a specific offence in law

Legal protections for key populations

Transgender people

No

Sex workers

No

Men who have sex with men

-

People who inject drugs

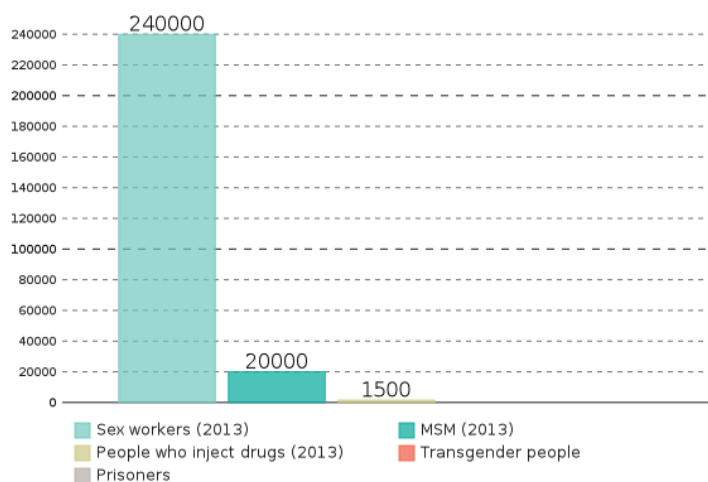
No

Policy questions: PrEP

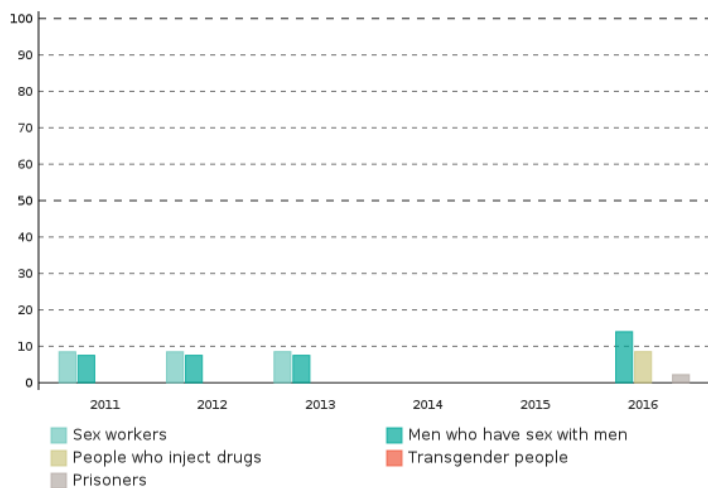
Is pre-exposure prophylaxis (PrEP) available in your country?

No

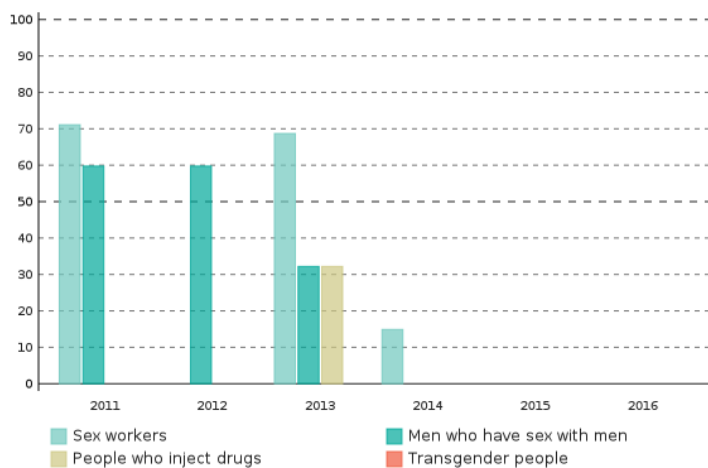
3.2 Estimates of the size of key populations, Sierra Leone



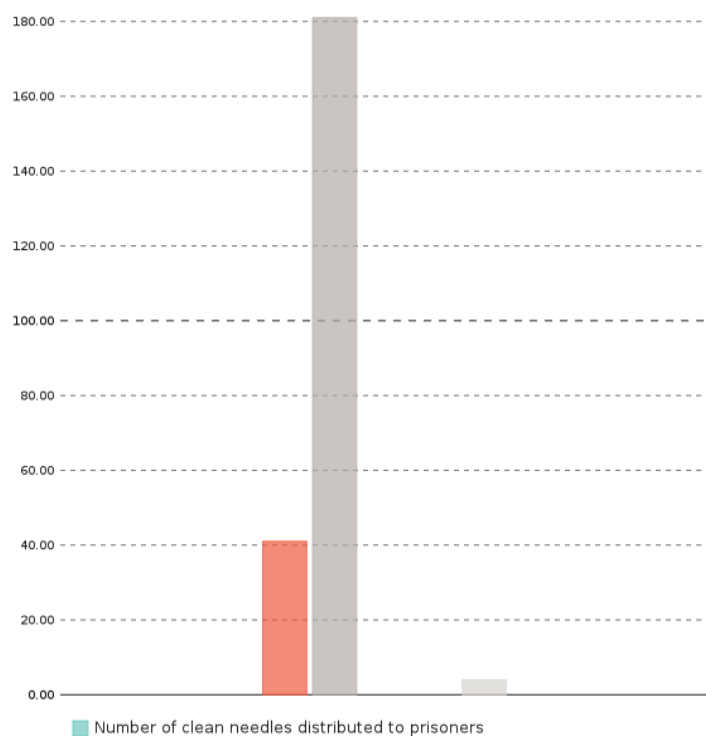
3.3 HIV prevalence among key populations, Sierra Leone (2011-2016)



3.6 Condom use among key populations, Sierra Leone (2011-2016)



3.13 HIV prevention programmes in prisons, Sierra Leone (2016)



Commitment 4

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Progress summary

HIV is fully mainstreamed into national strategies on elimination of gender based violence (GBV) and violence against women that includes HIV. Enforcement of the GBV laws include court injunctions for the safety and security of survivors; protection services for survivors of domestic violence such as legal services or shelters; services for the person perpetrating violence. First line support, emergency contraception and post exposure prophylaxis services are provided for survivors. The legal age of marriage for both girls and boys is 18 years.

Policy questions

Does your country have a national plan or strategy to address gender-based violence* and violence against women that includes HIV

Yes

Does your country have legislation on domestic violence*?

Yes

Does your country have any of the following to protect key populations and people living with HIV from violence?

Programmes to address intimate partner violence*

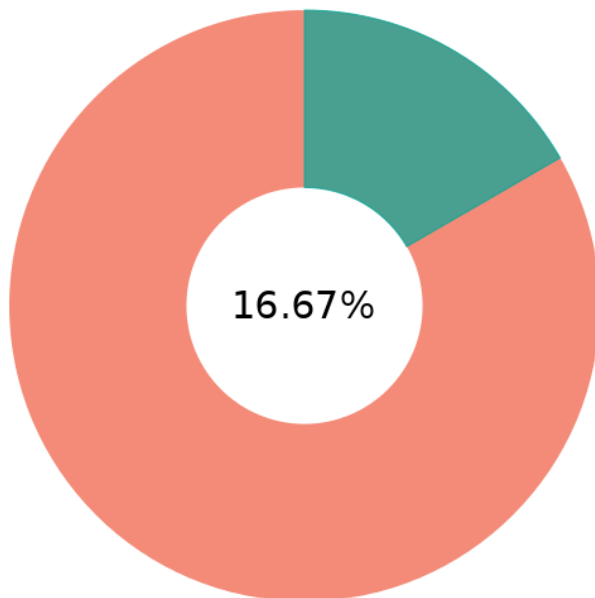
Interventions to address police abuse

Interventions to address torture and ill-treatment in prisons

Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

Yes, policies exist but are not consistently implemented

Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



1 / 6

Commitment 5

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Progress summary

Topics on HIV and AIDS prevention, treatment, care and support services and reproductive health are included in curriculum for primary and secondary schools. Young people actively participate in developing policies and strategies on their own health. Community based organizations often reach out to youths and train them as peer health educators in and out of school to lead engagement of their peers with tailored behaviour change communication messages. Youth friendly centres are also available in country to provide youth centric approaches to sexual reproductive health and peer support; some of these centres provide HIV services.

Policy questions

Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education*, according to international standards*, in:

a) Primary school

Yes

b) Secondary school

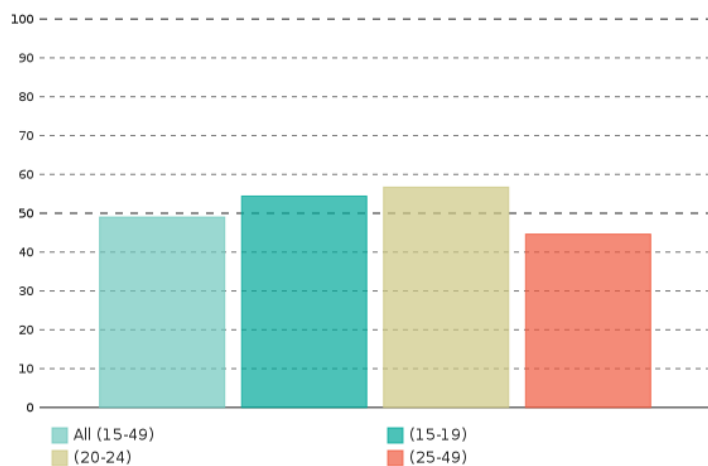
Yes

c) Teacher training

No

5.2 Demand for family planning satisfied by modern methods, Sierra Leone (2016)

Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods



Commitment 6

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Progress summary

Sierra Leone has a frame work on social protection for all vulnerable populations and this is being implemented and enforced across the country. The country has supported the establishment of the Network of HIV Positive Persons (NETHIPS), which is an umbrella care and support organization that advocates for the rights of its constituents. The support has been towards engendering livelihoods in the form of vocational centres, agricultural livelihood projects and fish ponds.

Policy questions

Yes

a) Does it refer to HIV?

Yes

b) Does it recognize people living with HIV as key beneficiaries?

Yes

c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?

Yes

d) Does it recognize adolescent girls and young women as key beneficiaries?

Yes

e) Does it recognize people affected by HIV (children and families) as key beneficiaries?

Yes

f) Does it address the issue of unpaid care work in the context of HIV?

Yes

Do any of the following barriers limit access to social protection* programmes in your country

Lack of information available on the programmes
Complicated procedures
Fear of stigma and discrimination
High out-of-pocket expenses
People living with HIV, key populations and/or people affected by HIV are covered by another programme

Commitment 7

Ensure that at least 30% of all service delivery is community-led by 2020

Progress summary

Communities play an active role in HIV response programming ranging from inception of proposal writing to implementation of services for people living with HIV and key populations. Peer groups often lead community discussions to raise awareness on HIV and Ebola. Traditional and religious leaders are active in disseminating information regarding HIV, treatment and the needed retention. Peers from support groups also provide assistance in tracing PLHIV colleagues who default from their treatment, and have proven to be successful in bringing them back to the facilities to receive their life saving drugs. District level work plans have also been created to prioritize interventions in the local level and provide greater accountability of the HIV response to the local level.

Policy questions

Does your country have a national policy promoting community delivery of antiretroviral therapy?

No

Are there any of the following safeguards in laws, regulations and policies that provide for the operation of CSOs/CBOs in your country?

Registration of HIV CSOs is possible

Registration of CSOs/CBOs working with key populations is possible

HIV services can be provided by CSOs/CBOs

Services to key populations can be provided by CSOs/CBOs

Number of condoms and lubricants distributed by NGOs in the previous year

a) Male condoms:

1485056

b) Female condoms:

18960

c) Lubricants:

0

Commitment 8

Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers

Progress summary

The national response for HIV/AIDS in Sierra Leone receives 99% of its funding from international donors. The largest donors are Global Fund, the UN, and KfW. Domestic resource mobilization strategy is available in country in order to generate sustainable financing. The government has committed an HIV budget line of 1.7 billion Leones for the HIV response and continues to uphold their government counterpart financing of 5% to the Global Fund grant.

Commitment 9

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

Progress summary

The national AIDS response provides interventions to educate PLHIV and key populations regarding their rights and the legal services available to them. However, there are reports of human rights and legal violations; these violations cause barriers in the accessing HIV services.

Policy questions

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at scale at the national level

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

No

Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings?

Complaints procedure

Mechanisms of redress

Procedures or systems to protect and respect patient privacy or confidentiality

Does your country have any of the following barriers to accessing accountability mechanisms present?

Mechanisms do not function

Commitment 10

Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Progress summary

HIV programming is integrated in the health system in varying degrees. The TB/HIV collaboration has commenced but not fully integrated. HIV is integrated into some SRH and youth centres. Sierra Leone has no policy on screening for cervical cancer for HIV positive women. However, small scale testing for positive women is been supported by one implementing partner. There is also no policy on screening for both hepatitis B and C for people living with HIV. Greater involvement from non-health facets of the response is desired.

Policy questions

Is cervical cancer screening and treatment for women living with HIV recommended in:

a. The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)

No

b. The national strategic plan governing the AIDS response

No

c. National HIV-treatment guidelines

No

What coinfection policies are in place in the country for adults, adolescents and children?

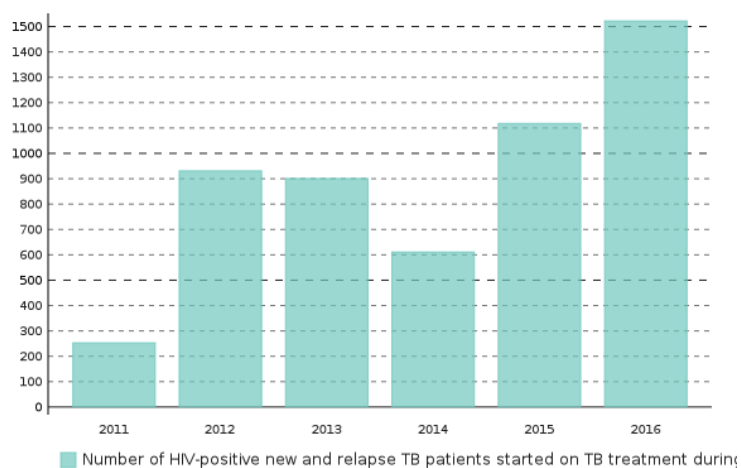
Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV

Intensified TB case finding among people living with HIV

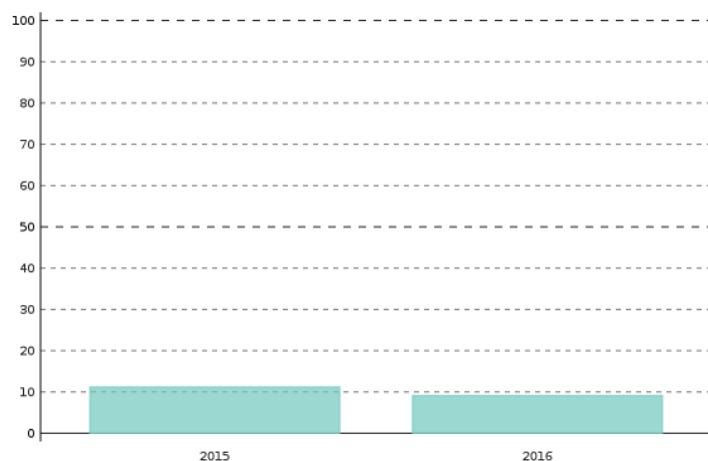
TB infection control in HIV health-care settings

Co-trimoxazole prophylaxis

10.1 Co-managing TB and HIV treatment, Sierra Leone (2011-2016)



10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Sierra Leone (2015-2016)



10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Sierra Leone (2015-2016)

