

2020-2021 | WESTERN AND CENTRAL AFRICA

COTE D'IVOIRE

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN WOMEN, ILO, UNESCO, WHO, WORLD BANK, UNAIDS SECRETARIAT, FAO, IOM

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team in Côte d'Ivoire made valuable contributions to reinforce the nation's progress towards the national and global AIDS targets. These included the assessment and revision of HIV testing and counselling policies, guidelines, and services to ensure their alignment with international recommendations and improve access to these services among vulnerable and key populations. Differentiated service delivery approaches, such as multimonth dispensing (MMD) of antiretroviral medicines, community-led testing and treatment services in the workplace, and economic and nutrition support were provided for people living with HIV and other vulnerable populations to ensure continuity of HIV testing and treatment services and improve treatment adherence and health outcomes among these groups. The Joint Team successfully advocated for the adoption and rollout of Dolutegravir-based HIV treatment for children living with HIV and supported the transitioning of 98% of the eligible children living with HIV on the new first-line regimen. The U-Test project and other community-led initiatives reached thousands of adolescent and young people with combination HIV prevention, including testing and pre-exposure prophylaxis (PrEP) services while over a million young people received health information and life skills via a mobile app and social media platforms. The Stigma Index 2.0 study showed enduring stigma and discrimination towards people living with HIV and key populations in health facilities and communities. Under the United Nations Sustainable Development Cooperation Framework 2022-2025, the Joint Team continued to address stigma, discrimination, gender inequality and gender-based violence to support the HIV response in Côte d'Ivoire.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

The Joint Team in collaboration with the African Network of Health Education supported the implementation of Hello Ado—an educational and interactive mobile app that seeks to improve the knowledge of adolescents and young people on sexual and reproductive health (SRH), including HIV. Financial and technical support was also provided for the dissemination of 300 health education and healthy living training manuals to trainers at the Ministry of National Education and nongovernmental organization. These efforts enabled to reach close to 1.3 million adolescents and young people with life skills through Hello Ado and comprehensive sexuality education.

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As a result of technical and financial support, 106 125 adolescents and young people accessed integrated sexual and reproductive health (SRH), HIV, and family planning services in school and university health centres during community outreach and service delivery activities, including the *Jeunesse saine*, *protège toi* caravans initiative organized in 2021.

The Joint Team supported the implementation of the U-Test project that seeks to scale up access to combination HIV prevention services, including HIV self-testing and pre-exposure prophylaxis (PrEP) among adolescents and young people from key populations via digital tools. In 2020-2021, the project enabled 37 699 adolescents and young people from key populations to access information on HIV prevention, of whom 480 were enrolled on PrEP and the 59 people who tested positive for HIV using the self-testing kits were enrolled on antiretroviral treatment. Additionally, 157 adolescents and young peer educators were trained on combination HIV prevention, and 15 participants were trained as trainers using digital tools.

Technical support was provided for a study on the feasibility of converting drop-in centres into autonomous structures that provide comprehensive HIV prevention, care, and treatment services for key populations. Hence, the evaluation was conducted in eight drop-in centres to assess their capacity in delivering these services, including dispensing of antiretroviral treatment. The assessment showed that while seven out of the eight drop-in centres offered different HIV service packages, they did not have integrated community-based ART distribution. Additionally, two centres were not accredited as HIV care centres. Following this feasibility study, the Joint Team is supporting introduction of community-based ART distribution in the eight drop-in centres, including the accreditation process.

Technical and financial assistance was afforded to several initiatives aimed at scaling up access to HIV and other essential health services and reducing the vulnerability of key populations. For instance, the *Hope Project* was supported to expand care and immunoglobulin A (IgA) services to minimize the risk of HIV infection among transgender persons and men who have sex with men in the Yopougon East district in Abidjan. The project also helped to sensitize 82 transgender persons and men who have sex with men aged 15-24 years on HIV, sexually transmitted infections (STIs), and gender-based violence; and reach 146 people with HTC service, of whom 11 tested HIV positive and were linked to treatment services.

PREVENTION OF MOTHER-TO-CHILD TRANSMISSION AND PAEDIATRIC TREATMENT

The Government was supported to develop technical standards and guidelines to strengthen prevention of mother-to-child transmission of HIV (PMTCT), and family planning services for pregnant and breastfeeding women living with HIV. Technical support was also provided to conduct a feasibility study on the implementation of a dual HIV/syphilis testing to scale up integrated services aimed at eliminating vertical transmission of these diseases. Findings will be used to inform the initiation of dual testing in the country.

In June 2021, the Joint Team facilitated the national multistakeholder consultation on paediatric HIV and tuberculosis that sought to increase demand for antiretroviral treatment services and further scale up equitable access to Dolutegravir-based treatment for children living with HIV.

Thanks to further intense advocacy and technical assistance, the Ministry of Health adopted and initiated the implementation of Dolutegravir-based (10mg for children weighing under 20kgs) first line treatment regimen among children living with HIV in Côte d'Ivoire. By the end of 2021, an estimated 98% of the eligible children living with HIV were enrolled on Dolutegravir-based treatment (data from PEPFAR COP22). The Ministry of Health was further supported with the procurement of 33 additional m-PIMA HIV-1/2 diagnostic machines to strengthen Point of Care HIV testing, early infant diagnosis, and viral load monitoring services.



HIV TESTING AND TREATMENT

Despite a steady increase in HIV testing coverage—from 74% in 2019 to 80% in 2021 (GAM data)—Côte d'Ivoire ought to accelerate its efforts to achieve the 90% target for the proportion of people living with HIV who know their status. Building on the gains achieved so far, the Joint Team provided technical and financial assistance for a rapid assessment of HIV testing and counselling services in the country. The assessment underscored the need to adopt a three-test algorithm (three rapid diagnostic tests) to confirm HIV diagnosis and integration of dual HIV/syphilis testing in antenatal care services to quicken the pace and improve access to quality HIV testing services. Based on these recommendations, the Joint Team further supported the revision of the national HIV testing policies and guidelines and its alignment with latest recommendations of the World Health Organization (WHO). Technical assistance was also provided to update the national HIV self-testing guidelines aimed at improving access to testing services among vulnerable and key populations.

To ensure the continuity of HIV services during the COVID-19 pandemic, the Joint Team supported the review of the national antiretroviral treatment guidelines, which resulted in the development and rollout of the HIV differentiated service delivery models and operational plan 2021-2023, encompassing a 3-6 months multimonth dispensing (MMD) of antiretroviral therapy. By the end of 2021, an estimated 86% of people living with HIV in Côte d'Ivoire were accessing treatment through MMD, of whom 43% received their treatment through a 6-month MMD.

The Joint Team also provided technical support for the documentation and dissemination of best practices in matters of differentiated HIV care and treatment service delivery in the Aboisso, Agboville, Sinfra and Yamoussoukro health districts to guide and scale up differentiated services throughout the country. Furthermore, the Joint Team facilitated the adoption and dissemination of the World Health Organization's HIV treatment guidelines to optimize treatment services among children, adolescents and adults living with HIV. The guideline allowed the Government to accelerate implementation of most optimal antiretroviral treatment regimens for adults and children across the country.

To improve HIV services in the workplace, the Joint Team supported the development of a national profile and policy document for HIV response in the workplace 2022-2025; and an assessment of the impact of the COVID-19 pandemic on workers living with HIV in the informal sector in Côte d'Ivoire. The assessment highlighted the precarity of their situation and their marginalization, and the need to strengthen social dialogue to prevent violations of the labour code, strengthen the monitoring of workers living with HIV to prevent treatment interruptions, and provide psychological support in the face of isolation and loss of work. The assessment also made recommendations on how policies can address these needs to strengthen workplace HIV services.

The Joint Team further supported the implementation of community outreach initiatives in the public and private sectors reaching 6789 (76% male) workers with HIV testing, care, and treatment information and services. The 23 people who tested positive for HIV were linked to treatment services.

SOCIAL PROTECTION

In partnership with civil society, the Joint Team also conducted two rapid surveys on the needs of people living with HIV and key populations during the COVID-19 pandemic. The studies revealed several challenges, including economic and food insecurity. The Joint Team provided cash transfers, food baskets and COVID-19 protection kits to alleviate some of these challenges among vulnerable people living with HIV.

In collaboration with the Agency for Employment Research and Promotion (AGEPE), the Joint Team provided capacity building on business creation for 25 transgender people and men who have sex with men to empower them to establish their own business and reduce their vulnerability to STIs and violence.



HUMAN RIGHTS, STIGMA, AND GENDER INEQUALITY

Technical and financial assistance was provided to conduct the Stigma Index 2.0 study that showed persistent stigma and discrimination against people living with HIV and key populations within communities and in healthcare settings. The final report is scheduled for publication in 2022.

Under the Inclusive Governance Initiative (IGI), which was initiated by the Joint Team, a baseline study of the rights and inclusion of people from the lesbian, gay, bisexual, transgender, and intersex (LGBTI) community was rolled out in Côte d'Ivoire. Conducted in partnership with LGBTI communities, the Ministry of Justice, the Ministry of Health, the Ministry of Defence and other partners, the study further mapped decision makers who support the rights and inclusion of the LGBTI community; and outlined strategic options and opportunities to address sexual and gender diversity issues in the development and implementation of national laws, policies, and programmes. Preliminary findings of the study indicate that Côte d'Ivoire is an open country on the issue of LGBTI inclusion with no punitive law. It also highlighted sensitivity and commitment among parliamentarians on issues affecting the LGBTI community. However, there is no data to measure this inclusiveness at the national level and the main civil society actors have limited capacity to implement productive advocacy efforts.

The Joint Team also supported a gender assessment to identify existing barriers impeding uptake and access to gender sensitive HIV services among women in Côte d'Ivoire. The study highlighted HIV-related vulnerabilities from a gender perspective and revisited the structural challenges at the societal level that exacerbate gender inequalities and fuel HIV vulnerability, including harmful sociocultural norms and gender imbalances in intimate relationships. It also underscored the need to create a more supportive environment for the delivery of services tailored to address the needs of women.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team made significant contributions for the inclusion of HIV in three outcome areas outlined in Côte d'Ivoire's United Nations Sustainable Development Cooperation Framework (UNSDCF) 2021-2025. Aiming to improve access to social protection and healthcare services, promote gender equality and women's empowerment, and create a transparent, safe, and equitable environment for all, these outcomes will directly contribute to reaching the Sustainable Development Goals (SDGs) 3 (Good Health and Wellbeing), 5 (Gender Equality), 8 (Economic Growth), 10 (Reduced Inequalities) and 17 (Partnerships).

In collaboration with the Ivorian Centre for Economic and Social Research (CIRES), the Joint Team conducted a participatory community situation assessment in Bounkani and Tchologo—border regions in the northeast of the country that are most impacted by security threats. The assessment revealed barriers in the access to basic social and health services, including HIV-related services. These results were used to guide joint Government and the United Nations programmes aimed at accelerating progress towards the SDGs in these two regions.

CHALLENGES AND LESSONS LEARNED

Insufficient implementation of HIV self-testing and PrEP services targeting vulnerable and key populations, including adolescents and young people remain a challenge in the national HIV response. Lessons learned highlight the necessity to align the national PrEP guidelines with global recommendations to strengthen these services in the country. The lack of HIV prevention and care services tailored to the most vulnerable adolescents and young people also continued to challenge the HIV response in Côte d'Ivoire. Experiences underscore the need to implement adolescent- and youth-friendly services based on clear strategic directions and coordination with all stakeholders.

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The new Global AIDS Strategy 2021-2026 puts the SDGs at the heart of the global and national HIV responses. It also provides an opportunity for greater cooperation and intensified joint HIV programming through key thematic strategic initiatives. Hence, there is a need to strengthen synergy and collaboration between all partners, including government and nongovernmental institutions, and civil society working on HIV to ensure efficient use of resources and optimize the impact of joint HIV programmes in Côte d'Ivoire.



Report available on the UNAIDS Results and Transparency Portal

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