

UNAIDS 2024

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# Results in Western and Central Africa

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**2022-2023 Regional report**



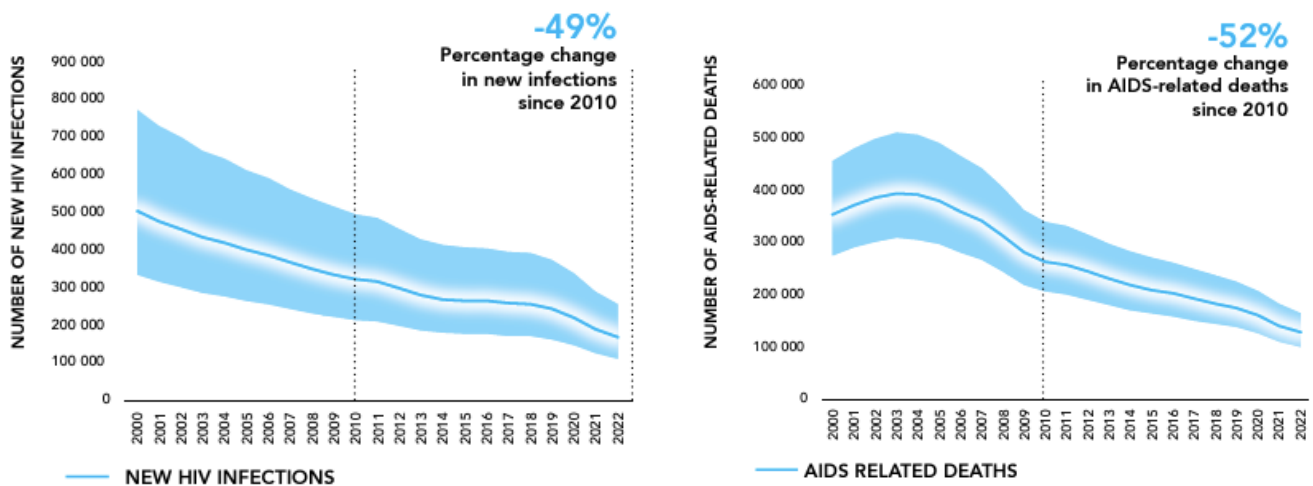
## Results in Western and central Africa

**23 countries with Joint UN Plans** aligned to national priorities and the Global AIDS Strategy

Total expenditures and encumbrances<sup>1</sup> of the Joint Programme (Cosponsors and Secretariat) in 2022–2023: **US\$ 162 million**

### Progress towards saving lives

#### Number of new HIV infections and AIDS-related deaths, western and central Africa, 2000–2022



Source: UNAIDS epidemiological estimates, 2023 (<https://aidsinfo.unaids.org/>).

### Selected UBRAF indicators progress in 2023

- **20** countries received support to scale up combination HIV prevention programmes.
- **20** countries have a national plan for the elimination of vertical transmission of HIV and implement the “treat-all” policy for pregnant and breastfeeding women.
- **20** countries received support for the incorporation and expansion of community-led HIV responses.
- **15** countries received support to remove or amend punitive laws and policies, and/or develop protective ones affecting the HIV response.
- **12** countries received policy, advocacy or technical support to implement gender-responsive HIV prevention, treatment, care and support services free of gender-based discrimination and violence.
- **11** countries have developed and report implementation of measures advancing full and sustainable HIV financing.
- **12** countries implement interventions/services for key populations in humanitarian settings.

<sup>1</sup> For more information on budget implementation breakdown, please see the executive summary of the 2022–2023 Performance Monitoring Report.

## Overview

*The Joint Programme's support in western and central Africa continued to sustain the expansion of HIV prevention, testing and treatment services among vulnerable and key populations across the region. High-impact HIV prevention interventions, capacity building and community empowerment were implemented in several countries.*

*More than eight million adolescents and young people accessed HIV prevention and self-testing information and services through an initiative backed by the use of artificial intelligence and social media. Access to CSE improved in 11 countries and several countries received support for inclusion of people living with disabilities in integrated HIV and SRH programmes. Adolescents and young people living with HIV were empowered to participate in community-led service delivery and advocate for inclusive and equitable HIV services, while health-care and social protection programmes were expanded to include people living with or affected by HIV, with technical and financial support from the Joint Programme.*

*Notable results have also been achieved in providing essential services in humanitarian settings, including to refugees and migrant people living with HIV. Finally, national HIV responses in the region are now stronger and more sustainable thanks to the Joint Programme's support for evidence generation, community-led responses, including advocacy and leadership, and effective resource mobilization.*

## **UBRAF Outcome 1: People living with, at risk of and affected by HIV obtain equitable access and reap equitable benefits from HIV prevention, treatment, care and support services**

During the 2022–2023 biennium, the Joint Programme in western and central Africa made significant contributions to the scale-up of targeted, high-impact HIV prevention programmes, a major priority in the region. The Central African Republic and Congo reaffirmed their commitment to reduce new HIV infections and joined the other 35 countries globally (five in the region) that benefit from guidance, tools, mentoring, peer learning opportunities and other technical support from the Global HIV Prevention Coalition. In addition, Congo, Côte d'Ivoire, Ghana and Nigeria assessed the effectiveness of their HIV prevention programmes, particularly for condom and key population interventions, to enhance high-impact prevention interventions (UNAIDS Secretariat).

The pilot "U-Test" strategy, an innovative artificial intelligence and social media initiative, increased access to HIV self-testing, PrEP and referral services among vulnerable adolescents and young people in Cameroon, Côte d'Ivoire and Nigeria. Over 8.3 million adolescents and young people accessed these services online or in-person and half of them reported having received HIV testing, including HIV self-testing through the initiative. Results from the "U-Test" strategy were presented at the 22nd International Conference on AIDS and STIs in Africa (ICASA) in Zimbabwe, showcasing the important role digital technology and artificial intelligence can play in ending AIDS (UNICEF).

Ministers of education and health from 25 countries endorsed the WCA Commitment for Educated, Healthy and Empowered Adolescents and Young People to strengthen prevention of HIV, early and unintended pregnancy and gender-based violence and achieve global targets on each of those related priorities (UNFPA, UNESCO, WHO, UNAIDS Secretariat). As part of implementation of the WCA Commitment and the Education Plus initiative, over 22 500 trained educators in Burkina Faso, Côte d'Ivoire, Mali and Senegal reached around 500 000 students with HIV and school-related gender-based violence education, thereby helping

to create a safer environment for adolescent girls to complete their education and be protected from HIV. In addition, thanks to technical support and capacity building from the Joint Programme, more than 8.2 million school learners (over four million girls) received CSE education in 11 countries, as part of the “Our Rights, Our Lives, Our Future” programme (UNESCO). Twenty-three countries also received guidance in four languages to support inclusion of people living with disabilities in integrated HIV and SRH programmes (UNFPA).

Closing gaps for the prevention of vertical transmission of HIV and paediatric AIDS remains a high priority in the region. The Joint Programme continued to provide technical support and leverage strong political commitment for the Global Alliance to end AIDS in Children across the region, with Cameroon, Côte d’Ivoire, the Democratic Republic of the Congo and Nigeria developing and implementing their prioritized paediatric action plans. In all four countries, the dynamics of the Alliance and the prioritized action plans have served as the basis for solid and ambitious proposals in the Grant Cycle 7 requests to the Global Fund or in the PEPFAR proposals (UNICEF, UNAIDS Secretariat).

The Joint Programme also stimulated strong uptake and scale-up of paediatric and community-led differentiated service delivery in the region, directly benefiting at least 14 countries. Key initiatives included the adoption of national policies on differentiated service delivery in Chad and Sierra Leone, the piloting of community treatment in the Central African Republic and Chad, and the roll-out of index testing and linkage to treatment for children in Burkina Faso and Chad. For instance, catalytic support provided to the nongovernmental organization REGIPIV in Burkina Faso and close collaboration with the government and communities drove the expansion of child screening activities and monitoring of pregnant women in hard-to-reach areas (UNICEF, WHO). In Nigeria, the national network of women living with HIV reviewed and documented the impact of the country’s Mentor Mothers Initiative, which builds on peer-led support to empower pregnant women and mothers living with HIV through education and information and by improving their access to essential services and care. The review documented the critical role women living with HIV play in improving access to services in their communities, and mapped out current challenges and policy recommendations to address them going forward (UN Women).

## **UBRAF Outcome 2: Communities of people living with, at risk of and affected by HIV, including key populations, women and young people, are empowered, enabled and effectively resourced to lead HIV service delivery, advocate for and enjoy their right to health, and social and structural drivers of the HIV epidemic are removed.**

A collaboration with the Civil Society Institute for HIV and Health in West and Central Africa, which convenes 150 civil society organizations from 21 countries, improved the capacity of civil society organizations, including networks of people living with HIV and key populations, for effective coordination of community-led responses in West and central Africa. More than one third of countries in the region now have a national civil society platform supported by the Institute, which responds at large scale to the capacity development needs of civil society and community-led organizations, using tailored and up-to-date training resources. A total of 68 representatives of national AIDS programmes, research institutes and technical and financial partners across 20 countries enhanced their capacities to produce quality key population size estimates and over 60 civil society experts are now capable of providing quality advice on HIV programmes targeting key populations (UNAIDS Secretariat).

In partnership with the Civil Society Institute for HIV and Health and other regional actors, the 2023 Ghana Summit and related civil society country dialogues engaged over 200 stakeholders from 20 countries and fostered commitment to recognize and strengthen

community leadership for paediatric HIV. The African Network of People Living with HIV (Central African subregion) is now more visible and empowered to actively participate in the national and regional HIV responses in nine central African countries, following technical and financial support provided for capacity analysis, revised governance and development of a new action plan (UNAIDS Secretariat).

During the 2022–2023 biennium, women living with HIV engaged with ministries of gender equality and women’s affairs for the development of new national action plans on gender equality and/or ending violence against women that include actions responding to the intersections of violence against women and HIV. In Cameroon, the Ministry of Women Empowerment and Family successfully finalized the women and families sectoral plan to address HIV and STIs, which includes specific targets that are focused on the needs of women and girls in the context of HIV (UN Women).

High-level advocacy, combined with effective collaboration with civil society partners including the Civil Society Institute for HIV and Health in West and Central Africa, Enda Santé, Alliance Côte d'Ivoire and Coalition PLUS, enabled the development of a three-year regional project to strengthen community-led responses to stigma, discrimination and gender-based violence in health-care settings and drive legal reforms in six countries. Over US\$ 2 million was mobilized for the first year of implementation, which includes ensuring access to inclusive and rights-based HIV services among vulnerable and key populations, thanks to advocacy and technical support from the Joint Programme (UNAIDS Secretariat).

Technical support from the Joint Programme also ensured a strong focus on human rights, gender, stigma and discrimination facing people living with HIV and people from key populations in health-care facilities in National Strategic Plans and Global Fund Cycle 7 applications in 10 countries (UNDP, WHO, UNAIDS Secretariat). Evidence generated by a gender assessment in the region will further inform further action to improve more equitable and rights-based HIV responses (UNAIDS Secretariat).

The Joint Programme’s catalytic support during the 2022–2023 biennium continued to advance the meaningful engagement of young people in the HIV response. The region-wide campaign “Education Saves Lives” reached 15 million people in 2022 and nine million people in 2023 with SRHR information for adolescents and young people. The campaign included the active participation of the “Commitment Youth Community” and young people, including through sharing experiences of living with HIV, early parenthood or sexual and gender-based violence (UNFPA, UNESCO, WHO, UNAIDS Secretariat). In Cameroon, a communication and awareness-raising campaign on HIV prevention, the 95–95–95 targets, gender-based violence and the promotion of human rights reached more than 2000 young people in the city capital (UNDP).

### **Empowering adolescents and young people living with HIV**

The creation of the West and Central Africa Network of Adolescents and Young People Living with HIV marked a significant achievement for the collaborative efforts of youth communities, UNICEF and UNAIDS Secretariat to address the challenges faced by young people living with HIV in the region.

Following its first general assembly in Cameroon, the Network improved engagement and collaboration of community-based organizations and peer groups in eight countries. This has been instrumental in promoting the development and implementation of effective strategies tailored to the needs of youth living with and affected by HIV, showcasing a successful model of community empowerment for the AIDS response and beyond.

### **UBRAF Outcome 3: Increased availability of effective, equitable and sustainable systems to achieve and maintain the 2025 targets, through robust financing for national budgets and community responses, greater service integration for people-centred delivery, expanded HIV service access in emergency settings, and effective pandemic preparedness and responses.**

Equitable access to health-care and social protection services was scaled up for people living or affected by HIV in six countries as a result of technical and financial support from the Joint Programme. In Benin and Chad, health and social service professionals and peer educators improved their knowledge of delivering nutrition education and monitoring, HIV prevention and physiological support services to people living with HIV and other vulnerable populations, including orphans and vulnerable children. In Cameroon, malnourished people living with HIV enrolled on treatment benefited from revamped nutrition programmes, including food distribution, which led to improved treatment adherence. In addition, treatment adherence and health outcomes among people living with HIV improved in Guinea, Mali and Sierra Leone as a result of food assistance and education programmes that were provided in partnership with national health authorities (WFP).

Social protection programmes and integrated HIV and nutrition services improved the health outcomes and well-being of people living with HIV and vulnerable populations in emergency settings in 12 countries, thanks to the Joint Programme's support. Health-care workers, community workers and networks of people living with HIV strengthened their capacities to deliver HIV and nutrition services including assessment and counselling in nine countries. Social protection programmes in the region were also assessed to ensure their sensitivity to HIV and revitalize regional coordination in emergencies. In addition, seven countries developed pandemic preparedness and response strategies that draw on lessons from the COVID-19 pandemic, with a focus on community engagement to ensure continuity of essential health-care and support services during health emergencies (WFP).

Access to HIV and other essential health services and information among refugees, asylum seekers and internally displaced populations was improved in several countries following substantial support and advocacy from the Joint Programme. For example, all refugees residing in Burkina Faso are now included in the national health-care system following implementation of the "Inclusion and Integration Strategy." In Cameroon, over 1100 people living with HIV in refugee camps and sites were enrolled on antiretroviral therapy in 2023 and 74% of them had undetectable viral load. In Chad, almost 240 000 adolescent and young refugees in South and Lake camps and key populations in host communities, including sex workers, were sensitized on HIV prevention and treatment services (UNHCR).

Capacities to generate new strategic evidence are stronger thanks to the Joint Programme. For example, a regional capacity-building workshop improved knowledge of data collection and analysis tools and indicators among 46 strategic information experts from 19 countries to strengthen HIV programmes and funding requests (UNICEF, WHO, UNAIDS Secretariat). A desk review of SRH, HIV and other STIs in humanitarian settings examined risk factors and access to health-care services, strengthening evidence for a tailored HIV response in eight fragile countries (UNFPA).

The Joint Programme also supported progress towards more sustainable health financing to improve availability of and access to people-centred services in countries. For example, a pivotal 2023 conference co-organized by the Joint Programme, amplified civil society's appeal for equitable financing and meaningful community involvement in driving sustainable health outcomes. During the event, 60 representatives of civil society organizations from

western and central Africa improved their capacities for advocacy and leadership for HIV and health financing (UNAIDS Secretariat). The Joint Programme also provided critical guidance, and coordinated technical support and facilitation to 19 countries in developing evidence-informed and prioritized funding requests to the Global Fund Grant Cycle 7, successfully mobilizing over US\$ 2.7 million for the 2023–2025 period.



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