Total Joint Programme expenditure in 2022-2023: US\$ 1 884 635



In Peru, the Joint Programme continued to support the scale-up of combination HIV prevention and testing services for kev populations and young people. The country joined the Global Prevention Coalition and developed a national HIV prevention roadmap to achieve its 2025 targets following advocacy and technical support from the Joint Programme. Capacity building and technical support from the Joint Programme further strengthened monitoring of and data collection on HIV prevention services among key populations (UNAIDS Secretariat). Following the implementation of the new pre-exposure prophylaxis (PrEP) policy, 1197 men who have sex with men and transgender women were enrolled on PrEP in 87 primary healthcare centres by the end of December 2023. In Ucayali region, over 7500 people, including adolescents and pregnant women from five indigenous communities were sensitized on HIV prevention, with a focus on preventing vertical transmission and new HIV infections among adolescents via intercultural campaigns implemented in partnership with communities (UNICEF). Moreover, 1245 adolescents, particularly from Afro-Peruvian and Amazonian communities received out-of-school comprehensive sexuality education, thanks to the support from the Joint Programme (UNFPA). In 2023, the Ministry of Health approved new standards for evaluating quality facility-based health services, which included HIV and sexually transmitted infection (STI) screening for adolescents as a criterion in line with the Ministerial Resolution 882/2020, which allows HIV testing without parental/guardian consent (UNICEF).

The decentralization of antiretroviral treatment was expanded to 23 healthcare establishments and six hospitals with significant support from the Joint Programme. As a result, at least one

healthcare establishment in each province is currently providing treatment services and up to 10% of people living with HIV enrolled on treatment in specialized hospitals have been transferred to primary healthcare centres (WHO). In addition, 220 primary and lay healthcare providers, including traditional midwives and shamans improved their capacity for undertaking HIV surveillance and delivering hepatitis, STI, tuberculosis, prevention of vertical transmission of HIV and adolescent health services (UNICEF, WHO).

The Stigma Index 2.0 study revealed that at least 50% of people living with HIV experienced some form of stigma and discrimination, affecting their emotions and decisions. The study also showered that this delayed or limited their search for medical care and caused social isolation and negative impacts on their physical and emotional health, due to the violation of their rights. These results will be used to further address stigma and discrimination in healthcare and justice systems and communities (UNAIDS Secretariat). In addition, in support of the Aurora programme, Peru's national programme for the prevention and eradication of violence against women, 141 sexual and reproductive health (SRH) service providers improved their capacity to address gender-based violence and promote positive masculinity. Mobile units provided more than 500 adolescents and women from the Awajun community with life-saving gender-based violence services in Condorcanqui province. As part of the Saving Lives project, 506 adolescents and women, including survivors of violence also accessed HIV and other healthcare services, legal assistance and psychosocial support in Lambayeque, Piura and Tumbes cities affected by floods (UNFPA).

KEY RESULTS

- Peru joined the Global Prevention Coalition in 2023 and scaled up combination HIV prevention services for young people, key populations and pregnant women, including from indigenous communities.
- HIV treatment and prevention of vertical transmission services are strengthened following decentralization, capacity building of healthcare providers and implementation of new standards.
- A newly approved bill enables thousands of migrants and refugees living with HIV and tuberculosis to benefit from the national health insurance system.
- More than 500 vulnerable people, including people living with HIV and sex workers received cash transfers to reduce their food insecurity and vulnerability to HIV.

Joint UN Team on AIDS

UNHCR UNESCO UNICEF WHO

WFP UNAIDS Secretariat

UNDP IOM

UNFPA

Contributing to the UNSDCF and SDGs







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Following advocacy and technical support from the Joint Programme, the Congress is ready to approve into law a bill which will allow 8500 migrants and refugees living with HIV and tuberculosis to access health services through the national health insurance system (UNHCR, WHO, UNAIDS Secretariat, IOM). In addition, 17 community-based organizations of people living with HIV and key populations, including migrants are now legally registered in Peru, thanks to advice from legal experts and technical support from the Joint Programme (UNAIDS Secretariat, IOM).

As part of the Nutritional and Food Assistance in Emergency Settings Project led by the Joint Programme in collaboration with community-based and civil society organizations, 88 sex workers and their family members in Lima and Callao cities received close to US\$20 000 worth of cash transfers to cover food expenses and other basic needs in response to the COVID-19 pandemic. In Lima and Callao, 454 migrants and host families living with or affected by HIV also received cash transfers improving their food security (WFP, UNAIDS Secretariat). In 2023, over 200 people living with HIV received financial assistance to access treatment services in partnership with the Red Cross and PROSA, while 100 women and people from the LGBTQI+ communities living with HIV were empowered through legal and entrepreneurship training led in collaboration with the community-based organization Mujeres Positivas (UNHCR).

As part of the Soy Clave project, the Joint Programme supported an assessment of the national HIV response and community-led services, which was followed by a dialogue that brought together more than 30 community leaders to discuss the scale-up and sustainability of the national HIV response (WHO, UNAIDS Secretariat). An advocacy plan for social contracting was also developed to strengthen sustainability of community-led HIV responses through technical assistance from the Joint Programme and collaboration with community-based organizations (UNAIDS Secretariat). In addition, the Ministry of Health developed contingency plans to address declining government budget for HIV, particularly HIV prevention programmes for key populations following intensive advocacy by civil society organizations led by GIVAR—the antiretroviral medicines supply surveillance group in Peru (UNAIDS Secretariat).