

2020 | LATIN AMERICA AND THE CARIBBEAN

### **BOLIVIA**

Report prepared by the Joint UN Team on AIDS

### PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
By the end of 2021, the access to services for key populations is increased by 50%, with emphasis on combined prevention services and decentralization of HIV services.	SLOW PROGRESS	A steering committee was established to assess and monitor HIV and other vulnerable populations in prison, including government and other stakeholders, aiming at harm reduction and comprehensive care for vulnerable people, including people living with HIV/TB in prisons. A PrEP pilot is being designed for implementation in Santa Cruz de la Sierra and Cochabamba as part of the combined prevention package; and a self-testing pilot programme is in design phase.
By 2021, adolescent pregnancy has been reduced by 3% compared to 13.5% in 2018, through STIs and HIV prevention, gender-based violence and comprehensive health services.	NO PROGRESS	Nine contraceptive delivery campaigns have been developed to improve access to long-term methods, combined with condom delivery, reaching 1719 women.
By the end of 2021, key populations and vulnerable populations have access to health services without stigma and discrimination in the most prevalent areas of the country (Cochabamba, Santa Cruz and La Paz - El Alto).	NO PROGRESS	Guidance on stigma and discrimination was developed for people living with HIV and the LGBTI community. 500 people living with HIV were informed on their human rights using the REDBOL manifesto.

### **JOINT TEAM**

UNHCR, UNICEF, UNDP, UNFPA, UNODC, UN WOMEN, WHO-PAHO, UNAIDS SECRETARIAT, UNRCO



### JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

Strategic information and combination prevention services have been strengthened in Bolivia in 2020, through pilots for new modalities in the country, such as pre-exposure prophylaxis (PrEP) and self-testing programmes, and technical assistance to support increased data collection for an evidence-based response. Prevention services have also been expanded through contraceptive campaigns in nine capital cities in Bolivia; in particular, young people have been targeted to receive comprehensive sexuality education and health services to reduce unintended pregnancy and the risk of HIV/STIs. Community engagement, especially in the Joint Team's response to the intersecting HIV and COVID-19 pandemics, has helped to protect ART adherence and respond to nutrition needs of vulnerable groups. South-South cooperation has also been an important factor in facilitating the sharing of equipment and medicines within the region during the COVID-19 pandemic in 2020.

### HIV SERVICES FOR KEY POPULATIONS TECHNICAL SUPPORT; CAPACITY BUILDING

The STI/HIV monitoring and evaluation system, along with prevention and care cascades in key population groups, were strengthened through designing, validating and piloting a self-survey to report sexual orientation and gender identity, in order to reduce the underreporting of key populations in notification system. Expected in 2021, the full implementation of this survey was prepared through virtual sessions and participation from NGOs working in HIV, and about 20 members of national and local AIDS authorities. HIV cascades from 2019 and 2017 were also analysed to adjust the prevention services to the needs of key populations and to increase coverage of testing.

Technical assistance was provided to follow up the individualized registry of HIV tests in key populations in the departmental/regional centres. This assistance supported the information and reference surveillance monitoring of the HIV/STI-related registration of tested people and data analysis, data quality control, and training of about 20 people in departmental and regional centres to implement a monitoring and evaluation (M&E) system.

# COMPREHENSIVE SERVICES FOR YOUNG PEOPLE TECHNICAL SUPPORT; CAPACITY BUILDING

Contraceptive campaigns have been conducted, regularly delivering condoms in nine cities (in La Paz, El Alto, Tarija, Sucre, Cobija, Trinidad, Cochabamba, Santa Cruz and Potosí), in coordination with the sexual and reproductive health (SRH) component of the Ministry of Health and with the Departmental Health Services. Estimates for this intervention are 6665 couple years of protection, and the subsequent reduction of unintended pregnancies, prevention of abortions and prevention of maternal and neonatal deaths. 160 400 male condoms, 2000 female condoms, 6000 subdermal implants and 2000 intra-uterine devices were provided to first, second and third level healthcare facilities, to reduce the risk of shortages and guaranteeing contraceptive access, reaching 1719 women of reproductive age by the end of 2020, focusing mainly on adolescent and young women.

Over 250 adolescents were mobilized to disseminate key information on HIV prevention, pregnancy and violence among adolescents in the Health Networks of Cobija, San Borja, Riberalta, Villa Tunari, and over 35 adolescents were empowered to develop HIV prevention and unwanted pregnancy interventions within their peer group in indigenous communities in Cochabamba.



## HUMAN RIGHTS, STIGMA AND DISCRIMINATION POLICY ADVICE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

In partnership with the REDBOL, the national network of people living with HIV, virtual orientation sessions were organized for people living with HIV and the LGBTI community, providing guidance and information on issues of SRH, violence, discrimination, stigma, rights, pregnancy and contraception; eight sessions were conducted, reaching an average of 80 participants per session. Additionally, the Joint Team provided financial and technical support to reach 500 people living with HIV through the REDBOL manifesto, informing them about their human rights in the context of COVID-19. 18 civil society press releases were published highlighting the difficulties of people living with HIV during the lockdowns, for example in accessing ART, nutritional needs, and gender-based violence.

#### **CONTRIBUTION TO THE COVID-19 RESPONSE**

In partnership with community-based organizations, a team of 25 peer educators and three psychologists provided monthly psycho-social support on ART adherence for over 300 people living with HIV during COVID-19. 1024 people living with HIV were reached with prevention information, and five audios with testimonies of people living with HIV who overcame COVID-19 infections were shared on social networks of associations of people living with HIV.

The Joint Team supported the development of information materials on nutrition that were then distributed by CSOs in different cities, including La Paz and El Alto. Dissemination was accompanied by training sessions for individuals and health services, towards providing people living with HIV with permanent access to adequate information on nutrition and support their treatment; a total of 747 people attended the face-to-face or virtual classes. Food vouchers were also distributed to participants, along with general messaging on COVID-19 prevention.

With an emergency investment of US\$ 920 000 from the Joint Team, personal protective equipment (PPE) and information materials on COVID-19 prevention were provided to 55 health services in the nine departments, covering the protection of 800 health workers and thereby guaranteeing the continuity of essential services for SRH, maternal health, care for survivors of sexual violence, HIV care and prevention.

Technical assistance from the Joint Team resulted in a communications platform being permanently established between three national aids programmes (Bolivia, Ecuador and Peru) to exchange information related to stock outs and facilitate agreements to avoid interruption to testing and treatment. Regional south-south cooperation and real time information-sharing were also facilitated among the national AIDS programmes of Peru, Ecuador, Bolivia and Brazil, exchanging, procuring and donating ARVs, HIV and viral load tests.

### **CONTRIBUTION TO THE INTEGRATED SDG AGENDA**

Through its work on social protection and inclusion of vulnerable populations, the Joint Team is directly contributing to the implementation to the 2018-2022 United Nations Development and Assistance Framework (UNDAF) for Bolivia, under the 'leaving no one behind' principle, in which the HIV work is integrated. A strong emphasis on the delivery of SRH information and services for adolescents and young people is contributing to the Result Group on equality and empowerment of women, adolescents and girls, in particular through ensuring access to contraceptives to prevent unintended pregnancies.

#### KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS **BOTTLENECKS** The COVID-19 pandemic became the core of Reinforce the pillars of HIV care cascade, the health system's activity in 2020, diverting through addressing access to ART for resources, and delaying/preventing prisoners, eliminating stigma and implementation of HIV activities. A decrease in discrimination in health services, intensifying HIV testing coverage, new enrolments in condom promotion under triple protection and treatment, and increasing abandonment of ARV promoting HIV prevention among young treatment are expected for all people living with people through ITC. HIV and key populations; sustainability and broadening the scope of intervention are threatened. Stigma and discrimination in health services Complete the self-survey protocol on sexual result in low coverage and underreporting of orientation and gender identity in partnership with the national AIDS programme, for key populations. implementation in HIV reference centres in Santa Cruz. Most recent IBBS show that around 60% of Provide support in developing a men who have sex with men used a condom in comprehensive strategy with the health sector their last sexual intercourse, and less than 50% on combination prevention, integrated into the when with a woman; this shows the need to areas of family planning and SRH, addressing strengthen condom use not only as a social, cultural and economic barriers beyond prevention strategy for HIV and STIs, but also an informational approach only, incorporating to prevent unwanted pregnancy. The the perspective of social determinants and the empowerment of women to use condoms empowerment of women and the LGBTI becomes crucial in a context in which they are population. more vulnerable in negotiating the use with their male partners. Legal barriers still need to be removed for Continue to advocate with the national adolescents to access HIV testing and authorities for the removal of barriers to HIV prevention without consent by parents or testing among adolescents.

Health care coverage for people who use drugs, and people living with HIV and/or TB in prison settings is very limited due to the lack of adequate infrastructure for care, the low economic resources for purchasing medicines and the lack of protocols for health services in prisons. There is also a lack of health workers in prisons, and the health network for referral, care and health coordination has further been affected by COVID-19 pandemic restrictions.

To support closing gaps in reaching the 95-95-

continuity of essential health services, including

those related to HIV prevention and testing,

95 targets, strategies that facilitate the

need to be developed or strengthened.

caregivers.

Support implementation of a project in prisons (as part of a wider programme from the Ministry of Justice) focused on ensuring comprehensive care for vulnerable people, including people living with HIV/TB in prisons, and aimed at reducing the gaps in access to HIV tests, ARV treatment and monitoring of viral load in persons deprived of liberty in prisons in La Paz.

Continue to prioritize interventions towards

supporting community-based activities and

highly vulnerable populations through

strengthening CSOs.



Report available on the UNAIDS Results and Transparency Portal

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