

# EGYPT

*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 2021, Egypt will reach 80%, 80% and 80% of the 90-90-90 testing and treatment targets.	<b>ON TRACK</b>	In 2020, 79% of people living with HIV know their status, and 56% of those who know their status are on antiretroviral treatment (ART) (GAM 2021). Despite the COVID-19 pandemic and related restriction measures, the screening services continued to be provided for key populations, and the adherence to treatment was increased by around 25% compared with the previous year; a higher estimated number of people living with HIV keep the overall share of people on ART relatively low.
By 2020, HIV prevention services are scaled up by 100% to reach at least 50% of key populations.	<b>ON TRACK</b>	Prevention services were scaled to more than 100% through expanding the prevention work, with governmental facilities providing harm reduction services for people who inject drugs and scaling up the needle and syringe distribution programme. In 2020, 6015 people from key populations were reached with prevention services, and out of them 2198 were tested for HIV. A total of 16 276 condoms and 21 432 syringes were distributed (GAM 2021). An additional 4000 people who inject drugs received counselling and testing services in rehabilitation centres (National AIDS Programme data).
By 2021, punitive laws and practices reduced by 70% and no more than 25% of people living with HIV reporting discriminatory practices.	<b>ON TRACK</b>	There are no specific laws that criminalize HIV transmission, however the intention to harm others is considered under the general law of criminalization. While no survey has been conducted, the reported cases of discriminatory practice are estimated to be very low by the National AIDS Programme, civil society organization and networks of people living with HIV.

<p>By 2021, Egypt's response is evidence-informed, aligned and funded to meet 2025 global targets.</p>	<p><b>ON TRACK</b></p>	<p>Advocacy has been successful for the continuation of the government's high-level commitment of more than US\$75 million for direct HIV services as treatment and care. The Joint Team supported two workshops for 26 representatives of nine UN agencies and 25 participants from six NGOs to mainstream HIV into their agency mandates and budgets.</p>
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## JOINT TEAM

UNHCR, UNICEF, UNDP, UNODC, UN WOMEN, WHO, UNAIDS SECRETARIAT, IOM

## JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

*Testing and treatment in ARV centres in Egypt were scaled up in 2020, through trainings and equipment provision, and progress to reduce vertical transmission was made through new national-level HIV/STI screening for pregnant women; prevention of mother-to-child transmission (PMTCT) has been considerably expanded in antenatal clinics, now covering 14 governorates in the country. The Joint Team has been actively engaged in delivering sexual and reproductive health (SRH) services and information, especially to women, as well as in addressing gender-based violence. People who inject drugs in Egypt are at greatest risk for new HIV infections, and this aspect of the HIV response has been tackled by the Joint Team through various means, including support for a national harm reduction project, provision of HIV testing in mental health hospitals, and increased support in addressing stigma and discrimination through awareness campaigns.*

### 90-90-90 TESTING AND TREATMENT

#### TECHNICAL SUPPORT; PARTNERSHIPS; CAPACITY BUILDING

Although voluntary counselling and testing (VCT) services were slightly disrupted due to COVID-19, the Joint Team supported the Ministry of Health and the National AIDS Programme (NAP) to provide HIV testing and treatment services by donating 1500 HIV rapid screening kits and 240 packages of HIV first line of treatment. NAP also received technical support to open new VCTs in 18 mental health hospitals for HIV and Hepatitis B/C testing, and to ensure continuous follow-up for people who inject drugs.

Medical and non-medical equipment was supplied to support four new VCT centres in prisons, including over 5000 doses of viral hepatitis B vaccine for at-risk adults. 900 HIV/Hepatitis B/C combination tests were supplied to seven other prisons to re-operationalize VCT centres, as well as more than 80 000 protective masks and gloves. The Joint Team's prisons project now covers around 27 000 male and female prisoners through established VCT centers, with continued capacity building of over 80 prison health staff. Through building capacity of prisons staff, procurement and delivery of ARVs were strengthened to ensure treatment adherence among prisoners; support was also provided to ensure their full linkage with the services from the Ministry of Health and Population after release.

To expand the pool of trained physicians able to handle HIV cases on a national scale, and to support the scaling up of ARV centres, 26 physicians from 13 governorates were trained on the updated clinical guidelines for enhanced HIV case management.

An HIV service-sustainability initiative for non-nationals is ensuring access to testing and treatment services for refugees/migrants. Working with a partnering NGO, the Ministry of Health and Population, and the NAP, HIV testing services were delivered to 723 refugees and asylum seekers (553 female and 170 male), of whom 293 people were found positive and put on ART (3 girls, 7 boys, 152 women and 131 men).

### **PMTCT COVERAGE TECHNICAL SUPPORT**

The Ministry of Health and Population received technical support for a national HIV, hepatitis B and syphilis screening campaign for pregnant women, supporting the scale-up of eMTCT to antenatal clinics, reaching a total of 4750 primary health care centres (PHCs). Training workshops provided to antenatal care staff on hepatitis B, HIV, and syphilis diagnosis supported national efforts to screen 2.5 million pregnant women for HIV, hepatitis B and syphilis. 25 online training workshops benefited 1395 maternal healthcare staff (339 supervisors and 1056 service providers) in 1229 PHC across 14 governorates, ensuring the continuation and improving the quality of HIV testing among pregnant mothers as a routine medical follow-up service.

### **COMBINATION PREVENTION AND SEXUAL AND REPRODUCTIVE HEALTH TECHNICAL SUPPORT; CAPACITY BUILDING; POLICY ADVICE; ADVOCACY**

Work continued towards the achievement of the Netherlands-funded SRH goals for women living with HIV in nine governorates, as well as increasing the number of CSOs working on HIV in five governorates – the latter focusing on outreach, harm reduction and referral in some of Egypt's neediest areas, a milestone for community engagement. 30 NGO staff were capacitated on counselling, outreach, and programmatic and data collection modules from the two largest governorates. 422 women and girls belonging to the most underserved populations were reached through outreach services during the first month of service provision. Through NAP, 1933 counselling services, including hotlines, were provided, and 126 women received gynaecological and mental health support.

The Joint Team actively engaged youth in the HIV response in 2020, through virtual interactive workshops reaching hundreds of viewers; the World AIDS Day campaign also included capacity building for 25 medical staff from 24 medical universities on how to design and implement SRH awareness and advocacy campaigns in their own communities; an awareness campaign was launched in November 2020, expecting to reach around 6000 students.

Training was provided for over 40 CSOs across 6 governorates on intersectional gender, SHRH for young women, and child protection; additionally, 97 women and girls benefited from outreach services including access to prevention, testing and awareness services through partnership with local CSOs. A 12-day training for 20 CSOs' representatives focused on better reach of key populations; an additional two-day workshop for 130 women and refugees delivered information on access to health services and protection against HIV and gender-based violence. A total of 15 480 condoms were distributed to seven CSOs to encourage and sustain harm reduction efforts among community partners.

HIV prevention services were targeted directly at the refugee / migrant population: 1182 people received information on reproductive health, tuberculosis and HIV; direct support was provided for 17 women with PMTCT services; 16 people living with HIV were treated for opportunistic infections; and 20 sexual assault survivors received timely post-exposure prophylaxis (PEP) for HIV, STI presumptive therapy, and emergency contraception.

The Joint Team supported an MoU signed between CSOs and the Ministry of Health and Population to endorse a needles and syringes programme as a national approach to harm reduction among people who inject drugs; this comes in line with the Ministry-approved opioid substitution therapy, and the national syringe distribution which was started through CSOs.

### STIGMA AND DISCRIMINATION

TECHNICAL SUPPORT; COORDINATION SUPPORT; COMMUNITY ENGAGEMENT; ADVOCACY

Towards a more enabling environment in Egypt, the Joint Team conducted a rapid assessment on the gendered social and health impacts of COVID-19 on women living with HIV and key populations, providing recommendations to guide the HIV response by strengthening access to SRH services. The assessment included stakeholders across the country such as, CSOs, networks of people living with HIV and key populations, in addition to government representatives.

Meetings with religious leaders continued in 2020, aiming to reduce stigma at community level. Over 150 young families were reached during an awareness event in Cairo, and additional training was delivered for five CSOs on harm reduction through outreach, referral, counselling and M&E to ensure sustainability of outreach. Addiction treatment centres and mental health hospitals have been included in stigma reduction campaigns reaching 50 health care providers this year, ensuring continuous and high-quality care to people who inject drugs, supporting the roll-out of the National Strategic Plan.

### CONTRIBUTION TO THE COVID-19 RESPONSE

TECHNICAL ASSISTANCE; CAPACITY BUILDING; COMMUNITY ENGAGEMENT

The Joint Team ensured that the rights and needs of vulnerable populations were included in UN-wide COVID-19 mitigation strategies and plans in Egypt, such as the Country Preparedness and Response Plan (CPRP). A communication group was established with the NAP and partner CSOs, to ensure coordination of emergency HIV/AIDS responses during COVID-19, successfully responding to hundreds of cases during lockdown. The group was integral in disseminating important information, sharing resources and coordinating effort, and helped to maintain Egypt's provision of essential health services, HIV prevention, care and treatment.

Over 100 women living with HIV in nine governorates were reached with gynaecological and psychiatric health services ensuring their linkage to treatment, and an additional 20 private health providers across six governorates were contracted to ensure continued positive healthcare-seeking behaviour for women during the pandemic. A series of workshops equipped 14 peer-supporters from six governorates to support treatment adherence for 412 people living with HIV in the context of COVID-19.

Financial support and technical guidance were provided to a network of women living with HIV to facilitate peer support to children, adolescents, and pregnant mothers, including COVID-19 awareness-raising and prevention, adherence to HIV treatment, social and mental health support. A total of 6000 people living with HIV were provided with personal hygiene kits.

### CONTRIBUTION TO THE INTEGRATED SDG AGENDA

POLICY ADVICE; ADVOCACY; TECHNICAL ASSISTANCE

The fruitful and sustained coordination between the Joint Team and national institutions for an HIV-inclusive HIV response is accelerating progress towards good health and wellbeing, and is reducing inequalities, contributing to achievement of both SDGs 3 and 10.

People living with HIV have been included in countrywide assessments, including those assessing vulnerable groups in times of COVID-19 within the Leaving No-One Behind policy. These have directly supported the achievement of SDG 10, specifically target 10.3 "ensuring equal opportunities and end discrimination" by including people living with HIV across all national policies and interventions. Also, rapid assessment on the gendered social and health impacts of COVID-19 on women living with HIV and key populations directly contributed to the gender component of the SDGs and advocated for equality.

Finally, on SDG 17, the partnership between the Joint Team and the Netherlands Embassy has led to increased capacity of health workers, through the provision of more than 30 targeted trainings; this contributed to target 17.9, "enhanced SDG capacity in developing countries".

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>The overwhelming burden of responding to COVID-19 has caused some interventions, activities, and new initiatives to be postponed, and some national priorities to shift; COVID-19 has also caused procurement delays.</p>	<p>Conduct the postponed Test-Treat-and-Retain cascade analysis.</p> <p>Active participation in UN-wide reforms, including the implementation of the new Global AIDS Strategy, through consultations with national partners and stakeholders towards addressing gaps, strengthening the sustainability of services, and ensuring full inclusion of key populations' views, needs and perspectives.</p> <p>Ensure that the rights and needs of vulnerable populations including people living with HIV are integrated in UN-wide COVID-19 mitigation strategies and plans.</p>
<p>Delays in receiving approvals from some government entities has hindered the start of important community-based HIV prevention projects by civil society organizations.</p>	<p>Strengthen the national coordination bodies including meaningful engagement of different communities and networks for people living with HIV.</p> <p>Scale-up mainstreaming of HIV-related SRH topics among the basic health packages.</p> <p>Develop an online platform, intended to act as a one-stop shop to provide information on HIV services for all local partners and beneficiaries.</p>
<p>There is a continued lack of strategic information, such as an updated IBBS and key population size estimates. The last studies were conducted in 2010 and 2014 respectively, indicating a growing critical need for targeted resources for this pillar.</p>	<p>Advocate for the use of available resources from the current Global Fund grant and provide technical support to conduct IBBS and population size estimates.</p>
<p>People who inject drugs are considered the biggest and fastest growing key population in Egypt, with the highest HIV prevalence. During 2020, there was a ministerial decree for approving opioid substitution therapy, and needle and syringe programmes; however, there is a lack of capacity to allow its operationalization nationwide.</p>	<p>Build capacity of national authorities on the provision of comprehensive harm-reduction services (opioid substitution therapy, and needle and syringe programmes).</p> <p>Support the translation and dissemination of the guidance, and the increase of the geographical coverage of harm reduction services in upper Egypt; support the development of an M&amp;E framework.</p>
<p>There was a delay in the implementation of activities in prisons, due to the closure of prison health clinics during COVID-19 lockdown.</p>	<p>Continue and expand the prison health programme from seven prisons to 10, including the provision of hepatitis B vaccination to key at-risk prison inmates.</p>

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