

GUINEA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNHCR, UNICEF, WFP, UNDP, UNFPA, WHO, UNAIDS SECRETARIAT, OHCHR

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team in Guinea made substantial contributions to scaling up HIV testing and counselling services, including in the procurement of commodities, facilitated community-led family identification of people living with HIV registered in health facilities for testing; expansion of HIV testing services for key populations; and promotion of prevention and of these services through mass media outlets. Successful efforts were also made to improve tuberculosis case finding using innovative service entry points, including pharmacies in Conakry. Similarly, community-based antiretroviral distribution centres were established in partnership with associations of key populations; and community-led guidance was also created to support appointment spacing efforts as well as tracing and reenrolment services among people living with HIV who are lost to follow up. With the Joint Team's support, cash transfers, food and nutritional support, and nutrition training contributed to improve treatment adherence and health outcomes of people living with HIV and/or tuberculosis. Nongovernmental organizations were assisted to implement community initiatives aimed at increasing demand and adherence to prevention of mother-to-child transmission of HIV services while various HIV testing commodities were procured and donated improving access to HIV testing among pregnant women during antenatal care and early infant diagnosis for HIV-exposed children. Finally, the Government was supported to develop a strategy to accelerate domestic resources for the national HIV response through the private sector, for improved sustainability.

HIV PREVENTION AND ACCESS TO TESTING

To improve access to quality diagnostic services, the Joint Team procured and donated several Point-of-Care HIV test kits, including 14 000 Determine HIV-1/2 Ag/Ab Combo, 1025 Bioline HIV 1/2, and 800 Trinity Uni-Gold HIV 1/2 test kits to the National HIV/AIDS and Hepatitis Programme. This enabled health facilities to provide HIV testing and counselling for 12 061 people and the 211 people who tested positive for HIV were enrolled on antiretroviral treatment.

The Joint Team provided technical support to local associations to identify 864 family members of people living with HIV registered in six health facilities in the Kankan region for HIV testing and counselling and the 172 people who tested HIV positive were referred for treatment. Additionally, 71 (53 women) people living with HIV who had been lost to follow-up were traced and returned to care.

Supported by the Joint Team, 1142 communication initiatives and community dialogues were conducted reaching 39 058 adolescents and young people on various topics of sexual and reproductive health (SRH). During these sessions, 17 212 agreed to take HIV testing and the 1513 people who tested HIV positive were enrolled on treatment. Additionally, 10 800 000 male condoms were procured and donated to the Ministry of Health for dual prevention of HIV and unintended pregnancy.

Financial support provided to the nongovernmental organization, Fraternité Médicale Guinée (FMG), helped to create a new service package tailored for key populations, particularly sex workers in the Oudiala health centre in the Mandiana prefecture. The services reached 205 sex workers of whom 120 agreed to take an HIV test, and the six people who tested positive for HIV were enrolled on antiretroviral treatment. As a result of the financial assistance, 50 condom vending machines were installed and 152 000 condoms were distributed in the Mandiana prefecture.

The Joint Team supported training for 38 women community leaders (including five women living with HIV) in the Mandiana prefecture to improve their knowledge of HIV, including modes of transmission, prevention, treatment adherence, HIV-related stigma and discrimination and gender-based violence. The trained women received image boxes on HIV prevention and treatment, which enabled them to sensitize and refer 285 women from their communities to health facilities for voluntary HIV testing. To further inform on HIV prevention and promote testing, the Joint Team supported the conduction of 18 interactive awareness-raising programmes (live calls) on Radio Espace Kankan and Milo FM, which were attended by more than 500 listeners.

The Joint Team supported tuberculosis screening among people who come to buy cough medicines at formal pharmacies in Conakry, which helped to detect 119 cases of tuberculosis out of the 916 people who agreed to take the test. Support was also provided for routine screening of tuberculosis for people who tested negative for COVID-19 or recovered from the virus with persistent respiratory problems. A total of 671 people were screened, of whom 35 people had confirmed cases of tuberculosis. The Joint Team further supported the development and dissemination of a strategy document and management tools for isoniazid preventive treatment (INH) to reduce the risk of active tuberculosis among people living with HIV in 29 large-cohort care sites.

HIV TREATMENT AND CARE

In 2020-2021, technical assistance was provided by the Joint Team for the development of policies, standards, and protocols for the management of the HIV infection in adults and children, incorporating the new recommendations from the World Health Organization.

To scale up community-based treatment services, the Joint Team provided technical and financial support to Fondation Espoir Guinée (FEG) to create three community-led antiretroviral treatment distribution centres in collaboration with key populations' associations. A total of 150 people living with HIV were able to access their treatment through these centres.

The Joint Team supported the establishment of a guidance unit managed by civil society organizations to address the challenges encountered by people living with HIV in accessing treatment and follow-up clinical consultations during the COVID-19 pandemic. Two toll-free telephone lines were also set up in the guidance unit to detect spaced-out appointments of clinical visits and provide accurate information, consultation and support services for people living with HIV and their families free of charge. A total of 153 people were able to increase their knowledge on HIV treatment and receive consultations on their concerns. The unit also helped to appropriately space-out appointments, which was 25% for one-month appointment (R1M), 38% for two-month (R2M), and 18% for 6-month (R6M) appointments.

The Joint Team provided cash transfers for 90 people living with HIV in the capital Conakry and the Mandiana Prefecture to cover their expenses, including food, transportation to health facilities and healthcare services, thus ensuring their adherence to treatment.

The Ministry of Health was supported to improve nutrition services for people living with HIV enrolled on treatment by training of 109 healthcare provider on the national guidelines for the care of people living with HIV. As a result, 34 659 malnourished people living with and affected by HIV and tuberculosis received nutritional support and food assistance, yielding a 75.5% nutritional recovery rate among people living with HIV, 73% recovery among people with tuberculosis on directly observed therapy (DOT), and 99% survival rate after six months of treatment. A 3.4% dropout rate and 0.1% AIDS-related deaths have also been recorded among the beneficiaries.

As part of the COVID-19 response, the Joint Team supported Guinea in the development and implementation of a national HIV and tuberculosis contingency plan. Under this plan, capacity building was provided for 132 representatives of civil society organizations from all 33 prefectures in the country. Two focal persons were also appointed for eight high prisons to ensure the continuity of awareness-raising initiatives and monitoring of HIV programmes in prison settings. Additionally, personal protection and hygiene materials, were procured for the health structures in Nzérékoré and Macenta cities, which house refugee camps to curb the transmission of COVID-19.

PMTCT AND FAMILY TESTING

The Joint Team supported the national network of people living with HIV (REGAP+) and the nongovernmental organization *Volontaires Unis pour la Promotion des Actions de Développement* (VUPAD) for the implementation of a joint project “PTME-Conjoint” which seeks to improve access to quality prevention of mother-to-child transmission of HIV (PMTCT) services in the prefecture of Mandiana. The project reached 3276 women via family awareness sessions, and 417 men and 623 women during home visits, of whom 53 women (20% of the women lost to follow-up) were traced and enrolled back into care, and 18 spouses were linked to health facilities for HIV testing.

Various HIV medicines and commodities, including 5000 Dried Blood Spots kits, 3000 boxes of antiretroviral medicines, 5000 vials of Cotrimoxazole syrup, 100 000 HIV/syphilis Duo tests, 2400 confirmatory tests, and 20 000 tests Determine and 50 000 vials of Sul. 200mg+Trim.40mg/5ml syrup were procured and donated to the Government to prevent shortage of supplies for PMTCT services. This support enabled 46 536 pregnant women to have their first antenatal consultation, of whom 33 974 were screened for the HIV/syphilis duo (73%) and 91% of the 441 pregnant women who tested positive for HIV were enrolled on antiretroviral treatment. A total of 214 HIV-exposed infants also had early infant diagnosis, of whom 10 babies who tested HIV-positive were enrolled on treatment.

INVESTMENT AND EFFICIENCY

The Joint Team provided technical assistance to the Ministry of Health to develop a resource mobilization strategy aimed at mobilizing domestic resources through the private sector to sustain the HIV response. The strategy will be used to advocate for a new financial law aimed at increasing government expenditure for health, including HIV—the goal is to increase domestic funding for the HIV response from 8% in 2018 to 15% by 2025.

In 2021, technical and financial support was provided to the Country Coordinating Mechanism (CCM) and the National HIV/AIDS and Hepatitis Programme (PNLSH) for the successful implementation of the 2021-2023 Global Fund grant, especially for HIV prevention, testing and treatment, PMTCT, supply management, and monitoring and evaluation.

To strengthen strategic information for the HIV response, the Joint Team supported the National AIDS Committee (NAC) by training 15 members of the Monitoring and Evaluation Technical Working Group on data generation and production of various reports, such as the global AIDS monitoring report, Spectrum estimates, and progress reports on the HIV response.

The Joint Team conducted a rapid assessment on the overall capacity of six associations of people living with HIV using the Rapid Organizational Assessment tool. The assessment revealed significant institutional and organisational weaknesses, including lack of accreditation, administrative, financial, reporting, monitoring and evaluation, communication and risk management minimum requirements; inadequate budget and lack of resources mobilization and advocacy knowledge. These results were used to guide the capacity building of these associations and support their accreditation process for better recognition and strengthened community-led responses.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

In collaboration with the other United Nations entities and the national counterparts, the Joint Team strongly contributed to the implementation of the United Nations Development Assistance Framework (UNDAF) 2018-2020, which was extended to end 2021 while developing the 2022-2026 United Nations Sustainable Development Cooperation Framework (UNSDCF).

As part of its development process, the Joint Team supported the 2021 Common Country Analysis (CCA) which assessed the national progress towards the Sustainable Development Goals (SDGs).

The Joint Team contributed to the achievement of SDG 3 (Good Health and Wellbeing) including through its support to HIV prevention, increase HIV testing, treatment uptake and viral load monitoring contributing to an increased viral suppression rate and progress towards ending HIV as a public health threat by 2030.

Contributing to SDG 10 (Reduced Inequalities) and the “leave no one behind” principle, the Joint Team provided technical and financial support to the Government for the revision of Law L025 of 2005 on the protection of people living with HIV. The preliminary draft of the revised law considers new global priorities and targets aimed at improving access to care and human rights protection for key populations. Due to the political situation, the submission of the draft revised law to the national authorities was postponed to 2023.

The Joint Team also greatly contributed to the protection and economic empowerment of people living with HIV and vulnerable people. For instance, 34 women community leaders from the Mandiana prefecture, including some living with HIV, benefited from capacity building on soap production process and seed funding to establish income-generating activities. This initiative enabled 167 community members to support their livelihoods, including food, health, and school expenses.

CHALLENGES AND LESSONS LEARNED

Heavy reliance on donor funding and weak resource mobilization for the HIV response continue to challenge implementation of effective HIV prevention, care and support services for people living with or affected by HIV in Guinea. Government’s suspension of public fund expenses – including for HIV - during the 2020 presidential election, political uncertainties that followed the change in government, and increased government staff turnover exacerbated the challenge. In 2020-2021, the COVID-19 pandemic further strained the HIV response creating delays in programme and disrupting services and the supply chain.

Weak supply and management system for HIV and tuberculosis medicines and commodities led to frequent stockouts of HIV testing commodities, impeding the scale up of testing and treatment services.

Despite encouraging results, progress towards universal health coverage, social protection, and gender and human rights-based approach to early diagnosis and treatment remains low. Experiences from the implementation of the differentiated approach underscored the need to scale up HIV testing for children at entry points, index testing, and appointment spacing to increase treatment coverage among adults and children living with HIV and improve retention in care.

Awareness raising initiatives targeting vulnerable populations, including adolescent and young girls, improved their knowledge of HIV and other sexually transmitted infections. However, lack of access to condoms continues to put these groups at higher risk of acquiring HIV and other sexually transmitted infections. Lessons learned showed the importance of empowering women and girls to increase their confidence to protect themselves and actively engage in the HIV response.

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