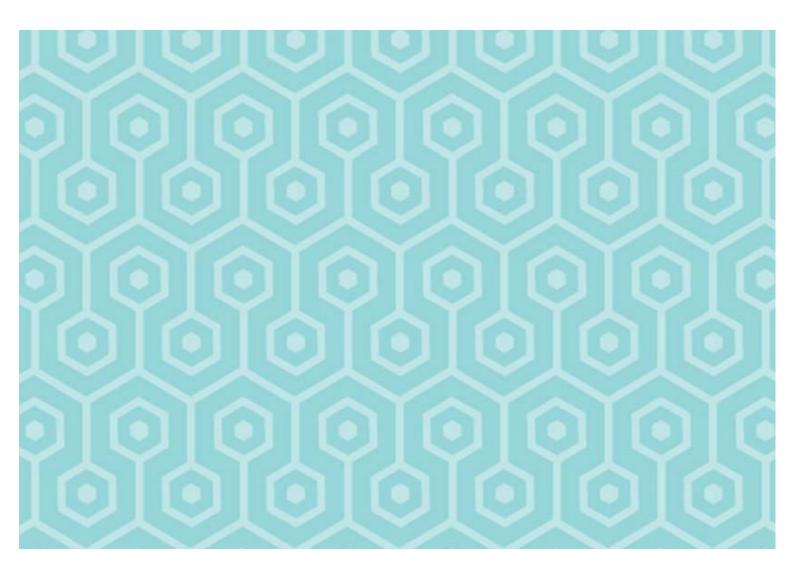
Country progress report - Sierra Leone

Global AIDS Monitoring 2020



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- X. Empowerment and access to justice Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights
- XI. AIDS out of isolation Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Overall

Fast-track targets

Progress summary

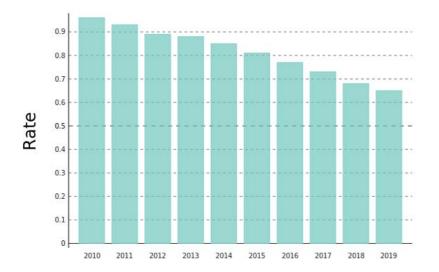
Sierra Leone is located in Western Africa, surrounded by Guinea, Liberia, and the Atlantic Ocean. It has five regions (Western Area, North-West, Northern, Eastern and Southern) which are divided into 16 districts. The capital city is Freetown which is located in the Western Area Urban. It has a population of 7,092,113 people (Census 2015).

The Country has a mixed and generalized HIV epidemic; with a prevalence of 1.7% (SLDHS, 2019). The 2019 Demographic and Health Survey (SLDHS, 2019) indicates that HIV prevalence is higher in urban areas than in rural areas (2.3% versus 1.2%). Relating these variations in HIV prevalence with the population density resulted in the classification of new high burden districts, thus reprogramming for focused service delivery.

The Country has prioritized domestic resource mobilization drive as key, aimed at sustainable program implementation. The Government of Sierra Leone Counterpart funding allocation has improved considerably.

3.1 HIV incidence rate per 1000, Sierra Leone (2010-2019)

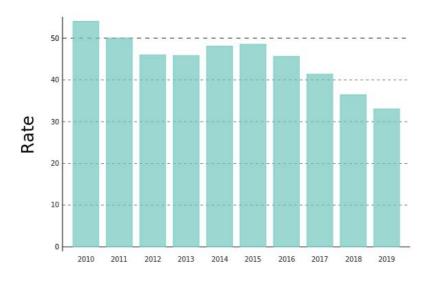
Number of people newly infected with HIV in the reporting period per 1000 uninfected population



Source: Spectrum file

1.7 AIDS mortality per 100 000, Sierra Leone (2010-2019)

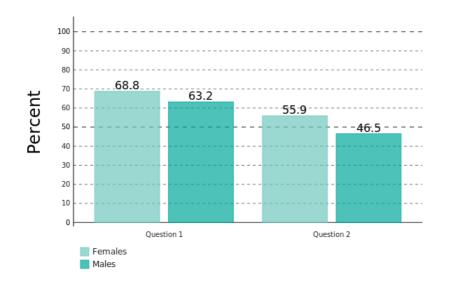
Total number of people who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

4.1 Discriminatory attitudes towards people living with HIV, Sierra Leone (2019)

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 -"Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"



HIV testing and treatment cascade

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Progress summary

Sierra Leone continues to make positive strides in its HIV testing and treatment efforts. To increase HIV testing volume, Sierra Leone is scaling-up provider initiated testing at facilities, targeted outreach testing among vulnerable populations, family testing and key populations targeted testing, in addition to its routine antenatal care. The number of people tested and received results in 2019 were 689,237in both general population and among pregnant women attending ANC and PMTCT services. The Country has adopted the WHO recommendations on test and treat. In 2019, 32,438 People Living with HIV (PLHIV) accessed ART while 4,129 pregnant women received ARVs to reduce the risk of mother to child transmission of HIV.

Policy questions (2019)

Is there a law, regulation or policy specifying that HIV testing:

a) Is mandatory before marriage

No

b) Is mandatory to obtain a work or residence permit

No

c) Is mandatory for certain groups

Yes

Recruits at Police and Military training institutions, and Pregnant Women

What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?

No threshold; treat all regardless of CD4 count; Implemented countrywide (>95% of treatment sites)

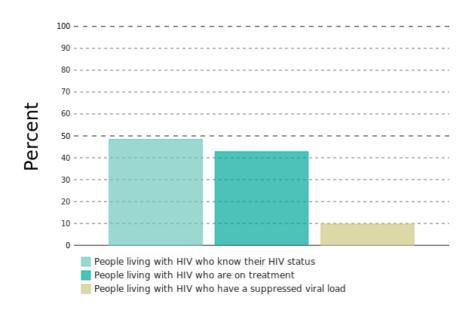
Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?

a) For adults and adolescents

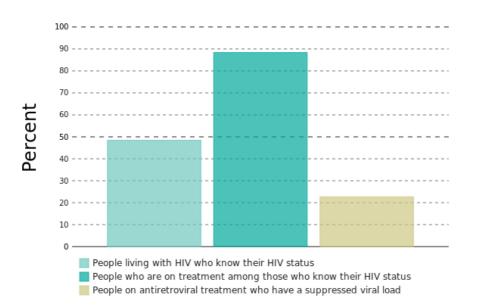
Yes; Implemented countrywide (>95% of treatment sites)

b) For children

Yes; Implemented countrywide (>95% of treatment sites)



Source: Spectrum file



Progress towards 90-90-90 target, Sierra Leone (2019)

Source: Spectrum file

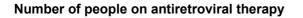
1.1 People living with HIV who know their HIV status, Sierra Leone (2010-2019)

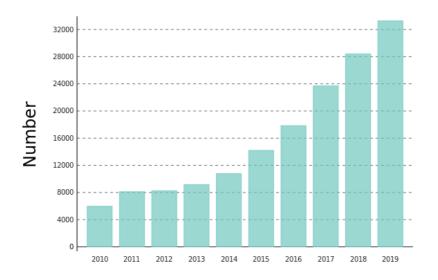
Number

Number of people living with HIV who know their HIV status

Source: Spectrum file

1.2 People living with HIV on antiretroviral therapy, Sierra Leone (2010-2019)

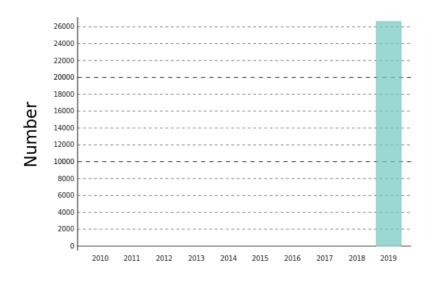




Source: Spectrum file

1.3 People living with HIV on antiretroviral treatment who have suppressed viral load, Sierra Leone (2010-2019)

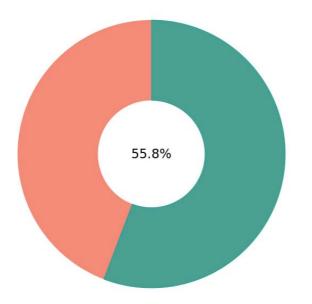
Number of people living with HIV with suppressed viral loads



Source: Spectrum file

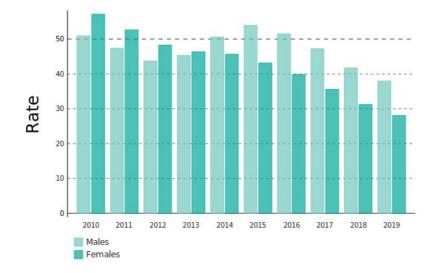
1.4 Late HIV diagnosis, Sierra Leone (2019)

Percentage of people living with HIV with the initial CD4 cell count <350 cells/mm3 during the reporting period



1.6 AIDS mortality rate per 100 000, Sierra Leone (2010-2019)

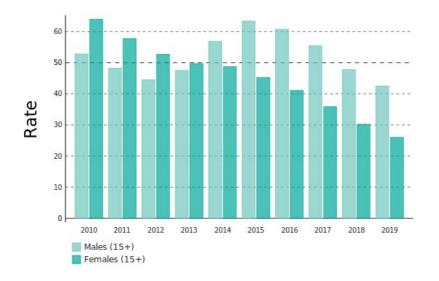
Total number of people who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

1.6 AIDS mortality rate per 100 000 among adults, Sierra Leone (2010-2019)

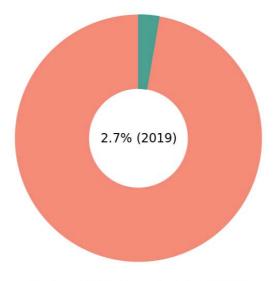
Total number of adults who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

1.7 HIV testing volume and positivity, Sierra Leone

Percentage of HIV -positive results returned to people (positivity) in the calendar year



Number of HIV tests conducted = 689 237

Prevention of mother-tochild transmission

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Progress summary

There are 866 health facilities providing PMTCT services. The country practices Option B+; treating all HIV positive women during pregnancy and providing lifelong antiretroviral medication to mothers. The country has continued to offer dual testing for HIV and Syphilis for pregnant using the Duo HIV/Syphilis test kits. Capacity building of national teams, District Health Management Team (DHMT) and facility staff (across facilities in Western Area Urban and Rural, Port Loko, Kono, Bombali districts, Kenema, Pujehun, Moyamba, Kambia, Koinadugu and Bonthe) was conducted to optimize coverage of viro-logical testing for infants and to enable effective delivery and monitoring of comprehensive PMTCT services. Early Infant Diagnosis (EID) sample collection services were also strengthened through collaboration with key units like Expanded Program on Immunization (EPI) and Under-five Clinics, therapeutic package at the facilities. Handbook of frequently asked questions in paediatric HIV care for pre-service and in-service health workers; job aids and Information Education and Communication / Behaviour Change Communication (IEC/BCC) materials were developed to improve provider and patient knowledge on Pediatric HIV. National guidelines for Sierra Leone Hub and Sample transportation system has been validated aimed at enhancing EID, Viral Load and routine surveillance system.

Policy questions (2019)

Does your country have a national plan for the elimination of mother-to-child transmission of HIV?

Yes

Target(s) for the mother-to-child transmission rate and year: <5%; 2020

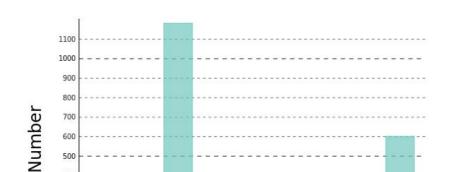
Elimination target(s) (such as the number of cases/population) and year: <5%; 2020

Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?

Treat all, regardless of age

Implemented countrywide (>95% of treatment sites)

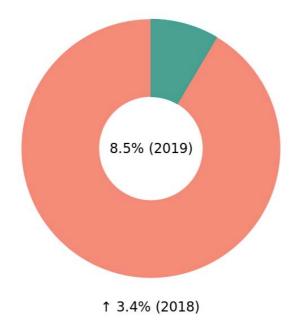
2.1 Early infant diagnosis, Sierra Leone (2011-2019)



Number of infants who received an HIV test within two months of birth

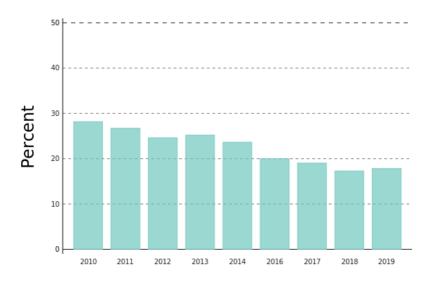
2.1 Early infant diagnosis, Sierra Leone (2018-2019)

Percentage of infants born to women living with HIV receiving a virological test for HIV within two months of birth



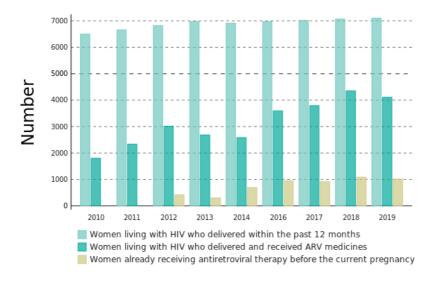
2.2 Mother-to-child transmission of HIV, Sierra Leone (2010-2019)

Estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months



Source: Spectrum file

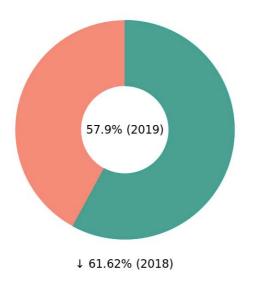
2.3 Preventing mother-to-child transmission of HIV, Sierra Leone (2010-2019)



Source: Spectrum file

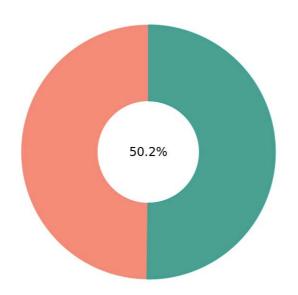
2.3 Preventing mother-to-child transmission of HIV, Sierra Leone (2018-2019)

Percentage of pregnant women living with HIV who received antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV



Source: Spectrum file

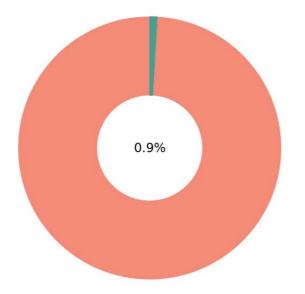
2.4 Syphilis among pregnant women, Sierra Leone (2019)



Percentage of pregnant women tested for syphilis

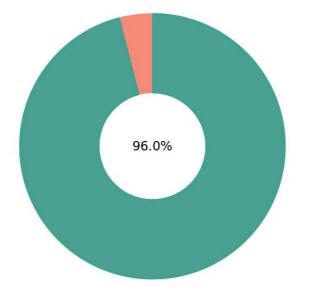
2.4 Syphilis among pregnant women, Sierra Leone (2019)

Percentage of pregnant women tested positive for syphilis



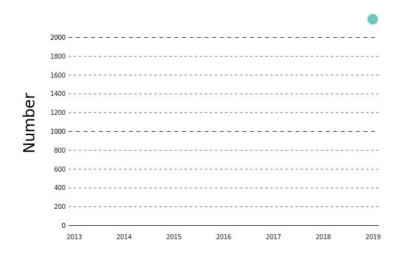
2.4 Syphilis among pregnant women, Sierra Leone (2019)

Percentage of pregnant women on treatment among those who tested positive



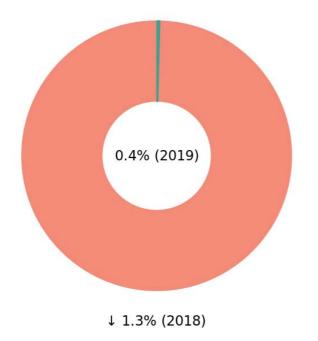
2.5 Congenital syphilis rate (live births and stillbirth), Sierra Leone (2013-2019)

Number of reported congenital syphilis cases (live births and stillbirths)



2.6 HIV testing in pregnant women, Sierra Leone (2018-2019)

Percentage of pregnant women with known HIV status



HIV prevention; Key populations

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Progress summary

In 2019, more Peer Educators and Peer Navigators (PE/PN) were engaged and trained in the provision of combination prevention services to beneficiaries (FSWs, MSM, PWID) and other stakeholders at hot-spots located across different communities. Awareness messages on HIV and AIDS were provided by the Peer educators to beneficiaries and their Pimps, Mammy Queens through face-to-face encounters at hot-spots and also through designated social media group forums. HIV testing and counselling services are also carried out on KPs with full participation of Peer Educators, Navigators and Counsellors. Adherence to ART has improved through the use of peer navigators who work with new case clients. The Navigators also collect and dispatch drugs to clients who are constrained to visit the health centre on prescribed visit dates. Activities provided include HCT services, condom and lubricant distribution and peer support. In 2019 10,721 MSM, 85,930 FSW, and 1,548 PWID were reached with prevention services.

Policy questions: Key populations (2019)

Criminalization and/or prosecution of key populations

Transgender people

Criminalized

Sex workers

· Selling sexual services is criminalized

Men who have sex with men

• Yes, imprisonment (up to 14 years)

Is drug use or possession for personal use an offence in your country?

• Drug use or consumption is specified as a criminal offence

Legal protections for key populations

Transgender people

Criminalized

Sex workers

• No

Men who have sex with men

• No

People who inject drugs

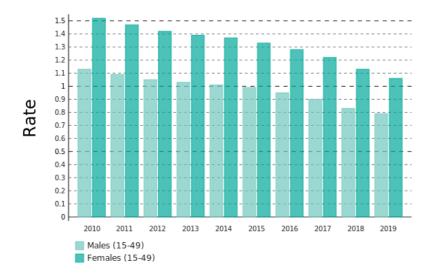
• No

Has the WHO recommendation on oral PrEP been adopted in your country's national guidelines?

No, guidelines have not been developed

3.1 HIV incidence rate per 1000, Sierra Leone (2010-2019)

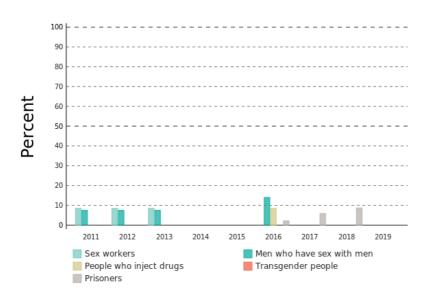
New HIV-infections in the reporting period per 1000 uninfected population (Adults, ages 15-49)



Source: Spectrum file

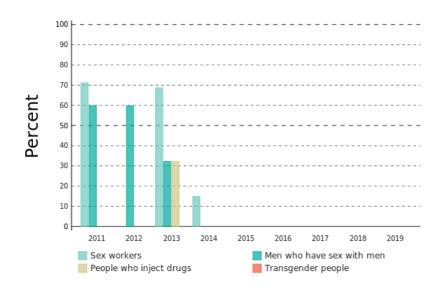
3.3 HIV prevalence among key populations, Sierra Leone (2011-2019)

Percentage of specific key populations living with HIV



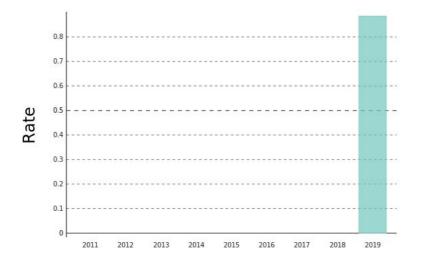
3.6 Condom use among key populations, Sierra Leone (2011-2019)

Percentage of people in a key population reporting using a condom the last time they had sexual intercourse



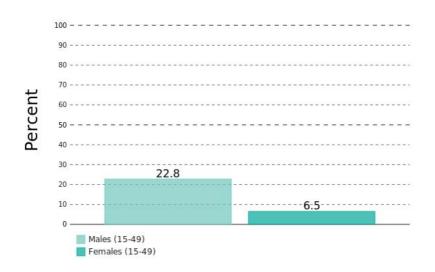
3.9 Needles and syringes distributed per person who injects drugs, Sierra Leone (2011-2019)

Number of needles and syringes distributed per person who injects drugs per year by needle-syringe programmes



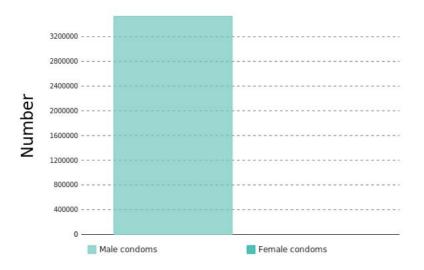
3.18 Condom use at last high-risk sex, Sierra Leone (2019)

Percent of respondents who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months

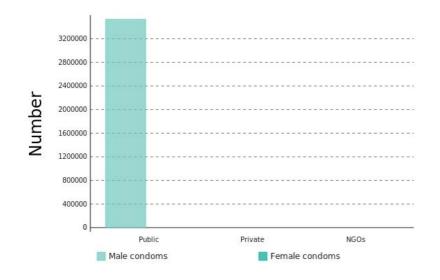


3.19 Annual number of condoms distributed, Sierra Leone (2019)

Number of condoms distributed during the past 12 months



3.19 Annual number of condoms distributed, Sierra Leone (2019)



Number of condoms distributed during the past 12 months

Gender; Stigma and discrimination

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Progress summary

Since stigma and discrimination remain a social challenge that limit uptake of HIV services in many communities, NETHIPS uses its community based structures to create awareness and demand for HIV services. Sessions on reducing stigma and discrimination in the health facilities have been integrated into training sessions and form part of community dialogues for many of the organizations providing services to key organizations. Furthermore, linking FSWs to support groups have also encouraged them (i.e. FSWs) to discuss their challenges and successes in a safe environment which is free of stigma, discrimination and judgment.

The Community Treatment Observatory (CTO) was a NETHIPS - led initiative that used locally generated evidence to engage relevant authorities on service delivery. In Sierra Leone, where practices of Key population is criminalized, the CTO provided opportunity for PLHIV and key populations to engage duty bearers and/or relevant stakeholders on improving access to quality, uninterrupted HIV treatment in Sierra Leone.

Policy questions (2018)

Does your country have a national plan or strategy to address gender-based violence and violence against women that includes HIV

Yes

Does your country have legislation on domestic violence*?

Yes

- Physical violence
- Sexual violence
- Psychological violence
- Emotional violence
- Economic violence
- Explicit criminalization of marital rape
- Protection of unmarried intimate partners

What protections, if any, does your country have for key populations and people living with HIV from violence?

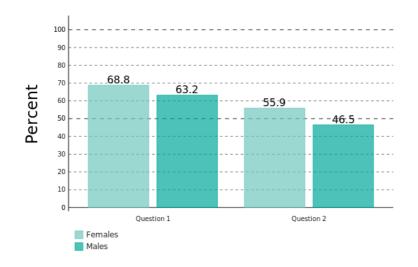
- · General criminal laws prohibiting violence
- · Programmes to address intimate partner violence*
- · Programmes to address workplace violence
- Interventions to address police abuse
- · Interventions to address torture and ill-treatment in prisons

Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

Does your country have laws criminalizing the transmission of, non-disclosure of or exposure to HIV transmission?

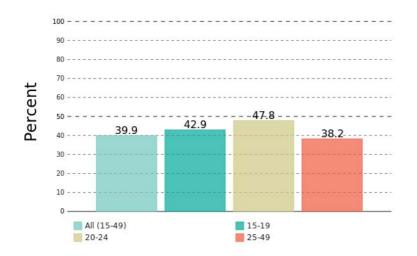
4.1 Discriminatory attitudes towards people living with HIV, Sierra Leone (2019)

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 -"Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"

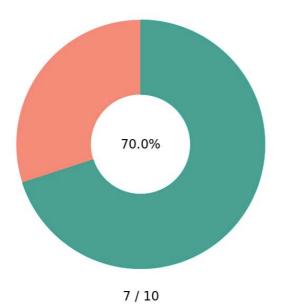


4.3 Prevalence of recent intimate partner violence, Sierra Leone (2020)

Proportion of ever-married or partnered women aged 15-49 who experienced physical or sexual violence from a male intimate partner in the past 12 months



Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



Knowledge of HIV and access to sexual reproductive health services

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Progress summary

Topics on HIV and AIDS prevention, treatment, care and support services and reproductive health are included in curriculum for primary and secondary schools. Young people actively participate in developing policies and strategies on their own health. There is an education policy that guides the delivery of life skills based HIV and sexuality education in Primary, Junior and Senior Secondary and Tertiary institutions. Topics on HIV and AIDS are part of questions in public examinations.

Community based organizations often reach out to youths and train them as peer health educators in and out of school to lead engagement of their peers with tailored behaviour change communication messages. Youth friendly centres are also available across the country to provide youth focused approaches to sexual reproductive health and peer support; some of these centres provide HIV services as well.

Policy questions (2018)

Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education, according to international standards, in:

a) Primary school

Yes

b) Secondary school

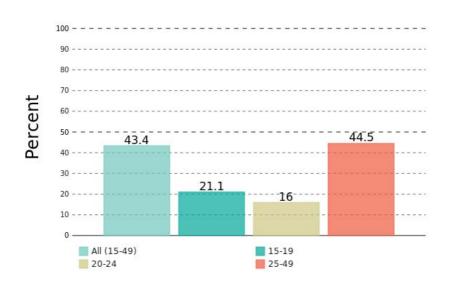
Yes

c) Teacher training

Yes

5.2 Demand for family planning satisfied by modern methods, Sierra Leone (2017)

Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods



Social protection

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Progress summary

Sierra Leone has a frame work on social protection for all vulnerable populations and this is being implemented and enforced across the country. The country has supported the establishment of the Network of HIV Positive Persons (NETHIPS), which is an umbrella care and support organization that advocates for the rights of its constituents. The support has been towards engendering livelihoods in the form of vocational centres, agricultural livelihood projects and fish ponds. There are plans to launch revolving loan schemes as part of poverty alleviation strategy for support group members. The Global Fund has supported the establishment of one drop in centre for NETHIPs in the Western Area aimed at providing a forum for PLHIVs to meet and articulate issues on positive living.

Policy questions (2019)

Does the country have an approved social protection strategy, policy or framework?

Yes, and it is being implemented

a) Does it refer to HIV?

Yes

b) Does it recognize people living with HIV as key beneficiaries?

Yes

c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?

No

• -

d) Does it recognize adolescent girls and young women as key beneficiaries?

Yes

e) Does it recognize children affected by HIV as key beneficiaries?

Yes

f) Does it recognize families affected by HIV as key beneficiaries?

No

g) Does it address the issue of unpaid care work in the context of HIV?

No

What barriers, if any, limit access to social protection programmes in your country?

- · Lack of information available on the programmes
- Complicated procedures
- Fear of stigma and discrimination
- Laws or policies that present obstacles to access

Community-led service delivery

Ensure that at least 30% of all service delivery is communityled by 2020

Progress summary

The Network of HIV Positive persons (NETHIPs), the umbrella organization for Persons living with and affected by HIV in Sierra Leone, has forty-six support groups nationwide and play a critical role in providing care and support to PLHIVs and OVCs in Sierra Leone. Through support group meetings, PLHIV benefit from health talks aimed at promoting positive living practices. They are encouraged to adhere to anti-retroviral treatment, monitor their viral load, observe personal hygiene and use condom to prevent transmission to their loved ones. NETHIPS supports elimination of mother to child transmission of HIV agenda through its mother-to-mother support groups. In 2019, women living with HIV as volunteer, followed up 500 pregnant and lactating HIV positive women with the aim of supporting treatment uptake and adherence. NETHIPS has established a Drop-in-center to provide counselling and testing support to family members of index cases. This service helps discordant couples to understand and deal with the challenges that come with living with HIV.

NETHIPS play a critical role in reaching their peers for the purpose of improving treatment uptake through the Community Health Worker (CHW) program led by the National AIDS Control Program. NETHIPS supports the CHW program by providing PLHIV volunteers. Over 300 CHWs have been trained and assigned to referral hospitals in the seven high burden districts to provide support to clinical staff through task shifting and also to follow up on PLHIV in the community

Policy questions (2019)

Does your country have a national policy promoting community delivery of antiretroviral therapy?

No

Are there any of the following safeguards in laws, regulations and policies that provide for the operation of CSOs/CBOs in your country?

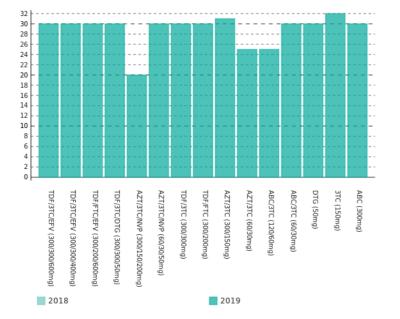
- Registration of HIV CSOs is possible
- Registration of CSOs/CBOs working with key populations is possible
- HIV services can be provided by CSOs/CBOs
- · Services to key populations can be provided by CSOs/CBOs
- Reporting requirements for CSOs/CBOs delivering HIV services are streamlined

HIV expenditure

Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers

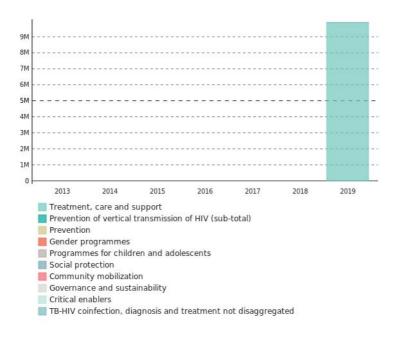
Progress summary

The national response for HIV/AIDS is funded largely by international donors. The largest donors are Global Fund (USD 9,889,000), and KfW – German Fund (€255,873.34). Domestic resource mobilization strategy is available in country in order to generate sustainable financing. The government has committed and allocated an HIV budget line of 14,635,627 SLL for the HIV response and continues to uphold their 5% counterpart financing to the Global Fund grant.

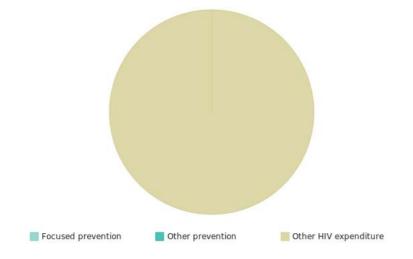


8.2 The average unit prices of antiretroviral regimens (in US\$), Sierra Leone (2018-2019)

8.3 HIV expenditure by programme category, Sierra Leone (2013-2019)



Share of effective prevention out of total, Sierra Leone (2019)



Empowerment and access to justice

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

Progress summary

A memorandum of understanding exists between the Principal Recipient and the Legal Aid Board; a para-legal institution providing legal services for key populations across the Country. Additional Drop-in-Centers have been established across the Country and among others, provide a forum for interaction among Key Populations, minor health care services, and additionally serve as a 'Safe Havens' to articulate issues of violation of human right for onward referral to the legal Aid board

Policy questions (2018)

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at scale at the national level

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

Yes

What accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings does your country have, if any?

- Complaints procedure
- Mechanisms of redress
- Procedures or systems to protect and respect patient privacy or confidentiality

What barriers in accessing accountability mechanisms does your country have, if any?

- · Affordability constraints for people from marginalized and affected groups
- · Awareness or knowledge of how to use such mechanisms is limited

AIDS out of isolation

Commit to taking AIDS out of isolation through peoplecentred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Progress summary

The National HIV programming is integrated in the health system in varying degrees. There is TB/HIV collaboration between the National AIDS Control Program and the National Leprosy and Tuberculosis Control Program reflected by co-location of TB/HIV facilities, joint programing among community health workers for defaulter tracing. HIV and AIDS treatment care and support services are also integrated into Sexual Reproductive Health services and at Adolescent and Youth friendly centres. A pilot study has commenced for Hepatitis B among HIV positive clients on ART in the main referral hospital in the capital city.

Policy questions (2019)

Is cervical cancer screening and treatment for women living with HIV recommended in:

a) The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)

No

b) The national strategic plan governing the AIDS response

No

c) National HIV-treatment guidelines

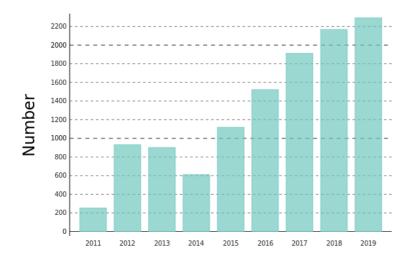
No

What coinfection policies are in place in the country for adults, adolescents and children?

- Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV
- Intensified TB case finding among people living with HIV
- TB infection control in HIV health-care settings
- Co-trimoxazole prophylaxis

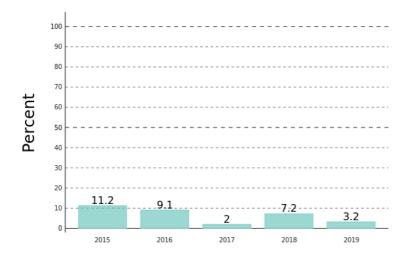
10.1 Co-managing TB and HIV treatment, Sierra Leone (2011-2019)

Number of HIV-positive new and relapse TB patients started on TB treatment during the reporting period who were already on antiretroviral therapy or started on antiretroviral therapy during TB treatment within the reporting year



10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Sierra Leone (2015-2019)

Total number of people living with HIV with active TB expressed as a percentage of those who are newly enrolled in HIV care (pre-antiretroviral therapy or antiretroviral therapy) during the reporting period



10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Sierra Leone (2015-2019)

Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during the reporting period



10.4/10.5 Sexually transmitted infections, Sierra Leone (2013-2019)

Number of men reporting urethral discharge in the past 12 months; number of men reported with laboratory-diagnosed gonorrhoea in the past 12 months

