

## The Fight Against HIV/AIDS in Africa

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### Abstract:

*HIV crisis peaked in the late 1990s and early 2000s, and collaborative efforts by stakeholders have cut the annual AIDS-related deaths and new infections by half. However, the way the epidemic is evolving reveals deepening international inequality. Most of HIV infections still occur in sub-Saharan Africa.*

*In most world regions HIV-prevalence and AIDS-related deaths are steadily declining, but the Middle East and North Africa (MENA) region is an exception.*

*This article highlights the success story of Rwanda in achieving its 90-90-90 UNAIDS 2020 goals and the efforts of the Democratic Republic of the Congo (DRC) in achieving the same goals. Further, the article features recommendations on the needed actions to continue the fight against HIV/AIDS in order to achieve the 2020 90-90-90 UNAIDS goals in Africa in general.*

*Africa continues to be the most affected region by HIV/AIDS in the world, particularly among young women. On access to antiretroviral therapy (ART), data have shown that less than 70% of people living with HIV in various regions of Africa have accessed antiretroviral therapy. Among infants (aged 0-14) living with HIV, less than 60 % have accessed antiretroviral treatments.*

*The global commitment to fight against HIV/AIDS resulted to a steady progress in the reduction of AIDS-related deaths, but efforts to reach the 2020 target for reductions in HIV infections are clearly off-track.*

*The fight against HIV/AIDS continues. WHO in Africa introduced the Regional Action Plan during the 20<sup>th</sup> ICASA Conference in Kigali, Rwanda that recommends providing and monitoring quality care to people living with HIV. The new plan also prioritizes active engagement with ministries of health, partners, stakeholders, research institutions and laboratories to support development of national HIV drug resistance strategic plans which are fully integrated into routine monitoring and evaluation activities.*

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HIV crisis peaked in the late 1990s and early 2000s, and collaborative efforts by stakeholders have cut the annual AIDS-related deaths and new infections by half.

The Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) - an international financing and partnership organization that aims to “attract, leverage and invest additional resources to end the epidemics” has reported that the world has seen an incredible progress in the past decades. It said that in 2018, 37.9 million people lived with HIV and 23.3 million were on antiretroviral therapy while 18.9 million have benefited the support of the Global Fund.

The Global Fund reported that an HIV-positive person with access to treatment can expect to have the same lifespan as someone who is HIV-negative. The lifesaving treatment is the use of antiretrovirals (ARVs). ARV therapy is not a cure for HIV, but those with HIV who are taking effective antiretroviral therapy and whose level of HIV is suppressed to undetectable levels will not transmit HIV sexually. It also help those live longer, healthier lives. People with HIV are encouraged to seek this lifesaving treatment.

HIV.gov defined HIV (human immunodeficiency virus) as a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases. If left untreated, HIV can lead to the disease AIDS (acquired immunodeficiency syndrome).

Specific groups of people who experienced increased vulnerability to HIV include gay, bisexual and other men who have sex with men, people who inject drugs, sex workers, and transgender people, and people in prison. People in these groups are considered the key population and are mostly socially marginalized.

Theresa Krinninger, in her December 2015 article featured in [www.dandc.eu](http://www.dandc.eu) wrote that the way the epidemic is evolving reveals deepening international inequality. Most of HIV infections still occur in sub-Saharan Africa, followed by South and East Asia and the Pacific, and Central Asia and Eastern. In western and central Europe and North America the number of new infections has remained fairly low.

Krinninger added that in most world regions HIV-prevalence and AIDS-related deaths are steadily declining, but the Middle East and North Africa (MENA) region is an exception. Furthermore, the UNAIDS statistics indicate that the number of new infections rose by 26 % in this region.

In Africa, governments, international organizations, and key players in the fight against HIV/AIDS continue their collaborative efforts in fighting this global epidemic.

In December 2019, the International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) held its 20th Conference in Kigali --- dubbed as the biggest conference on AIDS in Africa where close to nine thousand participants from 152 countries attended.

The conference theme "AIDS FREE AFRICA - Innovation, Community, and Political Leadership" engaged all participants in the Post-SDG Framework, where sustainability of the [Type here]

response in reaching 90, 90, 90 UNAIDS will not be possible, organizers declared, if Human rights are not the key priority in the context of strengthening the application of science-based evidence.

The 20th ICASA was an opportunity to renew this global commitment by drawing the world's attention that the legacy is now under threat as a result of the global economic downturn. The gathering was an opportunity for the international community, and all Africans, in committing to achieving an AIDS-free Africa.

Rwanda President Paul Kagame officiated the official opening of the Conference, highlighting the need to shun stigma, pursue innovative approaches and invest the necessary financing resources.

He was joined by the President of Mozambique Filipe Nyusi as well as the Director General of the World Health Organisation, Tedros Adhanom Ghebreyesus.

President Kagame highlighted stigma and silence as the real killers when it comes to sexually transmitted infections. He said, "shame discourages people living with HIV from learning and accepting their status and accessing the healthcare needed to live a full life." He further said that "ICASA exists in order to break down the taboos that impede prevention and early treatment." He declared that "AIDS is an epidemic without borders."

## **Fight against HIV/AIDS: Rwanda's Experience**

President Kagame also emphasized that "Much of the success in the campaign to halt the spread of the virus can be credited to global cooperation." He further remarked that "It is vital to continue raising the level of support for initiatives, and governments in Africa must prioritize domestic financing for health care."

President Kagame reiterated that "Good politics and governance have everything to do with health. There is no substitute for building an inclusive and caring society."

WHO Director General, Dr. Tedros Adhanom Ghebreyesus shared his observations that in Rwanda, over 90 per cent of all people living with HIV know their status and almost all of them are on life-saving treatment. Of those, 90 per cent have achieved viral suppression." This made Rwanda as one of the few countries to achieve the 90-90-90 targets prior to 2020.

By 2020, UNAIDS --- under its fast-track target known as 90-90-90 --- aims to have 90 percent of people with HIV knowing they are HIV-positive, 90 per cent of diagnosed people on treatment, and 90 per cent of those on treatment able to use the medication to suppress the amount of virus in their bodies to a low level.

The Minister of Health, Dr. Diane Gashumba has reported that Rwanda's fight against the HIV/AIDS epidemic is grounded in the principle that those affected should be at the center of the response. The integration of HIV treatment into maternal and child services has led to more equitable access to prevention and treatment. In collaboration with key partners,

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Rwanda has managed to put its people at the center of each intervention that is being made in the health sector.

Mozambican President Filipe Nyusi commended Rwanda's progress towards the fight against HIV/AIDS – and considered it a lesson to be learned in the fight against the HIV epidemic.

During the conference, ICASA President Prof. John Idoko reported that steady progress in the reduction of AIDS-related deaths has been witnessed, yet efforts are off track to reach the 2020 targets for reduction in new HIV infections.

## **ICASA's recommendations in the fight against HIV/AIDS**

Perspectives and actions were recommended at the conclusion of the 20<sup>th</sup> ICASA Conference that are worth noting:

Political leaders have to promote health rights as human rights, address gender inequality, and to respect vulnerable populations during the designing and implementation of health policies. The government has to mobilize domestic resources to finance health budget in their respective countries. New and innovative health solutions needs to be developed, policies and guidelines needs to be more inclusive, and scientists needs to pay more attention to what communities suggest. Mental health is a big issue that needs to be addressed as part of the package for HIV care, and people living with disabilities needs more information and knowledge to enable them make the right decisions. (Excerpt from the Remarks delivered by Colonel (Dr) Alain Azondekon, the Chief Rapporteur.)

Community means people who are infected and affected by HIV, sex workers, MSM, drug users, and prisoners who are at a high risk of contracting HIV infected. Political leadership is crucial to accelerate the HIV response. Evidently, partnerships with civil society organizations, faith based organizations, donors, and youth is important to end the HIV epidemic. Despite the recognized critical role of the community, community members still face discrimination and stigma for who they and how they live. (Excerpt from the remarks of Madam Jeanne Gapiya Niyonzima who represented the community.)

The youth has an important role in the fight against HIV. The response to the HIV/AIDS in Rwanda is an example of how political leadership impact in the achievement of goals. Therefore, it is fundamental to strengthen the role of political leadership. It is also necessity to ensure that every African child get access to Comprehensive Sexual Education. Laws need to be reformed, and make laws that value family planning. (Excerpt from the remarks of Mr. Mabingue Ngom, the Regional Director of UNFPA.)

The global fight against HIV/AIDS needs to focus on: new ways of prevention; how to integrate HIV response with other diseases response; the power of communities; and the importance of mobilizing domestic resources. (Excerpt from the remarks of Prof. John IDOKO, ICASA President.)

Health should be seen as an investment to be made with the HIV response. It is extremely crucial to live safe and healthy lives. Leaders must be committed to more investment in  
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health, and the well-being of adolescents and girls in particular. Challenges remained on how to improve mental health management. (Excerpt from the remarks of Dr. Diane Gashumba, Rwandan Minister of Health.)

## **Fight against HIV/AIDS: DRC's experience**

The Democratic Republic of the Congo (DRC) has one of the lowest cases of HIV (0.7% in adults between 15 and 49). But access to primary care for the disease is not adequate. In 2016, 30% of infected individuals were still dying for not having access to the required treatment in early stages.

According to UNAIDS, in 2018, DRC had 450,000 cases of HIV infections with 17,000 death cases. Due to various actions and programs, this death rate has been reduced from 34,000 in 2010 to 13,000 in 2018 - a 60% reduction. The rate of new cases has also dropped from 31,000 to 19,000.

In the DRC, all actors have actively worked toward the 90-90-90 objective for 2020 but fell short of achieving the targets.

Data in various reports have indicated that 62% of people living with HIV are aware of their status, but only 57% underwent treatment. Meanwhile, in this percentage, only 25% of infected children (0-14 years) underwent treatment.

On the other end, 44% of pregnant women have access to drugs to prevent mother-child transmission. This has preserved the life of 23,000 new born so far.

The rate of women living with HIV is high compared to male: 71.79% of infected individuals are female and 58% of them received medical treatment compared to 73% of male that received adequate treatment.

In DRC, with the support of the Government, local partners and organizations both local and international organized a forum called the National Forum for Mobilization of Workplaces against HIV (FONAST) --- to assess, study and set new goals to fight HIV.

Participants of this forum include but not limited to:

- PNMLS (Multi-sectoral national plan against HIV),
- CIELS (Inter corporation coalition against HIV/AIDS, tuberculosis and malaria)
- PNLS (National Plan against AIDS)
- UNAIDS
- OMS (WHO)
- UNICEF
- Local authorities.

FONAST has already had 5 editions, with the latest being in November 2019. Each edition has focus areas such as:

- Preventing HIV transmission from the mother to the child

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- Integrating the fast-track cities
- Adopting Option B+ programs
- Achieving the 90-90-90 goal
- Finances to be mobilized to fight HIV
- Involving all work sectors into fighting HIV.

At the end of each edition, deliverables were given to each actors, which will then be assessed in the following edition to track change and development.

In DRC, additional measures to provide adequate treatment and HIV prevention have been: (a) Support of local hospitals by MSF (Doctors without Borders) in HIV screening and education in Goma and Kinshasa; (b) Support of local initiatives such as the National AIDS Control Council (CNLS), PNLS, OMS and PNUD (UNDP).

## **UNAIDS AFRICA UPDATE & OBSERVATIONS**

Africa continues to be the most affected region by HIV/AIDS in the world, particularly among young women, although infections have declined.

UNAIDS Africa reported that new HIV infections for the East and Southern Africa Region were 800,000 in 2017, a 30% decrease since 2010 and for West and Central Africa there were 370,000, an 8% decrease.

UNAIDS data revealed that in 2017, 19.6 million people living with HIV were from the Eastern and Southern Africa Region. Among them 1,100,000 were adolescents of which 650,000 were girls. Six million and one hundred thousand people living with HIV were from the West and Central Africa Region, among them 440,000 were adolescents, of which 250,000 were girls.

On access to antiretroviral therapy (ART), UNAIDS Africa reported that in Eastern and Southern Africa, 66% have accessed antiretroviral therapy in 2017; 81% know their status and 52% of those in treatment were virally suppressed. In Western and Central Africa, 40% have accessed antiretroviral therapy; 48% know their status and 29% of those on treatment were virally suppressed. In the same year, 59% of children (aged 1-14) in Eastern and southern Africa and 26% in Western and central Africa have accessed antiretroviral treatments.

On AIDS-related deaths, 380,000 people died from AIDS-related illnesses in the Eastern and Southern Africa Region, (a 42% decrease since 2010). Among these deaths, 22,000 were adolescents. In the West and Central Africa Region, 280,000 people died (a 24% decrease since 2010). Among these deaths, 13,000 were adolescents.

The UNAIDS Global Update has indicated that there has been a steady progress in the reduction of AIDS-related deaths, but efforts to reach the 2020 target for reductions in HIV infections are clearly off-track. More than half of new HIV infections in 2018 were from the key population and their sexual partners.

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WHO in Africa has reported that growing resistance to HIV drugs in Africa is threatening the significant progress made in the global fight against the virus. WHO and its partners have unveiled a five-year plan to monitor, prevent and respond to drug resistance. In an effort to reinforce the gains and end the AIDS epidemic by 2030. WHO developed the Regional Action Plan which was presented at the International Conference on AIDS and STIs in Africa (ICASA) in Kigali, Rwanda 20th . It outlined systems to monitor HIV drug resistance indicators and how to use them at clinic and programme level to minimize drug resistance and develop evidence-based quality improvement for antiretroviral medicine (ARV) programmes.

WHO in Africa further reiterated that the Regional Action Plan recommends providing and monitoring quality care to people living with HIV. Poor retention or frequent out of ARVs stocks are particular risk factors. Children and adolescents on treatment are at higher risk of resistance emergence, requiring close monitoring. The new plan, WHO in Africa further added, also prioritizes active engagement with ministries of health, partners, stakeholders, research institutions and laboratories to support development of national HIV drug resistance strategic plans which are fully integrated into routine monitoring and evaluation activities.

The 2020 Global AIDS Monitoring Report by UNAIDS will have special importance for the global effort in the fight against HIV/AIDS. It will provide the basis of the 12-month countdown towards countries' progress and accountability for the 2020 Fast-Track Targets — a stepping stone to reaching the end of AIDS as a public health threat by 2030.

Furthermore, the report will be used in setting the Global AIDS Targets for 2025. The 2025 target setting will inform the national strategic plans on AIDS for the coming years. UNAIDS Global Monitoring Report will inform the 2020 development of the next Global AIDS Strategy, 2021-2030.

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