

ALGERIA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNHCR, UNICEF, UNDP, UNFPA, UNODC, WHO, UNAIDS SECRETARIAT, IOM

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

In Algeria, the United Nations Joint Team reinforced the country's efforts to improve HIV prevention and treatment services for vulnerable and key populations, including people living with HIV, migrants and refugees, and sex workers. Gains have been made in increasing access to combination HIV prevention, including pre-exposure prophylaxis services (PrEP) and harm reduction programmes for populations at risk as well as in transitioning people living with HIV to a new first line antiretroviral treatment with a better health outcome. Efforts to mobilize financial resources for nongovernmental organization-led HIV programmes and implementation of community sensitization to promote uptake of HIV and COVID-19 services were also key areas of support in 2020-2021.

HIV TESTING, TREATMENT AND EMTCT

Technical assistance was provided for the Ministry of Health in the development of a new national elimination of mother-to-child transmission of HIV (EMTCT) strategy, which includes innovative strategies and revision of legal frameworks aimed at increasing access to prevention of mother-to-child transmission HIV (PMTCT) services in Algeria. The new strategy is scheduled for launch in the third quarter of 2022.

A feasibility study was conducted on the implementation of HIV self-testing and results highlighted that 70% of community stakeholders were in favour of its implementation while only 40% of health workers endorsed the programme. Lessons from the study showed the need for educational campaigns to increase awareness, knowledge, and support for integration of HIV self-testing in the national biological guidelines.

The national HIV treatment guidelines were revised to integrate Dolutegravir (DTG) as the first line treatment regimen. This enabled 80% of people living with HIV on treatment to transition to DTG. Extensive advocacy with the Ministry of Health and the Medicines Patent Pool's (MPP) also enabled the Government to purchase DTG at a low price from end 2021 under a voluntary licence from MPP and ViiV Healthcare company. This helped the Government to reduce its spending on ART by 30%. Besides, the updated HIV treatment guidelines also prompted the scale up of pre-exposure prophylaxis (PrEP) services among serodiscordant couples, men who have sex with men and female sex workers in the country.

Under the Partnership to Accelerate COVID-19 Testing (PACT) and in collaboration with the Ministry of Health and five nongovernmental organizations - AIDS Algérie, ANisS, EI-HAYET, Rev+ and Solidarité AIDS, Algeria's country preparedness and response to the COVID-19 pandemic was strengthened ensuring continuity of HIV services. A total of 168 community health workers were engaged to sensitize 5000 people living with HIV and persons from vulnerable and key populations on COVID-19 prevention, associated risks, testing and vaccination services in 15 cities across Algeria. These efforts included organization of 380 awareness-raising activities in hotspots, 140 orientation and support sessions for COVID testing and vaccination services, three advocacy workshops with health authorities and health professionals, and economic support to 200 vulnerable people living with HIV.

As part of the national combination HIV prevention programme and through PACT, community-based HIV testing and counselling (HTC) activities were implemented in the targeted cities during the COVID pandemic contributing to an increase in HTC coverage among vulnerable and key populations—from 50% in 2020 to 88% in 2021 (Ministry of Health, 2021).

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

In 2020-2021, the Joint Team made substantial contributions warranting continuity of combination HIV prevention services among vulnerable and key populations. These included mobilization of resources for five nongovernmental organizations and 300 community health workers to provide HIV, sexual and reproductive health (SRH), COVID-19 testing and vaccination, and needle exchange services. The community health workers reached more than 15 000 migrants, refugees, asylum seekers, men who have sex with men, female sex workers, and people who inject drugs in 10 cities across the country. Beneficiaries also improved their understanding on sexual exploitation, stigma, and discrimination prevention. Personal protective equipment and hydroalcoholic gel were distributed to the community health workers and beneficiaries to support HIV prevention service delivery during COVID-19.

Technical assistance was provided for an online survey to assess the baseline SRH, including HIV and sexually transmitted infections (STIs) knowledge and information needs of young people among community health workers in 13 districts. Survey results revealed increased knowledge gaps of SRH among community health workers and the need to establish a national training programme for trainers. This led to the development of a trainer guide aimed at strengthening the capacity of community health workers for service delivery; and improving the quality of communication materials to promote health and safe sexual practices and uptake of HIV and STI prevention and testing services among youth.

INVESTMENT AND EFFICIENCY

Technical assistance was offered for the development of social contracting guidelines to strengthen partnership between the Government and civil society organizations for the implementation of community-based HIV response as prioritised in the National Strategic Plan 2020-2024. Consorted effort is needed to operationalize the social contract guidelines, focusing on CSOs working on combination HIV prevention programmes.

Efforts to mobilize financial resources for nongovernmental organization-led HIV programmes and implementation of community sensitization to promote uptake of HIV and COVID-19 services were also key areas of support in 2020-2021. US\$ 100 000 were mobilized to support PACT initiatives across the country and leave to one behind during the COVID-19 pandemic.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The National Human Rights and HIV Strategy 2022-2026 was developed and validated by stakeholders of the national HIV response, thanks to the significant contribution made by the Joint Team. With a strong focus on gender inequalities, the strategy reinforces Algeria's commitment to upholding human rights, justice, equality and ending the AIDS epidemic by 2030, a direct contribution towards the Sustainable Development Goals (SDGs) 5, 10, and 16.

As part of the development of the Common Country Assessment (CCA) and the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2022-2026, the Joint Team collaborated with research centres, national authorities, NGOs, and networks of key and vulnerable populations to ensure that the needs of populations left behind, including women, people living with HIV, migrants, refugees, and asylum seekers are addressed within the national health and development policies and programmes. The Joint Team further supported implementation of the differentiated service delivery (DSD) approach addressing social and cultural norms that reinforce discrimination, inequality, and gender-based violence among key and vulnerable populations, thus contributing to ending AIDS as part the implementation of SDGs.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic had negative impact on the national HIV response, including implementation of the combination HIV prevention programmes targeting vulnerable and key populations, disruption of care and treatment services for people living with HIV, and increased HIV-related stigma and discrimination. Competing national priorities significantly delayed planned activities, including implementation the EMTCT Strategy, and delays in the rollout of the opioid agonist therapy (OAT) programme severely limited access to a comprehensive package of harm reduction services for people who inject drugs during the pandemic.

Experiences from the COVID-19 pandemic underscore the leading role civil society organizations played in ensuring the continuity of HIV services among vulnerable people living with HIV, especially women living with HIV affected by the COVID-19 pandemic lockdown measures. These included provision of HIV and COVID-19 prevention services, including COVID-19 testing and vaccinations; home delivery of ART; transportation to treatment centres; and socio-economic support. However, sustainability of community-led combination HIV prevention interventions and services among key and vulnerable populations remains at risk due to insufficient funding and lack of capacity needed to mobilize more resources.

Data related to access to primary health care services, including HIV services among prisoners are not reported by the Ministry of Justice to the Ministry of Health lead of national AIDS committee, making it difficult to identify areas for technical support aimed at strengthening these services in close settings.

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