

ANGOLA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

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

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team reinforced Angola's efforts in expanding HIV testing and counselling (HTC) services among young people, key populations, and their families through partnerships with civil society organizations, activists, and peer educators. Gains have also been made in educating young people on prevention of HIV, sexually transmitted infections (STIs), and unintended pregnancies. Support was provided to address human rights violations, stigma, and discrimination against key populations which led to the signing of new penal code decriminalizing consented sexual relations between people of the same sex. The Stigma Index was also completed for the first time in Angola to help implementation of evidence-based HIV programmes for key populations. Focus on high impact programmes at sub-national level in grant applications resulted in significant increase in donor funding for the national HIV response.

HIV TESTING AND TREATMENT

The Joint Team, in partnership with the Angolan Network of AIDS services (ANASO), organized HTC activities targeting key populations in the city of Luanda. Nineteen female sex workers and their male partners accessed HTC services through this initiative, and five people who tested HIV positive were referred to health facilities ensuring continuity of care. Meanwhile, an HCT initiative targeting refugees in humanitarian settings provided 1655 people (854 males and 801 females, aged between 14 and 70 years) access to HTC of whom nine people were tested positive for HIV and referred to treatment.

Technical support was provided for reviewing existing laws and policies to enable adolescents and young people to have an autonomous consent to HIV testing and counselling in Angola. The review findings were disseminated among stakeholders to inform and improve adolescent- and youth-friendly HIV services.

PMTCT AND FAMILY TESTING

The Joint Team supported the strengthening of an existing cash transfer programme to vulnerable households with 825 HIV-exposed uninfected children and children living with HIV under the age of five to overcome the socio-economic impact of COVID-19 pandemic and adhere to treatment in 14 health facilities in Luanda Province.

To improve the quality of prevention of mother-to-child transmission (PMTCT) and paediatric HIV services and data, 57 health providers were trained to improve their skills around HTC, the Health Management Information System as well as the referral and counter referral system for pregnant women living with HIV and HIV-exposed children in Matala and Lubango municipalities.

Technical assistance was also provided to Huila and Cunene provinces for the uploading and use of data on the District Health Information Software 2 (DHIS2) for the integrated HIV and sexual and reproductive health (SRH) programme. The BOSS PLAN tool was installed for 80 focal points of the different health units to improve performance and communication between the referral and counter-referral system of patients in Huila Province.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

ANASO and Centro de Apoio ao Jovem were supported in rolling out a civil society engagement campaign that reached 28 000 young people in Luanda Province with HIV prevention activities, including HTC, SRH, and COVID-19 information and services. A total of 1476 young people (672 girls and 804 young men) accessed HCT services and 13 people who tested HIV positive were referred to health facilities; 170 000 condoms were also distributed during this campaign.

The Joint Team also supported Fundo de Apoio a Assistência Social (FAAS)—a civil society organization led by teachers—to reach 11 014 young people in 16 public schools in the Maianga neighbourhood (Luanda Province), with information on the prevention of HIV and STIs and unintended pregnancy. Through a partnership with Fórum Juvenil de Apoio a Saúde e Prevenção do SIDA (FOJASSIDA), 6158 adolescents and young people were also engaged in Cazenga neighbourhood (Luanda Province), improving their knowledge on SRH while promoting availability of integrated services tailored for young people.

As a result of technical assistance provided to the National Public Health Directorate, 60 health workers were trained to implement quality of youth-friendly health services in line with the Adolescent National Health Strategy, including prevention of HIV, STIs and early pregnancy in Luanda, Uíge and Cuanza Norte provinces. The Joint Team also supported the Angolan AIDS National Institute in training 60 adolescents living with HIV as peer educators in Benguela, Luanda, Huila and Cunene provinces and establishing three psychosocial support groups to serve their communities in these provinces.

A total of 316 activists who are trained in adolescent sexual reproductive health were supported to provide accurate information on sexually transmitted infections, including HIV and support services to their respective communities. These activists mobilized 13 483 adolescent girls and young women aged 10-24 years to access HTC and of the 316 people who tested HIV positive, 305 agreed to follow up with community-based services. Using resources from the Global Fund, the Joint Team also distributed HIV prevention service packages to 59 565 adolescent girls and young women in selected municipalities of Benguela, Cuando Cubango, Cuanza Sul, Cunene, Huila, Luanda, and Namibe.

To improve uptake of HIV services among key populations, the Joint Team provided support to train peer educators on HIV prevention and uptake of health services among female sex workers. In turn, the trainees reached 14 598 female sex workers with HIV testing and counselling and a package comprising information on HIV and STIs prevention, condoms, and lubricants. 12 197 of the female sex workers agreed to have HTC and 433 who tested positive for HIV were referred to health facilities—with 325 currently being followed by community peer educators to ensure continuity of care and support.

HUMAN RIGHTS, STIGMA, AND DISCRIMINATION AMONG KEY POPULATIONS

In November 2020, heightened advocacy by the Joint Team and civil society resulted in the signing of a new penal code decriminalizing consented sexual relations between people of the same sex or gender. The new legislation, which replaces the penal code of 1886, came into effect on 11 February 2021 and introduces heavier penalties for violence and refusal of employment based on sexual orientation.

The Joint Team, in partnership with ANASO, led the review of a training manual for the delivery of friendly HIV services for key populations, including lesbian, gay, bisexual, transgender, and intersex persons, and sex workers in Angola ensuring its alignment with the new Angolan penal code paving the way for equitable service delivery.

For the first time in Angola, the Stigma Index 2.0 was completed in partnership with the United States President's Emergency Plan for AIDS Relief (PEPFAR), the Global Fund and ANASO and findings will help to ensure rights-based and results-oriented HIV prevention, treatment, and care programming in the country. The Stigma Index 2.0 report is scheduled for launch in March 2022.

INVESTMENT AND EFFICIENCY

The Joint Team conducted a situation analysis on the progress towards the 90-90-90 targets to end the AIDS epidemic by 2030. Outcomes of the assessment revealed strategic priority areas that need heightened focus to accelerate the HIV prevention efforts and close the gaps in treatment services among people living with HIV. As a result, a five-year HIV Strategic Plan (2022-2026) was developed to advance the Fast-Track city initiative in Luanda and the Paris Declaration on Fast-Track Cities was signed by Governor of Luanda City in November 2021. In addition, the Joint Team led six advocacy meetings with governors and local leaders in various provinces to secure high-level commitment to the HIV response and to keep HIV among the top development priorities in Angola.

The Angolan AIDS National Institute, with support from the Joint Team, led technical working sessions on assessing quality of data regarding access to HIV treatment in Benguela Province. Outcomes of these sessions were used to inform strategies aimed at strengthening HIV reporting systems across Angola. To ensure efficiency and effectiveness of the national HIV response, the Joint Team also supported a four-day training for 72 community peer educators to improve their knowledge around HIV response strategies and community-led approach for monitoring and evaluation in Cuanza Sul Province.

As a result of technical and financial support, the Government developed an innovative and result-oriented Global Fund grant proposal for 2021-2024. The Joint Team played a key role in ensuring Angola's grant application would be focused on high impact activities at the sub-national level replacing diffused programmes with limited impact at the national level. The Global Fund Technical Review Panel (TRP) endorsed the new approach and approved US\$ 82 600 349—representing a 56% increase from the previous grant period.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

In 2020, the United Nations led an assessment on the socioeconomic impact of COVID-19 in Angola and developed a two-year evidence-informed and results-oriented workplan to help the country achieve the Sustainable Development Goals, based on the findings of the assessment. The Joint Team also succeeded in positioning the HIV and COVID-19 responses as top national priorities within the 2020-2022 United Nations Sustainable Development Cooperation Framework (UNSDCF) of Angola.

The Joint Team supported the conduction of a country situation analysis of the progress, including remaining gaps and challenges towards the Fast-Track targets. Results of the analysis informed rights-based programming and long-term strategic planning to address the challenges to gender equality, and a five-year strategic plan was developed to guide the HIV response in the City of Luanda in the 2022-2026 period.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic imposed enormous constraints in the HIV response, including difficulty of engaging large number of people for HIV sensitization and service drives due to social distancing policies.

There are limited mechanisms and strategies for tracing of people living with HIV enrolled on treatment services aimed at reducing loss to follow up cases, including mother-baby pairs in PMTCT, and discordant couples; and paediatric ART coverage is lagging behind. Experiences showed the need to establish a treatment working group and develop effective strategies that prioritize identification of children living with HIV and increase paediatric ART coverage.

There is a perceived and /or experienced stigma and discrimination towards people living with HIV. Results from the Stigma Index survey will constitute evidence on how stigma and discrimination impact people living with HIV and key populations, and will inform targeted HIV programming in the country.

Timely data collection and reporting continue to challenge the national HIV response. Efforts are being made to strengthen the monitoring and evaluation (M&E) system by replacing the paper-based reporting mechanism with electronic system; and improve the existing community-based HIV M&E system.

Report available on the
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