

BURKINA FASO

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
90% of people living with HIV know their status; 90% of people who know their status are on ART, and 90% of people on ART are virally suppressed.	ON TRACK	77.9% of people living with HIV know their status; 86.3% of people living with HIV who know their status are on ART, and 18.3% of people on ART are virally suppressed (Progress report on the AIDS response in Burkina Faso, March 2021).
Increasing paediatric coverage from 24% to 50% by 2021.	ON TRACK	Paediatric care is still low compared to the adult level; however, efforts have been intensified to improve the situation swiftly. An estimated 16 000 children (0-14 years) were living with HIV in Burkina Faso in 2020 (GAM 2021).
Elimination of mother-to-child transmission (eMTCT) of HIV by 2021.	SLOW PROGRESS	Mother-to-child transmission was at 12% in 2020 (compared to 9% in 2019) (GAM 2021). Work towards eliminating mother-to-child transmission is progressing slowly, especially in the areas with internally displaced people. The 2017-2020 eMTCT programme has ended; its evaluation and new programme development is in progress.
Mitigate the impact of the humanitarian crisis on the national response by 2021.	ON TRACK	The humanitarian crisis that the country has been experiencing since 2016 has been aggravated by the COVID-19 pandemic. The HIV emergency plan for internally displaced people is being partly implemented; a national level COVID-19 response plan has been adopted and is being implemented.

JOINT TEAM

UNHCR, UNICEF, WFP, UNDP, UNFPA, UNESCO, WHO, WORLD BANK, UNAIDS SECRETARIAT, IOM

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

Trainings among health and community workers, especially within refugee and displaced-persons camps, have built significant capacity in Burkina Faso in 2020 in terms of HIV screening and monitoring to reach vulnerable populations, young people and families. Through formative supervisions and trainings, progress has also been made in maternal and newborn health and towards eMTCT validation, and with prevention messages widely disseminated thanks to outreach among adolescents, young people and refugee populations. Stigma and discrimination have been further tackled by the Joint Team through advocacy and awareness-raising among community and religious leaders, law enforcement and the legal community.

ACCESS TO TREATMENT**TECHNICAL ASSISTANCE; CAPACITY BUILDING**

Technical assistance was provided for the analysis of the AIDS situation, the development of training guides and modules, and the training and supervision of 180 staff from ART centres nationwide. Also, technical assistance was provided to select best practices in terms of the differentiated approaches to HIV service implemented by the communities, and as a result, community and continuum screening standards and guidelines were updated.

Differentiated screening and biological monitoring were supported in refugee and internally displaced-persons camps. Training was delivered to 75 health workers from the Sahel region on differentiated approaches to HIV testing (30 in Dori, 15 in Gorom-Gorom, 15 in Djibo and 15 in Seba). Additionally, capacity of health workers and community actors in Goudebou and Mentao refugee camps, as well as health workers in Djibo and Dori health districts, was built in preparation of the roll out of a screening campaign during the week of celebration of World AIDS Day: 3109 people (including 2158 women) were screened for HIV, of which 16 positive cases were notified and linked to treatment. Also, 24 378 condoms were distributed during the campaign.

In collaboration with the pharmaceutical organization Abbott, training was delivered for 20 health and community agents in health care facilities to boost the implementation of family screening activities, enabling 30 333 young people and adolescents from families of people living with HIV to benefit from screening through the family index method. In addition, two mPIMA testing devices were procured for the Boulmiougou (Central region) and Seguenegua (North region) health districts, reaching paediatric testing rates of 97% and 68% respectively by mid-2020.

eMTCT**TECHNICAL ASSISTANCE; PARTNERSHIPS; CAPACITY BUILDING**

Progress towards eMTCT validation has been recorded for some indicators, and the certification process is ongoing with the support of the Joint Team, including technical assistance in monitoring and data analysis, and developing HIV estimations.

In collaboration with the Ministry of Health, the Joint Team delivered a PMTCT training for approximately 30 health care workers in Barsalogo. Besides, 128 monitoring and evaluation supervisions for health care workers were carried out nationwide, as well as joint supervisions with other specialists in nutrition, and community, maternal and newborn health.

To better equip community actors from the AMMIE paediatric-focused NGO in the North region, 1589 people were trained on HIV screening among women and children, as well as on delivering prevention messages; participants were then able to provide community support for mother-child pairs (home visits and follow-up supervision) facilitating early diagnosis in several children.

PREVENTION **TECHNICAL ASSISTANCE; CAPACITY BUILDING**

30 988 young people across the country received sexual and reproductive health (SRH) messages, including responsible sexual behaviour and HIV/STI prevention, as part of the 'All In' campaign; in the North region, an additional 41 789 young people and teenagers were reached.

100 health workers and psychosocial agents from the Boucle du Mouhoun, North, Center-North and Sahel regions, which are affected by insecurity, were trained on emergency SRH, including the prevention and care of HIV and COVID-19, family planning, psychosocial support and gender-based violence (GBV) in crisis and post-crisis situations, over a six-day training course. Participants were also trained on using data collection tools in emergency situations with a particular emphasis on HIV-related data.

The Joint Team supported the Sahel Regional Health Directorate for Adolescent and Youth Reproductive Health activities, producing and distributing 2000 books on SRH in schools, as well as 2000 registers for pregnancies in schools.

An integrated communication plan was implemented for refugees, internally displaced people and host populations in the municipalities of Djibo, Barsalogo, Dori, Déou and Bourzanga on HIV and SGBV. Besides, 40 peer educators from the Gorom-Gorom district were trained in communication techniques to convey HIV prevention messages and received animation kits. Educational talks on the prevention of HIV/STIs and sexual-GBV were also delivered to the refugee populations, internally displaced people and hosts communities in the area.

HUMAN RIGHTS, STIGMA AND DISCRIMINATION **CAPACITY BUILDING; ADVOCACY; COMMUNITY ENGAGEMENT**

In the Centre-North and North regions, which are reception areas to many internally displaced people, 35 community and religious leaders benefited from advocacy activities for more active involvement against stigma and discrimination. In addition, 26 community and religious leaders benefited from trainings on stigma and discrimination (including communication, social mediation techniques and legal frameworks). Thirty-three law enforcement and community actors, including police officers, members of the judiciary, lawyers, and civil society actors, also received capacity building on human rights, HIV/AIDS and issues of stigma and discrimination against people living with HIV and key populations.

SYSTEM STRENGTHENING AND SUSTAINABILITY **RESOURCE MOBILIZATION; TECHNICAL SUPPORT**

Through its strong engagement with the Country Coordinating Mechanisms workgroups and the United States President's Emergency Plan for AIDS Relief (PEPFAR) management units, the Joint Team provided technical assistance to the country in 2020 to mobilize more than USD 200 million from the Global Fund and more than USD 10 million from PEPFAR.

CONTRIBUTION TO THE COVID-19 RESPONSE

With technical assistance from the Joint Team, a national plan was developed and adopted around prevention, case management and the strengthening of the health system to address the COVID-19 pandemic. Support was also provided to the Ministry of Health to develop a contingency plan focusing on prevention for people living with HIV and the adoption of multi-month dispensing (MMD) for ART to support treatment adherence, with strong community involvement in distributing medication. With support from the Joint Team and the Global Fund, a total of 7209 people benefitted from MMD of ART in 2020.

To mitigate the impacts of the COVID-19 pandemic, the Joint Team worked with networks of people living with HIV and key populations to respond to their nutritional needs: 1000 vulnerable people including people living with HIV and key populations (686 of whom were women) were identified on the basis of a vulnerability grid to benefit from food assistance in the form of cash transfers in the regions of Boucle du Mouhoun, Centre North, East, North and Sahel. According to the post-distribution survey, the money received was used mainly for the purchase of food, as well as health and rent costs, and savings. In parallel, 5240 people received awareness messages on HIV and COVID-19 prevention and nutrition to contribute to behaviour change, and 820 people were screened for acute malnutrition; malnourished patients were referred to the nearest authorized health centres for treatment.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA TECHNICAL ASSISTANCE, CAPACITY BUILDING

Contributing to the achievement of both SDG 2 (zero hunger) and 3 (good health and well-being) in Burkina Faso, 26 health workers from Persis, Educo, Séguénéga, Gourcy and Yako were trained on monitoring people with severe malnutrition and with complications, and how to make referrals for consolidation of the nutritional status of children living with HIV in health facilities in the North region; two follow-ups and supervisions have also been carried out. Three tonnes of food were distributed during 2020 to 150 mothers accompanying severely malnourished children with complications during intensive treatment of children. In addition, 22 children aged 6-59 months and seven pregnant and lactating women living with HIV were treated for malnutrition.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>COVID-19 has presented a major challenge to maintaining the provision of HIV services for displaced populations, compounding existing challenges of the humanitarian crisis and insecurity context.</p>	<p>Mitigate the impacts of COVID-19 and the humanitarian crisis on the HIV response in Burkina Faso, including through advocacy and support for the establishment of community-based ART delivery and MMD.</p> <p>Further strengthen livelihoods of people living with HIV through cash-transfer programmes, and plan mitigation measures in case of crisis.</p>
<p>Insufficient paediatric HIV screening among malnourished children in health facilities poses a continuing challenge. There are insufficient health workers to ensure the various preventive and treatment activities, and a lack of training in data management and analysis.</p>	<p>Advocate with the Ministry of Health to institute systematic HIV screening for all children in malnutrition consultation across the country; support the introduction of rapid tests in all centres (health and community) delivering malnutrition consultations.</p> <p>Promote the use of paediatric ART consent forms to increase access to treatment for children testing positive for HIV.</p>
<p>While the number of people living with HIV knowing their status is high, treatment retention is poor (currently around 20%; National AIDS Programme data, 2020).</p>	<p>Collaborate with the National AIDS Council and the Ministry of Health to improve treatment retention, by supporting implementation of Global Fund and PEPFAR grants.</p>
<p>The low capacity of HIV community workers in targeting key populations impedes HIV prevention efforts.</p>	<p>Reinforce capacity of community actors to reach key populations via the delivery of trainings, in collaboration with the civil society institute.</p>
<p>Domestic HIV funding is decreasing, leading to challenges in terms of testing, treatment and nutritional care of people living with HIV, and sustainability of the national response.</p>	<p>Support resource mobilization activities for the implementation of the National Strategic Plan 2021-2025.</p> <p>Continue to advocate for the integration of people living with HIV into social protection systems and programmes. The use of social protection platforms will help meet the needs of sustainability, capitalization and accountability.</p>

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