

GAMBIA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, WHO, UNAIDS SECRETARIAT, FAO, IOM, OHCHR

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team continued to support the Government to provide HIV services in the Gambia during the COVID-19 pandemic. Technical support was provided to increase HIV prevention, testing and treatment knowledge and access to services among vulnerable and key populations, including through the provision of HIV prevention and testing commodities to support HIV programmes across the country. Moreover, health care providers were trained to increase the quality of vertical transmission of HIV services and scale up early testing for HIV-exposed children. Thousands of vulnerable people, including people living with HIV with moderate acute malnutrition were able to access food and nutrition support to ensure their retention on treatment and improve their health status. Social workers and people living with HIV were also trained on health meal preparation and hygiene measures. Increased advocacy and technical support led to the Gambia joining the global partnership that pursues the elimination of all forms of stigma and discrimination. Finally, the Joint Team facilitated the establishment of an inter-institutional committee and the rollout of a voluntary local review to assess progress towards national and international HIV targets, and the Sustainable Development Goals.

HIV PREVENTION, TESTING AND TREATMENT

The Joint Team in collaboration with the Network of AIDS Service Organizations (NASO) and with the support of healthcare providers and members of the Luomo Market Committees launched an HIV awareness and HIV testing and counselling (HTC) campaign during Lumos (weekly village markets) in Bureng, Kaur and Kerr Ayib—cross border areas between Gambia and Senegal. Over 3000 people, including vulnerable and key populations were sensitized on HIV prevention, testing, treatment, and care services while 165 people accessed HTC services, of whom six people tested HIV positive and were referred to the nearby health facilities in Kaur, Farafenni and Bansang cities.

The COVID-19 pandemic restrictions coupled with inadequate access to HTC and HIV-related stigma affected access and uptake of HTC services. To overcome some of these challenges and support the Government's efforts to reduce new HIV infections in the country, the Joint Team procured 304 950 pieces of male and female condoms and 1000 HIV self-testing kits.

The Joint Team in collaboration with Mutapola Voices—the first network of women living with HIV in the Gambia—sensitized 25 orphans and vulnerable children from five support groups across the country to improve their understanding of their sexual and reproductive health and rights (SRHR), access to psychosocial care, and social protection services.

The Joint Team provided financial and technical assistance to the Hands-on Care Health Centre—a national nongovernmental organization working on HIV—to conduct a three-day training for 100 people living with HIV from eight support groups in Banjul, Kanifing Municipal Council (KMC), and West Coast Region 1 and 2 to improve their understanding of antiretroviral treatment (ART), care and support services, and positive living. The training further covered several topics, including family planning, safer sexual practices, and interaction with service providers.

The Joint Team sought to address some of the challenges impeding scale up of comprehensive prevention of mother-to-child transmission of HIV (PMTCT) and early infant diagnosis (EID) services, such as lack of early detection, delays in turnaround time for test results, and lost to follow-up of people living with HIV. This included training for 20 participants (six public health officers and 14 community health nurses) to improve their understanding of PMTCT and EID services; standard operation procedures for dried blood sample collection, packaging, and transportation. The trainees were also provided with information, education, and communication (IEC) and behaviour change communication (BBC) materials to support their community engagement efforts.

SOCIAL PROTECTION AND SUPPORT TO PEOPLE LIVING WITH HIV

In partnership with the National AIDS Control Programme, the Joint Team enrolled 1128 people living with HIV with moderate acute malnutrition (MAM) on therapeutic supplementary feeding and treatment services to improve adherence to ART and their overall health outcomes.

Nutritional support was also provided for vulnerable populations, including pregnant and breastfeeding women and girls, children, and people living with HIV in four provincial regions and semi-urban districts of the West Coast Region. Additionally, 58 people living with HIV and seven social workers were trained to strengthen their skills on meal preparation using locally available nutrition ingredients and hygiene measures aimed at improving the nutritional status of mothers living with HIV and HIV-exposed children.

The Gambia joined the Global Partnership against stigma and discrimination to protect the rights of vulnerable and key populations, including people living with HIV and eliminate all forms of stigma and discrimination in the country. Under the leadership of the National AIDS Secretariat, the Country's Global Partnership Action Plan was developed to translate Gambia's commitments into concrete actions focusing on three settings: healthcare, individual and community, and workplace.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team contributed towards the 2021 United Nations Common Country Assessment (CCA) and supported active participation of people living with HIV and key populations to ensure their concerns are well addressed in the assessment. Key findings from the CCA including the need to accelerate progress on HIV and leave no one behind informed the new United Nations Sustainable Development Cooperation Framework (UNSDCF) 2022-2025 which seeks to fast-track the Gambia's progress towards the Sustainable Development Goals (SDGs).

The Joint Team further contributed to the establishment of UNInfo in Gambia—a UN-wide online tool used for planning, monitoring, and reporting on the United Nations Development Action Frameworks and Business Operations Strategies in Gambia.

The Joint Team organized a three-day inception workshop on the rollout of a pilot Voluntary Local Review (VLR) on the SDGs in Brikama and Kuntaur Area Councils, and Kanifing Councils. An inter-institutional committee, which comprises representatives from the Joint Team was established and technical support was initiated to help the local governments identify their priorities, set indicators, and report on their progress towards the SDGs and the National Development Plan.

At programme level, the Joint Team continued to make significant contributions to the *leave no one behind* principle, gender equality, human rights, and HIV-related issues that are central to achieving the SDGs 2 and 3, ensuring food security and better health outcomes of vulnerable populations. For instance, technical and financial assistance was provided to civil society organizations working on the HIV response to expand food and financial support to cover rental expenses for refugee men who have sex with men from Senegal who lost their source of income due to the COVID-19 pandemic.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic had negative socioeconomic impacts in the Gambia, including disruption of HIV services and elevated stigma and discrimination against people who were affected by the pandemic. While the Joint Team attempted to assess the human rights violations of people who acquired COVID-19, the study could not be materialized due to insufficient number of participants who were willing to respond to the questionnaires.

Lessons learned from the treatment literacy training among people living with HIV included its added value for communities, the need for sufficient learning time to ensure dissemination of accurate information and knowledge to community support groups, and the need for additional funding to ensure more participation especially of women living with HIV.

There is a need to establish a continuous follow-up mechanism to ensure people who test HIV positive are enrolled on ART in a timely manner and retained in care.

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