

GHANA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

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

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team made progress in scaling up reproductive health education in schools through capacity building of teachers and school staff and the development of an online national reproductive health education training system as well as a community-based and youth-led reproductive health education programme. Thousands of young people were also engaged on social media outlets to dialogue on the national HIV response. To increase demand and access to facility- and community-led HIV testing and referral services, the Joint Team collaborated with the government and civil society institutions. The implementation of differentiated service delivery initiatives for people living with HIV was also strengthened through supportive supervision, community outreach, distribution of information materials, and development of a pilot differentiated service project. Community health workers were trained and supported for the implementation of contact tracing through targeted outreach to people living with HIV to overcome the impact of the COVID-19 pandemic. The Joint Team supported the implementation of a pilot Point of Care (PoC) project which increased the number of PoC sites that provide early infant diagnosis and viral load testing services in Ghana. Outreach initiatives focussing on sexual and reproductive health rights and the prevention of sexual and gender-based violence reached thousands of young people at a teaching hospital.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

In partnership with the Ministry of Education, the Joint Team facilitated capacity building for more than 470 teachers and 330 technical officers, which enabled more than 45 000 students in 21 schools to benefit from sexual and reproductive health education.

The Joint Team provided technical assistance for the development of the national reproductive health education online training system (EMIS) which included key HIV indicators on knowledge of HIV prevention and transmission as well as sexual behaviours that put people at high-risk of HIV.

The Ghana Adolescent Health and Development programme was supported to develop a community-based and youth-led reproductive health education programme aimed at reaching out-of-school young people.

As a result of technical support, a Twitter chat was created prior to the June 2021 High-Level Meeting on AIDS enabling 5856 young people on Twitter to share their experiences and discuss their perspectives on the HIV response thereby informing the discussions around the UN General Assembly.

HIV TESTING AND TREATMENT

The National AIDS Control Programme was supported to develop the National Paediatric HIV Strategic Plan 2021-2025. The Joint Team further supported the Government to implement pilot Point of Care (PoC) technologies to scale up early infant diagnosis (EID) and viral load testing services with five sites opened at the end of 2021. A total of 683 HIV-exposed children benefitted from EID in 2022, of whom 41 tested positive and 31 children living with HIV were enrolled on antiretroviral treatment and care services.

The Joint Team worked with the National AIDS Control Programme, Christian Health Association of Ghana (CHAG), and West Africa Program to Combat AIDS to scale up HIV testing and treatment services. For instance, 900 people living with HIV were engaged to create demand for these services. The West Africa Program to Combat AIDS was also supported to provide community-based HIV and referral services for key populations.

In 2020-2021, the Joint Team continued to provide technical and financial assistance to scaling up differentiated service delivery initiatives for people living with HIV. The support included revising the differentiated service delivery operational manual and alignment with the World Health Organization guidelines; mobilizing resources from the Global Fund COVID-19 Response Mechanism for capacity building and supportive supervision; engaging people living with HIV to support community-based HIV programmes, such as peer-led psychosocial support and adherence to treatment and care services; developing demand creation materials for differentiated service delivery through the Global Fund Strategic Initiative; and completing a pilot project that integrated community-led monitoring and differentiated service delivery for viral load suppression.

Under the Partnership for Accelerated COVID-19 Testing (PACT) project, 63 community health workers were trained and supported on the implementation of contact tracing through targeted outreach to people living with HIV to mitigate the impact of the COVID-19 pandemic. The initiative emphasised on increasing access to personal protection equipment by distributing 4000 masks to vulnerable people living with HIV and breaking down barriers to the adherence to the COVID-19 safety protocols.

GENDER INEQUALITY AND GENDER-BASED VIOLENCE

The Joint Team trained 210 facilitators and provided technical and financial support to implement the "*Back to School*" campaign which targeted girls with higher risk of dropping out of school to encourage them to remain in school. The campaign also focused on reaching pregnant girls and supporting them to return to school after birth during the COVID-19 pandemic. More than 2000 girls, including pregnant girls were reached through this campaign.

With technical and financial support from the Joint Team, 3282 young people were reached through various outreach programmes held at the Korle-Bu Teaching Hospital focusing on sexual and reproductive health rights and the prevention of sexual and gender-based violence – for example dignity kits were provided to adolescents living with HIV as was a platform to discuss issues related to treatment adherence.

A campaign to ensure that survivors of sexual and gender-based violence know where to receive help (The Orange Support centre) was undertaken. As of December 2021, the OSC had received 3000 calls with 641 confirmed sexual and gender-based violence cases. Survivors of confirmed cases have received psycho-social counselling and a coordinated response by the

Domestic Violence Secretariat Unit (DOVVSU). Outreach programs were also conducted in communities in Accra and Kumasi reaching appropriately 11 896 people. Also, a total of 26 756 condoms were distributed to sexually active young people to promote HIV prevention and safe sex.

HUMAN RIGHTS, STIGMA, AND DISCRIMINATION

The Joint Team supported the Ghana AIDS Commission by providing technical elements to analyse the potential implications on public health and the HIV response of the bill “*Promotion of Proper Human Sexual Rights and Ghanaian Family Values*” which is being discussed by the Parliament.

Young people living with HIV were supported to develop a governance document which will regulate the United Nations’ support and collaboration with young people living with HIV in Ghana. The document provided the advocates (Young Health Association Advocates) with a constitution and the right to act as a legal entity that could officially participate in national policy development, implementation, and oversight activities.

The Joint Team under the Education Plus initiative, facilitated the training of 30 regional school health education programme (SHEP) coordinators, municipal SHEP coordinators, school based SHEP coordinators, and school nurses to support students living with HIV in Bono State. The trained officials reached over 3000 students, including students living with HIV and disseminated messages around reduction of stigma and discrimination as well as treatment adherence.

The Joint Team further supported a nine-month long anti stigma campaign related to HIV and COVID-19 comprising several awareness raising activities, including distributing educational materials in health institutions; broadcasting public service announcements on traditional and new media; development of informational videos featuring influential personalities in Ghana; sensitizing communities in hotspots using COVID-19 ambassadors; and engaging community health volunteers with stigma reduction activities.

INVESTMENT AND EFFICIENCY

As a result of technical support to the Country Coordinating Mechanism (CCM), US\$ 69 million was mobilized through the Global Fund COVID-19 Response Mechanism for the national COVID-19 pandemic response. The Joint Team further supported the development and implementation of guidelines aimed at ensuring the continuity of HIV services during the pandemic.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

In partnership with the Government and Civil Society, the Joint Team conducted two separate assessments on social protection and gender which revealed the need to include gender sensitive approaches to HIV prevention and HIV services programmes. Additionally, the social protection assessment highlighted four key points: the need for greater inclusion of people living with HIV and key populations, disaggregation of data for vulnerable and impoverished populations, removal of barriers to access of HIV services, and demand creation for available social protection programs.

The respective assessment results were widely shared with stakeholders and action plans were developed to support implementation of government- and community-led mitigating activities. Following the agreement with the Ghana Health Service and the results of the social protection assessment, the Joint Team provided capacity building on income generating activities and seed capital for 3000 people living with HIV in Eastern Region to empower them to establish small farming enterprises—contributing to the Sustainable Development Goals (SDGs) 3, 5, and 10.

The Joint Team-led initiatives in Ghana continued to make significant contributions towards the *leaving no one behind* principle and SDG 10 on reduced inequalities. For instance, under the Solidarity Fund for Social Enterprises, the Joint Team rolled out three key populations-led projects to help people from vulnerable and key population groups overcome the impacts of the COVID-19 pandemic. One of these projects enabled four young people living with HIV and three female sex workers to establish the *Martin Greenhouse* farm and the *No Weapon Fashion Design* boutique. The second project—the *Community Economic and Empowerment Programme* (CEEP)—provided capacity building in marketing, branding, financial management, and career guidance in fashion design to 27 men who have sex with men who are living with HIV, transgender women, and gay and bisexual persons. Finally, the Fund was used to support 20 female sex workers in Greater Accra to facilitate training on female empowerment and career development. All Solidarity Fund recipients received skills building in entrepreneurship, financial management, and self-esteem and personal empowerment. Challenges faced by all projects included: reporting results, financial management of funds received, and sustainability of projects overtime.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic disrupted some HIV services and programme implementation in Ghana. Pandemic-related restrictions and school closures also interrupted the delivery of HIV prevention and comprehensive sexuality education for in- and out-of-school adolescents and young people. Challenges persist to finalize the national guidelines for comprehensive sexuality education.

Survivors of sexual and gender-based violence in the country are neither comfortable nor empowered to report their cases—cases are mainly reported by family members or close confidants. Funding challenges continue to impede scale up of sexual and reproductive health and rights services among most vulnerable people who are left behind. Also, estimating needs and planning on condoms and lubricants, as well as for some other basic contraceptive methods remain challenges for the health sector.

Limited engagement of communities in the delivery and monitoring of HIV services continue to challenge the expansion of HIV testing and treatment services and follow-up of people living with HIV enrolled on treatment. Limited access to viral load test is also an impediment to achieving the 95-95-95 goals, as well as structural challenges in the information system. Lessons learned showed that community awareness creation and effective stakeholder engagement are key to successful partnerships aimed at closing the HIV testing and treatment gaps in the country.

Report available on the
UNAIDS Results and Transparency Portal

open.unaids.org