

# SOMALIA

*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
Percentage of people living with HIV currently receiving ART has increased by 9% from 2019 level.	<b>ON TRACK</b>	Approximately 3631 out of 11 000 estimated people living with HIV currently receiving ART (2% increase from 2019 figure of 3431). 38.3% of patients on ART have been transitioned to a dolutegravir (DTG)-based antiretroviral regimen. HIV testing for Tuberculosis (TB) patients attained a coverage of 94.4%, and of those found co-infected, 81.6% began ART (WHO Somalia, routine programme data, 2020).
90% of young people have the skills, knowledge and capacity to protect themselves from HIV.	<b>ON TRACK</b>	93% of youth have heard about HIV and had some form of HIV knowledge. Whilst there is a high percentage of awareness of HIV and modes of HIV transmission, the level of misconception and misinformation among young adults is also quite high (Youth Behavioural Survey 2018).
50% of people living with HIV and key populations enjoy equitable access to health and social services free of stigma and criminalization by end of 2021.	<b>ON TRACK</b>	The 2020 Stigma Index study was finalized in Federal and Somaliland; results validated and shared with the government and non-government stakeholders. The results show that stigma and discrimination experienced by people living with HIV remains high with 75% of people living with HIV choosing not to seek health services as a result of HIV-related stigma, and 61% choosing not to attend social gatherings because of stigma.

### JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, ILO, WHO, IOM

## JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

*Testing and treatment access further expanded with special for nutrition support for people with HIV and TB co-infections. There has also been constant advance in prevention coverage, particularly for young people, through awareness campaigns to improve understanding of HIV through community engagement and outreach. In partnership with networks for people living with HIV, government agencies and other institutions/actors such as legal aid practitioners, initiatives have been implemented to address gender inequalities, GBV, stigma and discrimination, and human rights violations against vulnerable and key populations. A new Global Fund grant has been leveraged and secured to further expand HIV services in 2021-2023.*

### HIV TESTING AND TREATMENT TECHNICAL SUPPORT; PARTNERSHIPS

With support from the Joint Team, Nutrition Assessment, Counselling, and Support (NACS) guidelines were developed and displayed across the country in all TB and HIV centres. During the World AIDS Day and World TB Day celebrations, radio programmes were broadcast discussing the links highlighted in the NACS guidelines between nutrition, HIV and TB.

As well as support for training and supplies, an external quality assurance exercise was carried out on health worker HIV testing and counseling, assessed at 98.7% accuracy.

As part of the NACS programme, 7230 malnourished HIV/TB patients on treatment received food contributions providing 728 Kcal/person/day for an average of 180 days, and recorded positive treatment achievements in the adult ART and TB programmes. This is 67% of the 10 794 people targeted to receive the nutrition, a 40% increase from 2019. Anthropometric equipment provided to 25 TB and ART centres where the programme was conducted supported this achievement.

Technical support was provided to develop a successful application for the Global Fund HIV grant for 2021-2023, worth US\$18.5 million over three years.

### PREVENTION AND YOUNG PEOPLE TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

A technical feasibility study was conducted on developing mobile applications to disseminate HIV prevention messages for all, as well as information on treatment for people living with HIV. The study showed that over 70% of young people believe there is a huge information gap in disseminating HIV-related information, and that people living with HIV would prefer to access information from mobile phones rather than visiting health facilities for privacy concerns; which confirms the need for the development of a mobile app in the near future.

Awareness campaigns have been conducted with support from the Joint Team, training 100+ youth activists, journalists and social media influencers from 17 districts to reach 13 700 young people in Galkaio, Mogadishu and Somaliland with accurate HIV information. There was a particular focus on vulnerable groups, such as low-income families and internally displaced persons.

## **STIGMA AND DISCRIMINATION**

### **POLICY DIALOGUE; TECHNICAL SUPPORT; PARTNERSHIPS**

In close partnership with the three networks of people living with HIV in Somalia, 'Knowing Your Rights' training was delivered to 120 people (72 women, 48 men) living with HIV in Mogadishu, Puntland and Somaliland, helping people living with HIV to understand their rights and that medical staff have a responsibility and obligation to keep their health records and HIV status confidential.

As a result of legal aid practitioners participating in this training, commitments were made by the Somali Woman Development Centre in Mogadishu, the Puntland AIDS Commission in Puntland, and the Hargeisa University Legal Aid Clinic in Somaliland to support members of the three networks of people living with HIV in these regions. Those legal aid clinics and practitioners also committed to provide legal aid and other support services for people who experience human rights violations, including gender-based violence (GBV).

To help reduce stigma and discrimination in law institutions, HIV and Human Rights capacity building training was carried out for 77 representatives from the Ministry of Justice, Ministry of Religious Affairs and Culture, Legal Aid Clinics, Lawyers, and Law Enforcement Agencies in Mogadishu, Puntland and in Somaliland. As a result of this meeting, the Ministries of Justice and Labour agreed to take the lead to develop policies and laws to support the rights of people living with HIV to work.

## **CONTRIBUTION TO THE COVID-19 RESPONSE**

### **TECHNICAL SUPPORT; CAPACITY BUILDING**

As part of the NACS programme and in partnership with the Joint Team through the national nutrition cluster, 65 cooperating partners, including those implementing in the TB and HIV centres were trained on COVID-19 responses including infection, prevention and control, and programme implementation. Staff were provided with PPE across all health centres, including ART and TB centres, and materials were also developed and distributed to facilitate COVID-19 triage and referral.

Initiatives on risk communication and community engagement were rolled out to consolidate the COVID-19 response, and assistance from the Joint Team further strengthened contact tracing activities and community-based ART provision to ensure continuity of HIV services during the pandemic.

HIV/COVID-19 integrated prevention messaging was disseminated across the country, and PPE distributed to over 10 000 young people, through mobile caravans mostly to internally displaced communities deemed vulnerable. The focus of the information was HIV prevention incorporating COVID-19 awareness, and items distributed included masks, soaps and sanitizers.

## **CONTRIBUTION TO THE INTEGRATED SDG AGENDA**

The Joint Team is continuously providing technical support on the integration of people living with HIV into existing and new social protection policies. Throughout 2020, the NACS programme has addressed the importance of nutritional support, the integration of vulnerable people into livelihood and safety net programmes, and highlighted the importance of practicing good nutritional habits, including diet diversity and the use of locally available foods to meet dietary needs and prevent the onset of nutrition deficiency disorders.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>COVID-19 restrictions delayed or prevented many activities in the first half of 2020, especially those involving field supervision, data collection, programme implementation and monitoring (e.g. in Somaliland), dialogue with government, and in-school messaging to young people. This had direct impact on levels of knowledge regarding HIV and risk.</p>	<p>Strengthen the focus on HIV prevention awareness within/outside youth centres in collaboration with Y-Peer network, a youth-led organization. This includes a condom distribution pilot among young people in three youth centres.</p>
<p>The COVID-19 pandemic also had an impact on the access to HIV treatment, with a lower enrolment of diagnosed HIV patients into HIV care and treatment in 2020 (a 16.3% dip compared with 2019 data).</p>	<p>Conduct a rapid assessment to understand determinants of reduced ART-enrolment under COVID-19 to guide future mitigation actions; and explore community ARV dispensing.</p> <p>Mobilize resources from the Global Fund to procure additional GeneExpert machines to ease the burden of COVID-19 testing on HIV machines.</p> <p>Improve nutrition uptake and access for people living with HIV, including through developing agreements with the government for some geographical areas; advocate for HIV-sensitive social protection to ensure use of safety net programmes by people living with HIV and prevent socioeconomic challenges.</p>
<p>Coverage of HIV testing services has significantly improved but is predominantly facility-based and not reaching those most vulnerable.</p> <p>Low rates of men accessing testing, as Essential Package of Health Services facilities are primarily focused on women and children and not utilised by men.</p>	<p>Advocate for a refocus of testing and counselling services for key populations, and support outreach to people living with HIV through drop-in centres.</p> <p>Support introduction of differentiated testing, yielding higher positivity rates and improved uptake and retention in ART treatment.</p>
<p>Disruption in supplies for early infant diagnosis (EID) via GeneExpert is affecting testing among newborns.</p>	<p>Support the planned desk review of EID, towards identifying key bottlenecks and designing systematic interventions.</p>

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