

TOGO

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
Acceleration towards the 90-90-90 targets, focused particularly on differentiated service delivery for HIV testing, expanded treatment access and retention (for adolescent treatment) and expanded viral load testing.	ON TRACK	The testing and care cascade has increased from 73-64-81% in 2019 to 76-72-84% in 2020. Due to problems with the supply of viral load tests, only 37% of people living with HIV received a viral load test compared to 15.6% in 2019. ARV coverage among pregnant women living with HIV was 76% in 2019 and 64% in 2020, with a mother-to-child transmission rate of 20.8%. Paediatric coverage improved slightly from 46% to 47% (Spectrum 2021).
By the end of 2021, coverage of HIV comprehensive prevention programmes for adolescent girls and young women is increased by 20% compared to 2019.	ON TRACK	No recent data available. Last available data showed a 26.96% HIV prevention among knowledge among young people aged 15-24 (DHS 2014). Through a collaboration between the Joint Team and civil society organisations, a total of 11 929 young people and adolescents received SRH and HIV prevention information in 2020 in the Maritime and Savanes regions.
By the end of 2021, stigma and discrimination, gender inequality and gender-based violence are reduced.	ON TRACK	The Stigma Index 2.0 was rolled out in 2020; analyses are ongoing and findings will be shared in 2021.

JOINT TEAM

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

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

In 2020, significant progress was made in Togo, in the area of HIV testing and treatment. Multi-month dispensing (MMD) of ART was implemented, while paediatric treatment and prevention of mother-to-child transmission (PMTCT) services were scaled up. A feasibility study paved the way for advocacy on safe and large-scale implementation of pre-exposure prophylaxis (PrEP) for people living with HIV and key populations. Work began with innovative approaches using mobile apps, especially targeting sexual and reproductive health, and gender-based violence (GBV) awareness and access to services. These initiatives will be further developed in 2021, alongside activities aimed at ensuring an enabling environment and HIV-sensitive social protection to address issues of inequality and inequity.

TESTING AND TREATMENT

TECHNICAL ASSISTANCE; CAPACITY BUILDING; COMMUNITY ENGAGEMENT

The Joint Team played a key role in advocating for MMD of ARV with the National AIDS Council (NAC), which was implemented in 2020 and is being scaled up with the dolutegravir regimen. MMD did slow down due to COVID-19-related challenges to the input supply, but technical assistance in supply and inventory management minimised production and delivery disruption. The monthly tracking and monitoring of HIV treatment data through an online tool enabled internal assessment on the effects of COVID-19 on the provision of and access to HIV services.

Progress was made in paediatric treatment and elimination of mother-to-child transmission (eMTCT). This included the integration of paediatric HIV care into child health services in 25 care sites through a PEPFAR-funded project supported by the Joint Team and FHI360, a nongovernmental organization partner. This project used innovative testing strategies, such as: index case and self-testing.

COMPREHENSIVE PREVENTION PROGRAMMING

ADVOCACY; TECHNICAL ASSISTANCE; CAPACITY BUILDING; PARTNERSHIPS

With technical assistance from the Joint Team, the policy and standards for prevention and care for key populations were revised during the development of the National Strategic Plan (2021-2025), to incorporate innovative and high-impact strategies such as self-testing and PrEP (including successfully advocating for their integration into future Global Fund and PEPFAR funding). The revision also included the definition of a standard package of services for each key population type. A study confirming the feasibility of PrEP among men who have sex with men was conducted in Togo. This study informed the Joint Team's advocacy work that is focused on the safe and large-scale implementation of PrEP in the country key populations, young people and adolescent girls. Additionally, the policy document and standards for combination prevention among young people and adolescents were also developed with support from the Joint Team.

Two civil society organisations (CSOs) were supported in the sensitisation and provision of integrated SRH and HIV services to 1640 female sex workers and their clients, and eight other CSOs provided services to 11 929 young people and adolescents in the Maritime and Savanes regions.

As part of the promotion of new communication technologies and e-health initiatives (such as Centre e-Convivial, Mofiala, Infoadojeunes and Dashmake), a reference manual was developed by the NGO AV Jeunes, which promotes the e-Conviviale application, and 500 copies were distributed to telephone advisors, peer educators, supervisors, and care providers. The manual is for use by national authorities, users, peer educators and supervisors, monitoring and evaluation officers, telephone counsellors, care providers and managers, and administrators. It provides general information on the structure of the application and its various services, and on the procedures for use at each level and for each intervention.

GENDER INEQUALITY, HUMAN RIGHTS, STIGMA AND DISCRIMINATION ADVOCACY; TECHNICAL ASSISTANCE; CAPACITY BUILDING; PARTNERSHIPS

The Joint Team supported the roll out of Stigma 2.0 Index study through technical and financial assistance and in collaboration with USAID/PEPFAR, the NGO partner FHI360 and the National AIDS Council. The validation of findings is planned for March 2021. Additionally, an evaluation was conducted of the 70 actors trained in community monitoring and the integration of human rights and gender indicators in the DIHS2 data management system.

Advocacy was carried out to allocate increased funding for human rights, gender equality and social protection in the new 2021-2023 Global Fund Grant, in partnership with the Global Fund team, the NAC, the Ministry of Health and civil society. Joint advocacy was also initiated to further ensure gender equality by supporting the country in joining the Education Plus initiative. An action plan is currently being developed, for information and advocacy with national actors.

EVIDENCE-BASED AND SUSTAINABLE HIV RESPONSE TECHNICAL ASSISTANCE; POLICY DIALOGUE

With technical and financial assistance from the Joint Team and PEPFAR, the new National Strategic Plan 2021-2025 (which includes a new pillar dedicated to human rights, gender, social protection and enabling environment interventions), and its operational plan for 2021-2022 were developed, along with the monitoring and evaluation plan and a policy document considering different innovative and high-impact strategies for self-testing and PrEP.

An evaluation of case-based tracking of people living with HIV and the use of unique identification codes was initiated to better monitor advances in HIV testing and treatment at district-level. Community-led monitoring activities were supported in 2020, in partnership with the 'Community Treatment Observatory' and an international NGO working towards improved HIV treatment access. The data collected in 2020 highlighted the difficult access of people living with HIV to viral load testing. The ensuing joint advocacy allowed the creation of a viral load technical group and the integration of the network of people living with HIV (RAS+) as member.

Technical and financial support by the Joint Team was provided to the Country Coordinating Mechanism in the development of the Global Fund HIV grant request, which provided funding of €40 782 956 for the period 2021-2023; participation in the drafting work, definition of strategic interventions, performance framework and indicators; and workshop funding. Additionally, support was provided for consideration of community treatment observatory in grant, integration of PrEP, and self-testing among key populations.

CONTRIBUTION TO THE COVID-19 RESPONSE ADVOCACY; TECHNICAL ASSISTANCE; CAPACITY BUILDING; COMMUNITY ENGAGEMENT

To respond to COVID-19 in Togo, the Joint Team developed a socio-economic response plan with a budget amounting to US\$ 48.9 million. This entailed reprogramming resources for the development of joint projects and the mobilisation of resources through multilateral partners including the Global Fund, and bilateral partners. The response plan includes an initiative to ensure access to social protection benefits for informal economy actors, people living with HIV, key populations and other vulnerable groups.

The Joint UN-team has contributed to the efforts of Togo and the UN system to attenuate the impact of the COVID19 pandemic on the development goals of Togo. The Joint UN Team gave specific attention to the impact of COVID-19 on vulnerable groups, such as people living with HIV, key populations, women, young women and adolescent girls. Stockouts of medicines and tests were avoided through a common action of UN agencies, MMD and community distribution of ARVs diminished contacts with health services, and protections materials were distributed to commercial sex workers, men having sex with men, and people in closed settings. Capacity

building and technical assistance was provided to CSOs, as well as the provision of personal protection equipment (PPE) and other equipment for the care of patients, and support in materials and computer equipment for data management and remote meetings.

In partnership with an NGO that works with vulnerable women and women living with or affected by HIV, the Joint Team supported a project aimed at fighting GBV related to the COVID-19 pandemic, and promote SRH. One of their workshop series on the role of civil society reached at least 30 000 people over the course of six months. Also, as part of this activity, the Mofiala web app was promoted for reporting GBV, and access to clinical and psychological care was made available to GBV victims. Additionally, with the direct involvement of 200 women and school students, four radio and television programmes raised awareness on GBV and COVID-19 prevention activities, reaching a wide audience through broadcast.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint UN Team contributes to the realization of the 2030 Agenda in Togo through a support to the following strategies: (i) capacity strengthening to respond better to the needs of key populations and vulnerable groups; (ii) multi-month dispensing and community distribution of ARVs; (iii) scale up and improvement of child HIV care; (iv) the promotion of innovative methods to reach key populations, like auto-test and PrEP and (v) the improvement of monitoring and evaluation activities. This will lead to the realization of the targets under the product 2.2 of the United Nations Development Assistance Framework (UNDAF) 2019-2023.

Through the "Delivering as One" approach, the UN Country Team in Togo is working towards strengthening community resilience, improving food security and ensuring access to quality basic social services to all people. For instance, in 2020, efforts have been made to support and expand the national school feeding programme, in parallel with other UN-led education initiatives.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>COVID-19 posed the main challenge in 2020, slowing down access to HIV prevention and care services for populations in need, and continues to impact people living with HIV and other vulnerable groups.</p>	<p>Review outstanding Joint Team-programmed activities and reschedule them accordingly.</p> <p>Support efforts to raise awareness among people living with HIV about COVID-19 protection measures and the need to be vaccinated.</p> <p>Sensitise policymakers to include the needs of people living with HIV among the populations vulnerable to COVID-19 receiving support from the Global Fund grant.</p> <p>Support further strengthening of civil society organisations to collect data on service availability, identify and address service access challenges, and in the follow-up and monitoring of their interventions.</p>
<p>Availability of ARV stocks and shortages of some medicines, especially paediatric ARVs, has been limited due to problems with the production of ARVs and the supply chain, linked to the lockdown.</p>	<p>Strengthen the management and supply of input stocks to avoid shortages/tensions of ARVs and reagents, monitoring the management and supply of inputs; assisting the country in planning/calculating needs; and strengthening civil society in community surveillance to quickly identify tensions and find solutions.</p> <p>Advocate for and support implementation of MMD, extending it to all stable patients on ARV and increasing to 6-month ARV supply.</p>
<p>In anticipation of the implementation of the new 2022-2026 Global AIDS Strategy, greater attention is required to the inequalities that influence vulnerability to HIV.</p>	<p>Develop a human rights strategic plan 2021-2025 using data from the Stigma Index and the law review.</p> <p>Support implementation of a gender assessment in partnership with the NAC, as well as a social protection analysis for people living with HIV, accompanied by the development of strategic interventions.</p>

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