

Country progress report - Liberia

Global AIDS Monitoring 2019



Contents

- I. Overall - Fast-track targets
- II. HIV testing and treatment cascade - Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020
- III. Prevention of mother-to-child transmission - Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018
- IV. HIV prevention; Key populations - Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners
- V. Gender; Stigma and discrimination - Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020
- VI. Knowledge of HIV and access to sexual reproductive health services - Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year
- VII. Social protection - Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020
- VIII. Community-led service delivery - Ensure that at least 30% of all service delivery is community-led by 2020
- IX. HIV expenditure - Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers
- X. Empowerment and access to justice - Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights
- XI. AIDS out of isolation - Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Overall

Fast-track targets

Progress summary

This report presents Liberia's achievements and challenges as it relates to the Political Declaration on ending AIDS, adopted at the United Nations General Assembly High-Level Meeting on AIDS in June 2016.

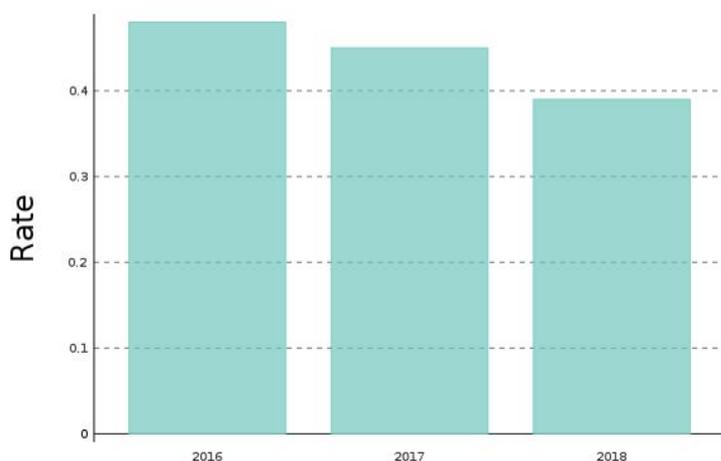
Tremendous efforts have been made in the fight against HIV and AIDS in Liberia. Since the diagnosis of the first case of HIV in Liberia, the Government of Liberia has remained committed to ensuring that this disease remains controllable; signing on to all past commitments including the 2001 Declaration of Commitment on HIV/AIDS, the 2006 Political Declaration on HIV/AIDS and the 2011 Political Declaration on HIV and AIDS.

However, like the rest of the most part of sub-Saharan Africa, the HIV is slowly creeping into the society and claiming the lives of over thousands and surely millions on the continent.

Despite these challenges being faced, there continue to be a steady decrease in the incidence of HIV and a reduction in AIDS mortality as depicted by the graphs below.

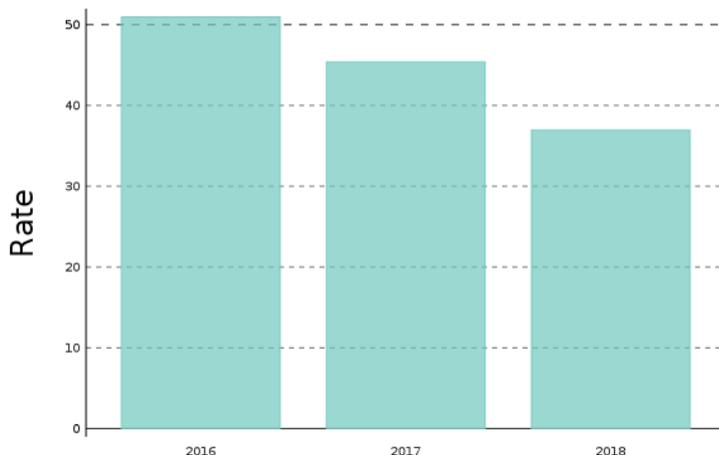
3.1 HIV incidence rate per 1000, Liberia (2016-2018)

Number of people newly infected with HIV in the reporting period per 1000 uninfected population



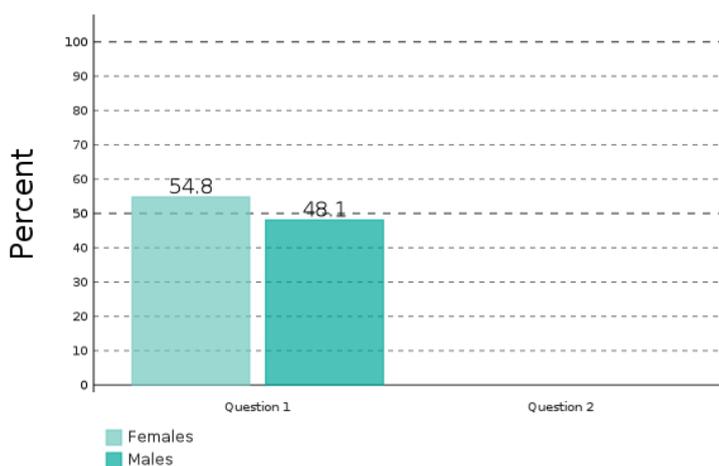
1.7 AIDS mortality per 100.000, Liberia (2016-2018)

Total number of people who have died from AIDS-related causes per 100 000 population



4.1 Discriminatory attitudes towards people living with HIV, Liberia (2018)

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 - "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"



HIV testing and treatment cascade

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Progress summary

In 2017, the Heads of State of the AU countries decided that their countries would engage in an acceleration movement in their countries to reach the 90-90-90 target for 2020 and to fill the gap between the actual and ideal coverage uptake.

The western and central Africa catch-up plan is a political instrument and a compact between countries and the international community that supports countries' strategies and plans to quickly address bottlenecks, accelerate the national responses and reach a trajectory to achieve the 90-90-90 targets by 2020. Deriving from the western and central Africa catch-up plan, the country plans are supplementing national strategies and existing plans with the aim of increasing antiretroviral treatment uptake and saving lives.

In 2016, with the NAC Board of Directors Meeting mandate, Liberia developed a National Catch Up Plan inline with the global fast track approach to achieving the 90-90-90 targets by 2020. The catch-up plan effectively sought to triple the country's Testing and Treatment figures within a short window of opportunity to fast track our progress towards 90-90-90.

The main targets for this plan include but are not limited to the following:

1. Location/Geography.
 - Counties with the highest unmet need for HIV related services (Grand Bassa, Margibi and Montserrado) 1st Phase (2016-2018).
 - Urban areas and Hotspots
2. Populations to be targeted based on the 2013 DHS and other epidata
 - Focus on women 15-49years (or above), pregnant women, women with STIs and those living in urban areas
 - Focus men aged 15 to 49 years/above

- Key populations: Sex workers, MSM/TG, Drug Users, Mine workers, prison population
- All HIV exposed babies
- Persons who know their HIV status but are not yet on ART (Pre-ART)

HIV Coverage targets:

The overall goal of all HIV activities by 2020 is to reduce new infections by 75%, to reduce aids related deaths by 75% and to annihilate stigma and discrimination in comparison with 2010 levels.

Policy questions (2018)

Is there a law, regulation or policy specifying that HIV testing:

a) Is mandatory before marriage

No

b) Is mandatory to obtain a work or residence permit

No

c) Is mandatory for certain groups

No

What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?

No threshold; treat all regardless of CD4 count; Implemented countrywide (>95% of treatment sites)

Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?

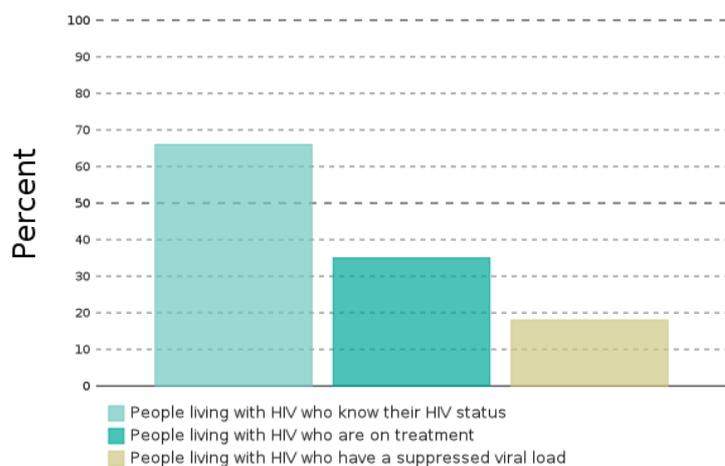
a) For adults and adolescents

Yes, partially implemented

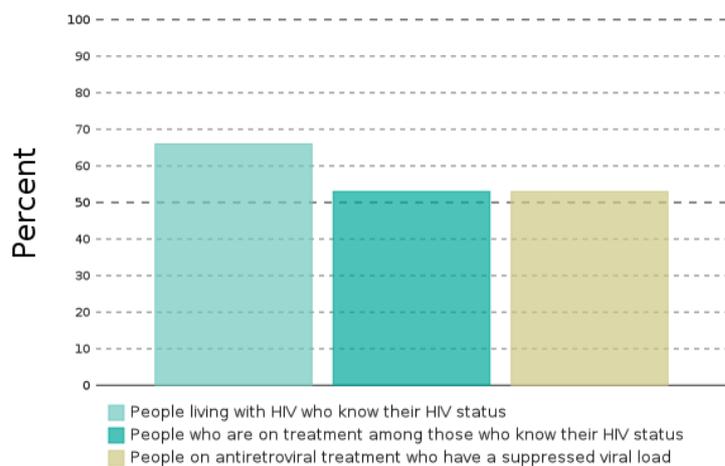
b) For children

Yes, partially implemented

HIV testing and treatment cascade, Liberia (2018)

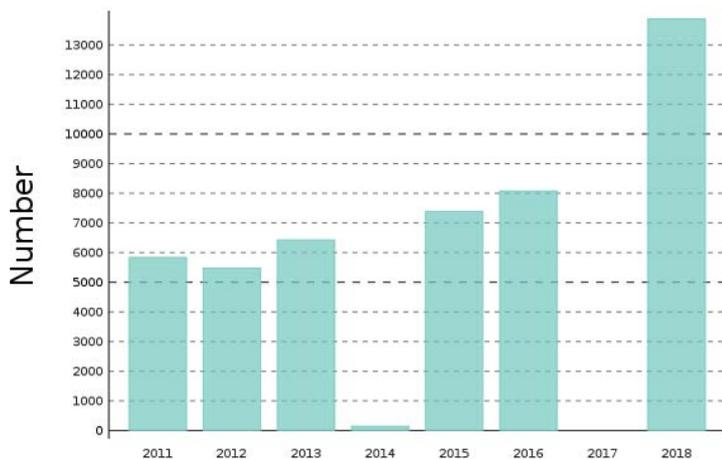


Progress towards 90-90-90 target, Liberia (2018)



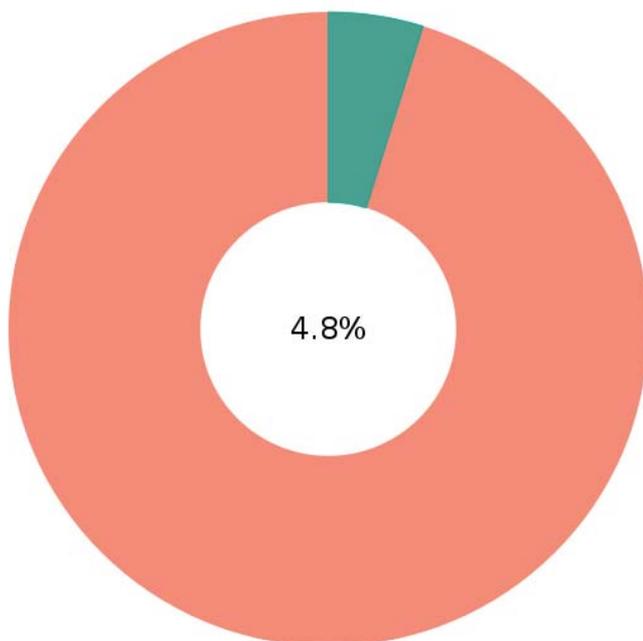
1.2 People living with HIV on antiretroviral therapy, Liberia (2011-2018)

Number of people on antiretroviral therapy at the end of the reporting period



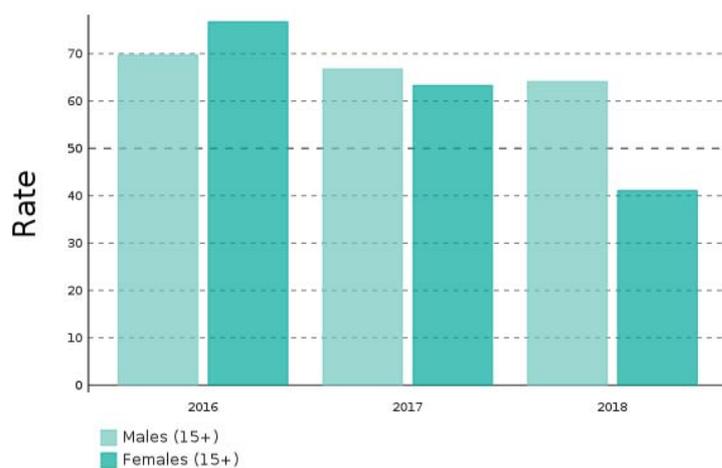
1.6 Antiretroviral medicine stock-outs, Liberia (2018)

Percentage of treatment sites that had a stock-out of one or more required antiretroviral medicines during a defined period



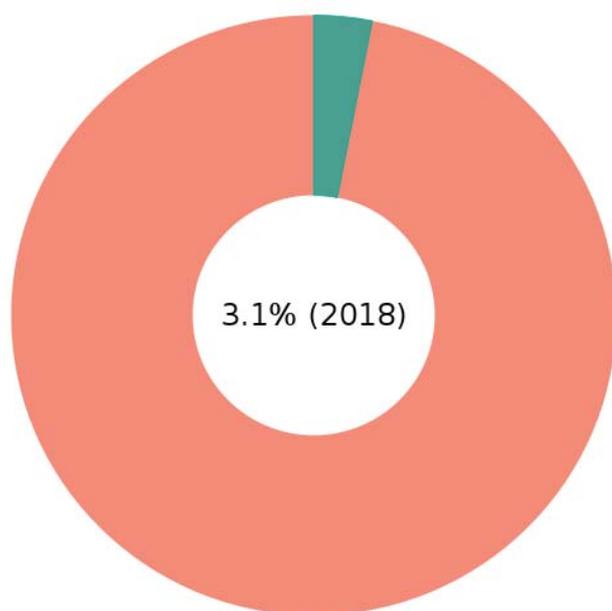
1.7 AIDS mortality rate per 100 000, Liberia (2016-2018)

Total number of people who have died from AIDS-related causes per 100 000 population



1.8 HIV testing volume and positivity, Liberia

Percentage of HIV -positive results returned to people (positivity) in the calendar year



Number of HIV tests conducted = 269 426

Prevention of mother-to-child transmission

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Progress summary

There have been enormous effort made within the PMTCT program to eliminate mother-to-child transmission of HIV in Liberia. Currently, over 435 ANC sites are providing ART treatment for HIV positive pregnant women. There continue to be a decline in the estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months.

Almost 100% of pregnant women diagnosed of HIV are being placed on treatment; unfortunately, records on the babies are scanty but the outcomes are often good. Out of a total of 288 infants tested for HIV within two months of birth, only 11 were found to be positive of HIV. Additionally, testing coverage increased by 8% compared to 2017.

Policy questions (2018)

Does your country have a national plan for the elimination of mother-to-child transmission of HIV?

Yes

Target(s) for the mother-to-child transmission rate and year: 0; 2020

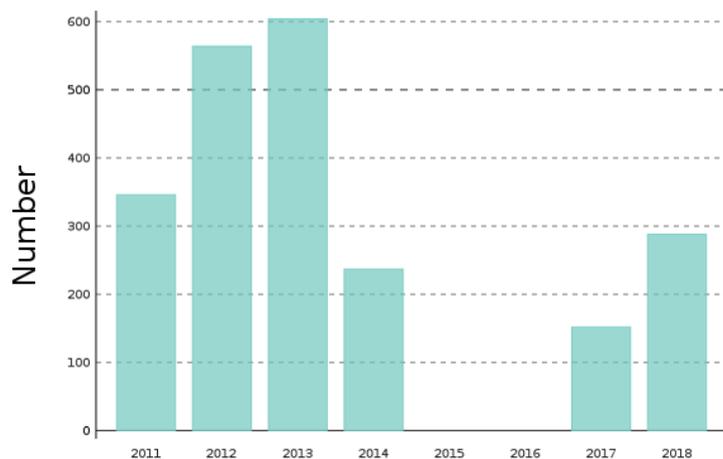
Elimination target(s) (such as the number of cases/population) and year: 0; 2020

Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?

Treat all, regardless of age; Implemented countrywide (>95% of treatment sites)

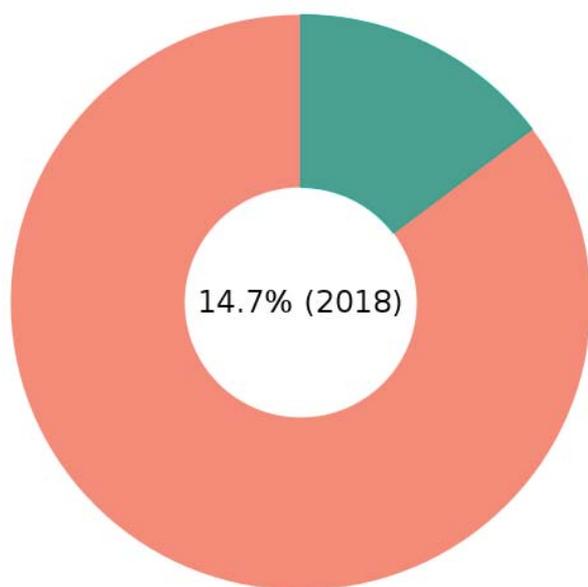
2.1 Early infant diagnosis, Liberia (2011-2018)

Percentage of infants born to women living with HIV receiving a virological test for HIV within two months of birth



2.1 Early infant diagnosis, Liberia (2017-2018)

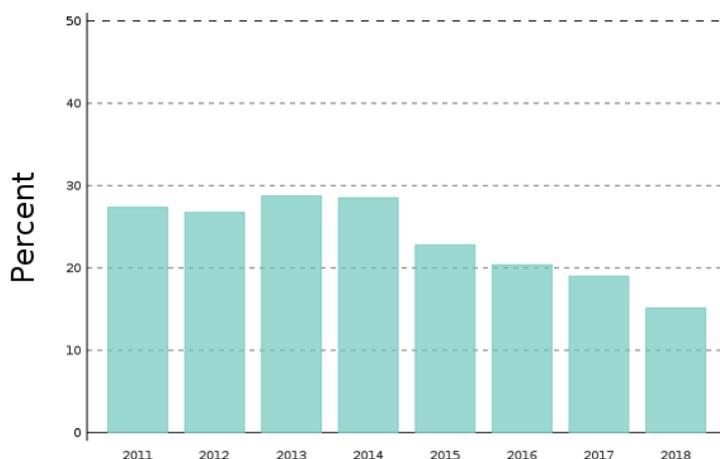
Percentage of infants born to women living with HIV receiving a virological test for HIV within two months of birth



↑ 8.0% (2017)

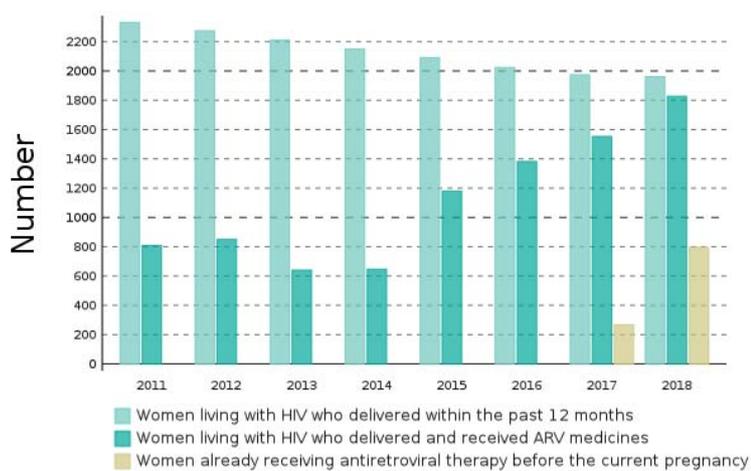
2.2 Mother-to-child transmission of HIV, Liberia (2011-2018)

Estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months



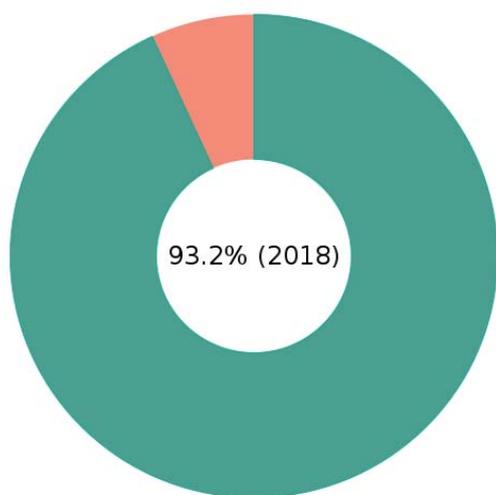
2.3 Preventing mother-to-child transmission of HIV, Liberia (2011-2018)

Percentage of pregnant women living with HIV who received antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV



2.3 Preventing mother-to-child transmission of HIV, Liberia (2017-2018)

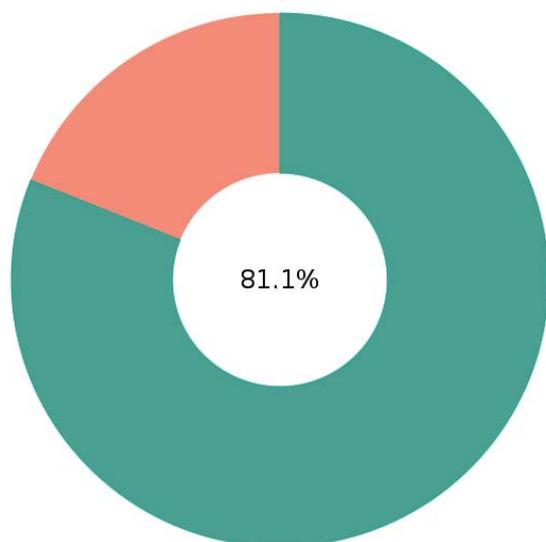
Percentage of pregnant women living with HIV who received antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV



↑ 78.69% (2017)

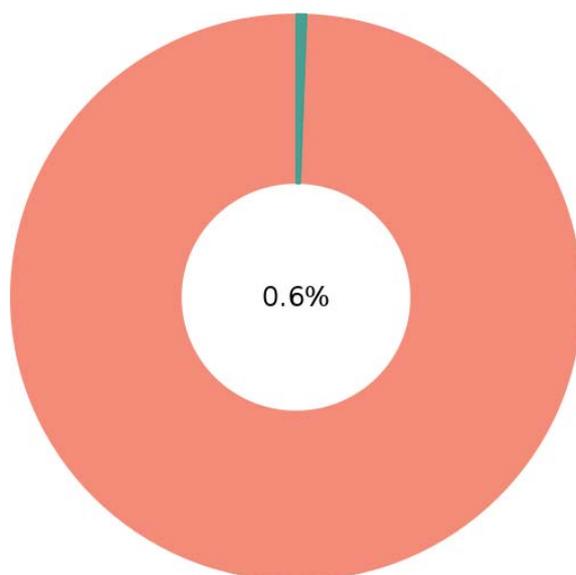
2.4 Syphilis among pregnant women, Liberia (2018)

Percentage of pregnant women tested for syphilis



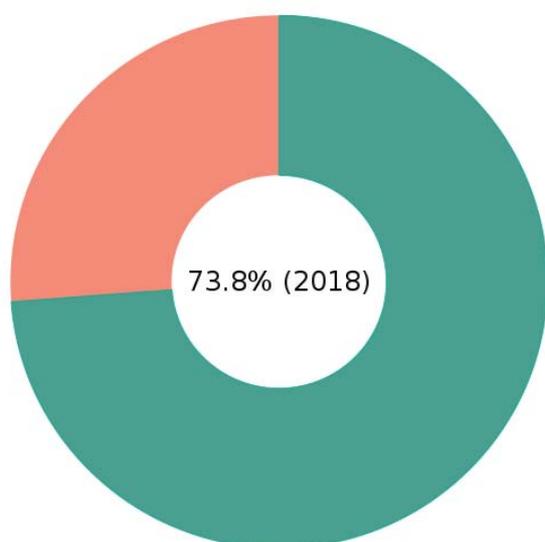
2.4 Syphilis among pregnant women, Liberia (2018)

Percentage of pregnant women tested positive for syphilis



2.6 HIV testing in pregnant women, Liberia (2017-2018)

Percentage of pregnant women with known HIV status



↑ 53.6% (2017)

HIV prevention; Key populations

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Policy questions: Key populations (2018)

Criminalization and/or prosecution of key populations

Transgender people

Criminalized

Sex workers

Selling sexual services is criminalized, Buying sexual services is criminalized, Profiting from organizing and/or managing sexual services is criminalized

Men who have sex with men

Yes, imprisonment (up to 14 years)

Is drug use or possession for personal use an offence in your country?

Drug use or consumption is specified as a criminal offence, Possession of drugs for personal use is specified as a criminal offence

Legal protections for key populations

Transgender people

No

Sex workers

No

Men who have sex with men

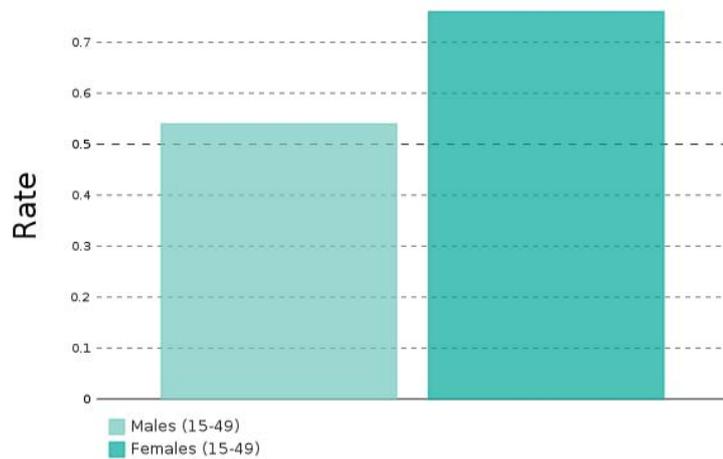
No

People who inject drugs

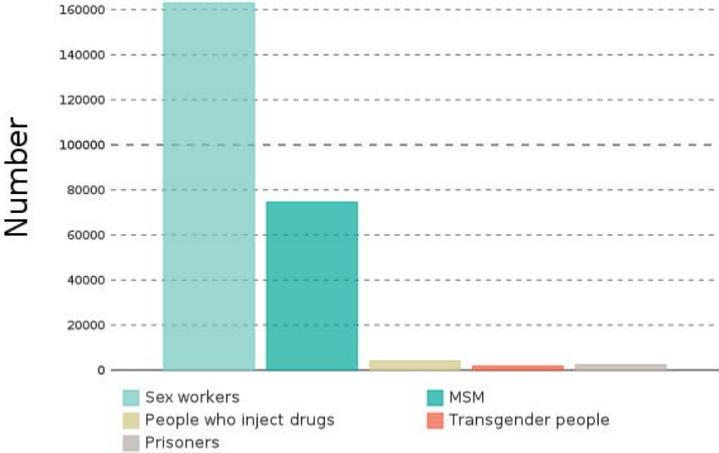
No

3.1 HIV incidence rate per 1000, Liberia (2018)

Number of people newly infected with HIV in the reporting period per 1000 uninfected population



3.2 Estimates of the size of key populations, Liberia



Gender; Stigma and discrimination

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Policy questions (2018)

Does your country have a national plan or strategy to address gender-based violence and violence against women that includes HIV

Yes

Does your country have legislation on domestic violence*?

Yes

What protections, if any, does your country have for key populations and people living with HIV from violence?

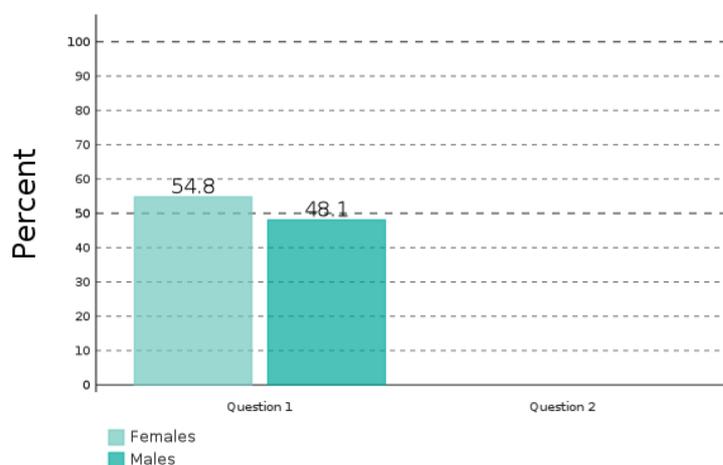
General criminal laws prohibiting violence

Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

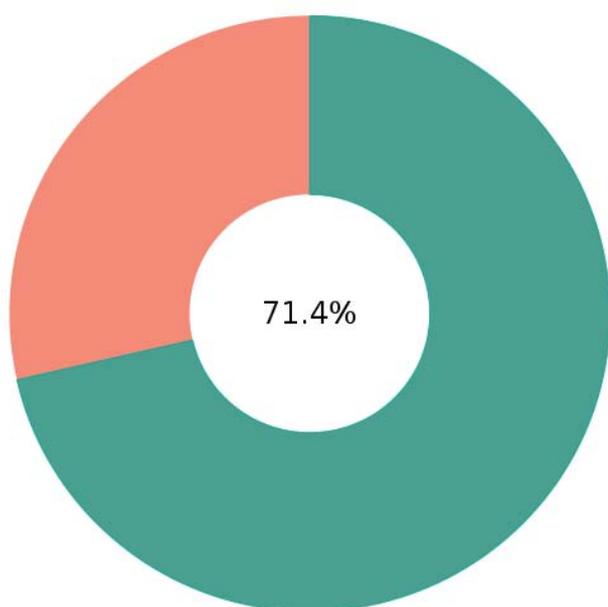
Yes, policies exists and are consistently implemented

4.1 Discriminatory attitudes towards people living with HIV, Liberia

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 - "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"



Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



Knowledge of HIV and access to sexual reproductive health services

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Progress summary

The 2013 Demographic and Health Survey of Liberia showed that 35.7 percent of young women between the ages of 15 to 24 years had comprehensive knowledge of HIV compared to their male counterparts. The data also showed that a little over 40 percent of women within child bearing age had their family planning demand satisfied.

We are currently in the planning stage of the 2019 LDHS which was delayed due to political activities in the country including the transitioning of government.

Policy questions (2018)

Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education, according to international standards, in:

a) Primary school

Yes

b) Secondary school

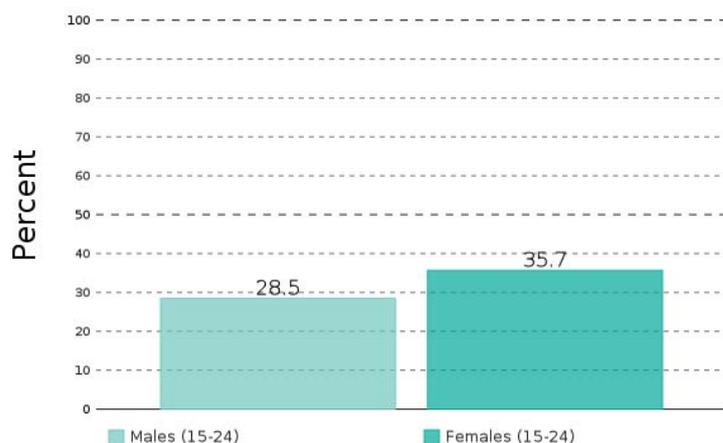
Yes

c) Teacher training

Yes

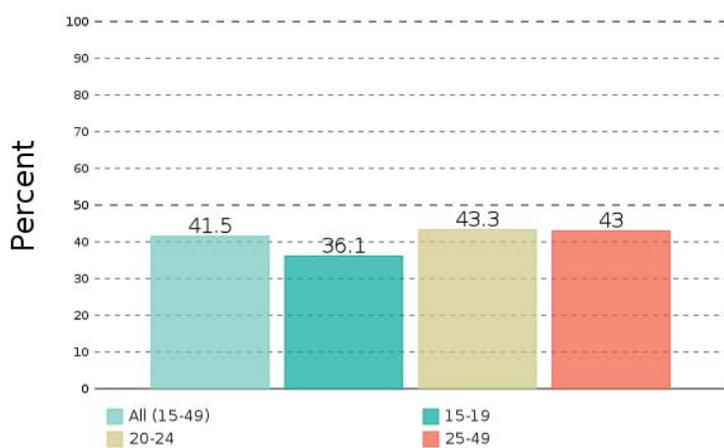
5.1 Young people: Knowledge about HIV prevention, Liberia (2013)

Percentage of women and men 15-24 years old who correctly identify both ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission



5.2 Demand for family planning satisfied by modern methods, Liberia (2013)

Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods



Social protection

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Policy questions (2018)

Does the country have an approved social protection strategy, policy or framework?

Yes, and it is being implemented

a) Does it refer to HIV?

Yes

b) Does it recognize people living with HIV as key beneficiaries?

Yes

c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?

No

d) Does it recognize adolescent girls and young women as key beneficiaries?

Yes

e) Does it recognize children affected by HIV as key beneficiaries?

Yes

f) Does it recognize families affected by HIV as key beneficiaries?

Yes

g) Does it address the issue of unpaid care work in the context of HIV?

No

What barriers, if any, limit access to social protection programmes in your country?

Social protection programmes do not include people living with HIV, key populations and/or people affected by HIV

Lack of information available on the programmes

Complicated procedures

Fear of stigma and discrimination

Lack of documentation that confers eligibility, such as national identity cards

Laws or policies that present obstacles to access

High out-of-pocket expenses

People living with HIV, key populations and/or people affected by HIV are covered by another programme

Community-led service delivery

Ensure that at least 30% of all service delivery is community-led by 2020

Policy questions (2018)

Does your country have a national policy promoting community delivery of antiretroviral therapy?

No

What safeguards in laws, regulations and policies, if any, provide for the operation of CSOs/CBOs in your country?

Registration of HIV CSOs is possible

HIV services can be provided by CSOs/CBOs

Services to key populations can be provided by CSOs/CBOs

Number of condoms and lubricants distributed by NGOs in the previous year

a) Male condoms:

-

b) Female condoms:

-

c) Lubricants:

-

Empowerment and access to justice

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

Policy questions (2018)

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at a small scale

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

No

What accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings does your country have, if any?

Procedures or systems to protect and respect patient privacy or confidentiality

What barriers in accessing accountability mechanisms does your country have, if any?

Mechanisms do not function

Mechanisms are not sensitive to HIV

Affordability constraints for people from marginalized and affected groups

Awareness or knowledge of how to use such mechanisms is limited

AIDS out of isolation

Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Progress summary

In 2018, a total of 6730 newly diagnosed HIV clients were enrolled in care. Four hundred and sixty three of those newly enrolled were found to be TB positive and placed on active TB treatment. However, about 21% of those patients were placed on IPT to prevent TB. Efforts are being made to scale up IPT distribution in health facilities offering HIV treatment.

The implementation of a combined HIV and TB grant has further strengthen collaboration between the two disease program and at facility level where clinician are more inclined to providing holistic services.

Policy questions (2018)

Is cervical cancer screening and treatment for women living with HIV recommended in:

a) The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)

Yes

b) The national strategic plan governing the AIDS response

No

c) National HIV-treatment guidelines

No

What coinfection policies are in place in the country for adults, adolescents and children?

Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV

Intensified TB case finding among people living with HIV

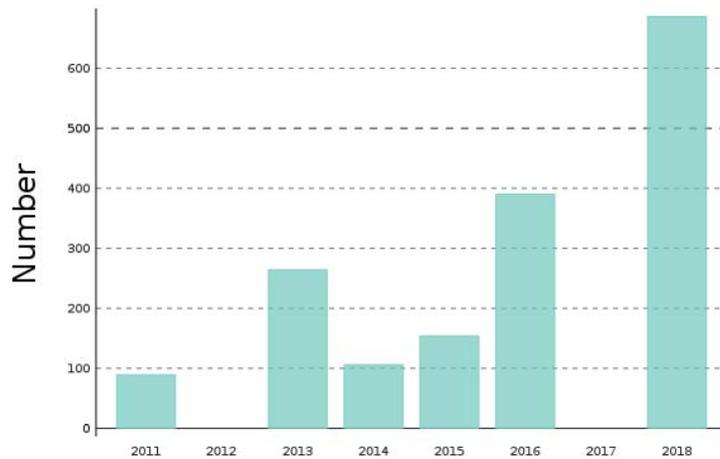
TB infection control in HIV health-care settings

Co-trimoxazole prophylaxis

Hepatitis B screening and management in antiretroviral therapy clinics

10.1 Co-managing TB and HIV treatment, Liberia (2011-2018)

Percentage of estimated HIV-positive incident tuberculosis (TB) cases (new and relapse TB patients) that received treatment for both TB and HIV



10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Liberia (2015-2018)

Total number of people living with HIV with active TB expressed as a percentage of those who are newly enrolled in HIV care (pre-antiretroviral therapy or antiretroviral therapy) during the reporting period



10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Liberia (2015-2018)

Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during the reporting period

