

Overview of HIV/AIDS care in Ethiopia

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Outline

- **Profile of HIV/AIDS (Global & National)**
- **The new direction in response to HIV/AIDS**
- **HIV/AIDS Prevention, Treatment, Care and support Interventions**
- **ART Program**
- **Opportunities and the way forward**



Global Summary of the AIDS Epidemic, December 2005

➤ PLWHA 40.3 million (36.7 – 45.3)

- Adults 38.0 Million (34.5-42.6)
- Women 17.5 Million (16.2-19.3)
- Children <15yrs 2.3mil (2.1-2.8)

➤ New infections 4.9 million (4.3–6.6)

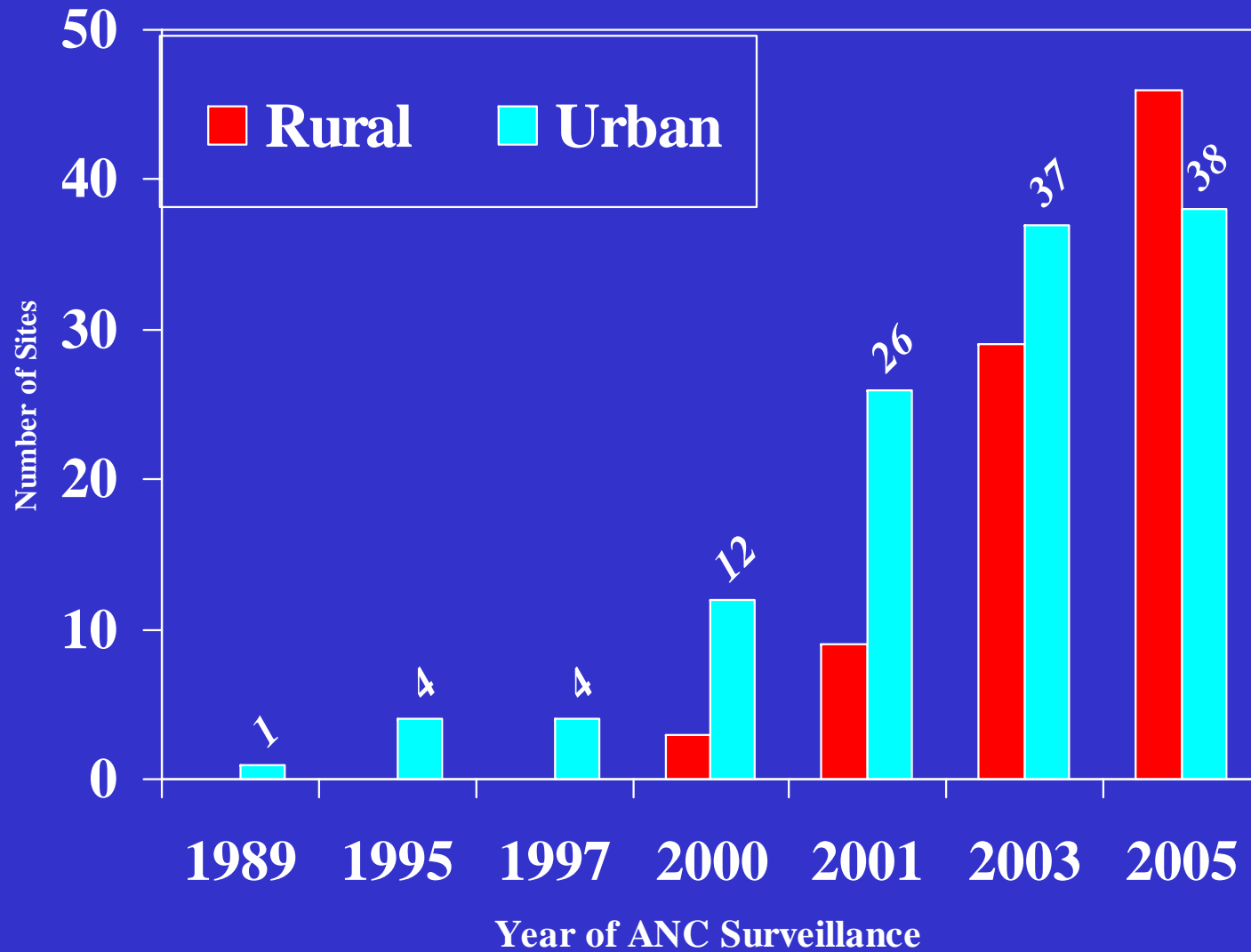
- Adults 4.2 million (3.6-5.8)
- Children < 15yrs 700,000 (630,000 – 820,000)

➤ AIDS Deaths 3.1 million (2.8 – 3.6)

- Adults 2.6 Million (2.3 – 2.9 million)
- Children <15yrs (570,000-670,000)



Urban/Rural Sentinel Sites



National Prevalence

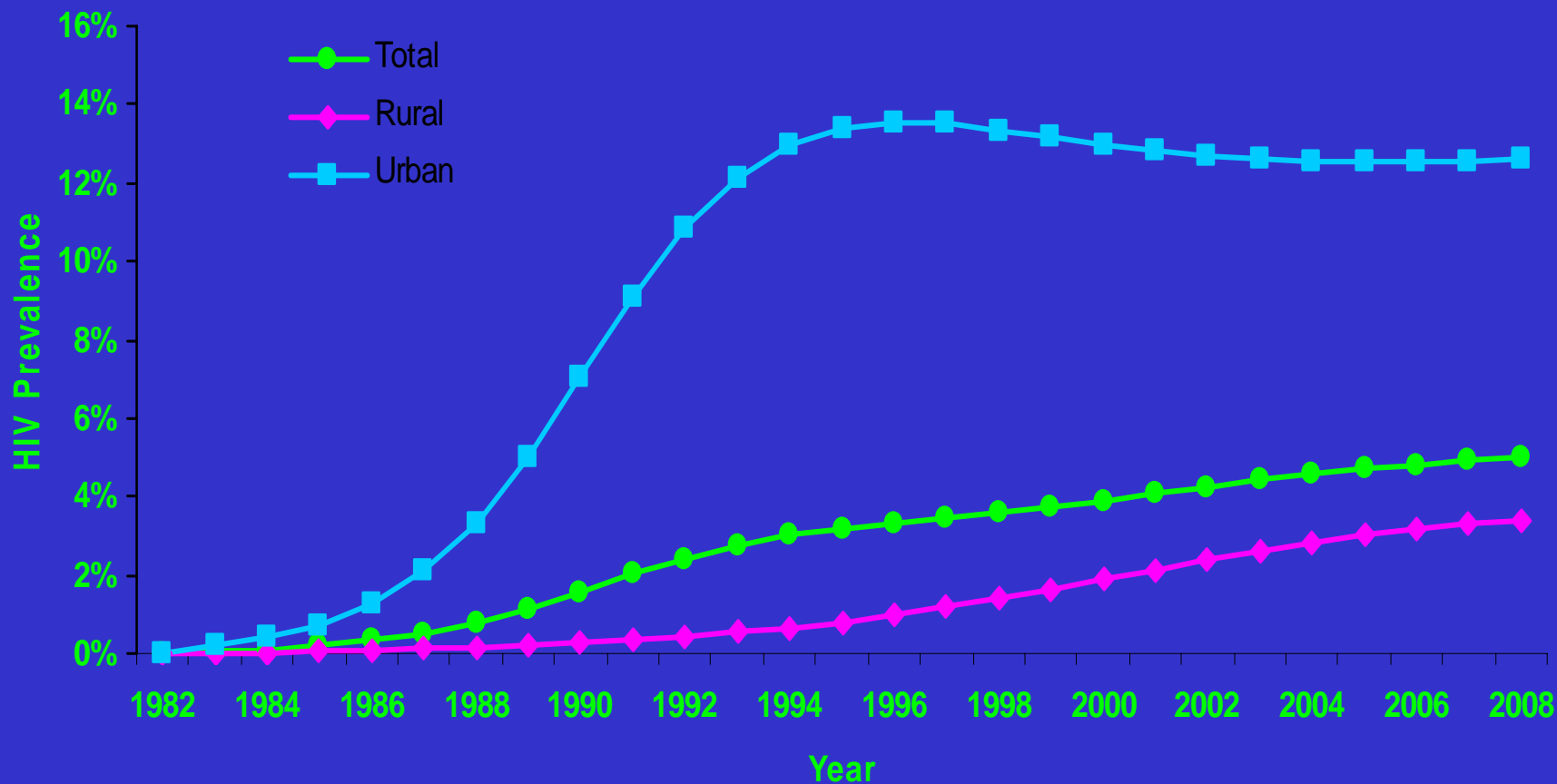
- National prevalence for 2003 4.4%
- National Prevalence for 2005 4.7%
 - Women - 5.0% & Men - 3.8%
- Urban prevalence in 2003.....12.6%
- Urban prevalence in 2005.....12.5%

- Rural prevalence in 2003 2.6%
- Rural prevalence in 2005..... 3.0%

- AA prevalence in 2003 14.6%
- AA prevalence in 2005 14.5%



Estimated and Projected HIV Prevalence By Year 15+ Population, Urban, Rural, and Total ETHIOPIA



Major HIV Indicators (2005)

- **Number of PLWHA** 1.7million
- **Estimated AIDS cases** 143,129
- **PLWHA requiring ARVDs** 286,258
- **Annual AIDS deaths** 134,124
- **AIDS orphans** 678,936
- **Total Orphans** 4,801,219
- **Adult and Children on ART** 20,477

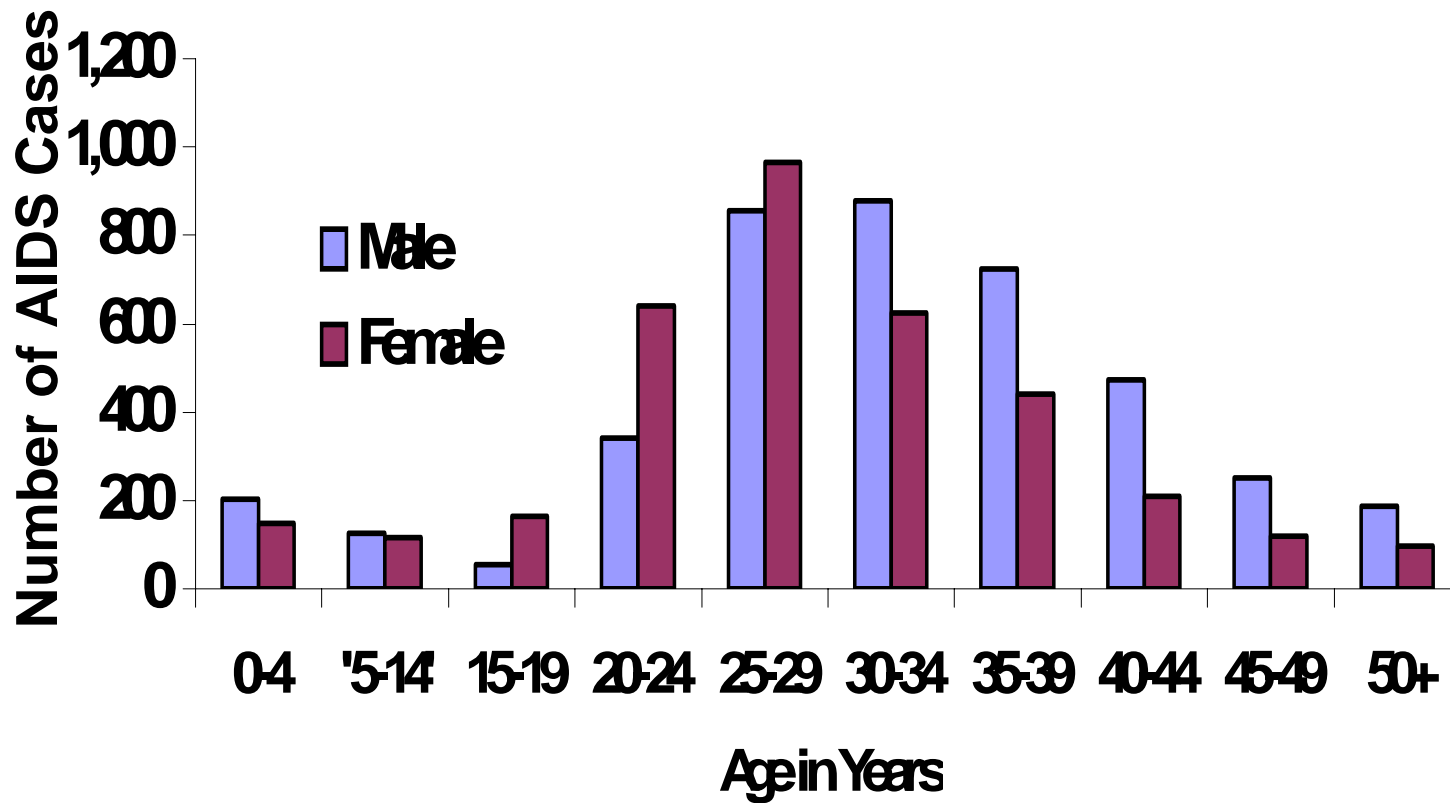


HIV/AIDS Indicators (2005)

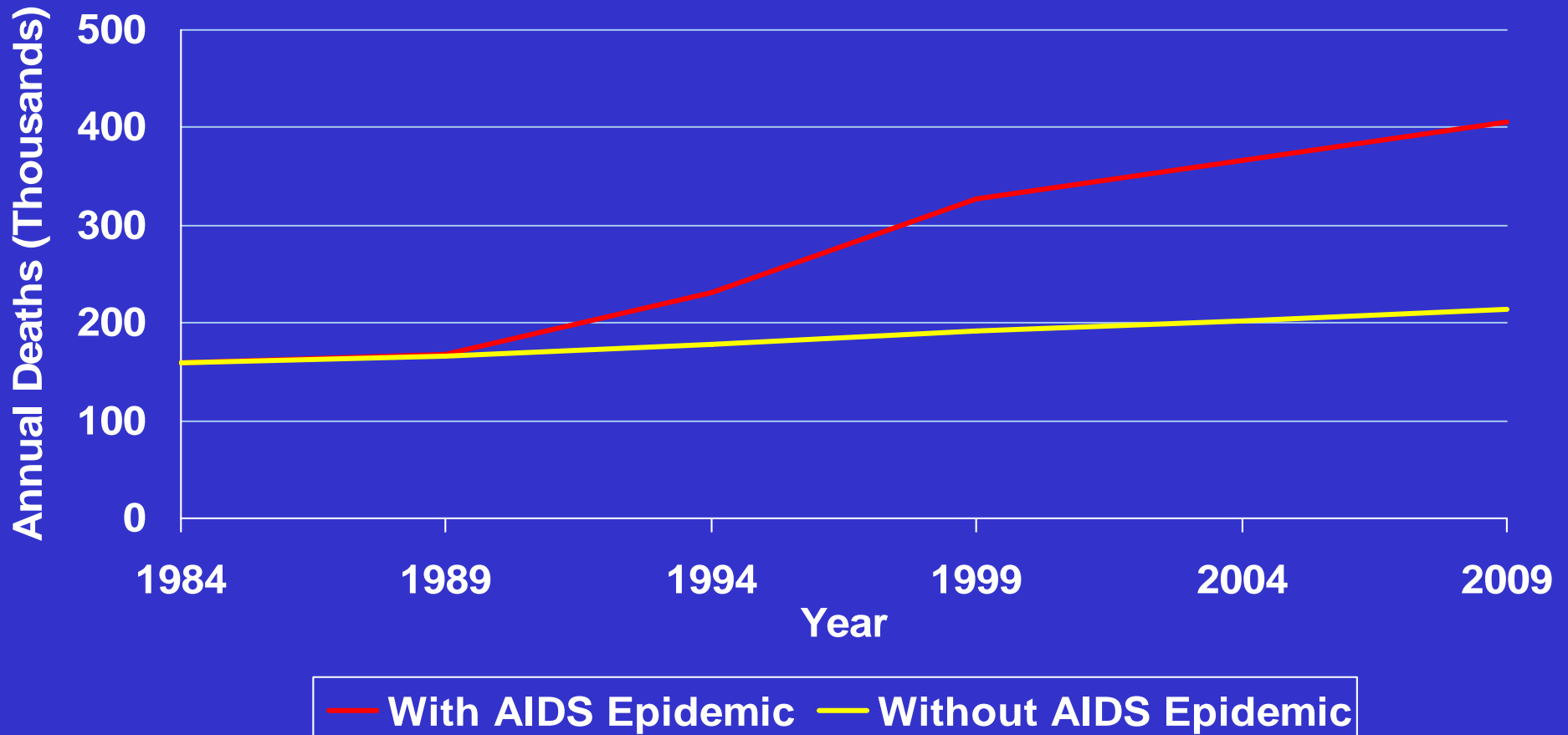
• Children living with HIV/AIDS	111,903
– New HIV Infections	39,886
– New AIDS Cases	29,359
• Annual AIDS Deaths	28,693
• Number of Newly needing ART	58,718
• Children on ART	654



Figure 5.1. Age and Sex Distribution of AIDS Cases Reported to MCH, 2003



Projected Annual Number of Young Adult Deaths (15–49 years)



New Direction in the Fight Against HIV/AIDS

- **HIV/AIDS Strategic plan for five years**
 - 2004 - 2008
- **Social mobilization & community involvement**
 - Community ownership
- **Scaled up ART program**
 - AIDS Fund was initiated (0.5-1%)
 - Free ART Program was scaled up



Goal of the SPM

- Reduce the spread of HIV/AIDS
- Reduce the social and economic impact of HIV/AIDS



Strategic Issues

- Capacity building
- Community mobilization and empowerment
- Integration with health programs
- Leadership and mainstreaming
- Coordination and networking
- Focus on special target groups



HIV/AIDS Intervention Strategies

I Prevention

- Social mobilization
 - IEC/BCC
- Voluntary counseling & testing
 - Provider initiated HIV counseling and testing
- STI prevention and control
- Condom Promotion
- Infection prevention
- Prevention of mother to child transmission (PMTCT)
- Post exposure prophylaxis



HIV/AIDS Intervention Strategies (2)

II. Care and Treatment

- Palliative care
- Community home based care
- Opportunistic infection treatment
- Tuberculosis treatment
- Treatment of AIDS patients

III. Support for affected and infected

- OVC
- PLWHA

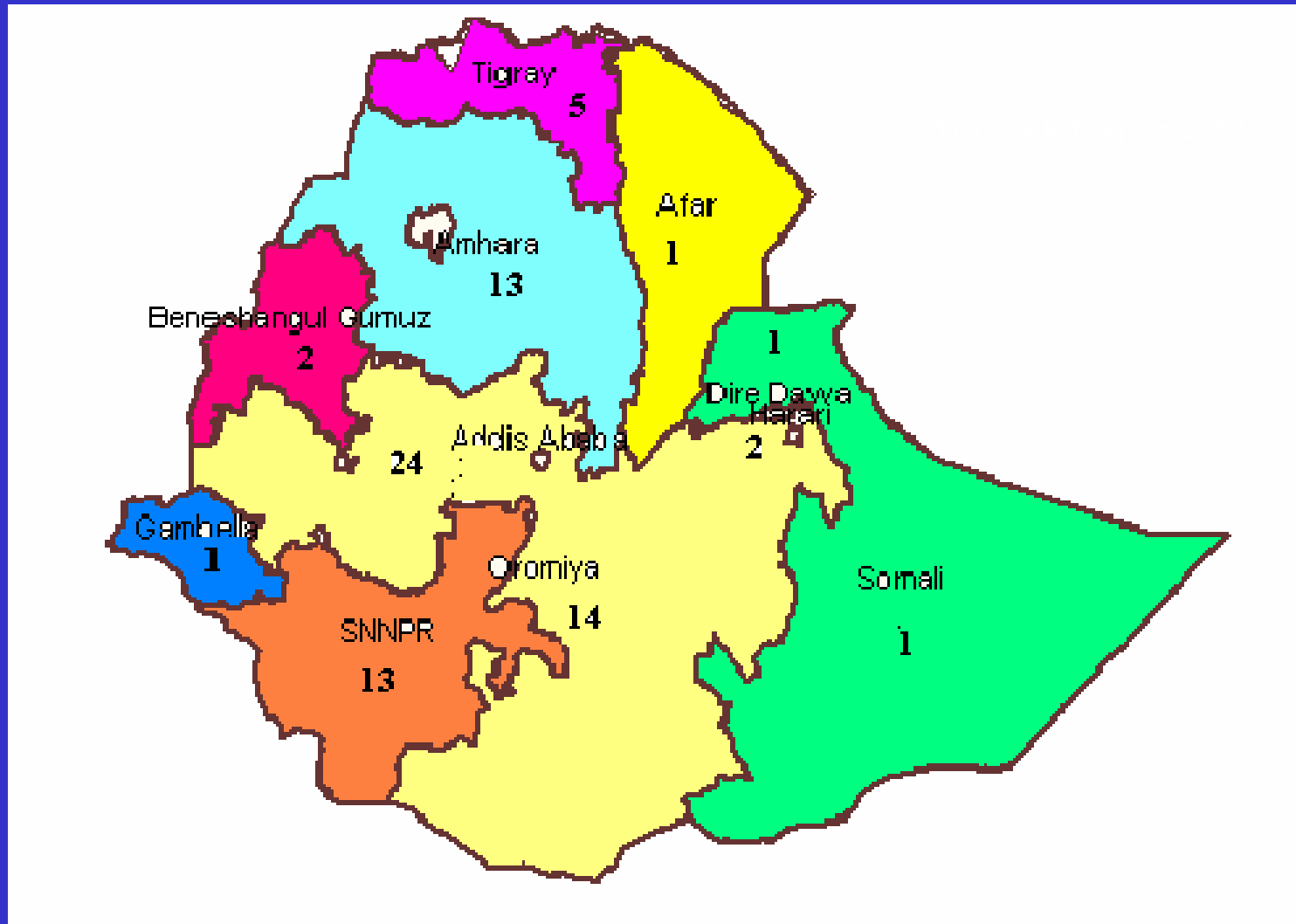


Social mobilization

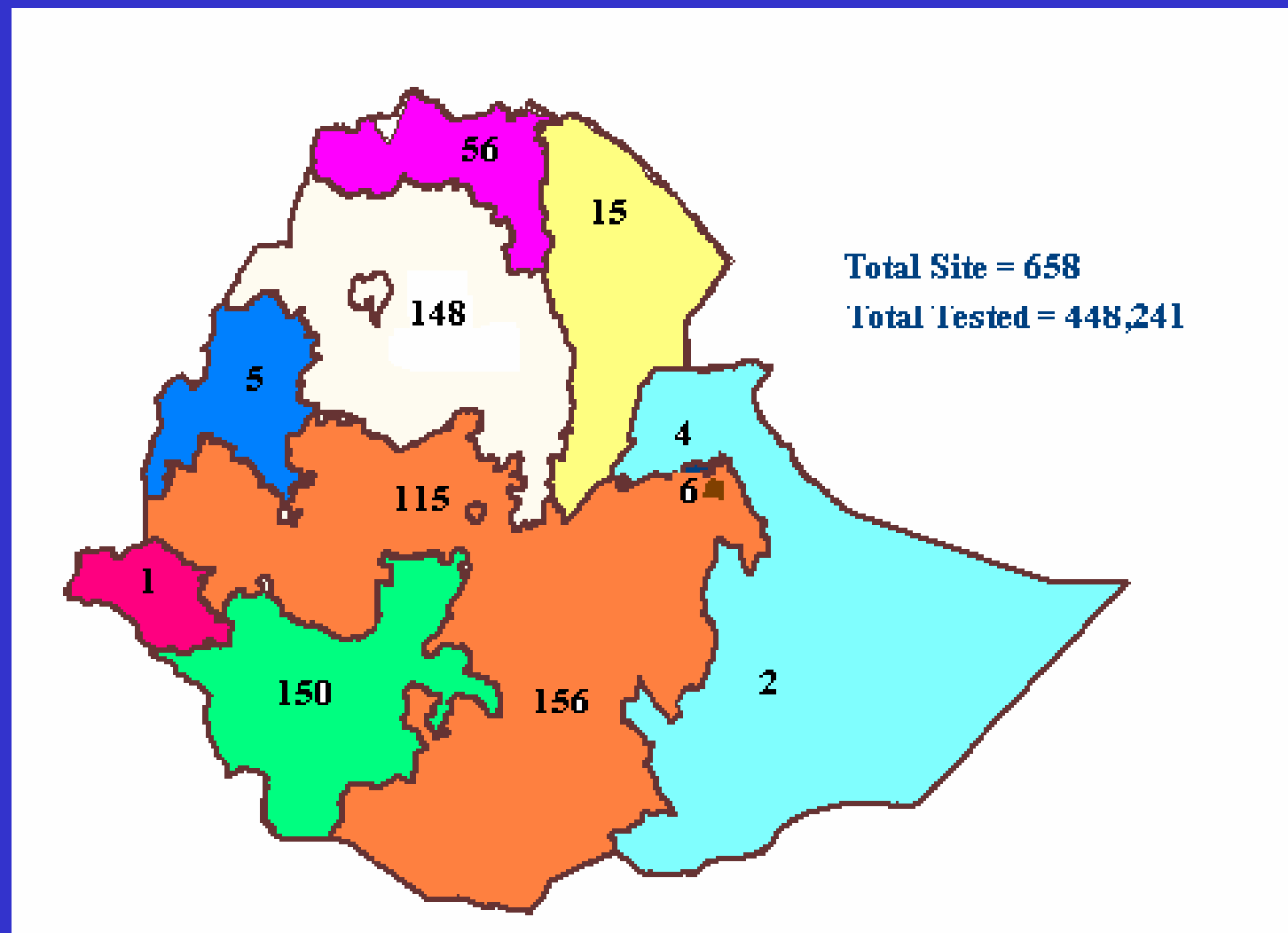
- **Objective of SM**
 - Ensure community ownership of the fight against HIV
 - Ensure maximum use of own (community) resources to fight HIV
- **Implemented Activities:**
 - The implementation of SM was initiated in SNNPR, Addis Ababa, Oromia
 - Guideline on Social Mobilization was prepared and distributed across the country
 - Budget from the Global Fund was allocated and distributed to all Regions



ART Site Distribution by Region, 2006



VCT Site Distribution by Region, 2005



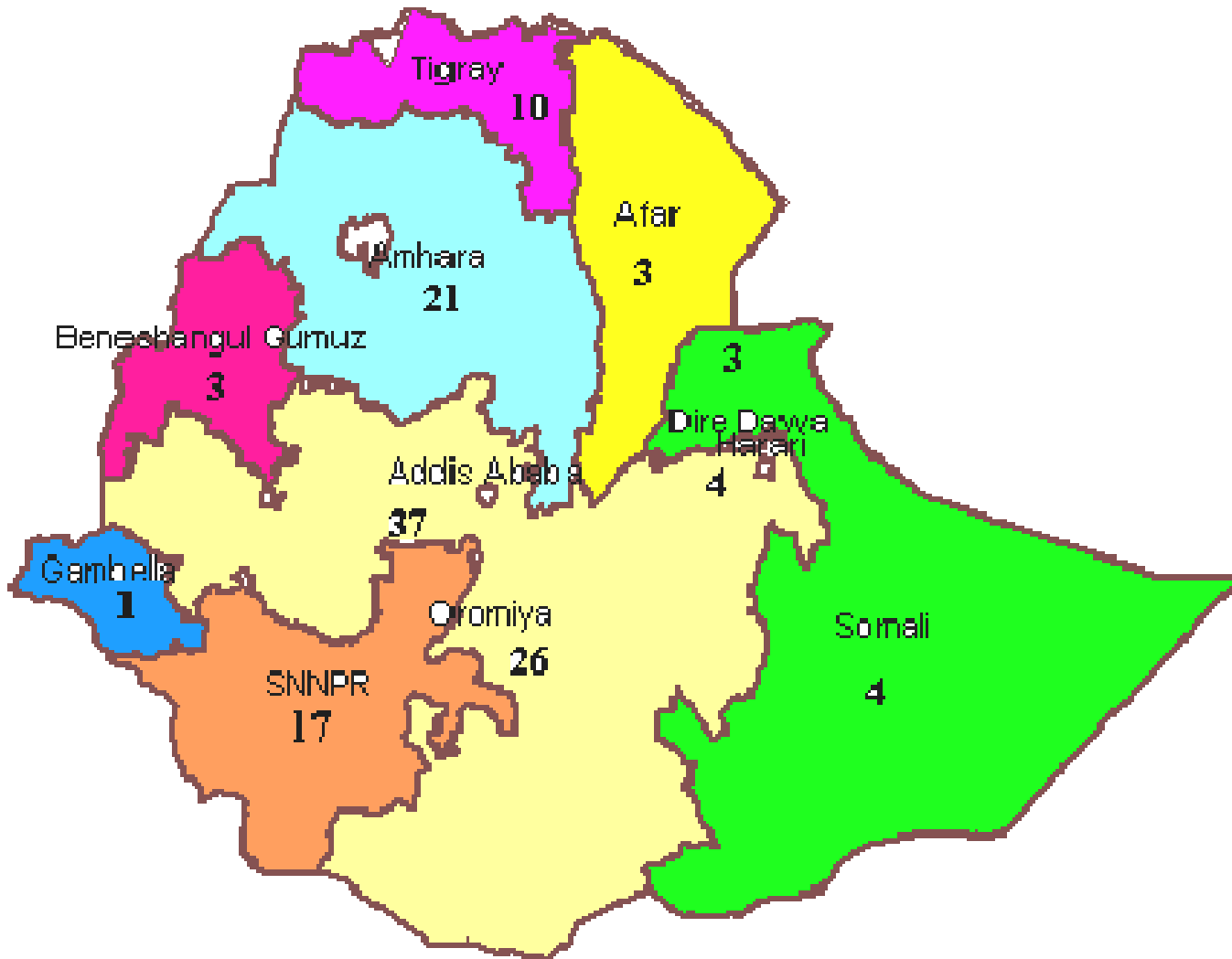
Condom Promotion

- **Increased awareness on appropriate use of condoms for the prevention of HIV and STIs**
 - 218 media sessions were conducted in 1997
 - Leaflets, brochures and posters were prepared & distributed
 - Quality assurance machines were installed to warrant the QA of condoms in the country by DACA
- **Increased the distribution outlets of condoms:**
 - 1997 - 71 million condoms
 - 1996 - 66 million condoms
 - 1995 – 49 million condoms were distributed



PMTCT Site Distribution in Ethiopia, 2005

(PMTCT sites = 129)



PMTCT

- **PMTCT program was initiated in 2002 expanded to 129**
 - **ANC attendees in 1997 Eth. Cal – 119,034**
 - **Mothers tested for HIV – 32,380**
 - **Mothers being positive for HIV – 3164**
 - **Mothers who have taken Nevirapine – 1636**
 - **Infants who have taken Nevirapine - 1368**



ART Program

- 286,000 PLWHA - require ARVDs in Ethiopia
- ART Road Map – 100,000 PLWHA will get ARVD until December 2006
- 200,000 PLWHA will be eligible for ARVD until the end of the SPM (2008)
- 89 ART hospitals and 267 HCs were selected to provide ART program



ART Patient Services in Ethiopia

Background

- ART Service Started in July, 2003
- Free based ART program started in March 2005

Current ART Sites

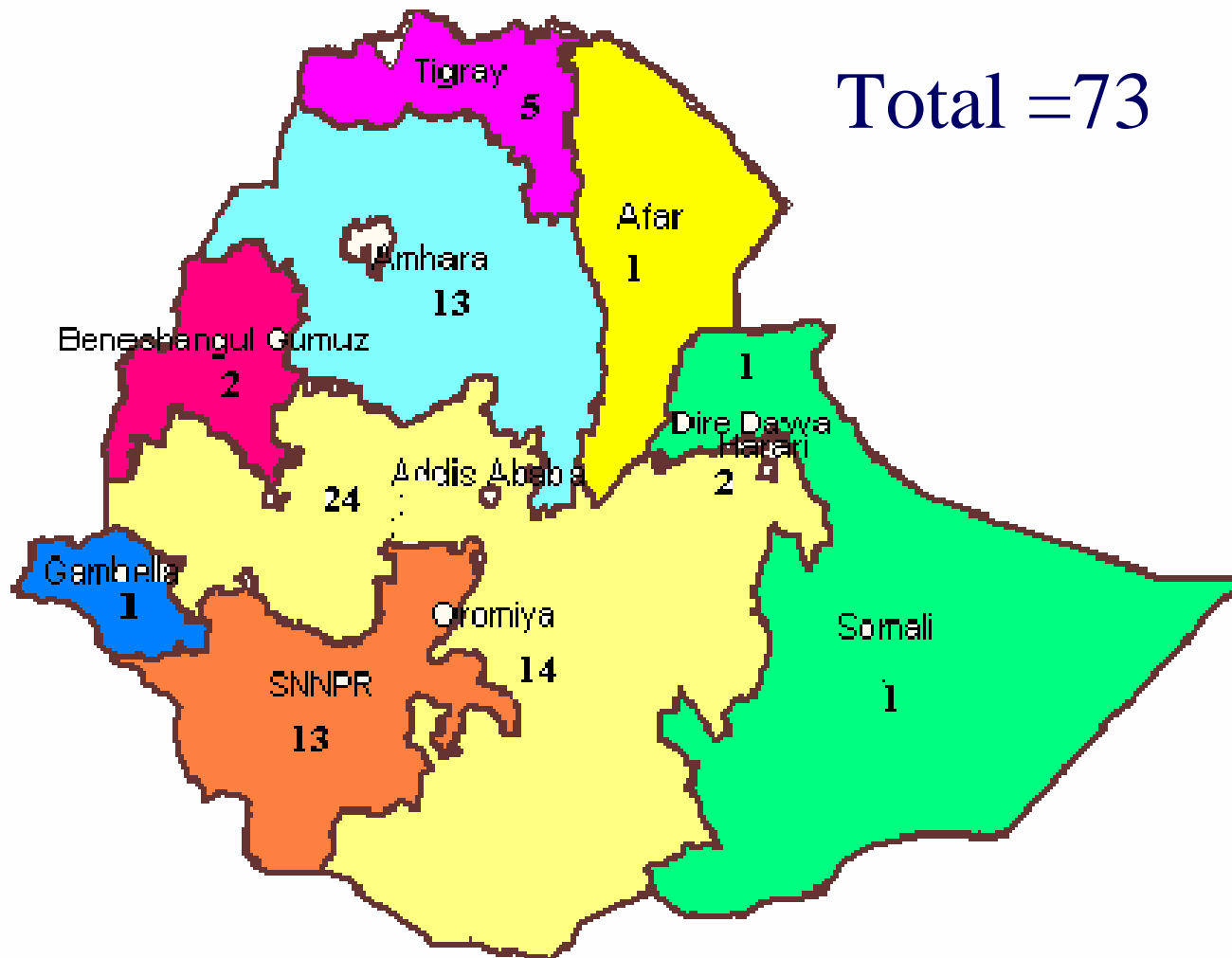
- | | |
|-----------|----|
| • Public | 60 |
| • Private | 13 |
| • Total | 73 |



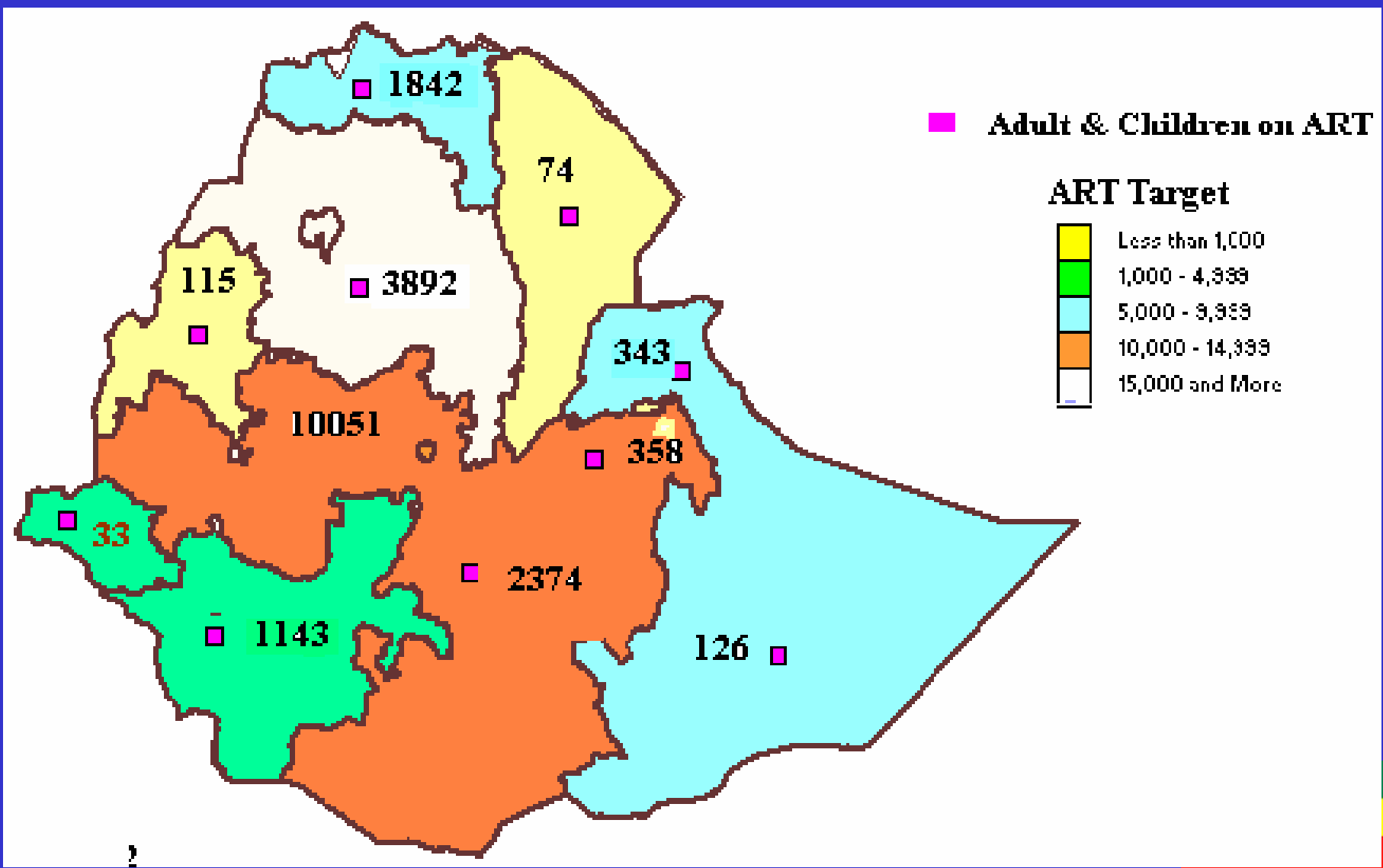
Patients Accessing HIV Care and ART

- **Enrolled in HIV care** = **27,341**
- **Ever Started on ART** = **22,064**
- **Currently on ART** = **20,477**
 - **Adult** **97%**
 - **Children** **3%**

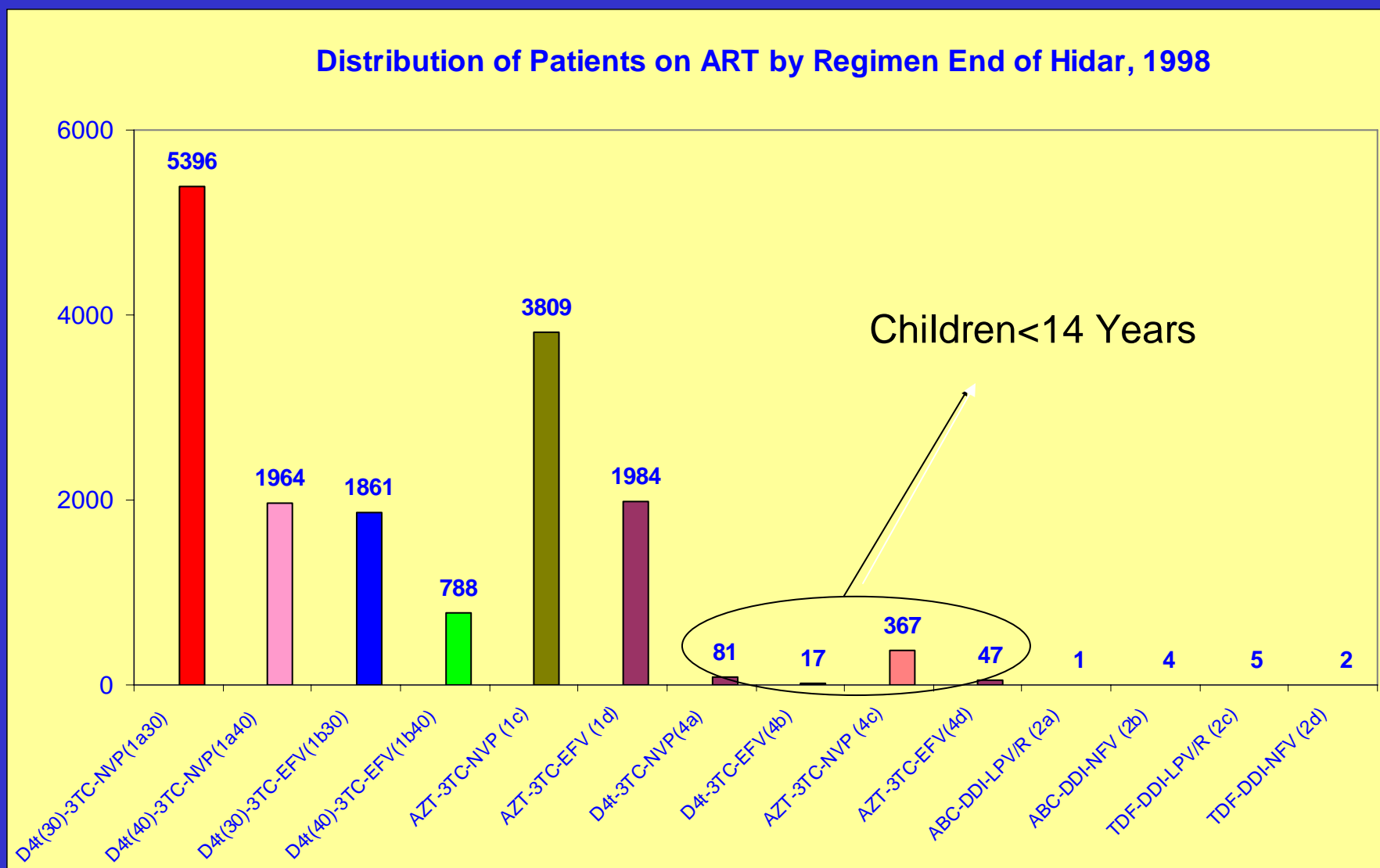
ART Site Distribution by Region



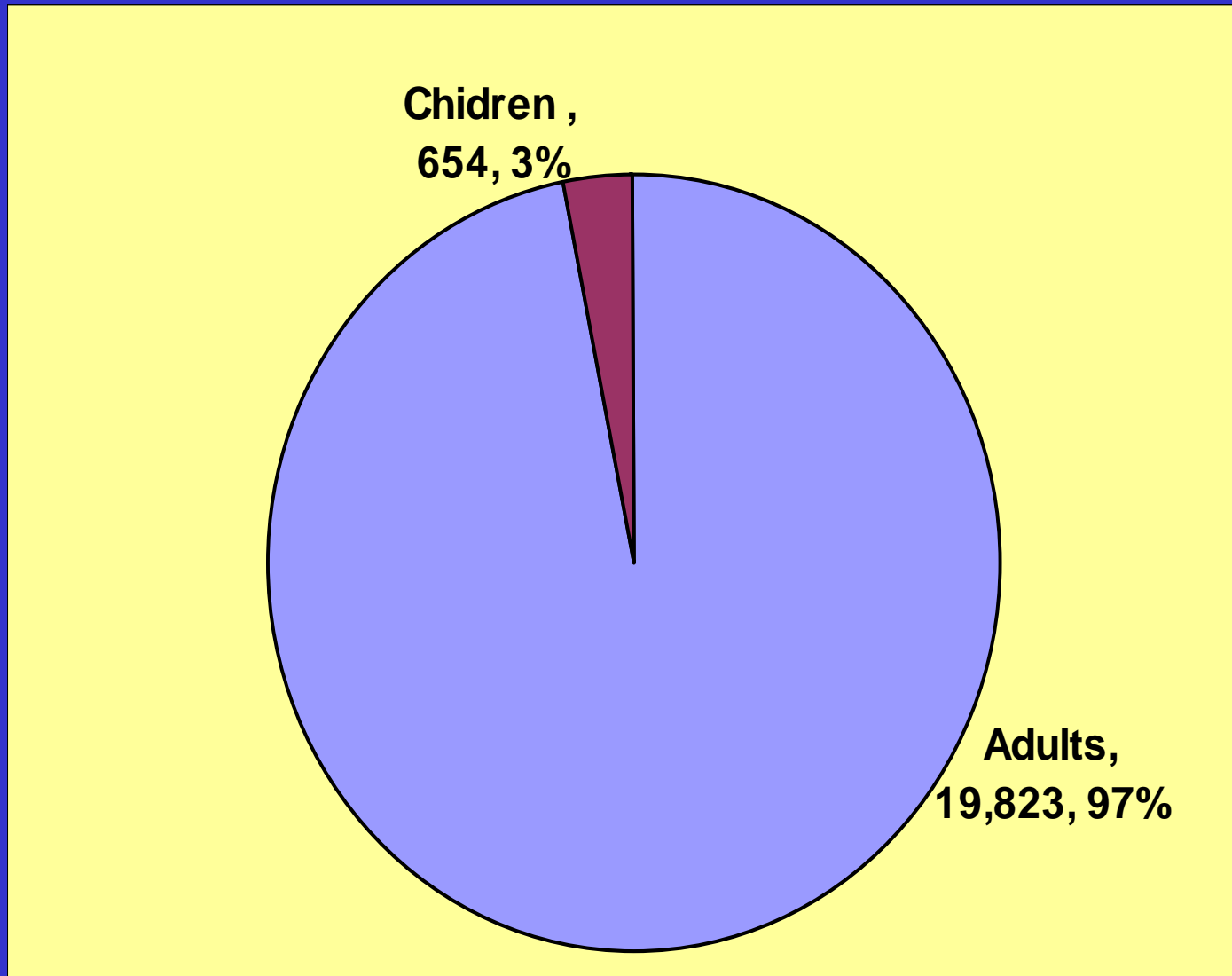
Adult and Children on ART as of Hidar 30, 1998



Distribution of Patients on ART by Regimen End of Hidar, 1998

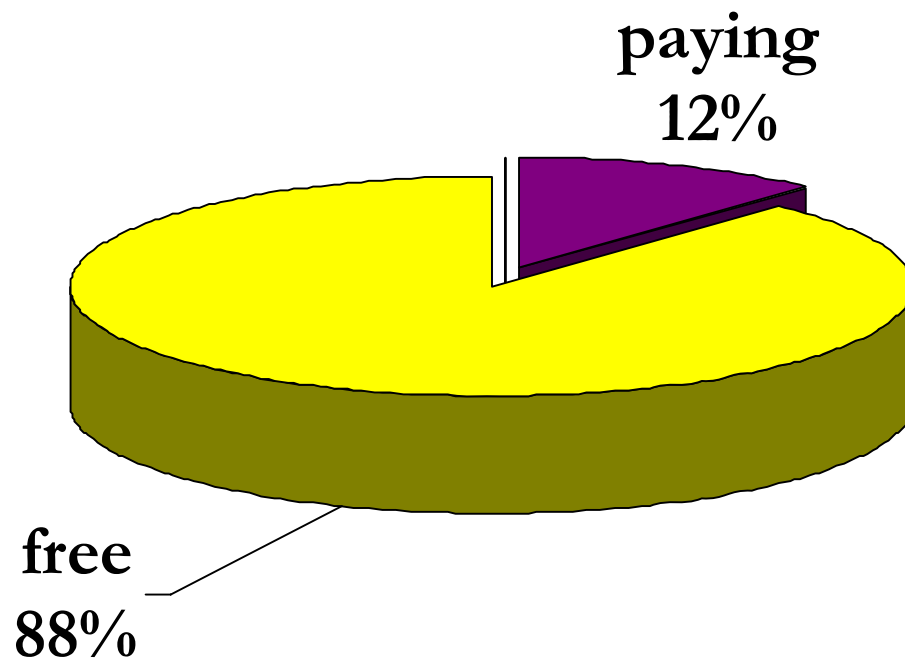


Adults & Children on ART as of Hidar 30, 1998

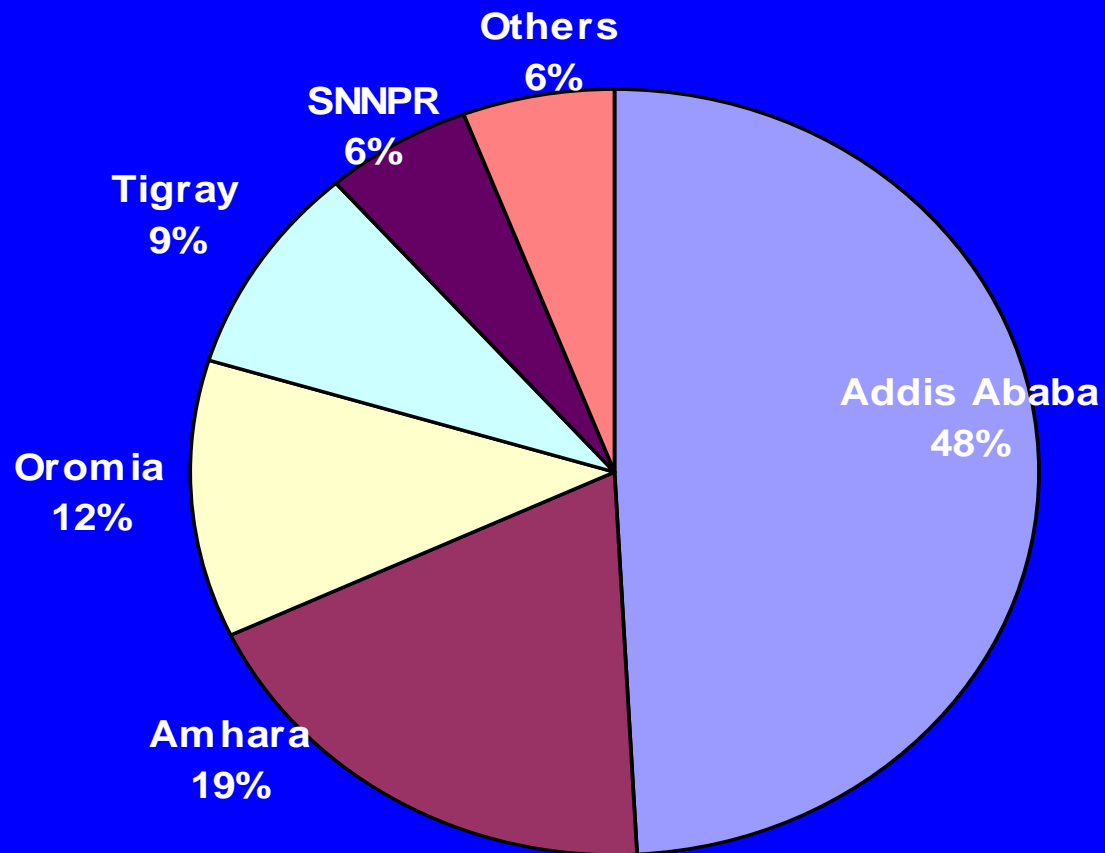


Distribution of Free ART

of 20,477 reported by status

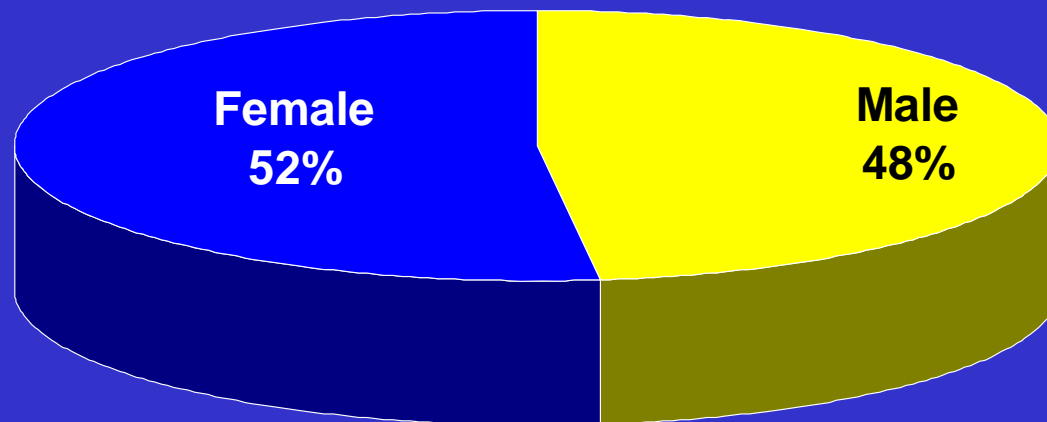


Regional Distribution of ART



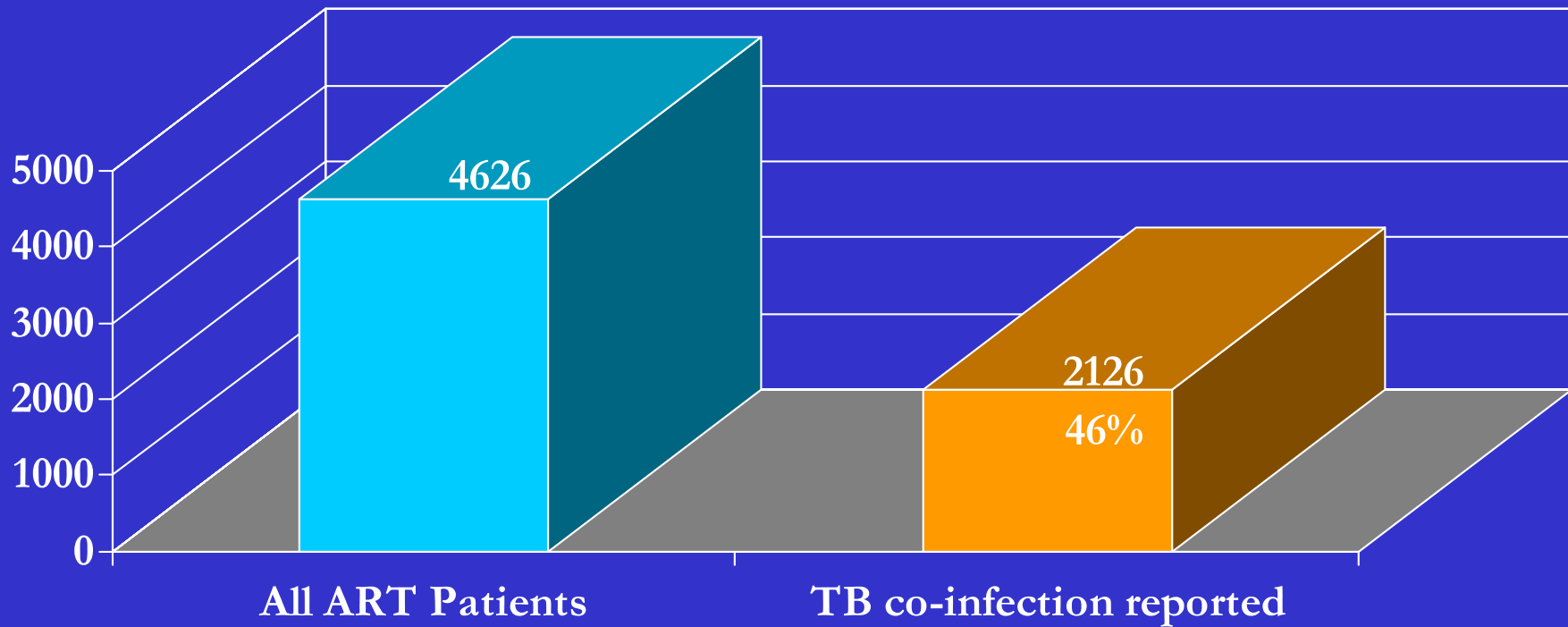
Current ART Distribution by Sex as of Hidar 30, 1998

Only From the 18 complete site report



HIV/TB Co-Infection

of 4626 Ever Started ART in Zewditu



Way forward

- **Expand social mobilization efforts for VCT and ART**
- **Intensify the rural HIV/AIDS interventions including ART program**
 - HEWs
- **Improve the HIV care and support program**
 - Nutrition and IGS
- **Expand Pediatrics ART program**
 - HCs
- **Establish a strong referral system (hospital, HCs & community)**
- **Improve the laboratory, procurement and supply system**
- **Establish National AIDS Fund**



Opportunities

- **GF and PEPFAR – (Harmonization)**
- **The Three ones:**
 - **One Coordinating Body**
 - **SPM/Road Map**
 - **M&E Framework (Standardized formats)**
- **CDC, USAID, WHO**
- **Universities (I-TECH, Columbia-ICAP, JHU, Tulane) & other stakeholders**

Thank You

