



Credit: HIV test kit, WHO Somalia/Fouzia

Mogadishu, 1 December 2022 – The World Health Organization (WHO), in partnership with Federal and State ministries of health, has managed to keep the human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) prevalence in Somalia on a steady decline, from above 1% in 2013 to 0.10% in 2022, thus keeping the country since 2014 classified as a low-level HIV epidemic country.

Out of over 3978 recorded HIV patients in Somalia who are on antiretroviral (ARV) treatment, 87.3% were virologically suppressed, that is, the quantity of virus had been brought down below the threshold required to gauge the treatment as being effective. Monitoring of viral suppression in HIV-positive patients on antiretroviral treatment (ART) is important both for optimizing patient health and for reducing risk of HIV transmission. Mortality and morbidity rates in ART patients are critically dependent on viral suppression and viral suppression in ART patients is critical to reducing HIV incidence at the population level. This success rate has been achieved on account of WHO's close monitoring of the HIV/AIDS situation in the country including ensuring equitable access to patient care, close follow up of patients who are on ART and regular monitoring of clinical conditions of the HIV/AIDS patients.

On the occasion of World Aids Day 2022, commemorated this year under the theme- "Equalize", WHO joins its partners to call upon the global leaders and citizens to boldly recognize and address the inequalities which are holding back progress in ending AIDS; and equalize access to essential HIV services particularly for children and key population groups who are at risk of contracting HIV/AIDS.

In its support to HIV/AIDS response activities in Somalia, WHO has worked with national and international stakeholders to provide training to national staff for HIV testing and counselling; treatment, including anti-retroviral therapy (ART); conducting periodic sentinel surveys to assess trends in the levels of the infection in the population; and in conducting annual HIV epidemic projection modelling exercises. In addition, WHO has supported capacity-building for monitoring HIV/AIDS treatment, including the measurement of the quantity of the HIV virus for patients on ART, as well as for conducting cohort analyses of patient outcomes. Furthermore, WHO has supported regular external quality assurance (EQA) assessments on the accuracy of HIV testing conducted by national staff at various HIV testing facilities across the country, including for voluntary counselling and testing, tuberculosis (TB), antenatal care and child delivery service outlets, as well as those who test blood prior to transfusion.

WHO's Medical Officer for HIV/AIDS Dr William Rogers Busulwa, while appreciating the reported decline in the prevalence of AIDS in Somalia, said that, "We still have a lot of ground to cover to ensure that communities and especially high-risk segments of society are regularly and

consistently engaged for raising awareness about the deadly disease, in addition to infected people are given equitable means of getting treatment without any fear of ostracization.”

HIV prevalence in Somalia

Somalia was classified as being a low-level HIV epidemic in 2014, but for 10 years prior to that antenatal HIV rates had been marginally above 1% in Somaliland, with this area classified as having had a generalized HIV epidemic. The HIV prevalence among the general population has seen statistically on a significant decline, with the most recent 2018 sentinel survey showing that antenatal HIV prevalence dropping to 0.15% in Somaliland, 0.17% in Puntland and 0.04% in South Central Somalia. The mean antenatal HIV prevalence for all 3 areas was 0.10% – positive signs that the disease continues to be on the decline.

For TB patients, HIV rates have also been on the decline, even as the coverage of HIV testing among them has increased to include more peripheral TB facilities. This prevalence declined from 5% in 2011, when systematic testing was launched, to 3.33% in 2014 and finally to 0.60% during January to June 2021.

Despite challenges of accessibility, ongoing drought, and security, WHO data reveal that by June 2022, out of recorded 3978 patients receiving ART, 82.7% of whom were already on the newer and more effective dolutegravir (DTG) based regimens. ART coverage of the estimated people living with HIV went up from 34.7% in 2018 to 44.7% in 2021. The data further reveal that during 2021, 49.6% of all patients enrolled on ART for at least 6 months received an HIV viral load test and 87.3% of these were virologically suppressed, that is, the quantity of virus had been brought down below the threshold required to gauge the treatment as being effective. This virological suppression increased from 69.1%.in 2018 when the service was first introduced, and from 80.7% in 2020.

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<https://www.emro.who.int/somalia/news/world-aids-day-reaching-more-people-with-hiv-services-and-reducing-inequalities.html>

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