EPIC: MAINTAINING EPIDEMIC CONTROL

Mali’s HIV prevalence rate of 1.4% is relatively high for West Africa and Mali is one of the few African countries where new infections are rising. HIV prevalence among key and priority populations is much higher than the national average. It is estimated that only one-third of Malians living with HIV know their status. Slightly less than one-third of those who test positive are on antiretroviral therapy (ART) and just under 10% of Malians on ART have achieved viral load suppression. Viral load suppression helps people stay healthy and live longer, and greatly reduces the chances of an HIV-infected person passing the virus on to others. Many Malians have difficulty accessing HIV testing and treatment due to stigma and the discrimination key populations face. Difficult access to health facilities and scarcity of follow-up at community level are also challenges.

PROJECT APPROACH

With funding from the President’s Emergency Plan for AIDS Relief (PEPFAR), EpiC supports quality of care across the HIV program cascade in Mali, working with four local NGOs; three Key Population (KP)-led associations; four community-based organizations, and; two community networks. EpiC also builds local capacity to end HIV as a public health threat in Mali working collaboratively with the Ministry of Health and Social Development through its National AIDS program and the National Public Health Institute’s referral laboratory.

Target Prevention, Care and Treatment: EpiC works through Malian partners to provide HIV testing, quickly get those who test positive onto ART, and help them stay on it until they achieve viral load suppression. For HIV negative beneficiaries, EpiC promotes peer messaging for evidence-based prevention measures such as condom use, prompt diagnosis and treatment of sexually transmitted disease, regular HIV testing for individuals at high-risk of infection, and improved access to pre-exposure prophylaxis.

Increase Demand: EpiC supports Malian partners to increase demand for HIV services by communicating and helping change behaviors, so project beneficiaries know their status, demand immediate treatment, and understand the benefits of viral load suppression for their own health and to prevent transmission.

Build Capacity: EpiC works with local NGOs and community partners, public and private sector providers, and governance bodies to improve HIV planning, management, service delivery, financial systems, and monitoring and evaluation. USAID supports the National AIDS Program’s Technical Working Groups and coordinates with other donors to ensure complementarity.

EpiC is continually working to improve HIV self-testing and index testing for family members and close contacts of people living with HIV. We are scaling up online outreach through social media and the highly successful Enhanced Peer Outreach Approach. Other priorities include closing the “linkage to treatment gap” by using peer navigation to get people who test positive onto ART, and to improve the availability and use of viral load testing to measure progress. EpiC is also investing to improve health information systems using an electronic individual tracker platform for data collection and evidence-based decision making.

BUDGET TO DATE: $7 million
PROJECT CYCLE: 2021-2024
TARGET AREAS: 23 districts in Bamako, Segou and Sikasso
IMPLEMENTING PARTNER: FHI360
KEY 2020 ACHIEVEMENTS:
• 10,599 (31,717 life of project total) key population members reached with prevention.
• 882 (life of project 1,898 total) adults and children newly enrolled on ART.
• 95% retention among 6,168 ART patients.
• 85% (of 783 patients) who received viral load tests achieved viral load suppression.