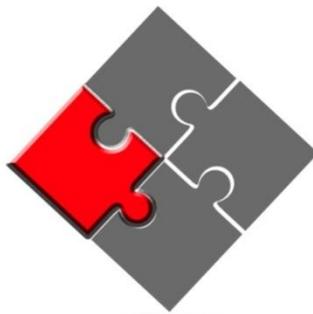


**A TEXT OF A PAPER PRESENTATION ON THE TOPIC:
HIV AND OUR SOCIETY
PRESENTED AT
THE ORDINARY GENERAL MEETING HELD ON SUNDAY, SEPTEMBER
9, 2018 AT FAMEWO COMMON ROOM, ALEXANDER BROWN HALL,
UNIVERSITY COLLEGE HOSPITAL**



THE PANACEA PROJECT
Identifying societal challenges; Proferring workable solutions

**THE PANACEA PROJECT
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BY

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INTRODUCTION

WHAT IS HIV?

The human immunodeficiency virus (HIV) infects cells of the immune system, destroying or impairing their function. Infection with the virus results in progressive deterioration of the immune system, leading to "immune deficiency." The immune system is considered deficient when it can no longer fulfill its role of fighting infection and disease. Infections associated with severe immunodeficiency are known as "opportunistic infections", because they take advantage of a weakened immune system. ¹

WHAT IS AIDS?

Acquired immunodeficiency syndrome (AIDS) is a term which applies to the most advanced stages of HIV infection. It is defined by the occurrence of any of and/or more than 20 opportunistic infections or HIV-related cancers. ¹

HOW IS HIV TRANSMITTED?

HIV can be transmitted through unprotected sexual intercourse (vaginal or anal), and oral sex with an infected person; transfusion of contaminated blood; and the sharing of contaminated needles, syringes, surgical equipment or other sharp instruments. It may also be transmitted between a mother and her infant during pregnancy, childbirth and breastfeeding. ¹

EPIDEMIOLOGY

People living with HIV

- In 2017, there were 36.9 million [31.1 million–43.9 million] people living with HIV in the world.
 - 35.1 million [29.6 million–41.7 million] adults.
 - 1.8 million [1.3 million–2.4 million] children (<15 years).
- 75% [55–92%] of all people living with HIV knew their HIV status in 2017.²
- Nigeria has the second largest HIV epidemic in the world. Although HIV prevalence among adults is much less (2.9%) than other sub-Saharan African countries such as South Africa (18.9%) and Zambia (12.4%), the size of Nigeria's population means 3.6 million people were living with HIV in 2016.³
- Six states in Nigeria account for 41% of people living with HIV, including Kaduna, Akwa Ibom, Benue, Lagos, Oyo, and Kano. HIV prevalence is highest in Nigeria's southern states (known as the South South Zone), and stands at 5.5%. It is lowest in the southeast (the South East Zone) where there is a

prevalence of 1.8%. There are higher rates of HIV in rural areas (4%) than in urban ones (3%).³

POLICIES PUT IN PLACE FOR HIV IN NIGERIA

1. Although Nigeria adopted a test and treat policy in 2015, whereby anyone with a positive diagnosis is eligible for treatment, this is far from a reality. Nevertheless, efforts have been made to scale-up treatment access, and 212,000 more people were enrolled on antiretroviral treatment between 2016 and March 2017.³
2. In early 2015, President Goodluck E. Jonathan signed a new antidiscrimination bill into law which secured the rights of people living with HIV, protecting HIV-positive employees from unfair dismissal and from mandatory HIV testing.³
3. Nigeria aims to triple treatment coverage in the next three years, ensuring that 90% of the population living with HIV are on treatment by 2021.³

TREATMENT

❖ Is there a cure for HIV?

No, there is no cure for HIV. But with good and continued adherence to ART, the progression of HIV in the body can be slowed to a near halt. Increasingly, people living with HIV can remain well and productive for extended periods of time, even in low-income countries. WHO now recommends treatment for all people living with HIV.⁴

WHAT ARE ARTs?

Antiretroviral drugs are used in the treatment and prevention of HIV infection. They fight HIV by stopping or interfering with the reproduction of the virus in the body, reducing the amount of virus in the body. In addition to ART, people with HIV often need counseling and psychosocial support. Access to good nutrition, safe water and basic hygiene can also help an HIV-infected person maintain a high quality of life. ¹

WHAT ARE THE CHALLENGES BEING FACED IN COMBATING HIV IN NIGERIA?

- ❖ **CULTURAL BARRIERS:** The national strategic framework identifies certain cultural practices that increase HIV vulnerability among the general population in Nigeria. These include female genital mutilation (FGM), widowhood rites, encouragement of multiple sexual partners for males, and marriage of young girls to much older men. In addition to these, STIGMA remains a key barrier to the HIV response in Nigeria,

with 46.8% of people reporting that they would not buy vegetables from a shopkeeper living with HIV, in 2016.

- ❖ **LEGAL BARRIERS:** One of the major barriers to accessing HIV prevention programmes for men who have sex with men are laws that criminalize their activities. For example, same-sex relations in Nigeria can be punished with 14 years imprisonment. This is not only limiting access to HIV prevention programming for this community, but causing nationwide stigma and discrimination against people based on their sexual orientation.
- ❖ **STRUCTURAL BARRIERS:** A simple lack of sites that deliver HIV services (testing sites, PMTCT (Prevention of Mother-to-Child Transmission) sites, and treatment sites) presents problems for the Nigerian population. In 2015 there were only 1,078 facilities providing HIV treatment, according to the national strategic framework.
- ❖ **ECONOMIC BARRIERS:** Funding problems arose in 2016 following an audit of NACA by the Global Fund to Fight AIDS, Malaria and Tuberculosis. The audit found evidence of “fraud and collusion in the amount of US\$3.8 million”, causing the Global Fund to suspend its funds. However, the Global Fund has reinstated its support following the creation of the West and Central Africa Catch up Plan. Despite an additional US\$17 million of domestic funds having been allocated to the HIV response for 2017, the vast majority of funding still comes from international donors. To increase domestic funding further, Nigeria has launched a new initiative to make each of the 36 states contribute up to 1% of their monthly allocations from the federal government to the HIV response. Nigeria also aims to increase private sector investment in the response from 2.1% in 2014 to 10% in 2018. ²
- ❖ **TREATMENT:** In Nigeria, out of the 3.4million persons living with HIV, only 750,000 are on antiretroviral therapy (ART). This is partly due to ignorance as most persons do not know that HIV treatment in Nigeria is FREE or infected persons do not know where to get the drugs. Right now, increasing numbers of drugs are now being licensed by NAFDAC for treatment of HIV and opportunistic infections. In Nigeria, antiretroviral drugs are available on prescription in hospital pharmacies, community pharmacies and some religious houses. Apart from cost related issues, better sources of these drugs are all Federal Teaching Hospitals, Federal Medical Centres and PEPFAR (USA/Nigeria Partnership for HIV/AIDs Relief) project centres. Currently, some hospitals provide such care. ⁴

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