

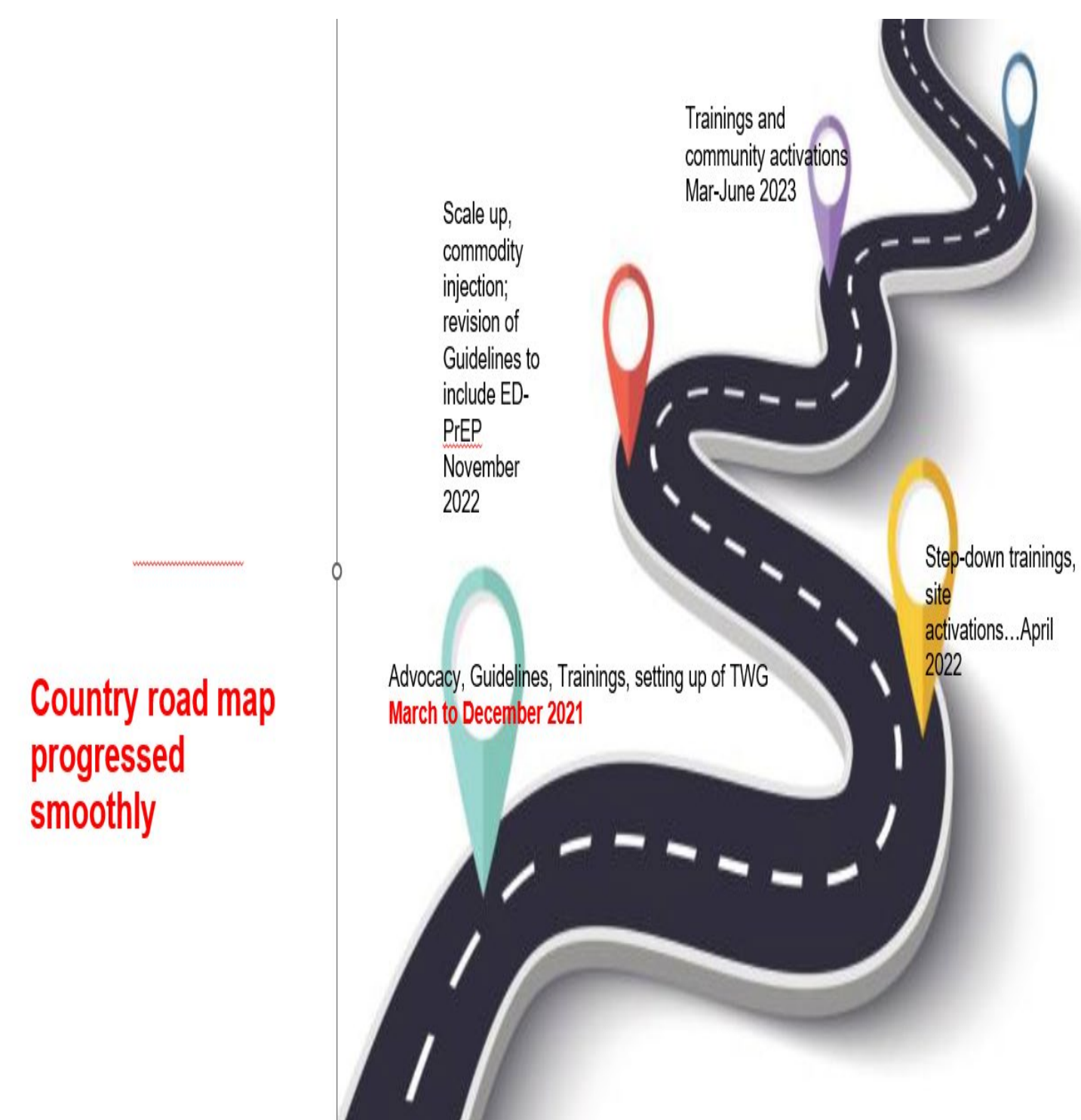
Implementing PrEP for HIV Prevention in Liberia: Sharing Best Practices and Programmatic Data

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BACKGROUND / INTRODUCTION

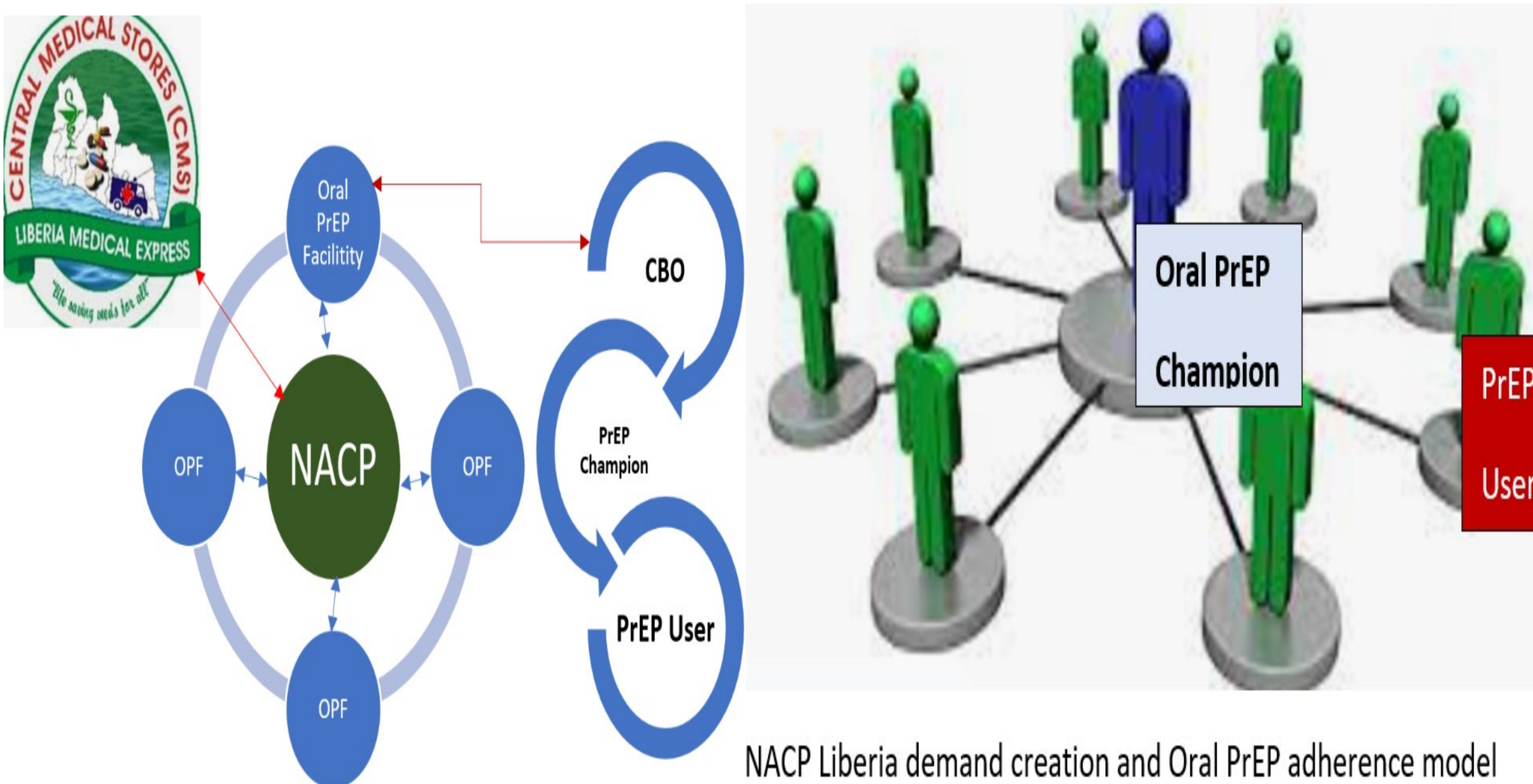
Key populations (KPs) in Liberia, with HIV prevalence rates of 37.9% among MSMs, 16.7% among FSWs, and 27.6% among TGs, are key drivers of the HIV epidemic (Liberia IBBSS 2018). With an estimated population of 74,634 MSMs, 163,033 FSWs, and 1,741 TGs, the country's progress toward the UNAIDS 95-95-95 targets have been hampered by stigma and poor access to HIV services. The National AIDS Control Program, supported by PEPFAR-funded Epic and Global Reach-2 projects, introduced Oral PrEP to prevent HIV transmission and enhance HIV case finding among key and associated general population.

HIV Prevalence (adjusted %)



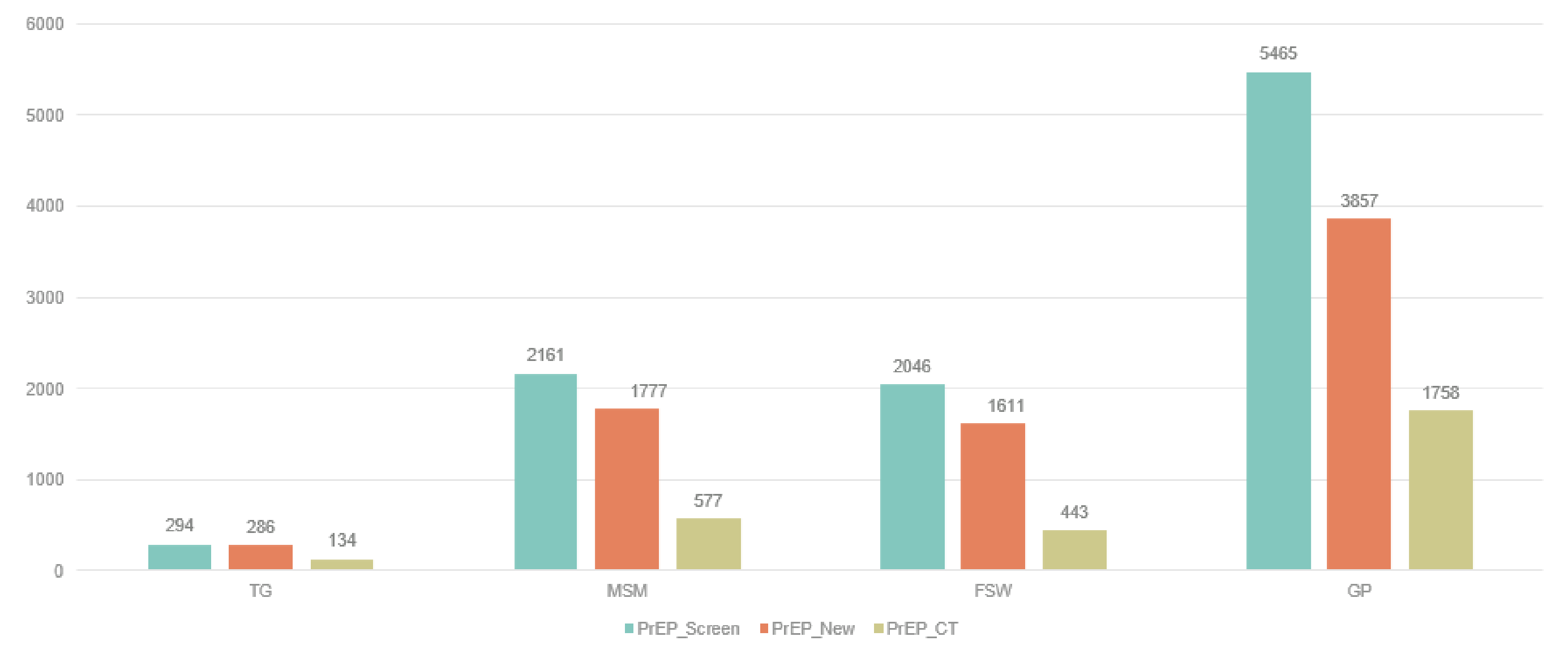
METHODS

Advocacy and sensitization with policy leaders led to the establishment of a multi-stakeholder group of technocrats, civil society, and IPs. Guidelines and job aids were developed to support the training, coordination of a hub of KP-friendly facilities and a spoke of multiple KP-focused CBOs for demand creation and safe service delivery corridor for Oral PrEP. A monitoring team of technical and strategic information visits the CBOs and facilities for quality assurance and compliance on the use for the guidelines. A quarterly technical working group meeting collates the experiences and discuss approaches to improve on the program.



RESULTS

Liberia PREP CASCADE PER POPULATION TYPE- Facility Based
April 6, 2022 - Sept 17, 2023



SUMMARY (WRA + LEN)						
Cumulative Achievement To Date						
Indicators	Total	FSW (%)	MSM (%)	TG (%)	PWID (%)	Others
HTS_TST	1,906	1,001(53%)	409(21%)	120(6%)	361(19%)	15(0.8%)
HTS_TST_POS	41	25 (61%)	11(27%)	2(5%)	3(7%)	0(0%)
PrEP_NEW	950	526(55%)	239(25%)	42(4%)	140(15%)	3 (0%)
PrEP_CT	269	124 (46%)	95 (35%)	7 (3%)	43 (16%)	0 (0%)

CONCLUSION

Oral PrEP is a feasible and acceptable HIV prevention intervention in Liberia. Good advocacy and stakeholder engagement led to the smooth operationalization of PrEP services for HIV prevention intervention. It is also an opportunity to finding new HIV cases among the key and general populations. There is need to scale up the intervention for country wide impact.



Training of CSOs on PrEP

Health workers displaying PrEP guideline after training

