Estimated number of people needing antiretroviral therapy (0-49 years), 2005: 62 000
Antiretroviral therapy target declared by country: 20 000 by the end of 2005

**Antiretroviral therapy target declared by country:**

Estimated number of people needing antiretroviral therapy (0-49 years), 2005:

- **SUDAN**

  **Background:**
  - Due to the civil war, Sudan is experiencing the early stages of a generalized epidemic. This is partly due to a lack of health services and awareness, in addition to the proximity to high-prevalence neighboring countries.
  - The northern states have one of the highest national HIV prevalences in the world, while the southern states have a lower prevalence.
  - The government has developed a policy to provide antiretroviral therapy, supported by the implementation of the Round 3 grant from the Global Fund.

**Epidemic level and trend and gender data**

- **Total population (millions):**
  - 2004: 34.3 (United Nations)
- **Population in urban areas (%):**
  - 2005: 40.7 (United Nations)
- **Life expectancy at birth (years):**
  - 2003: 59 (WHO)
- **Gross domestic product per capita (US$):**
  - 2002: 394 (Sudan Central Bureau of Statistics)
- **Government budget spent on health care (%):**
  - 2002: 6.3 (WHO)
- **Per capita expenditure on health (US$):**
  - 2002: 19 (WHO)
- **Human Development Index:**
  - 2003: 0.512 (UNDP)

**Vulnerable groups:**

- Major vulnerable and affected groups: internally displaced people, refugees, sex workers, tea sellers, street children, truck drivers, prison inmates, and police and armed forces personnel.

**Knowledge of HIV prevention methods (15-24 years):**

- Female: 0.7% (2003) (WHO/UNAIDS)

**Reported number of people receiving antiretroviral therapy (0-49 years), 2005:**

- <2005: 400 (Sudan National AIDS Programme)

**Estimated number of people needing antiretroviral therapy (0-49 years), 2005:**

- Sudan: 62 000 (WHO/UNAIDS)

**HIV testing and counselling sites: number of sites**

- Oct 2005: 15 (Sudan National AIDS Programme)
- Jun 2005: 2 478 (Sudan National AIDS Programme)

**Policy on HIV testing and treatment**

A ministerial decree endorsed by the government and stakeholders in March 2004 declared HIV/AIDS a priority disease and recommended that the national response strategy be based on simplified treatment and care guidelines in accordance with international standards. The decree also states that, under approved HIV/AIDS grants from the Global Fund to Fight AIDS, Tuberculosis and Malaria, services for voluntary testing and counselling and antiretroviral therapy and care for eligible people will be provided free of charge in the public sector. A policy on providing antiretroviral therapy was developed in support of the implementation of the Round 3 grant for HIV/AIDS from the Global Fund. The government is also committed to strengthening access to voluntary counselling and testing services.
The cost of a first-line treatment regimen is US$ 600 per person per year, using zidovudine + lamivudine + nevirapine. Discussions are underway with key suppliers on the possibility of reducing the prices of antiretroviral drugs as demand increases with treatment scale-up.

4. Resource requirements and funds committed for scaling up treatment and prevention in 2004-2005

- WHO estimates that between US$ 39.9 million and US$ 64.6 million was required to support scaling up antiretroviral therapy to reach the WHO “3 by 5” treatment target of 21 500 people by the end of 2005.
- Sudan submitted a successful Round 3 proposal to the Global Fund to Fight AIDS, Tuberculosis and Malaria focusing on prevention and advocacy in the context of a multistatental national response. The proposal was signed in January 2005, and in accordance with the national plan of action has been developed. The total funding request was for US$ 20.8 million, with two year approved funding of US$ 7.8 million. US $3.2 million had been disbursed as of November 2005 for implementation of activities. The proposal does not cover the need to scale up antiretroviral therapy, except for US$ 400 000 per year for treating 400 people at the originally expected price of US$ 1 000 per person per year. Given the potential for a drug price reduction, this funding is now expected to allow up to 1 300 people to be treated per year. This proposal also envisages the establishment of 12 voluntary counselling and testing centres. Sudan also submitted a successful Global Fund Round 4 grant proposal in support of HIV/AIDS prevention and care for southern Sudan for total funding of US$ 28.4 million and two-year approved funding of US$ 13.8 million. The grant agreement was signed in June 2005. As at 30 June 2006, a total of US$ 3.7 million had been disbursed for implementation of activities. The plans are to expand access to voluntary counselling and testing, support capacity building of health staff and provide antiretroviral therapy to 292 people over five years.
- Government expenditure for HIV/AIDS is limited, with a total budget of US$ 1.6 million for 2003. Some funds are also available from multilateral agencies, bilateral donors and international nongovernmental organizations.

5. Treatment and prevention coverage

- In 2003, WHO/UNAIDS estimated Sudan’s total treatment need to be 43 000, and the WHO “3 by 5” treatment target was set at 21 500 people by the end of 2005 (based on 50% of estimated need). In 2005, WHO/UNAIDS estimated that the treatment need was 62 000 people. The government committed to providing treatment to 20 000 people by the end of 2005 and 40 000 people by the end of 2009.
- A total of 40 000 people were receiving antiretroviral therapy at the end of 2004. This includes about 100 people receiving antiretroviral therapy from military hospitals (70 in Khartoum and 30 in Juba). Access to antiretroviral therapy services in southern Sudan is very limited. Efforts are underway to rehabilitate treatment and testing and counselling services in three cities - Juba, Waat and Malakal. Four additional sites are proposed to be established under the Global Fund Round 4 grant for the south.
- The Global Fund Round 4 grant is expected to provide antiretroviral therapy to 518 people by the end of year 2, which is targeted for June 2006.
- Voluntary counselling and testing services are expanding gradually. As of October 2005, 15 sites were providing voluntary counselling and testing services in the country. The number of people accessing voluntary counselling and testing services increased from 2 048 in June 2005 to 4 248 in June 2006.
- Services for the prevention of mother-to-child transmission are available at five sites, and 1012 women had accessed these services as of October 2005. Coverage of prevention of mother-to-child transmission services remains limited.

6. Implementation partners involved in scaling up treatment and prevention

Leadership and management

The Ministry of Health and the Sudanese National AIDS Control Programme coordinate and manage the overall HIV/AIDS programme, including the provision of antiretroviral therapy. The Ministry of Health also coordinates the legal and policy framework, programme evaluation and planning of human resources. WHO, UNICEF, UNDP and nongovernmental organizations contribute to the process of strengthening the health system. UNAIDS provides support for strategic planning, resource mobilization and coordination activities. The United Nations Theme Group on HIV/AIDS in Sudan plays a coordinating role at partner level. Members include United Nations agencies, national partners and representatives of international and national nongovernmental organizations. The Sudan AIDS Network represents the national nongovernmental organizations working on HIV/AIDS. Thematic technical working groups are established as needed to advise on work on specific issues. UNDP supports a Leadership Development Programme, focusing on capacity and leadership development at the national, state and community levels for scaling up antiretroviral therapy.

Service delivery

The Ministry of Health provides leadership in delivering HIV/AIDS prevention, care and treatment services. The Ministry of Defence and the Ministry of the Interior collaborate closely with the Ministry of Health in providing testing and counselling and in managing people living with HIV/AIDS at entry points. The Ministry of Health and partner nongovernmental organizations take the lead to plan and implement the annual National Training and Site-level Training. WHO and the German Gesellschaft für Technische Zusammenarbeit (GTZ) have assisted in establishing the Knowledge Hub for the Care and Treatment of HIV/AIDS in the Eastern Mediterranean for supporting capacity-building activities at the national and state levels. International nongovernmental organizations such as Family Health International and private-sector agencies such as Johns Hopkins have been involved in prevention, care and support activities. The Sudanese National AIDS Control Programme, the Central Medical Supplies and the General Directorate of Pharmacy of the Ministry of Health undertake procurement and supply management activities.

Community mobilization

Civil society groups increasingly collaborate with the Ministry of Health and the Sudanese National AIDS Control Programme in activities related to programme communication, capacity-building for people living with HIV/AIDS and treatment adherence and psychosocial support. The United Nations Population Fund, UNICEF and WHO provide support for integrating HIV/AIDS into school curricula and for social mobilization activities. UNDP, the Office of the United Nations High Commissioner for Refugees, the World Food Programme and the United Nations Industrial Development Organization support community mobilization efforts by building partnerships with nongovernmental organizations and providing support to people living with HIV/AIDS. About 50 national nongovernmental organizations are engaged in HIV/AIDS activities, coordinated by the Sudan AIDS Network. They play an important role in reaching out to vulnerable population groups. Local nongovernmental organizations and the Ministry of Health of the Church of Sudan provide counselling, home care and support to people living with HIV/AIDS. UNAIDS supports advocacy efforts and activities to involve and mobilize people living with HIV/AIDS.

7. Staffing input for scaling up HIV treatment and prevention

WHO’s response so far

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• Conducting a series of missions to assess the HIV/AIDS situation and to support the development of a training course and materials on HIV/AIDS programme management
• Providing technical assistance for establishing the Knowledge Hub for the Care and Treatment of HIV/AIDS in the Eastern Mediterranean to support regional HIV/AIDS capacity-building with the support of WHO and the German Gesellschaft für Technische Zusammenarbeit (GTZ), supporting the development of a state-level HIV/AIDS capacity-building work plan and providing training for state-level programme managers via the Knowledge Hub
• Completing the national adaptation of the WHO Integrated Management of Adult and Adolescent Illness (IMAI) strategy and training a core group of trainers with expert patients, nurses and physicians, including organizing four weeks of practical training for Sudanese health care workers at sites delivering antiretroviral therapy, counselling and related treatment and care services in Uganda
• Supporting the development of a national operational plan for scaling up antiretroviral therapy
• Supporting the rehabilitation of centres for voluntary counselling and testing and antiretroviral therapy services
• Providing support to the Ministry of Health in developing the Global Fund Round 4 proposal and in implementing the Round 3 and Round 4 grants
• Providing support for national efforts to mobilize resources
• Conducting an assessment of the national procurement and supply management systems and developing a plan to strengthen national capacity in procurement and supply management
• Recruiting a National Programme Officer to assist the Ministry of Health in monitoring drug resistance related to HIV, tuberculosis and malaria
• Establishing an HIV/AIDS country team to support the government and other partners in scaling up antiretroviral therapy

Key areas for WHO support in the future
• Supporting the development of national standards for HIV/AIDS treatment and care for different levels of the health care system, including national guidelines on antiretroviral therapy
• Providing ongoing support for training various levels of health workers to deliver a comprehensive package of HIV/AIDS services
• Providing support for finalizing and implementing the national operational plan for scaling up antiretroviral therapy
• Providing support for improving drug procurement and supply management systems
• Providing support for efforts to monitor drug resistance
• Providing support for strengthening blood safety

Staffing input for scaling up HIV treatment and prevention
• Current HIV staffing in the WHO Country Office includes: an international HIV/AIDS Country Officer; an HIV/AIDS National Programme Officer; and a National Programme Officer supported by the Norwegian Agency for Development Cooperation for coordinating activities related to drug resistance monitoring for HIV, tuberculosis and malaria. A National Programme Officer for southern Sudan is being recruited. Additional Country Office staffing needs identified include one National Programme Officer for national capacity-building issues related to the Knowledge Hub for the Care and Treatment of HIV/AIDS in the Eastern Mediterranean as well as a National Programme Officer for each of the four regions in the country to link with the HIV/AIDS Country Officer.