

U.S. Agency for International Development

> Bureau for Global Health

BENIN

Benin's overall HIV prevalence remains relatively low, compared to other countries in sub-Saharan Africa, but the disease is spreading steadily among young adults and in vulnerable populations. Benin registered its first case of AIDS in 1985, and, in 1999, the Ministry of Health reported an estimated 159,216 adults and children were living with HIV/AIDS. UNAIDS' estimates for 2001 report 120,000

Estimated Number of Adults and Children Living with HIV/AIDS (end 2001)	120,000
Total Population (2001)	6.4 million
Adult HIV Prevalence (end 2001)	3.6 %
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, patients seeking care for a sexually transmitted infection, or others with known risk factors)	41%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	2.3%

Country profile

HIV/AIDS

Sources: UNAIDS, U.S. Census Bureau

infections in Benin, and an adult prevalence of 3.6 percent. In 1999, 67 percent of reported AIDS cases occurred in the 20- to 39-year age group, and heterosexual transmission was linked to the vast majority of these cases (90 percent). The Ministry of Health estimates women account for about 40 percent of all persons living with HIV/AIDS.

According to Prime Minister Bruno Amoussou, HIV prevalence in Benin increased 10-fold from 0.36 percent in 1990 to 4.1 percent in 2000. HIV prevalence ranges from 0 percent to 14 percent in pregnant women, and from 4 percent to 32 percent among patients with sexually transmitted infections. Ministry of Health studies conducted in 1999 reported a prevalence of about 54 percent among sex workers.

The HIV epidemic in Benin has had a disproportionate impact on children, causing high morbidity and



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Map of Benin: PCL Map Collection, University of Texas

mortality rates among infected children and orphaning many others. Without access to, and use of, appropriate prevention of mother-to-child transmission programs, some 30 to 40 percent of infants born to HIV-positive mothers will become infected with HIV; most will die within two years. By the end of 2001, UNAIDS reported approximately 12,000 Beninese children were living with HIV/AIDS, and 34,000 living children had lost one or both parents to the disease. The Ministry of Health (PNLS) reported 76,063 children had been orphaned by 2001 (8,158 at age 5; 25,669 at age 10, and 42,236 at age 15).

Despite widespread knowledge of HIV and modes of transmission and prevention in Benin, it is difficult to establish a corresponding shift in behavior change. A national survey conducted by Population Services International in 1999 reported 42.7 percent of men and 50.4 percent of women had a negative perception of condoms. About 54 percent of Beninese reported using a condom during their last sexual encounter with an "occasional" partner. Also, according to the 2001 Demographic and Health Survey, only 31 percent of men and 16 percent of women reported using a condom during their last sexual encounter with an "occasional" partner. Of those who reported not using a condom, 34.2 percent said it was because their partner refused. The spread of HIV/AIDS in Benin is linked to risk factors that increase vulnerability to HIV infection, such as rising numbers of out-of-school youth, high unemployment levels, poverty, women's weak social and economic status, high rates of illiteracy (especially among women), and a lack of adequate treatment for sexually transmitted infections.

National Response

In response to the first reported cases of HIV/AIDS in Benin, the government established the *Programme National de Lutte Contre le SIDA* (PNLS) under the auspices of the Ministry of Health, with financial and technical assistance from the World Health Organization. A short-term HIV/AIDS plan was first put into place from 1987–1988, followed by a first medium-term plan from 1989–1993, and a second medium-term plan for 1997–2001.

Recognizing the increasing severity of its epidemic, Benin has recently scaled up its response to HIV/AIDS, including development of a national strategy for health information, education, and communication. The PNLS initiated an HIV/AIDS strategic planning process for 2001–2005, and the national budget for AIDS control increased from less than \$325,000 in 2000 to \$2.9 million in 2001. The new AIDS plan is an essential component of Benin's larger development and poverty eradication strategy. According to the Prime Minister, and in line with a recent Organization for African Unity agreement, Benin plans to spend at least 15 percent of its state expenditure on the health sector.

In addition, Benin's Council of Ministers recently committed to allocating debt relief funds to the AIDS response, and the UNAIDS Theme Group on HIV/AIDS addressed the National Assembly on HIV/AIDS. Nongovernmental groups, including service associations and bankers, have also indicated a willingness to address the epidemic.

USAID Support

In 2002, the U.S. Agency for International Development (USAID) allocated approximately \$3 million to HIV/AIDS activities in Benin, including funds for a new HIV/AIDS prevention program, social marketing of condoms, behavioral surveillance surveys, and direct support to the PNLS.

USAID/Benin is working to increase health-seeking behaviors, and reduce risky behaviors by promoting a supportive policy and program environment. Specifically, the Mission strives to increase access to services and products; improve the quality and management of prevention services; and increase the demand for HIV/AIDS services, products, and prevention measures.

From 1999–2000, USAID/Benin developed a strategy for a new national HIV/AIDS prevention program, which focuses on advocacy, epidemiological and behavioral surveillance, treatment of sexually transmitted infections, behavior change communication for vulnerable groups, and continued support for condom social marketing. This strategy led to the development of a four-year, \$4.5 million national activity, launched in July 2002. Africare was selected as the implementing partner.

USAID supports the following country programs:

Advocacy

To foster a supportive policy environment and encourage high-level action on HIV/AIDS, USAID finances the development of advocacy tools that can be used to influence decision-makers. USAID also plays an active role in the UNAIDS Theme Group, and served as the group's vice president from 2000–2002.

Behavior change communication

Since 1998, the Mission has funded a variety of information, education, and communication-related activities, including training of outreach workers to promote HIV communication-related activities; training of outreach workers to promote sensitivity to HIV and sexually transmitted infections; and the production and broadcasting of films and plays about HIV/AIDS-related topics.

In 2002, USAID worked with Family Health International and the PNLS to carry out Benin's first national behavioral surveillance surveys among vulnerable populations. The results of these surveys will contribute to improving targeted communication activities. In addition, the new HIV/AIDS Prevention Program will be starting the second round of behavioral surveillance surveys in coming months. This round will be linked with an epidemiological surveillance component.

Capacity building

USAID helps to build capacity within a national AIDS journalists' network and the national AIDS research network. The Mission provides support to the PNLS to improve management capacity and assist its efforts in coordinating the newly developed HIV/AIDS prevention strategy. In addition, USAID/Benin gives small grants for HIV prevention activities to selected nongovernmental organizations.

Condom social marketing

Condom social marketing is currently USAID/Benin's major national HIV/AIDS prevention activity. Condom sales have doubled since 1997, with more than 6.5 million condoms sold in 2001. This number represents approximately 93 percent of all condoms sold in Benin that year. By the end of 2002, there were more than 16,000 sales locations for condoms in Benin, up from 7,000 in 1999. The country is also part of a regional social marketing and behavior change program, targeting migrant populations such as truckers.

Quality media and communications interventions that explain the role condoms play in reducing the risk of HIV transmission are key to increasing further demand for the product. Marketing teams have been trained in HIV/AIDS prevention and communication techniques, focusing on how to talk with vulnerable populations. The teams travel to Benin's open-air markets, truck stops, schools and other "hot spots," spreading the message that HIV transmission can be prevented through the adoption of healthy behaviors, and demonstrating proper condom use. A bimonthly youth magazine and weekly radio call-in program promote abstinence, fidelity, and condom use for HIV/AIDS prevention.

For more information

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USAID HIV/AIDS Web site, Benin: http://www.usaid.gov/pop_health/aids/Countries/africa/benin.html

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For more information, see <u>www.usaid.gov/pop_health/aids/</u> or <u>www.synergyaids.com</u>.

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