



MALI

DHAPP

**DEPARTMENT OF DEFENSE HIV/AIDS
PREVENTION PROGRAM**

**REDUCING THE INCIDENCE OF HIV/AIDS
AMONG UNIFORMED PERSONNEL IN
SELECTED AFRICAN NATIONS AND BEYOND**

WINNING BATTLES IN THE WAR AGAINST HIV/AIDS

BACKGROUND

Country Statistics

The population of Mali is estimated to be 11.7 million people, with an average life expectancy of 49 years. French is the official language of Mali, which has an estimated literacy rate of 46.4%, unevenly distributed between men and women. Mali is among the poorest countries in the world, with 65% of its land area desert, and with a highly unequal distribution of income. Economic activity is largely confined to the river area irrigated by the Niger. About 10% of the population is nomadic and some 80% of the labor force is engaged in farming and fishing. The gross domestic product (GDP) per capita is \$1,200, with 64% of Malian people living below the poverty line.

HIV/AIDS Statistics

The HIV prevalence rate in Mali's general population is estimated at 1.7%, with approximately 130,000 people living with HIV in 2005. The primary modes of HIV transmission are heterosexual contact, sexual contact with commercial sex workers, and a high rate of sexually transmitted infections (STIs). Migration is thought to be a significant factor in Mali's HIV epidemic.

Military Statistics

The Mali Armed Forces (MAF) is estimated at approximately 7,000 members. Mali allocates 1.9% of the GDP for military expenditures. Military HIV prevalence rates are unknown; however, the majority of MAF soldiers are between 15- and 24-years-old, the group most vulnerable to HIV infection.

PROGRAM RESPONSE

In-Country Ongoing Assistance

In-country partner Family Health International (FHI) has established a collaborative relationship with the MAF and US Embassy officials in country. In Mali, military and civilian populations share the main hospitals, with the military primarily using the health clinics. There are 34 military clinics in the 6 military regions. Four (4) counseling and testing (CT) centers are available in Bamako, Timbuktu, Sevare, and Segou. The MAF conducts HIV testing as part of routine medical examination upon recruitment into security services, and the MAF offers state-of-the-art treatment, care, and support to all sick service members, spouses, and children under the age of 18, within and outside the country. The health care system in the military is severely limited in its capacity to care for people living with HIV/AIDS (PLWHA) due to inadequate staff skills, supplies, and infrastructure, including erratic availability of reagents in CT centers, drugs for STI treatment, and interrupted supplies of antiretroviral drugs in clinics.

Proposed Future Activities

DHAPP received two proposals for fiscal year 2007 activities on behalf of the MAF. The first, from partner FHI, focused on the following objectives: training CT workers and peer educators, and providing first-aid training for health care workers providing services for PLWHA (specifically, training will occur for health care providers in counseling, HIV screening, laboratory skills, and clinical skills to care for PLWHA; strengthening peer education by training cadres in each garrison that has a CT site; expanding CT sites by reinforcing capacity of the laboratory in Kati to accurately analyze HIV tests; and renovating 4 military CT sites.

The second proposal, from Fayetteville State University, stressed the following objectives: train master trainers and peer educators, engage HIV/AIDS behavior change communication, provide infrastructure for HIV testing centers, increase military voluntary CT, develop HIV laboratory capability, and increase clinical capability for care of PLWHA.

Both proposals were reviewed by a scientific panel and will be presented to the DHAPP Board of Directors.

OUTCOMES & IMPACT

Prevention, Care and Treatment

During fiscal year 2006, no reporting data were received from the MAF or its partners. DHAPP looks forward to future collaborative efforts with the MAF.

