

Sierra Leone

HIV/AIDS epidemiological summary

Scant information on HIV prevalence is available for Sierra Leone. In an unspecified region, 1% of antenatal clinic women tested positive for HIV-1 and/or HIV-2 in 1990. Data were not available for the individual virus types. In 1992, 2% of antenatal clinic women, again in an unspecified region, tested positive for HIV-1.

A 1995 sero-survey conducted among sex workers in Freetown found that 27% tested positive for HIV-1.

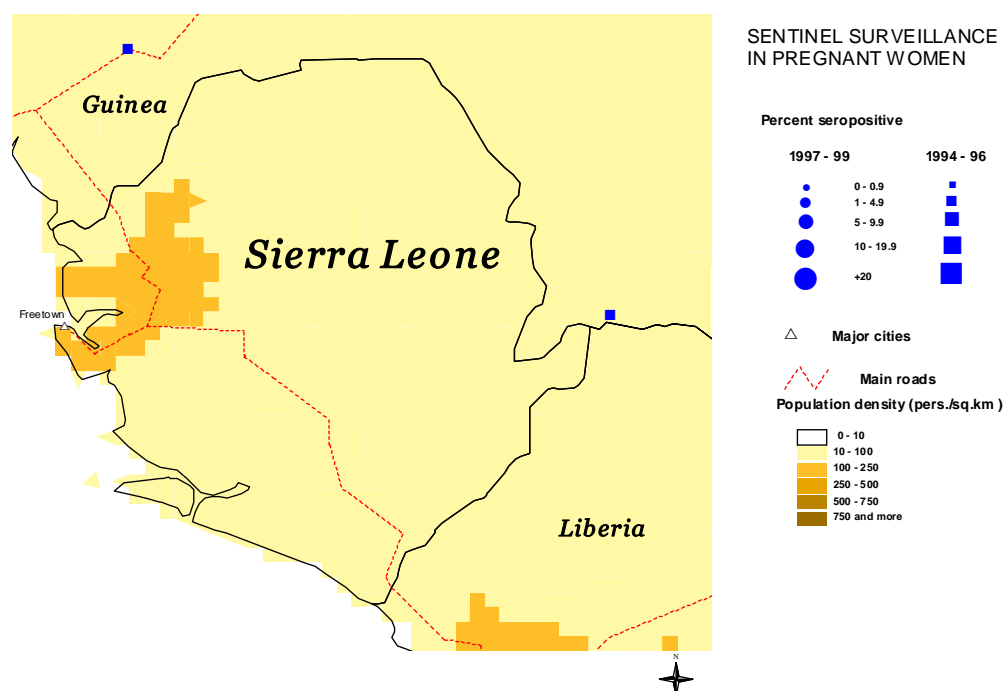
HIV prevalence among STI clinic patients tested in Freetown was about 3% between 1988 and 1992.

Estimated number of people living with HIV/AIDS, end 1999	Adults and children	Adults (15-49)	Adult rate (%)	Women (15-49)	Children (0-14)
Source: UNAIDS/WHO, June 2000	68 000	65 000	2.99	36 000	3300

Demographic impact of HIV/AIDS	Year	Estimate	Source
Children who lost their mother or both parents due to HIV/AIDS at age 14 or younger since the beginning of the epidemic	1999	56 000	UNAIDS/WHO, June 2000
Estimated AIDS deaths	1999	8200	UNAIDS/WHO, June 2000

Behavioural indicators	Most recent year	Age group	Male	Female
Reported condom use during most recent intercourse with a non-regular partner (%)	-	-	-	-
Reported non-regular sexual partnership over a 12-month period (%)	-	-	-	-

Measured HIV prevalence	Year	Median	Min.	Max.
Women in antenatal care clinics – major urban areas (%)	1992	2	2	2



Economic impact of HIV/AIDS

Summary of the economic impact of HIV/AIDS

No empirical data on the economic impact of AIDS in Sierra Leone were found. However, a modelling exercise carried out for the World Bank calculated the annual costs of scaling-up AIDS programmes to meet the current need to be between US\$ 9 million and US \$ 14 million. This represents a per capita cost of around US\$ 2–US\$ 3 and approximately 1.8% of GDP. In the education sector, the current primary school enrolment is 44%. A model developed by UNAIDS and UNICEF shows how increasing mortality rates have led to discontinuity, with many pupils losing or having a change in their teachers. This discontinuity, along with increasing numbers of orphans and children's growing responsibilities as a consequence of AIDS in the household, is likely to erode the achievements in this area, reducing enrolment and, hence, literacy rates. The potential impact on other sectors, including agriculture, households and firms, shown in other African nations to increase costs and expenditure, reduce savings and shift productivity patterns due to labour losses, needs to be carefully monitored in future studies to ensure an appropriate policy response.

Macroeconomic impact

Not available

Economic impact of HIV/AIDS on households

Not available

Economic impact of HIV/AIDS on agriculture

Not available

Economic impact of HIV/AIDS on firms

Not available

Economic impact of HIV/AIDS on education

Supply: A model developed by UNAIDS and UNICEF in 2000 shows that, of around 420 000 primary school students, 1900 would have lost a teacher to AIDS in 1999 (1).

Demand: Not available

Economic impact on the health sector

Demand: Not available

Supply: Not available

Resource gap: Annual costs of scaling-up HIV/AIDS programmes is estimated to be from US\$ 9 million to US\$ 14 million (2).

Management and implementation of the national response to HIV/AIDS

Policy formulation

Existence of national HIV/AIDS policy (either a written document or part of one)

Yes	No
	X

Comments/Key elements: A national HIV/AIDS policy document is being prepared by the National AIDS Control Programme.

Source: National AIDS Control Programme

Date: 17 July 2000

Existence of HIV/AIDS policy in the following sectors:

Sector	Yes	No
Agriculture		X
Education		X
Health		X
Military		X
Workplace		X
Sports		X
Others		X

Comments/Key elements: Sectoral HIV/AIDS policy documents are being prepared by the National AIDS Control Programme.

Source: National AIDS Control Programme

Date: 17 July 2000

Existence of HIV/AIDS-specific legislation against discrimination on the grounds of HIV

Yes	No
	X

Comments/Key elements:

Source: National AIDS Control Programme

Date: 17 July 2000

Organizational structure**Existence of high-level structure in support of the national response**

(e.g. National AIDS Committee/Commission, Inter-Ministerial Committee, Presidential-level bodies)

Yes	No
X	

Comments/Key elements: A National AIDS Co-ordinating Committee, reporting to the Ministry of Health. There is a clear need to revive it. Ad hoc inter-ministerial and parliamentary work on HIV/AIDS.

Source: National AIDS Control Programme

Date: 17 July 2000

Planning and programming**Existence of national strategic plan on HIV/AIDS**

Yes	No
	X

Comments/Key elements: National strategic planning has started. Preparatory seminars have been organized.

Source: National AIDS Control Programme

Date: 17 July 2000

National strategic plan on HIV/AIDS includes clearly identified priorities

Yes	No
	NA

Comments/Key elements:

Source: National AIDS Control Programme

Date: 17 July 2000

Existence of budget for implementation of the national strategic plan

Yes	No
	NA

Comments/Key elements:

Source: National AIDS Control Programme

Date: 17 July 2000

General demographic and socioeconomic indicators

Demographic indicators	Year	Estimate	Source
Total population (thousands)	1999	4717	UNPOP
Population aged 15–49 (thousands)	1999	2164	UNPOP
Annual population growth (%)	1990–1998	1.7	UNPOP
% of population urbanized	1998	34	UNPOP
Average annual growth rate of urban population (%)	1990–1998	3.2	UNPOP

Economic Indicators	Year	Estimate	Source
GNP per capita (US\$)	1997	160	World Bank
GNP per capita average annual growth rate (%)	1996–1997	-20.6	World Bank
Human Development Index rank (HDI)	2000	174	UNDP
% population economically active	-	-	-
Unemployment rate	-	-	-
Education Indicators	Year	Estimate	Source
Total adult literacy rate	1995	31	UNESCO
Adult male literacy rate	1995	45	UNESCO
Adult female literacy rate	1995	18	UNESCO
Male secondary school enrolment ratio	1996	21.0	UNESCO
Female secondary school enrolment ratio	1996	12.1	UNESCO
Health Indicators	Year	Estimate	Source
Crude birth rate (births per 1000 pop.)	1999	45	UNPOP
Crude death rate (deaths per 1000 pop.)	1999	24	UNPOP
Maternal mortality rate (per 100 000 live births)	1990	1800	WHO
Life expectancy at birth	1998	38	UNPOP
Total fertility rate	1998	6.0	UNPOP
Infant mortality rate (per 1000 live births)	1999	161	UNICEF/UNPOP
Contraceptive prevalence rate (%)	1990–1999	4	UNICEF/UNPOP
% of births attended by trained health personnel	-	-	-
% of one-year-old children fully immunized (DPT)	1995–1998	56	UNICEF

References

- (1) UNICEF. *The Progress of Nations 2000*. Background paper. New York, UNICEF, 2000.
- (2) World Bank and UNAIDS. *Costs of Scaling HIV Programmes to a National Level for Sub-Saharan Africa*. Draft report, April 2000.