



## DAKAR DECLARATION ON FACTORING KEY POPULATIONS IN THE RESPONSE TO HIV AND AIDS IN ECOWAS MEMBER STATES

**We, Ministers of Health, Heads of National AIDS Commissions, Public Prosecutors and Inspector Generals of Police of ECOWAS countries, meeting in Dakar on the 10<sup>th</sup> of April 2015**

**Recognizing** that despite the successes achieved by the Member States, HIV and AIDS remain public health issues in the ECOWAS region

**Considering** that the epidemic is fueled by the continuous occurrence of new HIV infections despite the slight downward trend over the past decade;

**Whereas** in general, more than half of new HIV infections occur within key populations and that they are the most-at-risk people in comparison with the general population;

**Acknowledging** that key populations are "groups of people more likely to be exposed to HIV or to transmit it and whose commitment is critical to the success of the HIV response";

**Considering** that the international community, including ECOWAS (ECOWAS HIV & AIDS Regional Strategic Plan) is committed to ending the AIDS epidemic in 2030 and, to that end, has set ambitious goals to be achieved by 2020 in the areas of treatment, prevention and stigma reduction. Thus, with regard to treatment, by 2020, 90% of the people living with HIV shall know their statuses; 90% of people tested for HIV shall be placed under continuous antiretroviral treatment; 90% of the people receiving antiretroviral therapy shall have sustainable undetectable viral loads;

**Recognizing** that to end the epidemic in key populations, there should be an effective implementation and up-scaling of a holistic combination of priority interventions which could be biomedical, behavioral or structural;

**Recognizing** that programs providing services to key populations are implemented mainly by community stakeholders in ECOWAS countries with proven success in terms of behavior change and HIV incidence reduction ;

**Aware** that there exist many factors that impede key populations from access to services, and expose them to violence and various abuses, resulting in a reluctance to use these services ;

Whereas bold leadership is essential to mobilize communities to support the most vulnerable and marginalized groups;

**Recognizing** that without a significant improvement in the AIDS response for key populations, it is impossible to end the AIDS epidemic ;

**Hereby solemnly commit to creating the conditions for increased access and use of HIV and AIDS response interventions for key populations living in the ECOWAS region and consequently, jointly undertake as of now, to:**

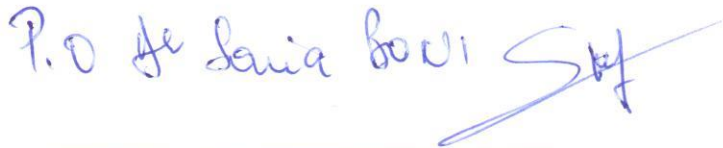
- **Invest in stigma reduction programs by**
  - Including non-stigmatization modules in basic and continuing training of judges and court officers and most especially of law enforcement officers ;
  - Training individual health care providers, regulators and administrators
  - Organizing information and dialogue meetings between beneficiaries and providers
  
- **Enhance community service provision for key populations through**
  - Support for the creation of community centers offering education, community mobilization, essential health services, social support and advocacy for political and legal changes ;
  - Legal protection for community actors involved in various services for key populations ;
  
- **Streamline health systems strengthening** to better meet the specific needs of key populations ;
  - Capacity building for health actors to facilitate access to prevention, treatment and care to key populations
  
- **Relentlessly lay emphasis on key populations as a priority group in national HIV / AIDS response strategies**
  
- **Strengthen strategic knowledge or information necessary to plan interventions for key populations and monitor progress towards the attainment of objectives.**

Encourage the establishment of a regional thematic working group on key populations. The group will work under the leadership of WAHO, which will support the implementation of our commitments and provide technical support to national and regional initiatives in the HIV specific response for these populations.

Dakar, April 10th, 2015

Signed

Ministre de la Santé de la République du **BENIN**



**Prof. Dorothée Akoko KINDE-GAZARD**

Ministre de la Santé du **BURKINA FASO**




**Dr Amédée Prosper DJIGUIMDE**

Ministra Adjunta e da Saúde de **CABO VERDE**

PI 


**Dra Maria Cristina L. A. FONTES LIMA**

Ministre de la Santé et de la Lutte contre le SIDA République de **COTE D'IVOIRE**

PO 

**Dr. Raymonde GOUDOU COFFIE**

Minister of Health & Social Welfare **THE GAMBIA**

  
|

**Mr. Omar SEY**

Minister of Health **GHANA**

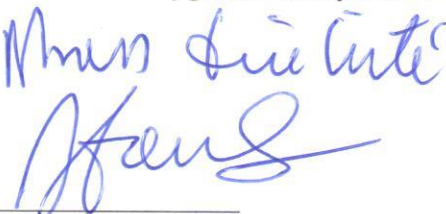
**DR ANGELO EL-ABAS**

for

  
|

**Mr. Alex SEGBEFIA**

Ministre de la Santé et de l'Hygiène Publique de la République de **GUINEE**

P/D M. Mous Siu Inté  SE/CMS

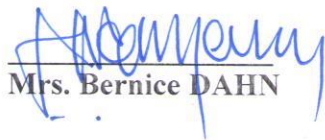
**Médecin Colonel Rémy LAMAH**

Ministra da Saúde Pública da **GUINÉ-BISSAU**



Dra Valentina Mendes

Minister of Health and Social Affairs **LIBERIA**

P.O. 

Mrs. Bernice DAHN

Ministre de la Santé et de l'Hygiène Publique de la République du **MALI**

Mrs. Bernice DAHN

Ministre de la Santé Publique de la République du **NIGER**

P.O. Directeur de cabinet 

M. Mano AGHALI

Minister of Health **Federal Republic of Nigeria**


Dr. KHALIRU ALHASSAN

Ministre de la Santé et de l'Action Sociale République du **SENEGAL**



Prof. Awa Marie COLL SECK

Minister of Health and Sanitation **SIERRA LEONE**

*fr*   
Dr Abu Bakarr Fofana

Ministre de la Santé de la République **TOGOLAISE**

M. Kwesi Séléagodji AHOOMEY-ZUNU