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PEPFAR-Supported Sites in Sub-Saharan Africa Exposed to Conflict in 2024

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BACKGROUND

By the end of 2024, a number of countries supported by the President's Emergency Plan for AIDS Relief (PEPFAR) had either achieved or were approaching epidemic control. However, many of these countries have regions experiencing frequent conflict events such as battles (explosions/remote violence, violence against civilians), demonstrations (protests, riots), and non-violent actions (arrests, looting/property destruction) disrupting service delivery and threatening the continuity of HIV antiretroviral therapy (ART) treatment for people living with HIV (PLHIV) in PEPFAR-supported sites.

METHODS

We sourced 2024 conflict data from the Armed Conflict Location and Event Data Project (ACLED) for 24 sub-Saharan African countries. We extracted PEPFAR's Monitoring, Evaluation, and Reporting (MER) indicator data for the number of adults and children currently receiving ART from an active site, defined as sites reporting at least one patient in 2024, from PEPFAR's Data for Accountability, Transparency and Impact Monitoring system.

We estimated conflict exposure with ACLED's exposure guidelines which specify the distance of influence for different conflict types (five kilometers for battles, explosions/remote violence, and violence against civilians with at least one fatality; two kilometers for riots and violence against civilians with no fatalities). We calculated the proportion of sites and their patients within the radius of any conflict event to the total number of sites with useable geocoordinates.

RESULTS

In 2024, PEPFAR supported 26,368 active sites serving 18,451,306 patients in sub-Saharan Africa; 22,693 (86.0%) of these sites had useable geocoordinates for analysis. A total of 3,980 (17.5%) of the sites were exposed to a conflict event, serving 5,014,693 patients or 29.9% of all patients currently on ART. Sub-Saharan African sites averaged 1.6 events per site (SD = 6.6). By event type, 24.8% of sites were exposed to violence against civilians with at least one fatality; 22.8%, riots; 18.3%, at least one battle event; riots; 14.1%, violence against civilians with no fatalities; 5.2%, explosions/remote violence.

In 2024, 17.5% of PEPFAR-supported sites in Sub-Saharan Africa, serving 5 million ART patients, were exposed to a conflict.

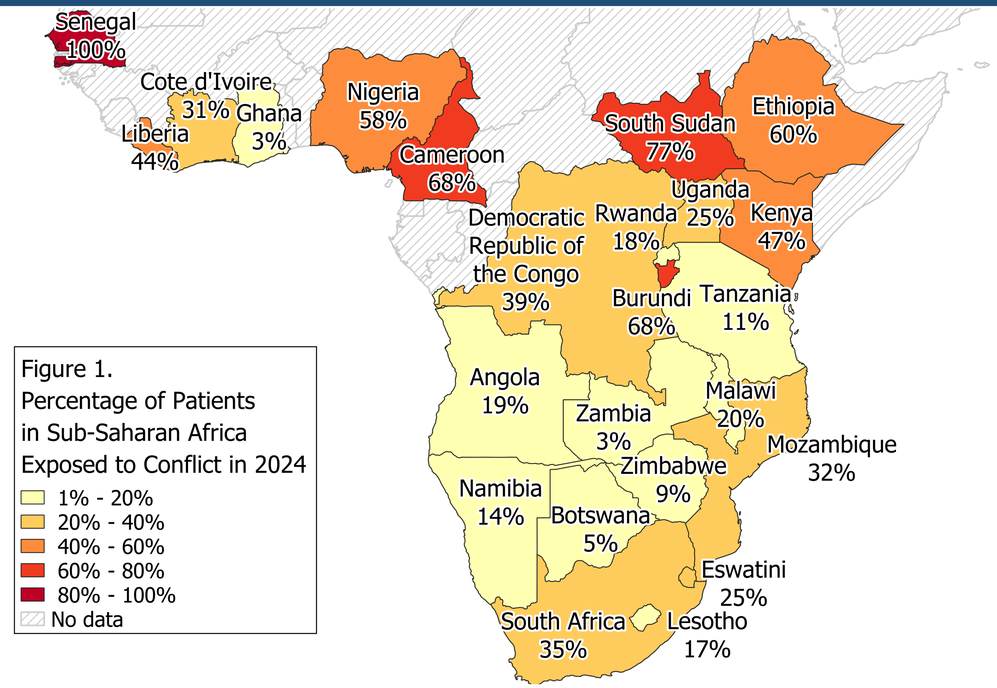


Figure 1. Percentage of Patients in Sub-Saharan Africa Exposed to Conflict in 2024

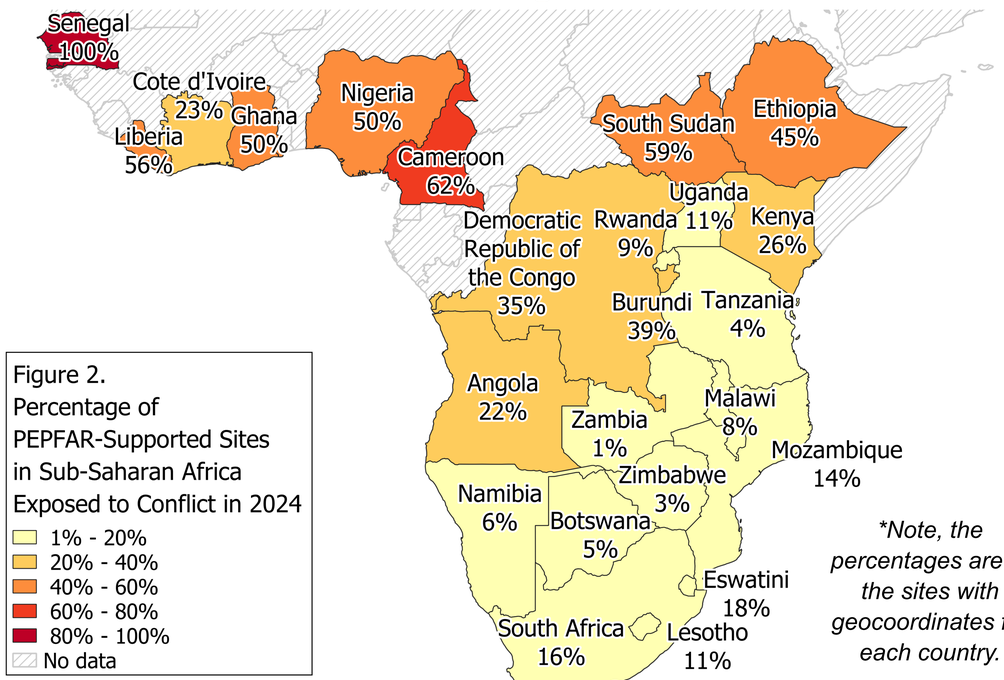


Figure 2. Percentage of PEPFAR-Supported Sites in Sub-Saharan Africa Exposed to Conflict in 2024

**Note, the percentages are of the sites with geocoordinates for each country.*

CONCLUSIONS

Conflict events pose a significant threat to many PEPFAR-supported sites and to national health systems providing HIV care and treatment in sub-Saharan Africa. Future analyses are needed to identify and predict conflict hotspots and assess countries' resilience to different conflicts. Incorporating resilient service delivery adaptations may help ensure treatment continuity of services in security-challenged areas.

REFERENCES

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Conflict events such as battles, explosions, and violence against civilians occur frequently in Sub-Saharan Africa (SSA) and can affect the continuity of antiretroviral therapy for people living with HIV (PLHIV). We analyzed conflict data and its impact on PEPFAR-supported sites in 2024 across 24 countries in SSA. We found that out of the 26,368 active sites serving over 18 million PLHIV, 17.5% were exposed to conflict events, potentially affecting nearly 30% of all PLHIV on ART. Future research is needed to identify areas most affected by conflict and develop strategies to ensure that ART remains available in these affected areas.