Facilitating adolescent access to HIV interventions through age of access policy reform in Africa

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Background

National **age of access policies** for HIV interventions are guided by the legal definition of adulthood. When out of step with WHO recommendations - 12 years and above for access to HIV testing, prevention, and treatment - such policies can prevent adolescents, including adolescents within key populations, from making their own decisions regarding their health by requiring them to obtain consent from a parent or guardian, which may curtail their sexual and reproductive rights and impede access to vital HIV testing and treatment services.

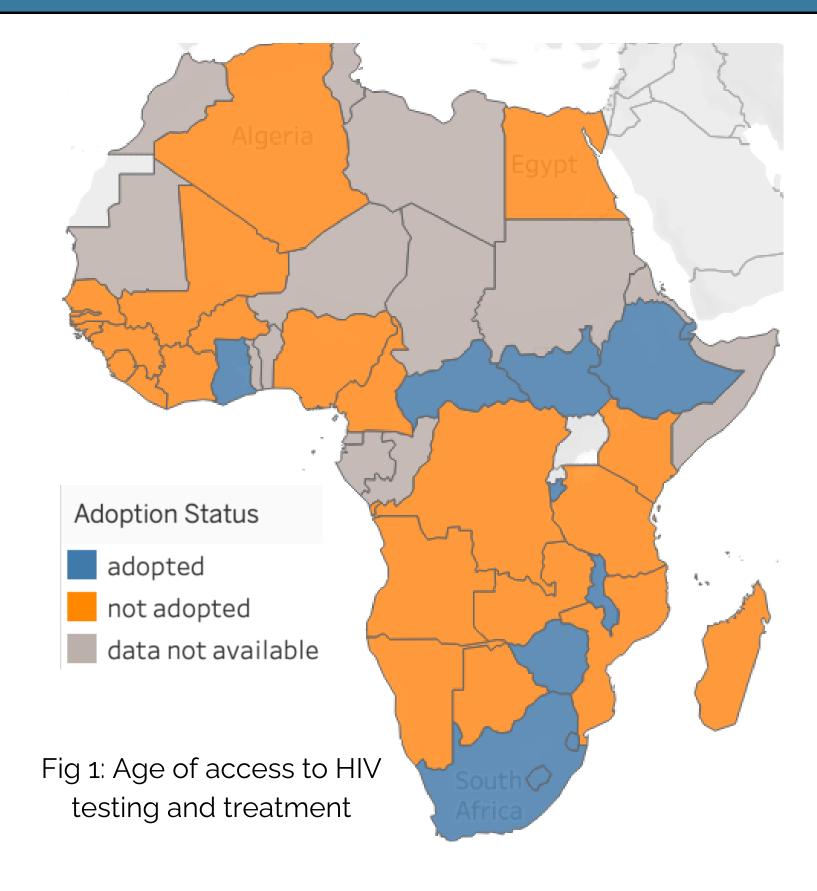
Here, we examine the national policy on age of access policies by evaluating if adolescents can access HIV testing and treatment without parental consent in Africa.

Methodology

The HIV Policy Lab tracks where national policy does not require adolescents (aged 12 years and above) to obtain consent from parents or guardians to access HIV testing and treatment, in alignment with WHO's age of access recommendations. Countries that impose age restrictions on adolescents and require them to obtain parental consent are considered to not be in alignment/not adopted. We highlight the exceptions and contradictions across countries

Results

Our findings indicate that only 12 countries have adopted optimal age of access policies for HIV testing and treatment. Among 10 countries with the largest population of adolescents living with HIV, Among 10 countries with the largest population of adolescents living with HIV, only Kenya, Tanzania and DRC require parental consent for HIV testing. For HIV testing 10 countries require parental consent for <18 years, 3 for <16 years, 5 for <15 years, and 2 countries <14 years.



Conclusion and Recommendations

Eliminating parental consent for HIV testing and treatment for adolescents is still needed in many countries. Reforming these policies to be in line with WHO recommendations can help facilitate adolescents' access to HIV testing and treatment services and create a conducive policy environment to ensure that they can make informed decisions about their health without unnecessary barriers.

Countries	Policy exceptions for HIV testing								
	Married	Pregnant	Sexually Active	НоН	Emancipated Minor	Maturity	Street Children	HCW	AoA (years)
Burundi									12
Eswatini									12
Lesotho									12
CAR									15
Djibouti									18
Ethiopia									15
Ghana									16
South Sudan									18
Zimbabwe									16
Malawi									13

Table 1: Optimal age of access policies adopted by countries.