

# Country progress report - Guyana

Global AIDS Monitoring 2017





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# Overall

## **Fast-track targets**

## **Progress summary**

Guyana the only English speaking Country in South America has a population of 746,955 and a landmass of some 215,000 square kilometres. According to the 2012 census report, 50.2% of the population are females while 49.8% represent the male population. Unlike the 2002 census, for 2012 ,the 15-19 age range comprised the highest proportion (11.4%) closely followed by the 10-14 age group (11.1%). The productive sector (20-49 yrs) of the society represents 41.6%of the total population which is a slight decline from the 2002 census report. The Gross National Income (GNI) per capita is US\$4,090 (2015 World Bank) and Guyana is now ranked as a upper middle income country and number 127 (Human Development Report 2016) on the Human Development Index scale. The HIV Epidemic in Guyana continues to be mixed with key population groups (MSM, FSW and TG) being disproportionately affected. Based on the UNAIDS 2017 estimation exercise Guyana's HIV adult prevalence (15-49 yrs) is 1.6% while the prevalence among MSM, FSW and TG are 4.9%, 5.5% and 8.4% respectively(BBSS 2014).

# Commitment 1

## **Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020**

### **Progress summary**

Guyana has accepted and began a phased approach of the "Treat all" policy during the fourth quarter of 2016 following the revision of its treatment guidelines which began in 2015. As such all children less than 5 years old, WHO clinical stage III and IV, key population at higher risk, PLHIV with co-infection, comorbidities, pregnant women, serodiscordant couples and PLHIV older than 50 years are prioritize for initiation. The National AIDS Programme in collaboration with partners will continue revision of its guidelines to optimize the regimen and will focus primarily on simplifying the paediatric formulations.

### **Policy questions**

Is there a law, regulation or policy specifying that HIV testing:

**a) Is solely performed based on voluntary and informed consent**

Yes

**b) Is mandatory before marriage**

No

**c) Is mandatory to obtain a work or residence permit**

No

**d) Is mandatory for certain groups**

No

**What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?**

≤500 cells/mm<sup>3</sup>; Implemented countrywide

**Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?**

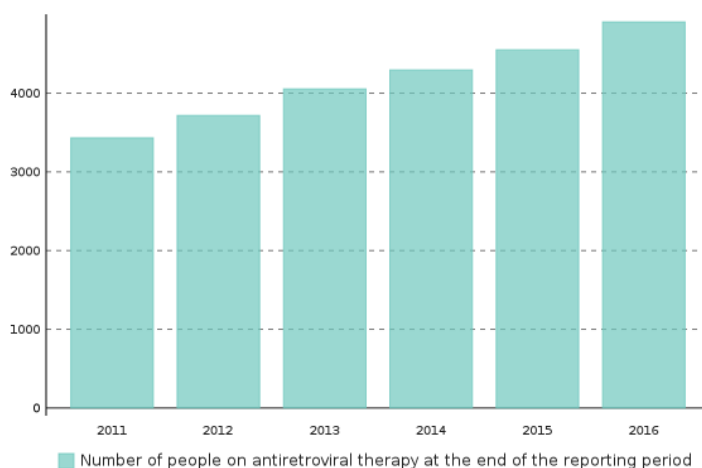
**a) For adults and adolescents**

Yes, fully implemented

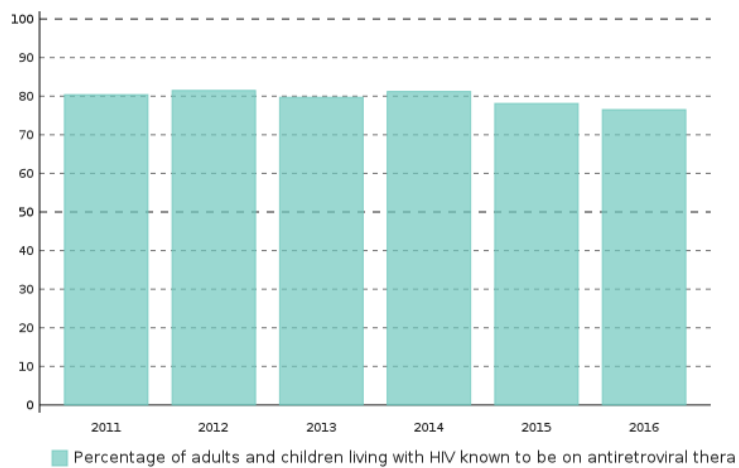
**b) For children**

Yes, fully implemented

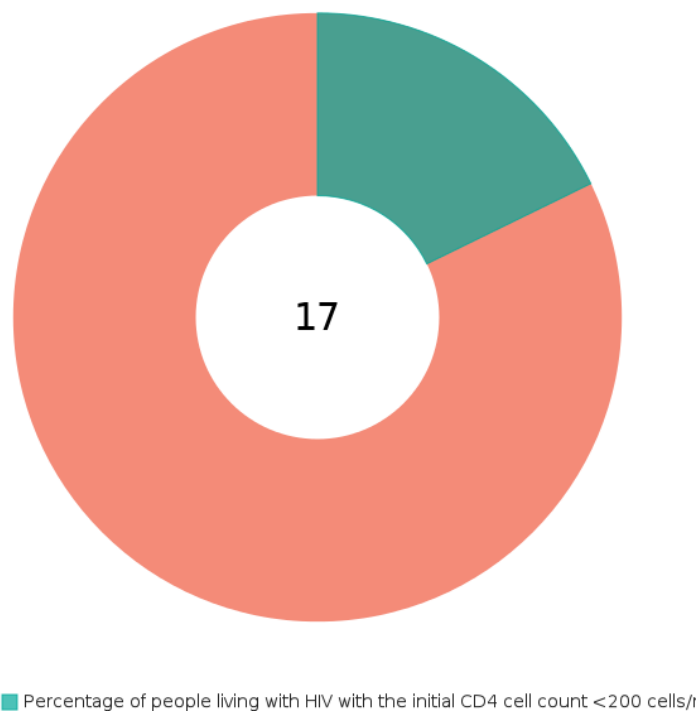
## **1.2 People living with HIV on antiretroviral therapy, Guyana (2011-2016)**



### 1.3 Retention on antiretroviral therapy at 12 months, Guyana (2011-2016)



### 1.5 Late HIV diagnosis, Guyana (2016)





# Commitment 2

**Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018**

## **Progress summary**

The country has completed and submitted to PAHO its first draft of the Elimination Initiative report on Congenital Syphilis (CS) and Mother – to – child – transmission (MTCT) of HIV . The document was reviewed by the Regional validation committee (RVC) and is currently being adjusted based on the feedback provided. Additionally, the Case Tracking Management System (CTSM) continues to grow as more clients are enrolled; however, it has still not yet reached national proportions. Currently there are three hundred and eighteen (318) positive women within the child bearing age and one hundred fifty(150) HIV exposed babies enrolled. Further, Breast Milk Substitute (BMS) are provided free of cost by Government of Guyana from birth to 18 months. For the year 2016 a total of 15,193 tins of infant formula were distributed for exposed infants 0-6 months

while 3,658 tins of Full cream milk were dispatched for those between 6-18 months old.

## **Policy questions**

**Does your country have a national plan for the elimination of mother-to-child transmission of HIV?**

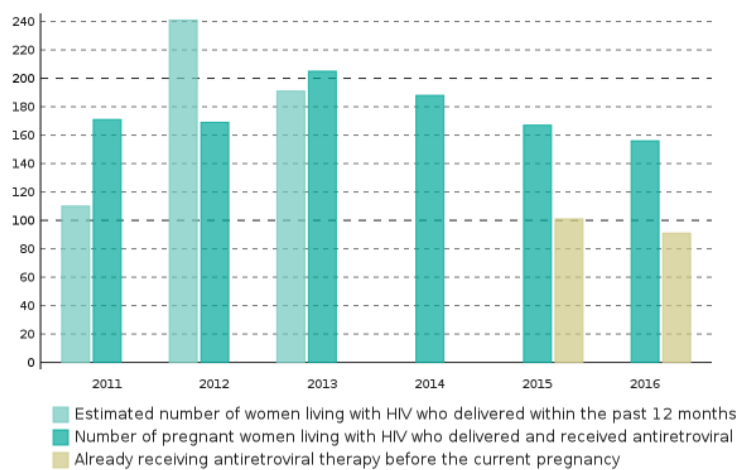
No

**Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?**

-

-

### 2.3 Preventing the mother-to-child transmission of HIV, Guyana (2011-2016)



# Commitment 3

**Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners**

## **Progress summary**

Guyana has committed to identify and reach key population with a comprehensive HIV prevention services which includes testing for HIV and other common sexually transmitted infections. The country has continued its delivery of targeted interventions in young women and girls in keeping with the national strategic plan through collaborative efforts between the NAPS and other line ministries. There has been no commitment to providing pre-exposure prophylaxis.

## **Policy questions: Key populations**

### **Criminalization and/or prosecution of key populations**

#### **Transgender people**

-

#### **Sex workers**

-

#### **Men who have sex with men**

-

#### **Is drug use or possession for personal use an offence in your country?**

-

## Legal protections for key populations

### Transgender people

-

### Sex workers

-

### Men who have sex with men

-

### People who inject drugs

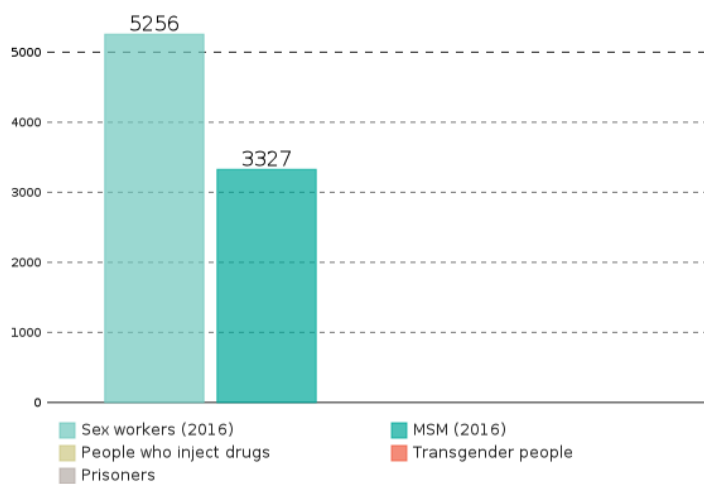
No

## Policy questions: PrEP

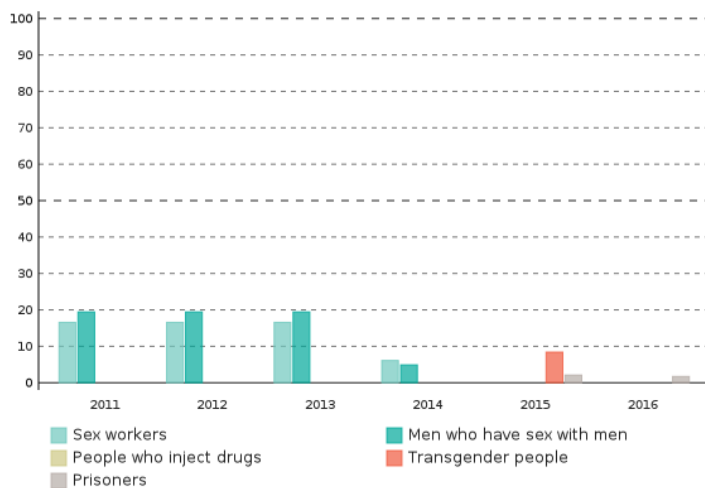
Is pre-exposure prophylaxis (PrEP) available in your country?

No

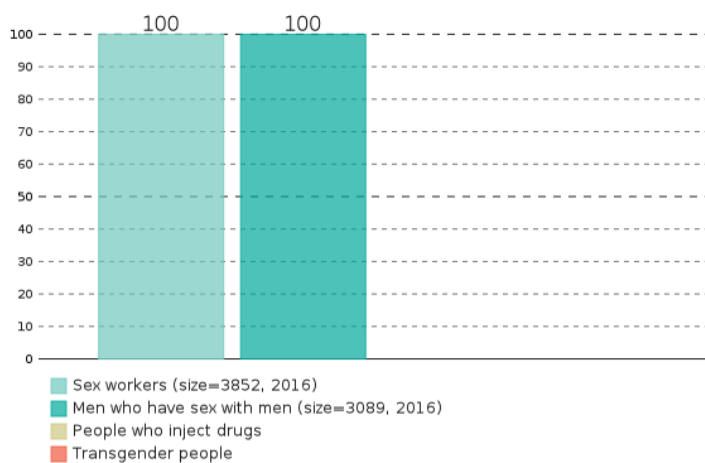
## 3.2 Estimates of the size of key populations, Guyana



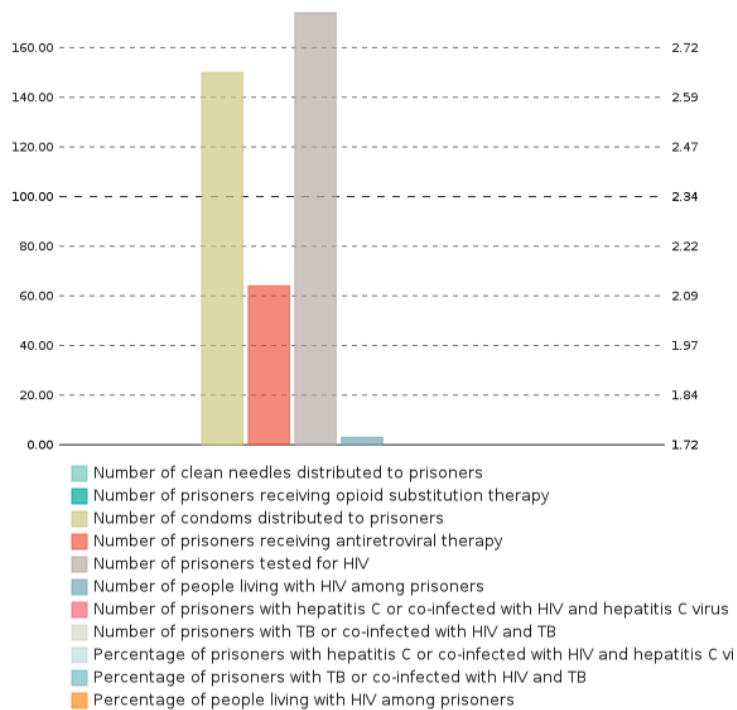
### 3.3 HIV prevalence among key populations, Guyana (2011-2016)



### 3.4 Knowledge of HIV status among key populations, Guyana



### 3.13 HIV prevention programmes in prisons, Guyana (2016)



# Commitment 4

## **Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020**

### **Progress summary**

A committee for gender affairs was established by the Ministry of Social Protection and will be expanding its membership to include other stakeholders especially at the level of the National AIDS Programme Secretariat.

### **Policy questions**

**Does your country have a national plan or strategy to address gender-based violence\* and violence against women that includes HIV**

No

**Does your country have legislation on domestic violence\*?**

No

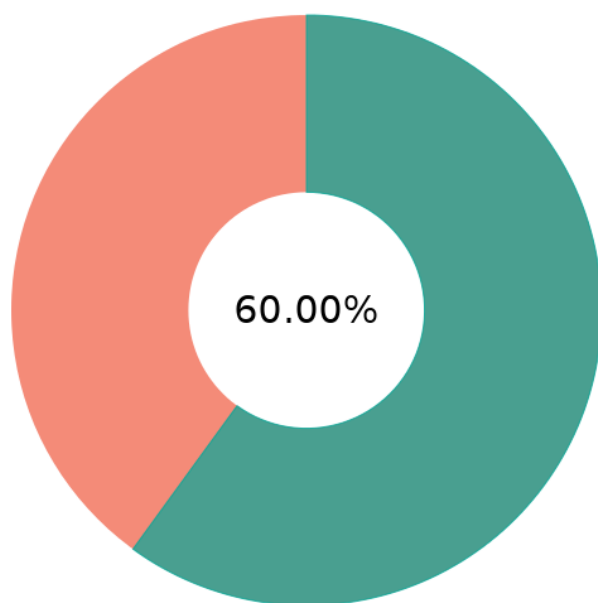
**Does your country have any of the following to protect key populations and people living with HIV from violence?**

-

**Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?**

-

**Percentage of Global AIDS Monitoring indicators with data disaggregated by gender**



6 / 10



# Commitment 5

**Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year**

## **Progress summary**

The National AIDS Programme Secretariat continues to work in collaboration with Ministry of Education through the Health and Family Life Education programme in schools which provides sensitization on HIV and life skills.

## **Policy questions**

**Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education\*, according to international standards\*, in:**

**a) Primary school**

No

**b) Secondary school**

No

**c) Teacher training**

No

# Commitment 6

## **Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020**

### **Progress summary**

The country has committed to providing nutritional support through the distribution of food hampers to PLHIV who are enrolled in care and economically and socially disadvantaged.

This was done in partnership with the private sector and with support from the GFTAM. During 2017, the Government of the Cooperative Republic of Guyana will be funding this initiative to ensure the effort is sustained. The National HIV Programme will also undertake to improve the strategy and strengthen the eligibility criteria used in order to effectively measure the impact of this initiative.

### **Policy questions**

No

**Do any of the following barriers limit access to social protection\* programmes in your country**

-

# Commitment 7

## **Ensure that at least 30% of all service delivery is community-led by 2020**

### **Progress summary**

The civil society organizations play a major role in the provision of HIV prevention services including testing services for key populations at higher risk (FSW, MSM, Transgender) through outreaches funded by PEPFAR and GFTAM. During 2017, the country with technical support from Health Policy Plus, will examine the possibility and level of sustainability of social contracting to achieve this target by 2020.

### **Policy questions**

**Does your country have a national policy promoting community delivery of antiretroviral therapy?**

No

**Are there any of the following safeguards in laws, regulations and policies that provide for the operation of CSOs/CBOs in your country?**

-

**Number of condoms and lubricants distributed by NGOs in the previous year**

**a) Male condoms:**

-

**b) Female condoms:**

-

**c) Lubricants:**

-

# Commitment 8

**Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers**

## **Progress summary**

The Government of the Cooperative Republic of Guyana has continued to increase the National budget allocation towards the procurement of antiretroviral medicines and is fully funding commodities for viral load and CD4 testing. Additionally, human resources for the HIV and AIDS response which were donor funded have been absorbed by the country's Public Service Commission.

# Commitment 9

**Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights**

## **Progress summary**

Although Guyana through support from Global Fund for Tuberculosis, AIDS and Malaria continues provide Human Rights training to PLHIV to empower them challenge and prevent violation of their rights there is a need to intensify efforts in this area. The country will examine ways to provide these trainings at scale and consistently through collaboration with the PLHIV network and the support groups at care and treatment sites.

# Commitment 10

**Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C**

## **Progress summary**

The National HIV programme will continue to strengthen its collaboration with the National Tuberculosis Programme in its management of TB co-infected patients. Currently 54% of all HIV treatment sites provide point of care cervical cancer screening using Visual Inspection with Acetic acid and treatment for precancerous lesion; the other 46% do so by referral. The NAPS has also developed a draft Hepatitis B guidelines which will be reviewed at technical forum with support from PAHO before being finalized and subsequently implemented.

## **Policy questions**

**Is cervical cancer screening and treatment for women living with HIV recommended in:**

**a. The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)**

No

**b. The national strategic plan governing the AIDS response**

No

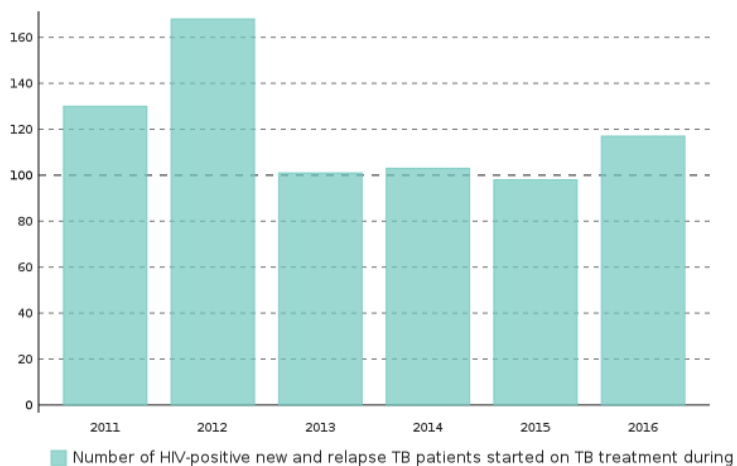
**c. National HIV-treatment guidelines**

No

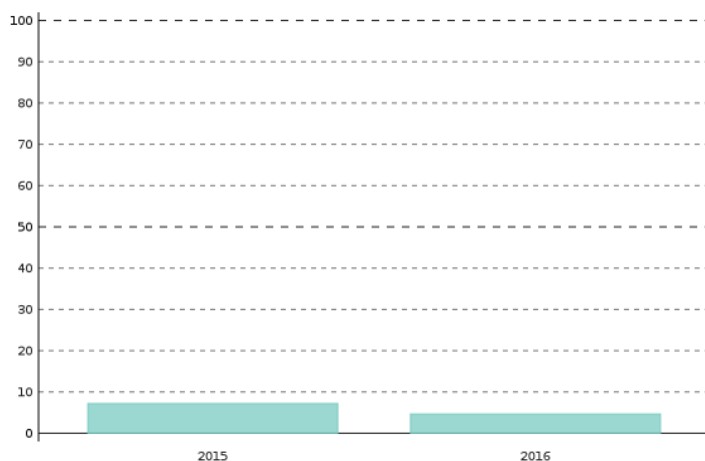
**What coinfection policies are in place in the country for adults, adolescents and children?**

-

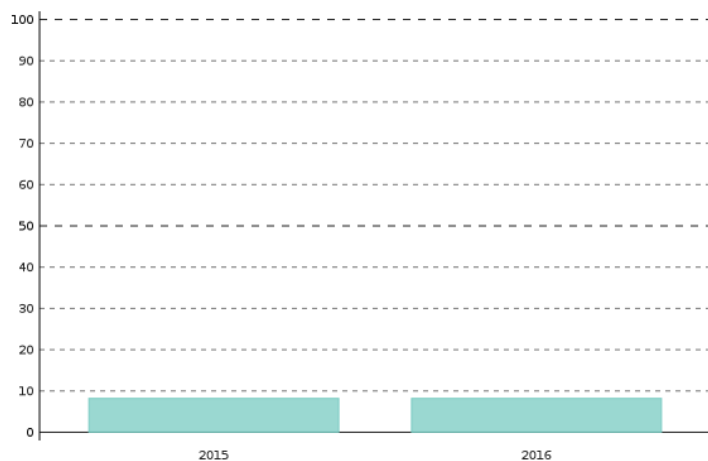
### 10.1 Co-managing TB and HIV treatment, Guyana (2011-2016)



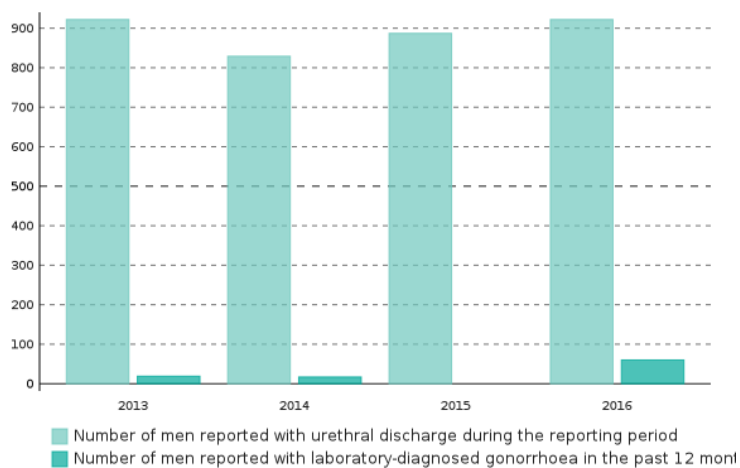
### 10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Guyana (2015-2016)



### 10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Guyana (2015-2016)



### 10.4/10.5 Sexually transmitted infections, Guyana (2013-2016)





## 10.6/10.8 Hepatitis B and C testing, Guyana (2015-2016)

