



U.S. Agency for International Development

Bureau for Global Health

COUNTRY PROFILE

HIV/AIDS

DOMINICAN REPUBLIC

The number of HIV infections in the Dominican Republic is stabilizing to some degree, apparently a direct result of successful national AIDS prevention and control strategies. Several figures point to a slowing epidemic. For example, reported AIDS cases in the Dominican Republic peaked at 505 in 1995, and, except for an upswing in 1999, the number of cases appears to have dropped consistently, to 438 in 2000, and to 305 in 2001. In another example, HIV infections among pregnant women peaked at 1.88 percent in 1997, and have dropped steadily since, to 1.1 percent in 2000.

Estimated number of adults and children living with HIV/AIDS (end 2001)	130,000
Total population (2001)	8,507,000
Adult HIV prevalence (end 2001)	2.5%
HIV-1 seroprevalence in urban areas	
Population most at risk (i.e., sex workers and clients, patients with a sexually transmitted infection, or others with known risk factors)	4.6%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	1.2%

Sources: UNAIDS, U.S. Census Bureau

Together, the Dominican Republic and Haiti, the country most affected by the AIDS epidemic outside of sub-Saharan Africa, account for 85 percent of HIV/AIDS cases in the Caribbean. UNAIDS estimates in the Dominican Republic by the end of 2001:

- 120,000 adults, ages 15 to 45, (2.5 percent of the adult population) were living with HIV/AIDS (although the Dominican Republic's National Program for the Control of HIV/AIDS estimates that as many as 150,000 to 170,000 people may be infected with HIV);
- 4,700 children under the age of 15 were infected with HIV;
- 7,800 adults and children died of AIDS in 2001; and
- 33,000 children had lost their mother or both parents to AIDS since the beginning of the epidemic.

HIV is transmitted primarily through sexual contact; 74.8 percent of infected individuals contracted HIV through heterosexual sex, and 7.6 percent through homosexual or bisexual contact. Perinatal HIV transmission is sustained at approximately 2 percent of cumulative cases; transmission due to blood transfusion constitutes 4 percent of the cumulative total; and intravenous drug use accounts for 3.8 percent of cases.



Map of the Dominican Republic: PCL Map Collection, University of Texas

Men constitute 64 percent of all reported AIDS cases; women represent 35 percent. Most (79.6 percent) AIDS cases occur in people between the ages of 15 and 44. Young people, ages 15 to 24 years, constitute 18 percent of AIDS cases, which implies they were infected with HIV in early adolescence. Of those, 52 percent are men and 48 percent are women. Dominicans, ages 25 to 34, represent 40 percent of the total number of reported AIDS cases.

1300 Pennsylvania Avenue NW
Washington, DC
20523-3600

www.usaid.gov

The distribution of AIDS cases per province showed that 48 percent of cases have occurred in the National District, followed by Puerto Plata (5.6 percent) Santiago (5 percent), San Cristobal (4.2 percent), and San Juan de la Maguena (3.5 percent)

NATIONAL RESPONSE

The Dominican Republic has made a commitment to providing better health care services for its most vulnerable people, and during the past three years, the Secretariat of Health has placed greater emphasis on maternal and child health care, HIV/AIDS prevention, and other important health sector reforms.

Nevertheless, the Dominican Republic continues to struggle with a high incidence of HIV transmission, particularly among young people. The government has developed a 2000–2003 national strategic plan for HIV/AIDS, and has implemented major public policies and programs to address the epidemic. In addition, a presidential-level AIDS council has been appointed to oversee the involvement and participation of several government sectors.

The Dominican Republic's program for the control of HIV/AIDS and sexually transmitted infections (Programa de Control de Enfermedades de Transmision Sexual y SIDA, or PROCETS) resides within the Public Health State Office of the Secretary of Social Aid. Key PROCETS and national government activities include:

- Information, education, and communication campaigns;
- Communications training for governmental and nongovernmental organizations;
- Coordination of care and support services for people living with HIV/AIDS;
- Programs to reduce mother-to-child transmission;
- Voluntary counseling and testing programs at the two main maternity hospitals in Santo Domingo and at a general hospital in Puerto Plata;
- Syndromic management services and distribution of training manuals for the treatment of sexually transmitted infections;
- Coordination to ensure the safety of the blood supply; and
- Monitoring and evaluation of provincial and national plans.

In a statement during the June 2001 United Nations General Assembly Special Session on HIV/AIDS, the government of the Dominican Republic committed to the following actions in the next five years:

- Develop a sex education program to target adolescents;
- Create a strategic alliance with the pharmaceutical industry to produce generic antiretroviral medications at an affordable price;
- Implement a national policy to promote and distribute condoms to vulnerable populations; and
- Expand mother-to-child transmission prevention efforts throughout the entire public health system. This will include offering better access to medications to prevent transmission from mother to child, voluntary counseling and testing programs, and offering safe alternatives to breastfeeding.

Civic organizations are becoming more involved in the fight against AIDS; this is evident in the creation of a coalition of nongovernmental organization to fight AIDS and the establishment of the Dominican Republic Network of Persons Living with HIV/AIDS.

USAID SUPPORT

USAID funds are enabling Dominican nongovernmental organizations to promote behavior change education strategies, provide counseling services, and assist in implementing the HIV/AIDS law. USAID is also helping make stronger the national program to control tuberculosis, which in turn, will reduce the incidence of AIDS-related tuberculosis. By the end of 2003, USAID anticipates more than 800,000 people will have received prevention and care services for HIV/AIDS and other sexually transmitted infections.

In 2001, the Dominican Congress passed the General Health and the Social Security laws, a significant milestone in the Dominican health sector reform process. The new laws propose a new way to organize, manage, and finance health care

in the Dominican Republic. Under the new scenario, decentralization becomes a key strategy of the new health care delivery system. USAID helped define the laws and continues to support the Health Secretariat's decentralization agenda.

In the summer of 2002, USAID launched a new five-year development strategy that will help advance the Dominican Republic and USAID priorities in the areas of economic growth, democracy and governance, and health. USAID plans to invest \$100 million in these areas during a five-year period. In 2003, USAID plans to focus on the major areas of health risk in the Dominican population: HIV/AIDS, sexually transmitted infections, and tuberculosis prevention and treatment; reproductive health and family planning; and child survival. A fourth area, health sector reform, will help USAID achieve its objectives in the three health risk areas. USAID's health and population program helps ensure Dominicans have access to services that address their most pressing health concerns. Beneficiaries include persons infected with HIV, their families and communities, poor women, and adolescents who seek reproductive health and family planning services.

The Academy for Educational Development is the main contractor for HIV/AIDS activities. Other key partners include Family Health International, Commercial Management Services, and Population Services International. USAID's reproductive health partners include three Dominican nongovernmental organizations (Profamilia, Adoplafam, and Mude). Abt Associates, Inc. implements USAID's health sector reform activities.

An important limitation to implementation has been the varying degrees of technical capacity, commitment, and leadership among counterpart provincial and local health teams. In response, USAID-funded technical assistance designed a regional health management training program, which was to be implemented in partnership with a local university in 2002. Also, the second phase of the prepackaged HIV therapy pilot project has been delayed due to the lack of public sector-procured medicines. A new activity will address this.

Behavior change communication

The Dominican Republic is increasingly open to public discussion of HIV/AIDS. This openness is forging new opportunities for the government and local nongovernmental organizations to provide services and information. USAID assistance helped promote awareness and understanding of HIV/AIDS through a nationally aired film dramatization that depicts the challenges facing a young Dominican woman living with HIV. Songs about HIV and AIDS have become popular, and the first national HIV/AIDS Song Contest gained national attention. In addition, the private sector has begun to view HIV/AIDS as an economic concern as well as a health concern, and the private sector made significant contributions to the costs associated with the production of the film and the public concert. A USAID-funded mass media campaign was launched by AccionSIDA through the Academy for Educational Development in December 2001, and its broadcasting began in 2002.

Capacity building

During the past year, the USAID Mission gave more attention to health sector reform and decentralization issues. Building on gains made by the Partnerships for Health Reform activity, new activities aim to strengthen provincial abilities to manage local health programs, develop models to promote the use of health services by more poor people, and stimulate broader participation in health policy formulation. Several models show promising results and have the potential to become best practices (e.g., the post-abortion program, pilot projects in support of people living with HIV/AIDS, and a public-private partnership for service delivery).

USAID continues to offer training and technical assistance to support the health sector reform agenda to improve the equity and efficiency of integrated health services. It is doing so by decentralizing management to the provincial and municipal levels and forging model, local, public-private provider networks under a reformed health care delivery system.

Condom use

USAID funds are being used to provide technical assistance to the Dominican government to define and implement a national condom policy to increase access to condoms by poor and vulnerable populations, develop a strategy to expand the 100 percent condom use ideal, and define policies to implement the AIDS law.

Under the Horizons program, research has been conducted in Puerto Plata, an area that attracts many tourists, to establish and compare the efficacy of regulatory and voluntary approaches to 100 percent condom use in sex establishments. Specific objectives of the Horizons program are to compare clinical, reported, and observed outcome measures at regular intervals for two years. Cost-effectiveness and quality of the interventions will also be assessed.

Cross-border issues

USAID staff members in the Dominican Republic are collaborating closely with staff in Haiti to coordinate joint efforts to provide information and services to mobile and vulnerable populations in “hot spots” along the Haiti/Dominican Republic border, and to build constituencies at the national and regional levels for better HIV prevention, care, and support measures.

International and community-based organizations

In 2003, USAID will provide funds and personnel for health policy reform initiatives that support local advocacy efforts by nongovernmental organizations to ensure that reproductive health services are included in a basic services package called for in the new social security law. Ongoing assistance by USAID will ensure that local organizations can sustain themselves to provide reproductive health services that complement public sector efforts.

USAID recently awarded Family Health International and its partners \$35 million to lead a five-year program in the Dominican Republic to address health issues in family planning, HIV/AIDS, sexually transmitted infections, maternal mortality, child survival, and health sector reform. The program, called ConectaSalud, is a partnership of Abt Associates Inc., the Dominican firm Agencia Latinoamericana de Expertos en Planificación H, and numerous local community organizations. Strategies for the project include instituting policy and structural reforms (translating gains in health reform into specific policy), ensuring continuity of care (integrating and actively referring between services where feasible), mobilizing communities to demand and use quality health services, improving provider performances through training and interventions, and linking public and private services so programs are sustainable. Nongovernmental, community-based, and faith-based organizations will be key players in these activities.

Prevention of mother-to-child transmission

In 2001, two local nongovernmental organizations initiated HIV pretest and post-test counseling services in six public hospitals, an initial step into a pilot program in public hospitals to prevent mother-to-child transmission. The success of the pilot phase encouraged the Ministry of Health to expand the program, and it is now being implemented in 16 hospitals. By the end of 2002, more than 72,000 pregnant women had received pretest counseling and 15,000 had voluntarily consented to have an HIV rapid test. Approximately 3.5 percent tested positive, of which 35 percent were treated with Nevirapine.

Voluntary counseling and testing

USAID-funded technical assistance through the IMPACT project is helping the Secretariat of Health develop counseling norms and the curricula for counselors. In response to a request from the National AIDS Program, Family Health International, through the IMPACT project, began providing support for voluntary counseling and testing programs at the two main maternity hospitals in Santo Domingo and at a general hospital in Puerto Plata. In addition to counseling and testing, the three hospitals offer individual counseling on prevention of mother-to-child transmission of HIV.

For More Information

USAID/Dominican Republic

Leopoldo Navarro #12

Santo Domingo, Dominican Republic

Tel: 809-221-1100

Fax: 809-221-0444

Website: www.usemb.gov.do/usaid.htm

National AIDS Program

Programa Nacional de SIDA/ETS, PROCETS

Calle Mahatma Gandhi No. 351

Apartado 2882

Santo Domingo

Republica Dominica

Tel: 809-688-5810

Fax: 809-686-7697

USAID/Dominican Republic web site: <http://www.usaid-do.org>

USAID HIV/AIDS web site for Dominican Republic: http://www.usaid.gov/pop_health/aids/Countries/lac/do.html

*Prepared for USAID by TvT Global Health and Development Strategies /Social & Scientific Systems, Inc.,
under The Synergy Project*

For more information, see www.usaid.gov/pop/aids or www.synergyaids.com

May 2003

