

CARIBBEAN REGION

Caribbean Region Includes:

Antigua and Barbuda, Bahamas, Barbados*, Grenada, Guyana*, Jamaica*, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, and Trinidad and Tobago* (*Priority countries)

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) Caribbean Regional Office (CRO) works with Ministries of Health (MOHs) and partners across the region to implement the World Health Organization (WHO) Treat All guidelines with the goal of reaching HIV epidemic control. The main objectives are to: improve access to quality services for key populations; re-engage people living with HIV (PLHIV) lost to follow-up; retain them on treatment to achieve viral suppression; enhance laboratory capacity and improve viral load testing services; and, improve data access and quality, particularly for key populations to inform program decisions. Currently, CRO focuses on four countries with high HIV burdens (Barbados, Guyana, Jamaica, and Trinidad and Tobago).

The other countries are supported through regional activities. Interventions through the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) in the Caribbean are mainly focused on Jamaica where the HIV burden is greatest. Beginning in 2017, CDC’s regional office began the transition of its office from Barbados to Jamaica.

CDC-Caribbean Region Office Staff: 16

Locally Employed Staff: 11

Direct Hires: 4

Fellows & Contractors: 1

		Barbados	Guyana	Jamaica	Trinidad and Tobago
Country Quick Facts	Per Capita GNI (2016)	\$15,210	\$4,240	\$4,630	\$16,240
	Population (2016) (millions)	.28	.77	2.88	1.36
	Under 5 Mortality (Per 1,000 Live Births) (2016)	12	32	15	19
	Life Expectancy (2016)	76	67	76	71

Source: <http://www.worldbank.org/en/country>

		Barbados	Guyana	Jamaica	Trinidad and Tobago
Global HIV/AIDS Epidemic (2016)	Estimated Prevalence (Age 15–49)	1.3%	1.6%	1.7%	1.2%
	Estimated AIDS Deaths (Age ≥15)	<100	<200	1,200	<500
	Estimated Orphans Due to AIDS	N/A	<1,000	13,000	2,200
	Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15)	1,200	4,700	10,200	6,600

Source: <http://aidsinfo.unaids.org/>

		Barbados	Guyana	Jamaica	Trinidad and Tobago
Global Tuberculosis Epidemic	Estimated Incidence (Per 100,000 Population) (2016)	1.2	93	4.5	18
	TB patients with known HIV-status who are HIV-positive (2016)	0%	24%	50%	21%
	Treatment Success Rate (2015)	N/A	68%	23%	63%

Source: <http://www.who.int/tb/country/data/profiles/en/>

KEY ACTIVITIES AND ACCOMPLISHMENTS

- Working with MOHs across the region to build capacity to Treat All (same-day initiation and implementation of the guidelines); returning PLHIV who have been lost to follow-up into treatment; finding new HIV- positives via index partner testing and notification services; and, expanding key populations’ (KP) access and utilization of prevention and treatment services (extended and flexible clinic hours); and, providing adherence counseling. These activities result in increasing the number of patients across the region who are on lifesaving HIV treatment.
- Increasing access to accurate and reliable viral load testing to support monitoring of PLHIV on antiretroviral therapy (ART); and, ensuring availability of HIV drug resistance testing for those failing treatment.



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- In collaboration with the Government of Barbados, CDC CRO supported the construction of the Best-dos Santos Public Health Laboratory. Construction was completed in December 2017. The laboratory provides state-of-the-art services and diagnostics for Barbados and the region.
- Supporting continuous quality improvement toward accreditation, including strengthening human resource capacity through technical training. To date, CDC has supported the accreditation of six labs in the region.
- Implementing the HIV Rapid Test Quality Improvement Initiative (RTQII) and monitoring Quality Assurance of HIV testing.
- Providing external quality assurance panels to monitor HIV and related testing.
- Strengthening HIV drug resistance (DR) testing and supporting the implementation of HIV DR surveillance.
- Studies on HIV prevalence and risk factors for infection among men who have sex with men (MSM) have been completed in the Bahamas, Barbados, Jamaica, and Trinidad and Tobago. Data from these studies are being used to improve access to quality services for MSM.
- Establishing sentinel surveillance for key populations.
- Updating of clinical cascade data, including improving reporting of key population specific data.
- Linking disparate data systems to improve national cascade and data availability for analyses.
- Supporting publication of HIV Surveillance reports and system strengthening activities.
- Supporting development of HIV module and evaluation, and piloting of national health information system.
- Given recent focus in Jamaica and ending of direct PEPFAR/CDC funding to Suriname and Bahamas, CDC has been focused on transition and capacity building activities as well as advocating for the transition of key staff previously funded by PEPFAR to MOH.

KEY COUNTRY LEADERSHIP

CDC CRO Regional Director: Varough Deyde
 PEPFAR Coordinator: Victoria Nibarger
 Jamaica Prime Minister: Andrew Holness
 US Chargé d’Affaires to Jamaica: Eric Khant
 Jamaica Minister of Health: Christopher Tufton
 US Ambassador to Barbados and Eastern Caribbean: Linda Tagliatalata
 Barbados Prime Minister: Mia Mottley
 Barbados Minister of Health: Jeffrey Bostic
 US Ambassador to Guyana: Perry Holloway
 Guyana President: David A. Granger
 Guyana Minister of Health: Volda Lawrence
 US Chargé d’Affaires to Trinidad and Tobago: John McIntyre
 Trinidad and Tobago Prime Minister: Keith Rowley
 Trinidad and Tobago Minister of Health: Terrence Deyalsingh

