

Country progress report - Dominica

Global AIDS Monitoring 2017





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Overall

Fast-track targets

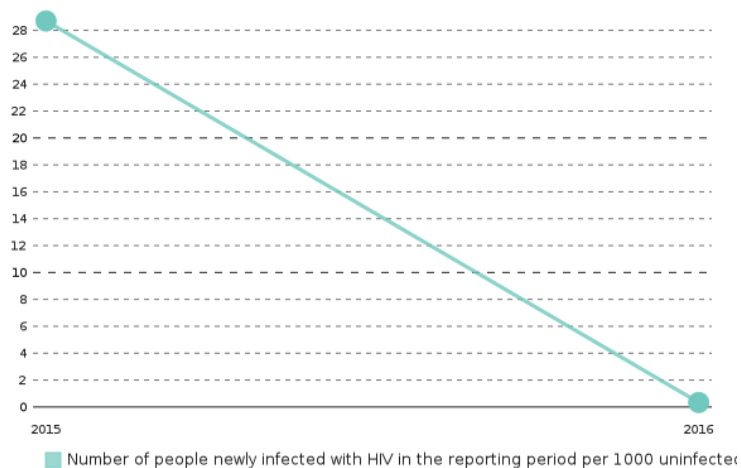
Progress summary

The National HIV and AIDS Response Programme as a government department is guided by the Ministry of Health's vision and mission: "Partnering for optimum health", "to enhance the ability of persons living in Dominica, to better manage their own health, improve their productivity and quality of life and reduce the risk for disease and injury in the most cost-effective way". Regional and international targets in HIV and AIDS prevention and management are also used to provide direction in goal-setting and forms the basis of the National Strategic Plan for HIV and AIDS Management.

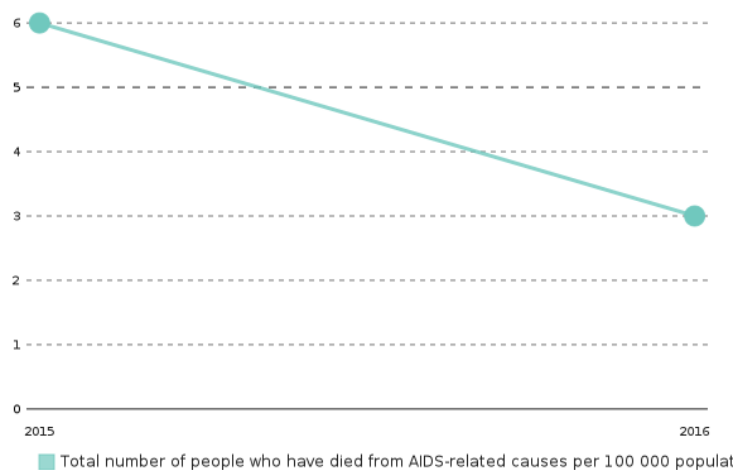
Priority areas include:

- Prevention of sexually transmitted infections including HIV amongst the most vulnerable groups. Main goal: Maintain HIV prevalence among vulnerable groups at less than 5%
- Prevention of new infections of HIV and other STI's amongst the general population. Main goal: Maintain HIV prevalence among the general population at less than 1 %
- Improve treatment, care and support for people living with HIV and AIDS. Main goal: The provision of comprehensive and integrated care, treatment and support for people living HIV and AIDS.

3.1 HIV incidence, Dominica (2015-2016)



3.1 AIDS mortality, Dominica (2015-2016)



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

Dominica is committed to meeting these targets and thus far in order to meet the first 90, rapid HIV testing has been scaled up over the years. Rapid HIV testing is offered at 9 public health sites at no cost to the clients, at 1 NGO site at a minimum fee of \$20.00 XCD and at 3 private sector sites, where clients pay varying cost. But, the options are readily available. 12 of the 13 sites report testing data to the National Program on a quarterly basis.

Clients tested reactive at a testing site have a sample drawn and sent to the national lab for confirmation and all positive cases are referred to the Infectious Disease Clinic which falls under the National Program. This clinic remains centralized but will eventually this will change. Getting clients linked into care can sometimes be challenging but most clients report to be registered. Adherence to their management is a bigger issue, so the last 90 is still a bit difficult to attain.

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

Yes

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/mm³; 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?

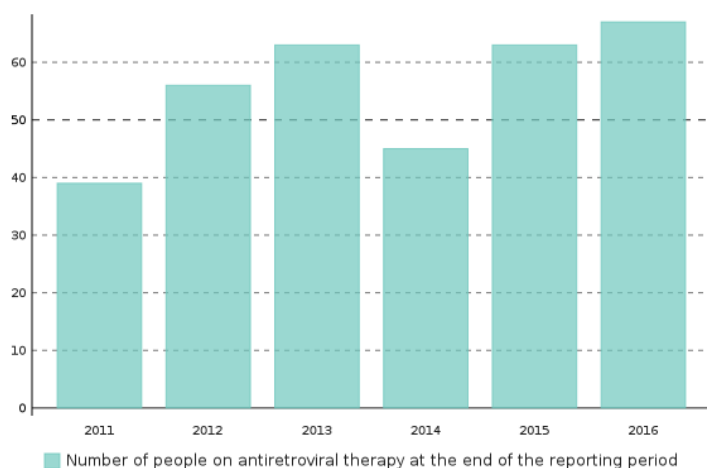
a) For adults and adolescents

Yes, fully implemented

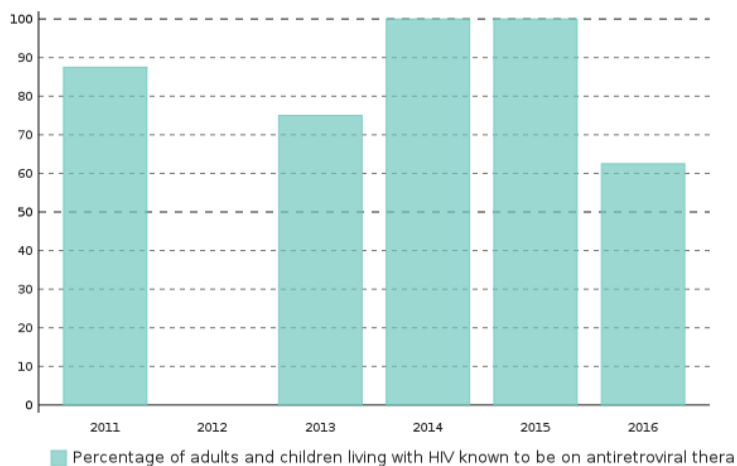
b) For children

Yes, fully implemented

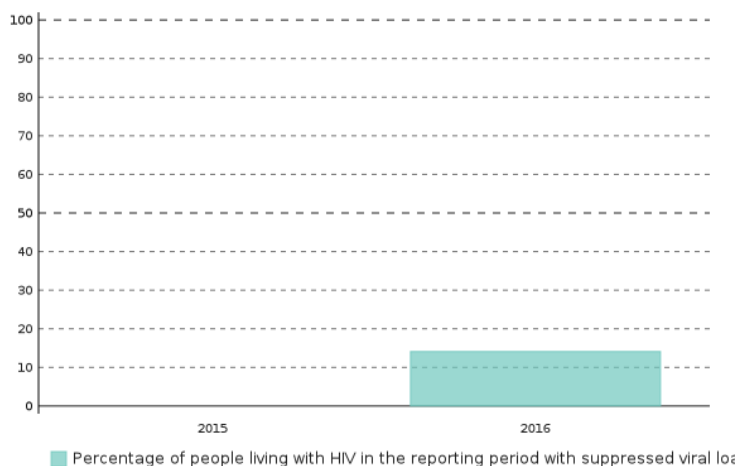
1.2 People living with HIV on antiretroviral therapy, Dominica (2011-2016)



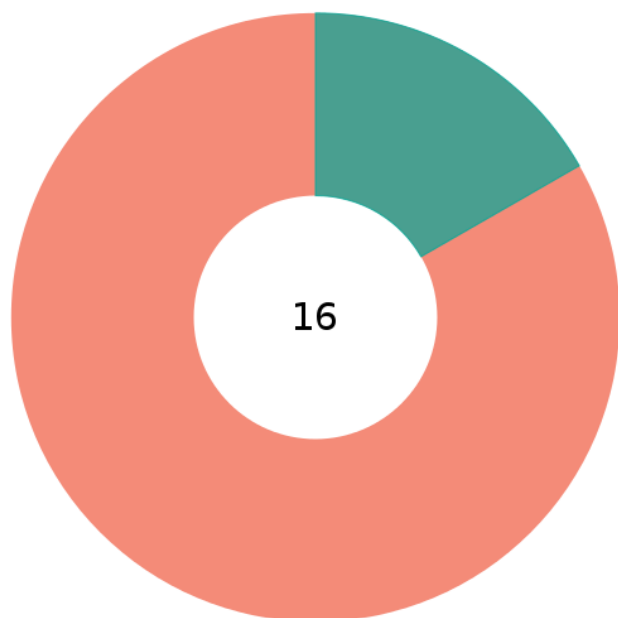
1.3 Retention on antiretroviral therapy at 12 months, Dominica (2011-2016)



1.4 People living with HIV who have suppressed viral loads, Dominica (2015-2016)



1.5 Late HIV diagnosis, Dominica (2016)



■ Percentage of people living with HIV with the initial CD4 cell count <200 cells/mm³

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

Dominica has had no exposed infants sero-converted from 2001 when the PMTCT program was instituted. Currently no children are HIV positive. All HEIs are followed up to ensure that they are HIV negative at 18 months when the elisa is done and they continue their child care clinics throughout childhood.

Importantly, drug projections always include paediatric formulations of ARVs when drug forecasting is done, should this need arise.

Policy questions

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

Yes

Target(s) for the mother-to-child transmission rate and year: 0

Year: 2017

Elimination target(s) (such as the number of cases/population) and Year: 0

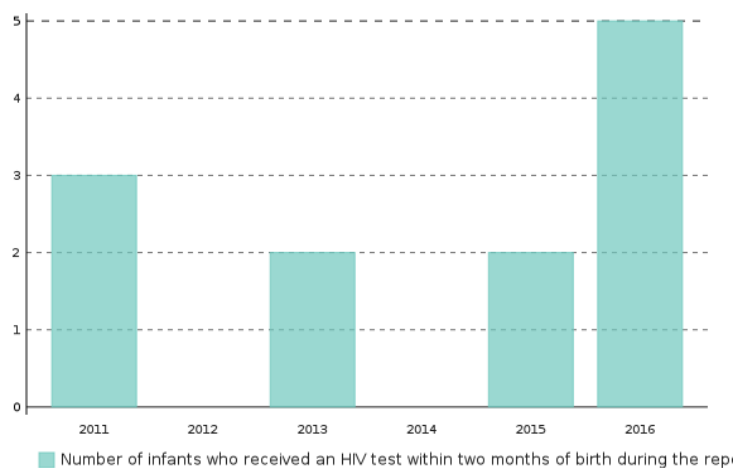
Year: 2017

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?

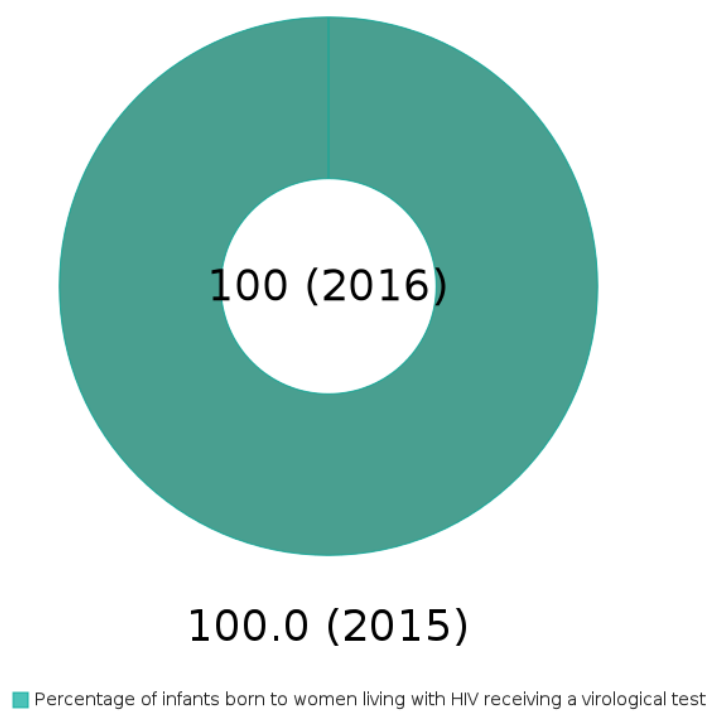
Treat All

Implemented countrywide

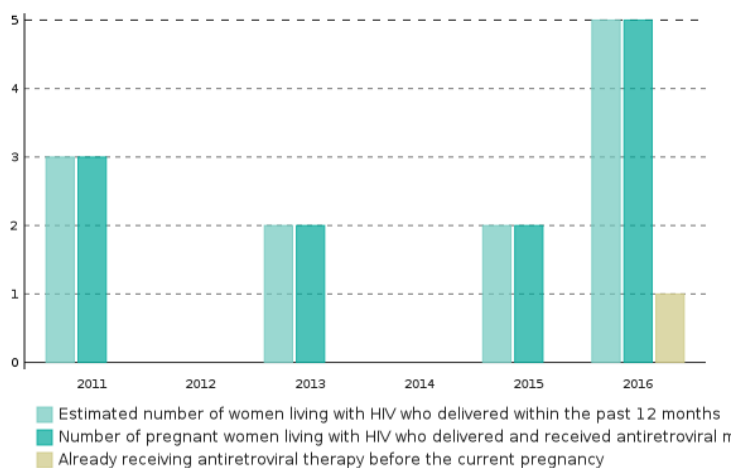
2.1 Early infant diagnosis, Dominica (2011-2016)



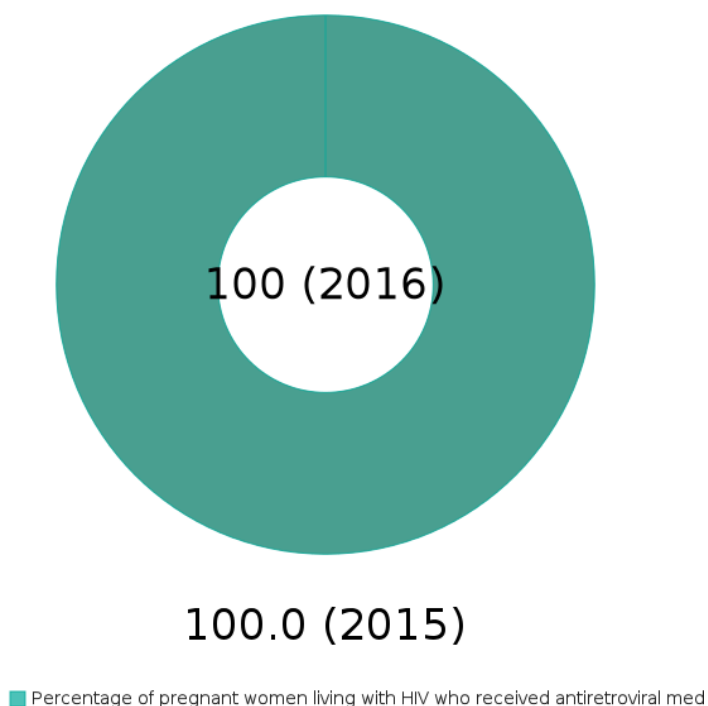
2.1 Early infant diagnosis, Dominica (2015-2016)



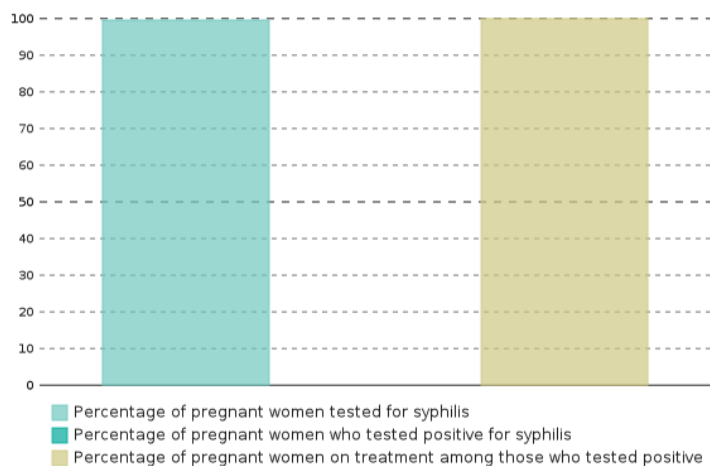
2.3 Preventing the mother-to-child transmission of HIV, Dominica (2011-2016)



2.2 Preventing the mother-to-child transmission of HIV, Dominica (2015-2016)



2.4 Syphilis among pregnant women, Dominica (2016)



2.5 Congenital syphilis rate (live births and stillbirth), Dominica (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

Commodities distribution form a major component of the National Programme's prevention thrust. A minimum package of SRH education, condom demonstrations and condom and lubricant distribution is done, at no cost to the clients. The Unit has an trained community animator assigned to work with the SWs in their communities and the MSMs are reached through identified gate keepers who report to the Unit to collect the commodities for distribution. In a few weeks these individuals will receive training in both SRH and Combination Prevention.

Targeted HIV rapid testing is also offered to the key populations in closed settings to encourage testing.

Policy questions: Key populations

Criminalization and/or prosecution of key populations

Transgender people

Neither criminalized nor prosecuted

Sex workers

Selling sexual services is criminalized

Men who have sex with men

Yes, imprisonment (up to 14 years)

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

Drug use or consumption is a specific offence in law

Legal protections for key populations

Transgender people

-

Sex workers

-

Men who have sex with men

Constitutional prohibition of discrimination based on sexual orientation

People who inject drugs

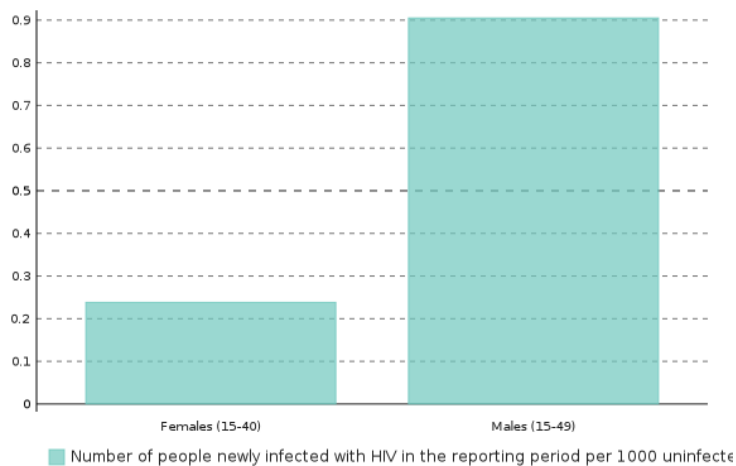
No

Policy questions: PrEP

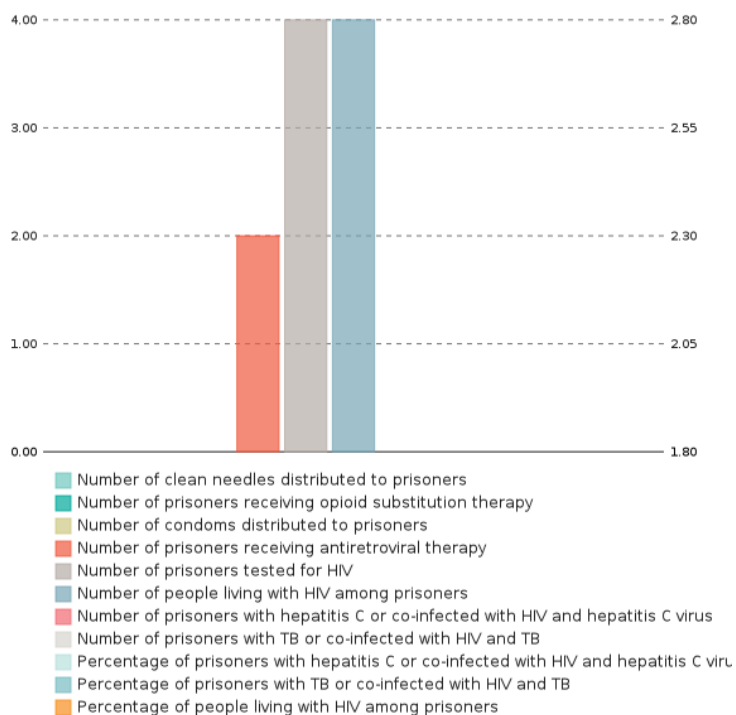
Is pre-exposure prophylaxis (PrEP) available in your country?

No

3.1 HIV incidence, Dominica (2016)



3.13 HIV prevention programmes in prisons, Dominica (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

The National Programme works along with the Gender Bureau and other CSOs to continue to train HCWs and other volunteers in S&D and human rights.

Policy questions

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

Yes

Does your country have legislation on domestic violence*?

Yes

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

General criminal laws prohibiting violence

Programmes to address intimate partner violence*

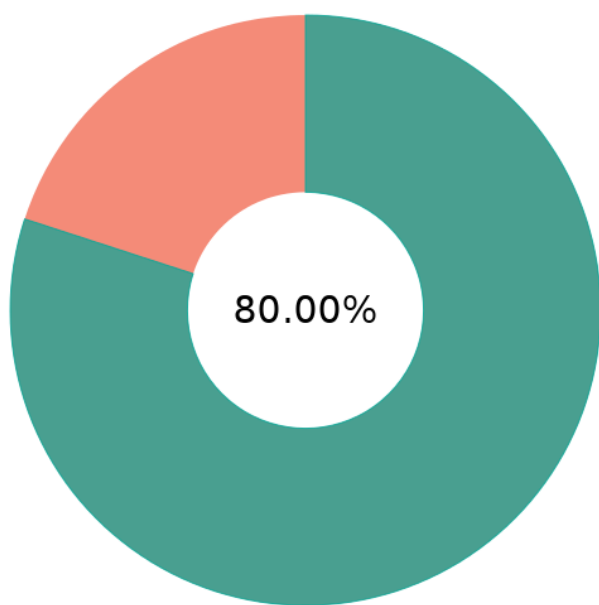
Programmes to address workplace violence

Interventions to address police abuse

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?

Yes, policies exist but are not consistently implemented

Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



4 / 5

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 youth is an identified KP for Dominica and the Unit works with the organized youth organizations: the National Youth Council and the Youth Advocacy Movement in organizing outreach and other structured programs for youth across the island.

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

Yes

b) Secondary school

Yes

c) Teacher training

Yes

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

Currently social protection is available for affected clients; in terms of housing assistance, free health care and other social support with food, care for children, etc. There is still room for improvement especially with timeliness of interventions.

Policy questions

Yes

a) Does it refer to HIV?

Yes

b) Does it recognize people living with HIV as key beneficiaries?

Yes

c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?

Yes

d) Does it recognize adolescent girls and young women as key beneficiaries?

Yes

e) Does it recognize people affected by HIV (children and families) as key beneficiaries?

Yes

f) Does it address the issue of unpaid care work in the context of HIV?

Yes

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

Lack of information available on the programmes
Complicated procedures
Fear of stigma and discrimination
High out-of-pocket expenses

Commitment 7

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

Progress summary

N/A

Policy questions

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

Yes

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

Registration of HIV CSOs is possible

Registration of CSOs/CBOs working with key populations is possible

HIV services can be provided by CSOs/CBOs

Services to key populations can be provided by CSOs/CBOs

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

a) Male condoms:

-

b) Female condoms:

0

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

N/A

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

This is one of the areas that Dominica needs to improve on and the Unit can commit to make this a part of its workplan going forward.

Policy questions

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at scale, at the sub-national level

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

No

Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings?

Complaints procedure

Mechanisms of redress

Procedures or systems to protect and respect patient privacy or confidentiality

Does your country have any of the following barriers to accessing accountability mechanisms present?

Awareness or knowledge of how to use such mechanisms is limited

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

HIV & AIDS is already covered by the government. Affected clients do not pay to receive and those in care are screened for TB, Hep B and women of reproductive age are screened for cervical cancer by pap smears.

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)

Yes

b. The national strategic plan governing the AIDS response

Yes

c. National HIV-treatment guidelines

Yes

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

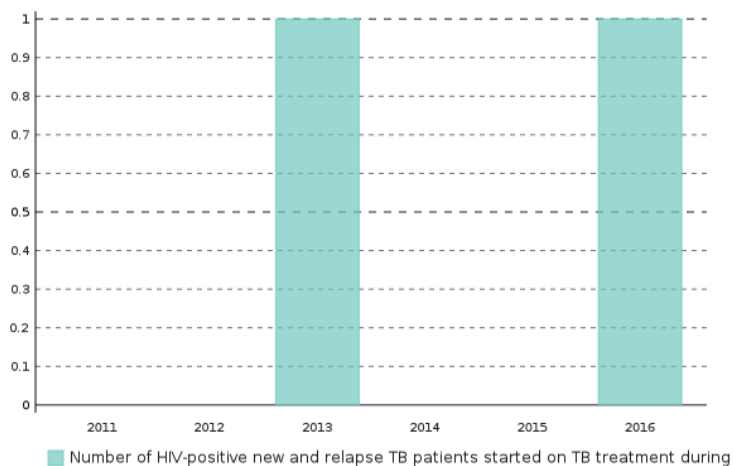
Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV

Intensified TB case finding among people living with HIV

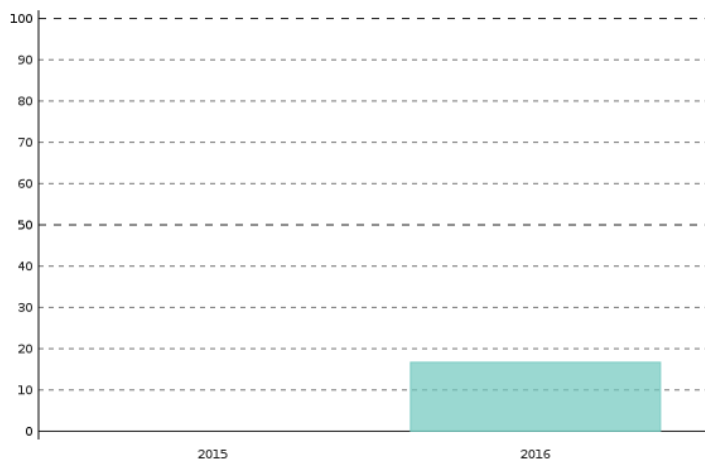
TB infection control in HIV health-care settings

Co-trimoxazole prophylaxis

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



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



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

