

Global AIDS Technical Assistance Program—Country Profile

HAITI

HIV/AIDS IN HAITI

The Republic of Haiti has a vibrant culture and a proud history as the world's first free Black republic. Today, however, more than 75% of its population of 8.2 million lives in absolute poverty, making Haiti the poorest country in the Western Hemisphere. Unemployment ranges from 60-80%, and yearly income is about \$500 per capita. Haiti also has the highest HIV prevalence outside of Africa, with an estimated 5.6 percent of its population estimated to be infected with the HIV virus (UNAIDS, 2004 Report on the Global HIV/AIDS Epidemic), and, among countries in the Western Hemisphere, is second only to Brazil in terms of the number of persons living with HIV infection.

Since the epidemic first appeared in Haiti, both public and not-for-profit sectors have joined forces to curb its progression. These collaborations between the Haitian Ministry of Health and its partners have resulted in the development of a national strategic plan and successful applications to the Global Fund. Funds available from the Global Fund and the United States President's Emergency Plan for AIDS Relief have created opportunities for unprecedented expansion of programs to provide voluntary counseling and testing (VCT) for populations at risk, for services to prevent mother-to-child HIV transmission (PMTCT), and for care and treatment services in general. With the availability of this funding, nearly thirty VCT centers have been established, and more are expected to be created over a five year period. All major health facilities in Haiti are being equipped to provide PMTCT services, including HIV testing for all pregnant women attending the facilities and offering prophylactic treatment to women and their children, with the goal of reducing by half the number of infected children.

Within the efforts to rapidly expand and improve AIDS-related services in Haiti, the Centers for Disease Control and Prevention – Global AIDS Program/Haiti (CDC/Haiti) provides technical leadership in the areas of strategic information, laboratory services, and many aspects of clinical care. One of the priority areas for CDC/Haiti and the Haitian Ministry of Health is to put in place a revitalized HIV/AIDS case notification system in order to provide data critical to planning and monitoring activities related to the prevention of HIV transmission and treatment of infected persons.

NASTAD'S ROLE

The National Alliance of State and Territorial AIDS Directors (NASTAD) is a nonprofit national association of U.S. state health department HIV/AIDS directors based in Washington, DC. Its members bring over 20 years of experience in developing, implementing, and evaluating HIV prevention and care programs. The majority of NASTAD members are responsible for overseeing surveillance activities for their state and working with national partners in furthering surveillance systems at the state and national levels. In this capacity, NASTAD members have been faced with the same decisions confronting national programs of partner countries such as Haiti: namely, how to balance limited resources with the need for data and how to use surveillance data to make programmatic decisions about HIV prevention and care and treatment activities.

ACTIVITIES

- In 2003, the CDC Global AIDS Program-Haiti requested assistance from NASTAD to work closely with CDC/Haiti, USAID, and the Haitian Ministry of Health to make recommendations and to assist with implementing revised procedures within

the current HIV/AIDS case reporting system in order to achieve a more comprehensive and complete surveillance program.

- In October 2003, as a first step towards these objectives, the NASTAD team evaluated the current situation in Haiti with respect to the different components of a successful, sustainable HIV/AIDS reporting system. This situational analysis and its preliminary recommendations provided a framework for discussion and feedback among partners.
- In April 2004, NASTAD and CDC/Haiti hosted a meeting of partners to discuss details of a pilot phase for the revised case notification procedures, which would inform decisions about procedures to incorporate in a strengthened national system, and to create an implementation plan that was coordinated with other related HIV/AIDS activities.
- From April to July 2004, the NASTAD team worked with CDC/Haiti and partners to draft a protocol and revised case reporting forms for the pilot phase, based on feedback from partners and on the revised WHO/CDC recommendations for HIV/AIDS case reporting and AIDS case definitions.
- In August 2004, a meeting was hosted by NASTAD, CDC/Haiti, and the Institut Haitien de l'Enfance (IHE), a Haitian non-governmental

organization charged with local implementation of case notification pilot activities, to establish consensus among partners on methods and forms to be piloted during the first phase of the revitalization of HIV/AIDS case notification in Haiti.

NEXT STEPS

With the support of U.S. based and local partners, case notification pilot activities should begin in November 2004 and will run through April 2005. Throughout this time period, NASTAD will continue to provide technical leadership for the project and will monitor its progress with CDC/Haiti and IHE. NASTAD will also work with CDC/Haiti and the Ministry of Health to develop a template for a periodic bulletin to disseminate case notification data at the departmental and national levels. At the end of the pilot phase, the NASTAD team will evaluate the revised procedures and will produce a final report describing the successes, failures, and lessons learned during the pilot phase in order to inform decisions about the structure of a strengthened national case notification system for Haiti.

Contact Information:

Natasha Sakolsky
Director, Global AIDS Technical Assistance Program
www.nastad.org
(202) 434-8090
nsakolsky@nastad.org