Office of the United States Global AIDS Coordinator

COUNTRY PROFILE

HIV/AIDS

GUYANA

HIV/AIDS Epidemic in Guyana	
HIV Prevalence in Pregnant Women	3.7%
Estimated Number of HIV-Infected People	18,000
Estimated Number of Individuals on Antiretroviral Therapy (2003)	200
Estimated Number of AIDS Orphans	4,000

The HIV/AIDS epidemic in Guyana is characterized as an early generalized one. Most HIV transmission is believed to be heterosexual, but prevalence data are poor for other historically high-risk populations. Guyana has an estimated adult prevalence of between 3.7 and 7.1 percent. The best data come from the antenatal seroprevalence survey, which show approximately 3.8 percent of pregnant women with HIV. Given the early stage of the epidemic, most funding is directed at prevention activities, and infrastructure and capacity development for expanded care and treatment services. To further define where activities and funding should be directed, several types of surveillance surveys will be carried out this year.

U.S. GOVERNMENT RESPONSE

In 2003, President George W. Bush announced the Emergency Plan for AIDS Relief, a five-year, $15 billion U.S. Government initiative that aims to provide treatment to at least two million HIV-infected individuals, prevent seven million new HIV infections, and provide care and support to 10 million people living with and affected by HIV/AIDS, including orphans and vulnerable children. To help attain these goals, the U.S. Government is rapidly expanding its programs and engaging new partners in 15 focus countries, including Guyana. Under the Emergency Plan, Guyana will receive $9.3 million in 2004 to support a comprehensive treatment, prevention, and care program.

Map of Guyana: PCL Map Collection, University of Texas

Treatment

The U.S. Government's program will focus on providing treatment to HIV-infected people at three sites in Georgetown, where the majority of the population lives. U.S. Government funding will be directed at improving infrastructure and training, strengthening referrals from sites offering services for prevention of mother-to-child HIV transmission, sexually transmitted infection, and tuberculosis; and improving quality assurance. The program will expand associated services such as drug management and logistics, information systems, and laboratory support. The program's focus in the first year will be on developing a national laboratory and a new care and treatment site that offers CD4 testing, which is not currently available through public sites in Georgetown.

Prevention

The U.S. Government program will expand services for prevention of mother-to-child HIV transmission to 32 sites and to the five hospitals that

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collectively perform more than 80 percent of deliveries. Abstinence and faithfulness activities will focus on in- and out-of-school youth and will strengthen the capacity of a number of smaller, local, community-based organizations to provide prevention services. The program will support the development of referral systems for care and treatment programs through voluntary counseling and testing and will support the Ministry of Health in strengthening blood safety and medical injection safety. The U.S. Department of Defense will work with Guyana's Defense Secretariat to strengthen HIV screening and awareness in the armed forces. Other prevention activities will target those at heightened risk—including patients at clinics for sexually transmitted infections, sex workers and their clients, and men who have sex with men—through direct services and condom social marketing.

Care

The U.S. Government program will focus on clinical care activities at three sites that will treat and care for the majority of people living with HIV/AIDS in Guyana. The program will improve identification, testing, and awareness campaigns for opportunistic infections and tuberculosis and will expand clinical care for affected individuals. The program will fund initial assessments and program development for home-based and palliative care services. Support will also be provided to strengthen community-based care for orphans and vulnerable children.

Other

The U.S. Government program will continue to support surveillance and national monitoring and evaluation capacity. A national health-management information-system assessment will enable U.S. Government partners to determine current needs and improve the collection, analysis, and dissemination of critical information. Targeted research and impact evaluations, including a miner's survey, an antenatal clinic survey, an AIDS information survey, and a health facility survey, will guide future programming. Crosscutting activities will strengthen national committees and policies for HIV/AIDS and will begin to address the need for human capacity development.

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