HIV/AIDS in Belize and USAID Involvement

With an adult HIV/AIDS prevalence estimated as high as 4 percent, Belize is one of the worst affected countries in the Central American region. The first case of AIDS in Belize was diagnosed in 1986, and HIV has since spread into the general population. Transmission is fueled by poverty, low levels of condom use, and cultural attitudes that promote multiple sexual partnerships for men. The Prime Minister of Belize said during the June 2001 United Nations General Assembly Special Session on AIDS that young people, especially those of poor and migrant families, are at greatest risk for contracting and transmitting HIV/AIDS across Belize.

According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), by the end of 1999:

- 2400 adults (prevalence of 2.01 percent) were living with HIV/AIDS. (Belize’s National Health Information System reported a 4.01 percent prevalence rate in June 2001);
- Men accounted for 75 percent of HIV/AIDS cases;
- Fewer than 100 children under 15 were infected;
- 420 children had lost their mother or both parents since the beginning of the epidemic; and
- 170 people died of AIDS in 1999 alone.

With infection rates in the general population estimated to be between 2 and 4 percent, the epidemic is growing quickly among the heterosexual population. Available data from Belize District shows that in 1994 less than 1 percent of pregnant women using antenatal services tested positive for HIV; by 1997 this number was 2.5 percent. Sex between men is also thought to be a major risk factor for HIV transmission in Belize.

NATIONAL RESPONSE

The Ministry of Health is responding to the challenge of HIV/AIDS with preventive interventions and programs to care for people living with the disease. The country first established a National AIDS Task Force in 1996. In January 2000 the government declared HIV/AIDS one of the greatest health challenges facing Belizeans.
In February 2000 a National AIDS Commission was established, and is chaired by the Minister of Human Development, Women and Civil Society. The Commission’s strategic plan aims to change attitudes and practices, facilitate intersectoral collaboration, and provide support services to those living with HIV/AIDS. Programs targeting children and teenagers incorporate health and AIDS education into primary and secondary schools. The Commission is working to develop a national policy and legal framework to address issues of discrimination, education, migration, and the criminalization of willful acts of transmission. In addition, issues of confidentiality and compassion are an integral component of the national strategic plan.

The government is cognizant of the role that gender equality plays in the process of changing sexual behavior and recognizes that greater efforts to equalize the balance of power between men and women must be made. Belize is also beginning to tackle the vital issue of mother-to-child transmission (MTCT).

**USAID SUPPORT**

Although the U.S. Agency for International Development (USAID) does not have a presence in Belize, the country is included in USAID’s Central American Regional HIV/AIDS Program. In FY 2001, USAID allocated $3.7 million for HIV/AIDS activities in the region.

USAID’s Central American regional strategy focuses on geographical areas and high-risk groups. It emphasizes improvement of the political environment by strengthening policy formulation through research and information dissemination. USAID is working to develop a broad cadre of public and private sector leaders who actively acknowledge HIV/AIDS as a growing and serious problem, support effective policies and programs, and support responsive public sector reforms. The program also strengthens the capabilities of Central American organizations to deliver HIV/AIDS services and information to target groups, and implements a condom social marketing strategy among populations at high risk for HIV infection.

In addition, USAID is working with several Central American countries to formulate a regional approach to HIV/AIDS prevention for mobile populations. The activity targets geographic “hot spots” where mobile populations converge, such as truck routes, border towns, ports, and trade centers.

The 2002-2006 regional strategy will concentrate on information sharing and dissemination; national and regional strategic alliances among nongovernmental organizations (NGOs), policy leaders, business and labor groups; and media outreach.

**USAID-SUPPORTED NGOS**

Through Population Services International (PSI), USAID funds the Pan American Social Marketing Organization (PASMO), which is active in Costa Rica, El Salvador, Guatemala, Belize, Nicaragua, Panama, and Honduras. The program’s goals are to...

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**Key Population, Health, and Socioeconomic Indicators**

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<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
<th>Source</th>
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<tbody>
<tr>
<td>Population</td>
<td>256,062</td>
<td>U.S. Census Bureau 2001</td>
</tr>
<tr>
<td>Growth Rate</td>
<td>2.8%</td>
<td>U.S. Census Bureau 2000*</td>
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<tr>
<td>Life Expectancy (Male)</td>
<td>69</td>
<td>U.S. Census Bureau 2000*</td>
</tr>
<tr>
<td>Life Expectancy (Female)</td>
<td>73</td>
<td>U.S. Census Bureau 2000*</td>
</tr>
<tr>
<td>Total Fertility Rate</td>
<td>4.1</td>
<td>U.S. Census Bureau 2000*</td>
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<tr>
<td>Infant Mortality Rate</td>
<td>26 per 1,000 live births</td>
<td>U.S. Census Bureau 2000*</td>
</tr>
<tr>
<td>Maternal Mortality Rate</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>GNP per capita (US$)</td>
<td>$2920</td>
<td>World Bank 2000</td>
</tr>
<tr>
<td>Public health expenditure as % GDP</td>
<td>2.2%</td>
<td>World Bank 1998</td>
</tr>
<tr>
<td>Adult Literacy (% of people 15 and above)</td>
<td>92.7%</td>
<td>UNESCO 1999</td>
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* From U.S. Census Bureau 2000 HIV/AIDS country profiles, which included data from U.S. Census Bureau, Population Reference Bureau, UNAIDS and WHO.
develop and expand partnerships with commercial, public, and non-profit groups; to leverage regional comparative strengths and reproductive health resources; and to create a more sustainable and effective condom social marketing program in the region. PASMO primarily targets groups at high risk of contracting HIV/AIDS, and sexually active adolescents. By September 2000, PASMO had launched the sale of VIVE (Live!) condoms in El Salvador, Nicaragua, and Guatemala, Costa Rica, Panama and Honduras. To date, more than 8.1 million condoms have been sold throughout the region.

OTHER SUPPORT

The National Institutes of Health (NIH) funds HIV prevention research in Belize, Trinidad and Tobago, the Dominican Republic, and Haiti, including studies to evaluate interventions to prevent MTCT.

DONOR SUPPORT

UNAIDS contributed $450,000 to national programs in Central America during 1998-99, and is beginning to provide funding for regional activities, such as the USAID-supported mobile populations initiative, and HIV/AIDS meetings and conferences.

CHALLENGES

According the Government of Belize, the country faces the following challenges in implementing HIV/AIDS prevention and care programs:

- Gender inequality leading to women’s inability to negotiate condom use;
- A growing heterosexual epidemic;
- Increasing rates of MTCT; and
- Misconceptions about how HIV is spread and stigma surrounding the disease.
SELECTED LINKS AND CONTACTS

1. National AIDS Program: National AIDS, Old Belize City Hospital, Eve Street, Belize City, Belize, Central America. Tel: (501-2) 30-778, Fax: (501-2) 30-778.

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February 2002