

Presentation delivered during the Second Technical Advisory Committee on HIV/AIDS/STI

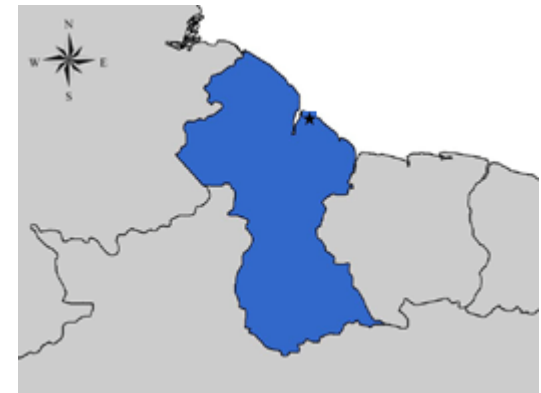
Brasilia, Brazil

16-19 January 2006

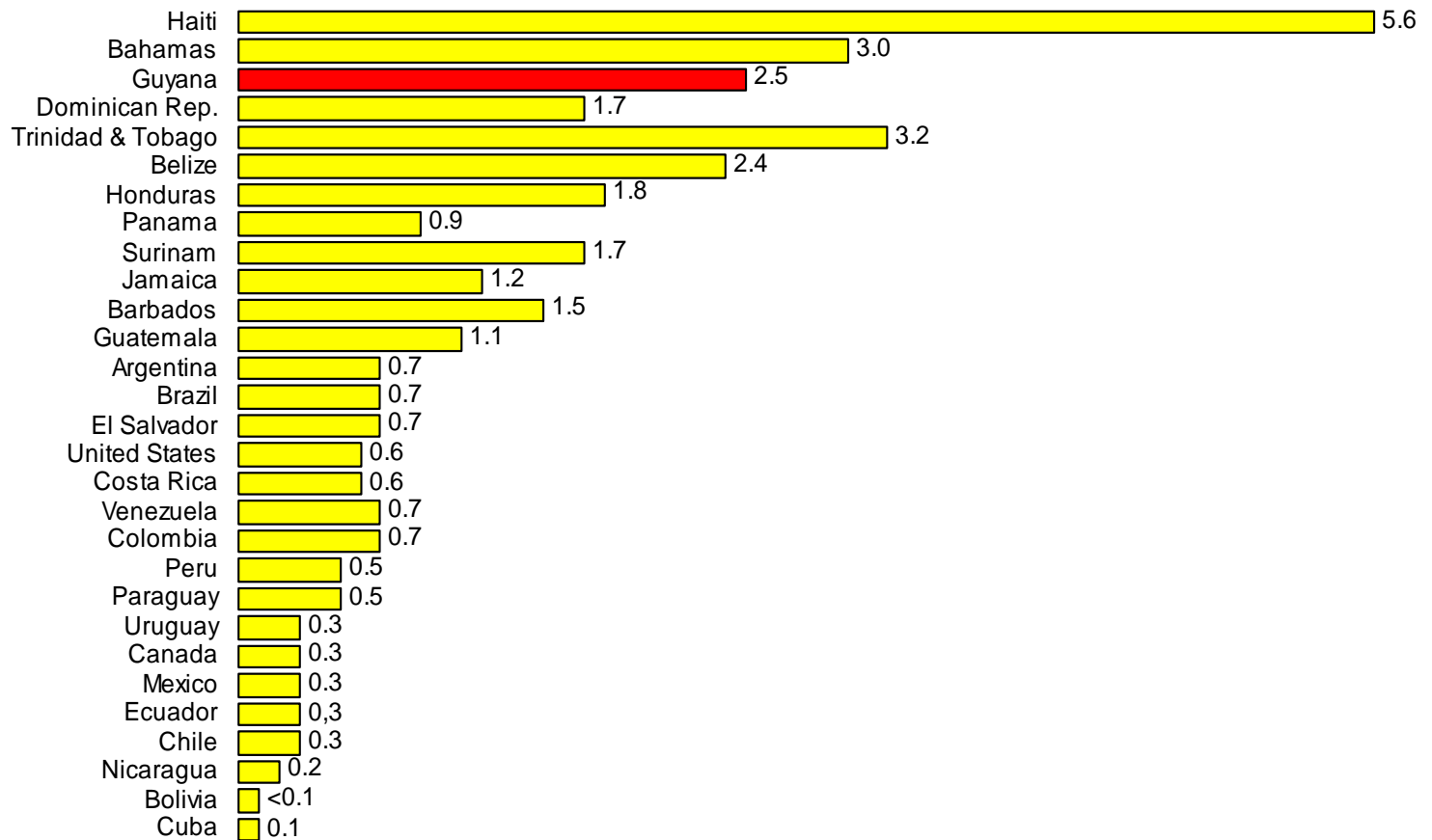


Guyana's experience with 3 by 5

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HIV/AIDS prevalence rate in adults America and the Caribbean



Population	Gender	Year	Prevalence (%)	Remarks
Blood Donors	All	2001 2004	1.0 0.8	Blood Bank survey
Pregnant Women	Female	1993 1995 2000 2002 2003 2004 2004	3.7 7.1 5.6 3.9 3.1 2.5 2.6	ANC Survey PMTCT Sites PMTCT Sites PMTCT Sites ANC Survey
STI Patients	Male	1992 2002 2004	13.2 15.1 19.8	Clinic Records
	Female	1993 2002 2004	6.5 12.0 15.8	Clinic Records
CSW	Female	1992 1997 2004	25.0 45.0 26.6	CSW Survey CSW Survey BBSS, 2004
MSM	Male	2004	21.25	BBSS, 2004
TB Patients	All	1997 2003	14.5 30.2	Clinic Records
Miners	Males	2000 2004	6.5 11.9 3.9	1 mine 1 mine 22 mines

Current Situation on treatment and care

- Started ARV treatment in April 2002.
 - 3 x 5 target: 1000 patients
 - 986 are on ARVs by the end of 2005
 - 8 treatment sites, including two private operated sites
 - CD4 count since August of 2004.
 - Viral load testing available since September 2005.
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Historical

- Guyana's Government declared universal access in 2001. New GPC collaboration with GoG.
 - Guyana subscribed to the 3 by 5 initiative in June 2004
 - WHO 3 by 5 country officer was recruited in March 2005
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3 by 5 Highlights

- Coordination of the development of the National Strategic Plan-2006-2010
 - Participate in the revision of ARV Guidelines.
 - Coordination of the Development of the National M/E strategy-2006-2010
 - Assist in strengthening the Health sector response.
 - Participation in the Coordination of the implementation of HIV/AIDS Programme (CCM and the PCHA)
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Facilitating factors

- Political commitment of the Government
 - Leadership from the Minister of Health
 - Mobilisation of support- Global Funds, World Bank and PEPFAR
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Facilitating factors

- In country presence of the 3 by 5 officer with international experience in HIV/AIDS and STIs.
- PAHO/ WHO technical expertise.
- Close collaboration and historical ties with the MoH.
- Close collaboration with other partners and stakeholders.
- PAHO assisted in strengthening existing systems rather than creating parallel systems.

Strengthen the Health sector

- Facilitated a participatory planning process.
 - Mapping the resource gaps in implementation.
 - Assisted in the collaboration and coordination of partners to leverage resources to fill these gaps.
 - Assisted in the training of health care workers.
 - Facilitated government's participations in various for a on HIV and AIDS.
 - Participated in the crafting of a National STI strategy.
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Collaboration with other sectors

- The 3 by 5 enhanced the multisectoral approach through the organization of workshops.
 - Through participation at all CCM and PCHA meetings
 - Through the active participation at the Health Theme Group meetings of the Ministry of Health
 - Through participation at the UN Technical Group on HIV/ AIDS (a sub committee of the UN Theme group chaired by PAHO)
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- Thank you.