

# Guyana

## Background

Population size  
767,085<sup>1</sup>



### In the Caribbean, the rate of new HIV infections, concentrated among key population, remained stable 2010-2015<sup>2</sup>

Number of people living with HIV<sup>3</sup>  
**7,800**

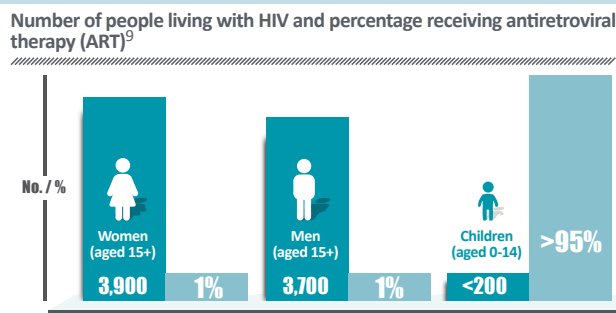
HIV prevalence<sup>6</sup>  
**1.5%**

Number of people receiving ART<sup>7</sup>  
**4,551**

Coverage of people receiving ART<sup>8</sup>  
**59%**

People receiving a HIV test and receiving test results in the last 12 months<sup>10</sup>  
**26.3%** (Women) **24.9%** (Men)

Number of new HIV infections<sup>4</sup>  
**<200** (Female) **<200** (Male)



Number of AIDS-related deaths<sup>5</sup>  
**<100** (Female) **<100** (Male)

### Coinfections

Co-management of TB and HIV treatment<sup>12</sup>  
**61%**

Treatment of HIV and hepatitis B coinfecting persons<sup>13</sup>  
**Data not available**

Treatment of HIV and hepatitis C coinfecting persons<sup>14</sup>  
**Data not available**

Viral load suppression<sup>11</sup>  
**79%**

### Elimination of mother-to-child transmission of HIV

Mother-to-child HIV transmission rate (at 18 months)<sup>15</sup>  
**4.1%**

Number of HIV-positive women delivering<sup>16</sup>  
**<500**

Pregnant women who know their HIV status<sup>19</sup>  
**94.4%**

Demand for family planning satisfied with a modern method of contraception  
**57.1%** for all women (15-49)<sup>20</sup>  
**Data not available** for women living with HIV (15-49)<sup>21</sup>

### Adolescents

Estimated number of adolescents living with HIV<sup>22</sup> (aged 10-19)  
**<500**

Number of new child HIV infections<sup>17</sup>  
**<500**

Maternal deaths attributed to HIV<sup>18</sup>  
**Data not available**

AIDS deaths among adolescents<sup>23</sup> (aged 10-19)  
**<100**

### Key populations

Men who have sex with men  
Population size estimate<sup>24</sup> **3,327**  
HIV prevalence<sup>25</sup> **4.9%**

Sex Workers  
Population size estimate<sup>26</sup> **5,256**

People who inject drugs  
Population size estimate<sup>28</sup> **Data not available**  
HIV prevalence<sup>29</sup> **Data not available**

Transgender people  
Population size estimate<sup>30</sup> **Data not available**  
HIV prevalence<sup>31</sup> **Data not available**

Inmates/Detainees  
Population size estimate<sup>32</sup> **Data not available**  
HIV prevalence<sup>33</sup> **Data not available**

### Stigma and discrimination

Supportive of AIDS response: **Conducive** **Inhibits**

Are there laws that criminalise HIV transmission or exposure?<sup>34</sup> **NO**

Has the Stigma Index been conducted?<sup>35</sup> **NO**

Percentage of general population reporting discriminatory attitudes to HIV?<sup>36</sup> **Data not available**

### Health systems

Commodity stockouts  
Antiretrovirals<sup>37</sup> **Data not available**

Community service delivery  
Is there a national policy and strategy on community delivery of antiretroviral therapy?<sup>38</sup> **Data not available**

### Funding

HIV spending from domestic public and international sources<sup>39</sup>  
**\$17,400,000**

HIV spending from domestic public sources<sup>40</sup> **Data not available**

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# Guyana

## Policies, Strategies & Laws



### Policies and Strategies

Supportive of AIDS response:

■ Conducive ■ Inhibits

#### HIV strategy

Is there a national HIV strategy?<sup>41</sup>

NO ✘

If yes, has the plan been costed?<sup>42</sup>

Have the following SRHR components been included as a measurable target:

Gender-based violence	No
Prevention / elimination of mother to child transmission of HIV	No
SRHR of people living with HIV	No
Sexually transmitted infections	No

#### Sexual and reproductive health and rights (SRHR) strategy

Is there a national SRHR policy or strategy?<sup>43</sup>

NO ✘

Have the following HIV components been included as a measurable target?

HIV counselling and testing	No
Prevention / elimination of mother to child transmission of HIV	No
SRHR of people living with HIV	No
Sexually transmitted infections	No

#### HIV testing and counselling strategy

Is there a national policy/strategy or other policy document from your government on HIV testing?<sup>44</sup>

YES ✔

#### Elimination of mother-to-child transmission strategies

Is there a plan to eliminate MTCT of HIV and syphilis?<sup>45</sup>

YES ✔

Integrated plan to eliminate MTCT of HIV and syphilis?<sup>46</sup>

YES ✔

Is there a national policy to eliminate MTCT of hepatitis B?<sup>47</sup>

YES ✔

#### SRHR and HIV integration strategy

Is there a national SRHR and HIV integration policy or strategy?<sup>48</sup>

NO ✘

#### Tuberculosis (TB) strategy

Is there a national policy/strategy or other policy document from your government on Tuberculosis?<sup>49</sup>

YES ✔

What are the main focus areas:

1. Early diagnosis of tuberculosis including universal drug-susceptibility testing
2. Improve treatment and support of all TB cases including drug-resistant tuberculosis
3. Strengthen collaborative TB/HIV and other co-morbid related activities
4. Increase screening of TB contacts and high-risk groups

#### Cervical cancer policy

Is there a cervical cancer policy?<sup>50</sup>

YES ✔

#### Community service delivery strategy

Is there a national policy and strategy on community delivery of antiretroviral therapy?<sup>51</sup>

Data not available

What approaches are utilized to support community delivery of antiretroviral therapy

#### Viral hepatitis strategy<sup>52</sup>

Is there a specific strategy for the prevention and control of hepatitis B and/or hepatitis C?

NO ✘

Does your Government have goals for the prevention and control of hepatitis B and/or hepatitis C?

NO ✘

Does your Government have a hepatitis B vaccination policy?

YES ✔

Does a hepatitis B vaccination policy exist for:

- Infants
- Adolescents
- Healthcare Workers
- Data not available Military personnel
- Data not available Travelers
- Persons at high risk

### Laws

Supportive of AIDS response:

■ Inhibits ■ Partially ■ Conducive

#### People living with HIV

Are there laws that:<sup>53</sup>

criminalise HIV transmission or exposure?<sup>54,54a</sup>

No ■

impose HIV specific restrictions on entry, stay or residence?<sup>55,55a</sup>

No ■

address HIV-related discrimination and protect people living with HIV?<sup>56,56a</sup>

Data not available

#### Gender-based violence

Are there laws that address gender-based violence?<sup>57,57a</sup>

Yes ■

#### Key populations

Are there laws that:<sup>58</sup>

criminalise same-sex sexual activities?<sup>59,59a</sup>

Yes ■

deem sex work as illegal?<sup>60,60a</sup>

Yes ■

mandate the death penalty for drug offences?<sup>61,61a</sup>

No ■

demand compulsory detention for people who use drugs?<sup>62,62a</sup>

Data not available

recognise a third, neutral and non-specific gender besides male and female?<sup>63,63a</sup>

No ■

#### Age of consent

What is the minimum legal age for marriage without parental consent?<sup>64</sup>

18 Female 18 Male

What is the legal age for HIV testing (without parental consent)?<sup>65</sup>

18 Female 18 Male

What is the legal age for accessing contraceptives?<sup>66</sup>

18 Female 18 Male

What is the legal age for consent to sexual intercourse?<sup>67</sup>

12 Girls Data not available Boys

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# Guyana

## Stigma and Discrimination, & Gender-based Violence



### Stigma and discrimination

#### Stigma faced by people living with HIV

Percentage of general population reporting discriminatory attitudes to HIV<sup>68</sup>



#### Stigma Index<sup>69</sup>

Supportive of AIDS response:

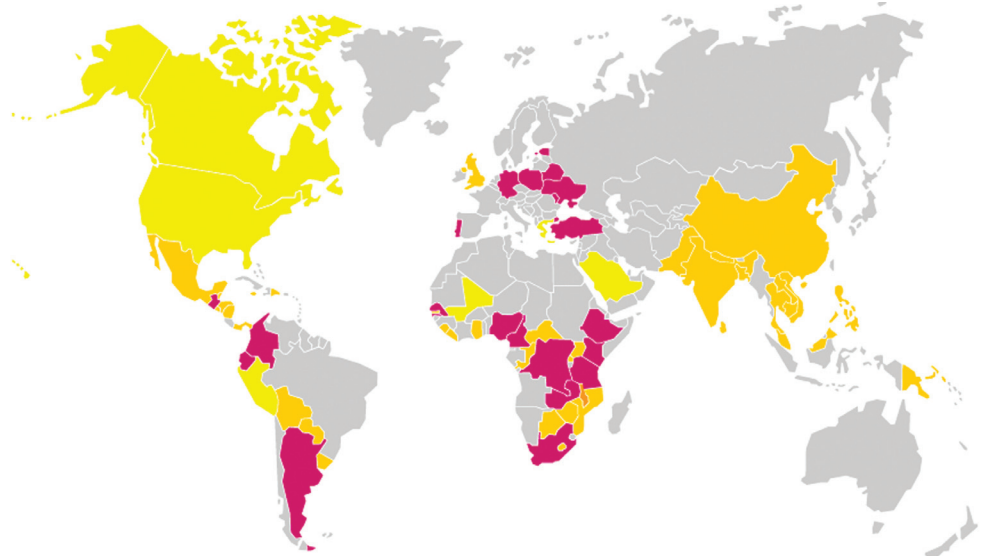
■ Conducive

■ Inhibits

Has the Stigma Index been conducted?<sup>70</sup>

**NO**

The People Living with HIV Stigma Index provides a tool that measures and detects changing trends in relation to stigma and discrimination experienced by people living with HIV. In the initiative, the process is just as important as the product. It aims to address stigma relating to HIV while also advocating on the key barriers and issues perpetuating stigma - a key obstacle to HIV treatment, prevention, care and support.



■ In progress  
■ Implemented  
■ Implemented more than once  
■ Implemented and raw data is available on request for further analysis  
■ Reserved for future use 1  
■ Reserved for future use 2

### Gender-based violence

#### Gender-based violence<sup>71</sup>

Girls married before 18<sup>72</sup>

**23%**



Prevalence of recent intimate partner violence<sup>73</sup>



Wife agrees husband justified beating her

One specified reason<sup>74</sup> if she refuses sex with him<sup>75</sup>

**16.3%**



**4.4%**

Five reasons: argues with him; refuses to have sex; burns the food; goes out without telling him; or when she neglects the children.

#### Women's empowerment<sup>76</sup>

Ability to participate in decisions regarding their own health<sup>77</sup>

**40.7%**  
Female

**Data not available**  
Male

Women who believe wife is justified in refusing sex with husband in three specific circumstances<sup>78</sup>



Specific circumstances: knows husband has a sexually transmitted disease, knows husband has intercourse with other women, or is tired or not in the mood

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# Guyana

## Children & Adolescents



### Children (aged below 18)

#### Children and social protection

Children who have lost one or both parents due to AIDS<sup>79</sup>



Children whose households received external support<sup>80</sup>



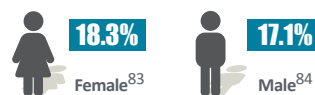
### Adolescents (aged 10-19) and Young People (aged 15-24)

#### Sexual behaviour

Sex before age 15



Median age at first sex among young people aged 20-24



#### HIV

Estimated number of adolescents living with HIV (aged 10-19)<sup>85</sup>



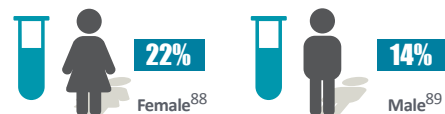
AIDS deaths among adolescents (aged 10-19)<sup>86</sup>



New HIV infections among adolescents (aged 15-19)<sup>87</sup>



Adolescents aged 15-19 who were ever tested for HIV and received the results



Young people aged 15-24 living with HIV<sup>90</sup>



#### Sexual and reproductive health and rights

Unmet need for family planning among young women aged 15-19<sup>91</sup>



Young women aged 15-19 able to participate in decisions about their healthcare<sup>92</sup>



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## Key Populations





Key populations: UNAIDS considers gay men and other men who have sex with men, sex workers and their clients, transgender people, people who inject drugs and prisoners and other incarcerated people as the main key population groups. These populations often suffer from punitive laws or stigmatizing policies, and they are among the most likely to be exposed to HIV. Their engagement is critical to a successful HIV response everywhere—they are key to the epidemic and key to the response. Countries should define the specific populations that are key to their epidemic and response based on the epidemiological and social context. The term key populations at higher risk also may be used more broadly, referring to additional populations that are most at risk of acquiring or transmitting HIV, regardless of the legal and policy environment.<sup>93</sup>

### Missing from the data

#### Size estimates, prevalence and testing

	Men who have sex with men 	Sex workers 	People who inject drugs 	Transgender people 	Inmates/ Detainees 
Population size estimate 	3,327 <sup>94</sup>	5,256 <sup>95</sup>	Data not available <sup>96</sup>	Data not available <sup>97</sup>	Data not available <sup>98</sup>
HIV prevalence 	4.9% <sup>99</sup>	6.1% <sup>100</sup>	Data not available <sup>101</sup>	Data not available <sup>102</sup>	2.1% <sup>103</sup>
HIV testing 	37.8% <sup>104</sup>	47.6% <sup>105</sup>	Data not available <sup>106</sup>	Data not available <sup>107</sup>	

#### Prevention

Condom use 	64.4% <sup>108</sup>	75.7% <sup>109</sup>	Data not available <sup>110</sup>	Data not available <sup>111</sup>
Number of needles per person who injects drugs 			Data not available <sup>112</sup>	

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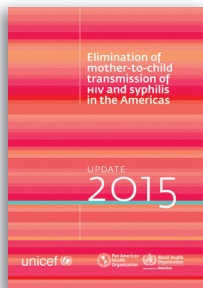
# Guyana

## Elimination of Mother-to-Child Transmission & Integrated Services

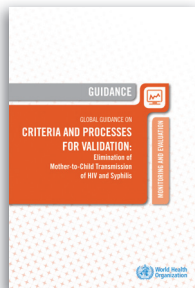


### HIV and syphilis

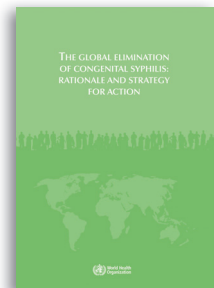
WHO (2015). Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas. Update 2015.<sup>113</sup>



Global guidance on criteria and processes for validation: elimination of mother-to-child transmission (EMTCT) of HIV and syphilis.<sup>114</sup>



The global elimination of congenital syphilis: rationale and strategy for action<sup>115</sup>



### Elimination of mother-to-child transmission of HIV

Number of HIV-positive women delivering<sup>116</sup>



<500

Number of new child HIV infections<sup>117</sup>



<500

#### Four-pronged strategy

Prong 1: new HIV infections among women 15-49<sup>118</sup>

<100

Prong 2: unmet need for family planning for women of reproductive age<sup>119</sup>

27.2%

Prong 3: final mother-to-child HIV transmission rate<sup>120</sup>

4.1%

Prong 3: women receiving antiretrovirals (ARVs) (excluding single dose nevirapine) to prevent new infections among children<sup>121</sup>

76%

Prong 4: ART coverage among children under 15 years<sup>122</sup>

>95%

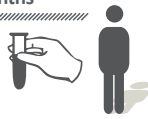
Pregnant women who know their HIV status<sup>123</sup>



94.4%

Pregnant women attending antenatal care (ANC) whose sexual partners were tested for HIV in the last 12 months<sup>124</sup>

9.2%



Visiting ANC clinic at least once<sup>125</sup>



91%

Visiting ANC clinic at least 4 times<sup>126</sup>



87%

Skilled attendant at birth (total)<sup>127</sup>



94%

Early infant diagnosis<sup>128</sup>



48%

Coverage of infant ARV prophylaxis<sup>129</sup>



Co-trimoxazole (CTX) prophylaxis coverage<sup>130</sup>



Demand for family planning satisfied with a modern method of contraception for women living with HIV (15-49)<sup>131</sup>



### Elimination of mother-to-child transmission of congenital syphilis<sup>132</sup>

Congenital syphilis rate (live births and stillbirth) (per 100,000 live births)<sup>133</sup>

0.0%

Syphilis testing in pregnant women<sup>134</sup>

82.7%

Syphilis rates among antenatal care attendees<sup>135</sup>

0.1%

Syphilis treatment coverage among syphilis-positive antenatal care attendees<sup>136</sup>



### Hepatitis B

#### Elimination of mother-to-child transmission of hepatitis B

Coverage of birth dose of hepatitis B vaccine i.e. within 24 hours of birth<sup>137</sup>



Coverage of third dose of hepatitis B vaccine among infants (<12 months of age)<sup>138</sup>



### Integrated service delivery

#### Health facilities provide HIV services integrated with other health services

- Many
- Few
- None

HIV counselling and testing with SRH<sup>139</sup>

**MANY** ✓



EMTCT/prevention of mother-to-child transmission of HIV (PMTCT) with antenatal care/maternal and child health<sup>140</sup>

**MANY** ✓



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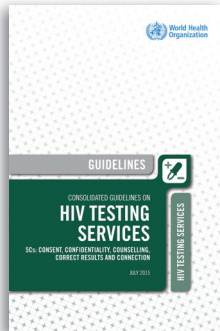
# Guyana

## HIV Testing and Counselling, & Treatment

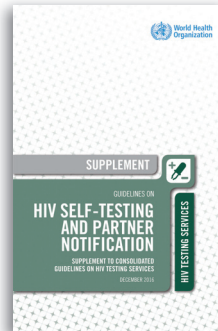


### HIV testing and counselling

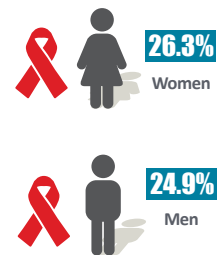
Consolidated guidelines on HIV testing services<sup>141</sup>



Guidelines on HIV self-testing and partner notification<sup>142</sup>

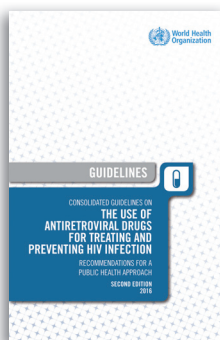


People receiving a HIV test and receiving test results in the last 12 months<sup>143</sup>



### HIV treatment

Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection<sup>144</sup>



Number of people receiving ART<sup>145</sup>



Coverage of people receiving ART<sup>146</sup>



Deaths averted due to ART<sup>147</sup>



Late HIV diagnoses (i.e. HIV-positive people with first CD4 cell count <200 cells/ $\mu$ L)<sup>148</sup>



12 month retention on ART<sup>149</sup>



24 month retention on ART<sup>150</sup>



Viral load suppression<sup>151</sup>



# Guyana

## Tuberculosis, Viral Hepatitis & Cervical Cancer



### Ending TB<sup>152</sup>

**54th DIRECTING COUNCIL**  
67th SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS  
Washington, D.C., USA, 29 September-2 October 2015

Agenda Item 4.8

CDSE/13, Rev. 1  
2 October 2015  
Original: Spanish

**PLAN OF ACTION FOR THE PREVENTION AND CONTROL OF TUBERCULOSIS**

Reduce mortality due to tuberculosis by at least 24% by 2019 (0.8 per 100,000 population) compared to 2014 (1.1 per 100,000 population).<sup>153</sup>

#### Tuberculosis

Incident TB cases in people living with HIV<sup>154</sup>



TB-related deaths among people living with HIV<sup>155</sup>



Number of TB patients living with HIV receiving ART<sup>156</sup>



Co-management of TB and HIV treatment<sup>157</sup>



Proportion of people living with HIV receiving TB preventive therapy<sup>158</sup>



Proportion of people living with HIV newly enrolled in HIV care with active TB disease<sup>159</sup>



#### Integrated services

Health facilities providing HIV services with other health services

HIV counselling and testing, and tuberculosis<sup>160</sup>



Data not available

ART and tuberculosis<sup>161</sup>



Data not available

### Hepatitis B and C: prevention, care and treatment<sup>162,163</sup>

**54th DIRECTING COUNCIL**  
67th SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS  
Washington, D.C., USA, 29 September-2 October 2015

Agenda Item 4.19

CDSE/13, Rev. 1  
2 October 2015  
Original: English

**PLAN OF ACTION FOR THE PREVENTION AND CONTROL OF VIRAL HEPATITIS**

Promote the development and implementation of coordinated public health policies and interventions with the aim of eliminating hepatitis B and hepatitis C in Pan American Health Organization (PAHO) Member States by 2030.<sup>164</sup>

#### Viral Hepatitis

Estimated mortality (2004) per 100,000 population<sup>165</sup>

Acute hepatitis B (HBV)

Acute hepatitis C (HCV)

Liver cancer

Cirrhosis

Data not available

Hepatitis B testing among people in HIV care<sup>166</sup>



Data not available

HIV-HBV coinfected persons currently on combined treatment<sup>167</sup>



Data not available

Hepatitis C testing among people in HIV care<sup>168</sup>

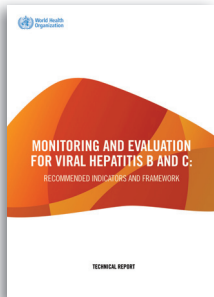


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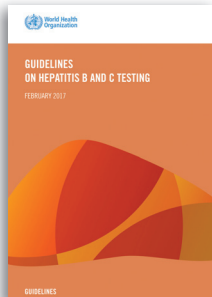
HIV-HCV coinfected persons currently on combined treatment<sup>169</sup>



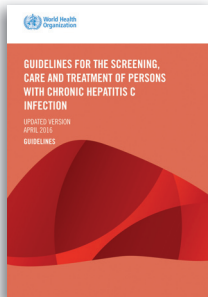
Data not available



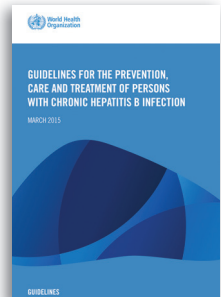
Monitoring and evaluation for viral hepatitis B and C: recommended indicators and framework<sup>170</sup>



Guidelines on hepatitis B and C testing<sup>171</sup>

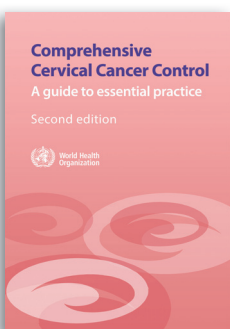


Guidelines for the screening, care and treatment of persons with chronic hepatitis C infection. Updated version, April 2016<sup>172</sup>



Guidelines for the prevention, care and treatment of persons with chronic hepatitis B infection<sup>173</sup>

### Cervical cancer<sup>174</sup>



**Comprehensive Cervical Cancer Control**  
A guide to essential practice  
Second edition

Women living with HIV are at 4-5 times greater risk of developing cervical cancer.

#### Epidemiology

Number of new cervical cancer cases (Year)<sup>175</sup>

573

Number of cervical cancer deaths (Year)<sup>176</sup>

327

#### Vaccination<sup>177</sup>

Human Papillomavirus vaccination schedule: HPV vaccination for adolescent girls

1st contact, +1 month, +6 months

#### Cancer screening and early detection<sup>178</sup>

Cervical cytology (PAP)

Data not available

Acetic acid visualization (VIA)

Data not available

#### Cancer treatment and palliative care<sup>179</sup>

Radiotherapy

Data not available

Chemotherapy (medicines not specified)

Data not available

Oral morphine (formulation not specified)

Data not available

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# Guyana

## Human Resources, Service Coverage, Stockouts & Rapid Assessment



### Human resources<sup>180</sup>

Doctors per 1,000



Nurses and midwives per 1,000



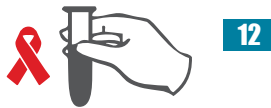
Community and traditional health workers per 1,000



### Sexual and reproductive health and rights (SRHR) and HIV service coverage

Sexual and reproductive health and rights programmes and policies include, but are not restricted to: services for family planning; infertility services; maternal and newborn health; prevention of unsafe abortion and post-abortion care; prevention of mother-to-child transmission of HIV; sexually transmitted infections, including infection from HIV, reproductive tract infections, cervical cancer and other gynaecological morbidities; promotion of sexual health, including sexuality counselling; and prevention and management of gender-based violence.<sup>181</sup>

HIV testing and counselling facilities per 100,000 adult population<sup>182</sup>



Primary level service delivery points offering at least three modern methods of contraception<sup>183</sup>



Combined oral contraceptives (COCs) or “the pill”, progestogen-only pills (POPs) or “the minipill”, implants, progestogen only injectables, monthly injectables or combined injectable contraceptives (CIC), combined contraceptive patch and combined contraceptive vaginal ring (CVR), intrauterine device (IUD): copper containing, intrauterine device (IUD) levonorgestrel, female condoms, female sterilization (tubal ligation), lactational amenorrhea method (LAM), emergency contraception (levonorgestrel 1.5 mg), standard days method (SDM), basal body temperature (BBT) method, two day method, sympto-thermal method.<sup>184</sup>

### Commodity stockouts

Contraceptives<sup>185</sup>



Antiretrovirals<sup>186</sup>



STI drugs<sup>187</sup>



### Rapid assessment on sexual and reproductive health and HIV linkages tool<sup>188</sup>

Supportive of AIDS response:

Conducive

Inhibits

Has the Rapid Assessment for Sexual and Reproductive Health and HIV Linkages been conducted?<sup>189</sup>

**NO**

A rapid assessment of sexual and reproductive health and rights and HIV linkages is a useful tool for countries to assess existing bi-directional linkages at the policy, systems and service delivery levels.

# Guyana

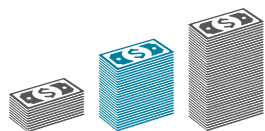
## Spending & Funding



### Spending

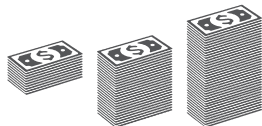
World Bank income classification<sup>190</sup>

UPPER MIDDLE

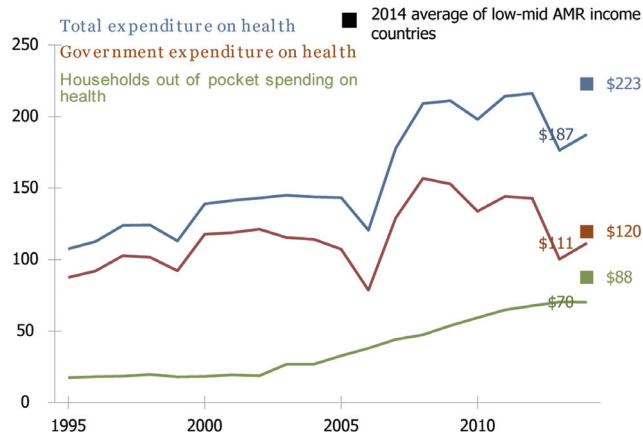


Gross national income per capita in US\$<sup>191</sup>

\$ 4,226



Per capita health expenditure in US\$ (constant 2014 US\$)<sup>192</sup>



### HIV funding<sup>193</sup>

HIV spending from domestic public and international sources

\$ 17,400,000



HIV spending from domestic public sources

Data not available



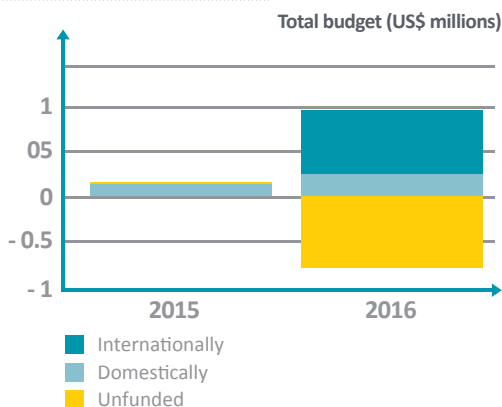
HIV spending from international sources

\$ 17,431,482



### Tuberculosis funding<sup>194</sup>

National TB budget: TB financing, 2016



National TB budget 2016 (US\$ millions)

1.2



Funding sources 2016



55%

Domestic



39%

International



6%

Unfunded

Data are as reported to WHO. Estimates of TB and MDR-TB burden are produced by WHO in consultation with countries. Generated: 2016-11-15.

TB patients facing catastrophic total costs<sup>195</sup>



Data not available

### Viral hepatitis funding<sup>196</sup>

Supportive of AIDS response:

Conductive

Inhibits

Partially

Does your Government fund or part-fund the treatment of hepatitis B and/or hepatitis C?

The following drugs for treating hepatitis B are on the national essential medicines list or subsidized by the government: interferon alpha, adefovirdipivoxil and tenofovir. It is not known which drugs for treating hepatitis C are on the national essential medicines list or subsidized by the government.

Publicly funded treatment for HBV is available to the entire population, but not for HCV. The amount spent by the government on such treatment for HBV B is not known.



Disclaimer: Whilst all reasonable care has been taken in compiling these briefings we do not guarantee their accuracy or reliability and cannot be held responsible for any inaccuracies or mis-statements of fact beyond our control. If you have more up to date information please contact us at [crnrcfsurvey@gmail.com](mailto:crnrcfsurvey@gmail.com)

