

DOMINICAN REPUBLIC

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, UNODC, UNESCO, WHO-PAHO, UNAIDS
SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

The Joint Team provided technical and financial support to reinforce Dominican Republic's efforts towards ending HIV as a public health threat by 2030. Innovative strategies, including pre-exposure prophylaxis and multimonth dispensing of antiretroviral treatment were implemented. During the COVID-19 pandemic, mitigating actions were taken to minimize shortages of antiretroviral medicines, and healthcare providers were trained to ensure the continuity of services. Following an assessment of the needs of people living with HIV during the pandemic, the Joint Team implemented food and nutrition support initiatives; distributed COVID-19 prevention information and commodities; trained peer counsellors and people living with HIV on nutrition and food security; and ensured the inclusion of people living with HIV in national social protection schemes. To improve access to case detection and treatment services among pregnant and breastfeeding women, the Joint Team supported integration of HIV and congenital syphilis services in obstetrics and gynaecology services in several adolescent health, primary healthcare centres, and hospitals. In 2020-2021, the Joint Team also sought to strengthen HIV prevention and treatment services for people who use addictive substances, including narcotics and alcohol. Technical support was provided for the development of guidelines for provision of care among people who use drugs; and trainings were conducted for government healthcare personnel on management of drug use-related disorders and HIV prevention services. A proposal aimed at amending the law on drugs and controlled substances was submitted to strengthen healthcare, gender, and human rights approaches on the delivery of clinical and psychosocial services among people who use drugs.

HIV TESTING AND TREATMENT

In the Dominican Republic, HIV testing and antiretroviral treatment service coverage showed a slight increase between 2019 and 2020. The Ministry of Public Health was supported to rolled out the 3-6 months multimonth dispensing of antiretroviral treatment reducing the gaps in access and continuity of services for people living with HIV. A clinical guideline was also developed and implemented ensuring treatment supply and dispensing during the COVID-19 pandemic. The 2021 needs assessment conducted in selected Comprehensive Care Service units showed that 47% of the eligible people living with HIV accessed their treatment through a 3-month multimonth dispensing.

The Joint Team further provided technical assistance in building the managerial and financial capacity of the Government that led to the relocation of HIV medicines and commodities from a private warehouse to Government warehouses—saving the country an estimated US\$ 254 429 per year in storage costs.

With PEPFAR funding, the Joint Team supported the *Centro de Desarrollo Sostenible* (CEDES), a community-based organization, to develop and implement community-led monitoring in six Comprehensive Care Service units for people living with HIV. By increasing the participation of communities in monitoring, evaluation, and strategic decision-making processes, the project aims at increasing the quality and accessibility of HIV services, and particularly at identifying gaps for improvement. The Joint Team also developed and implemented training sessions for 184 healthcare providers from primary care and specialized healthcare centres improving their capacities on provision of integrated services and clinical management of HIV, tuberculosis, and sexually transmitted infections (STIs), including cognitive and operational tools for patient management.

An opinion survey on the impact of antiretroviral treatment shortage in Comprehensive Care Service units among people living with HIV was completed with technical support from the Joint Team. The survey identified critical challenges in access to treatment services, including shortage of antiretroviral medicines, increased out-of-pocket healthcare spending, and decreased adherence to treatment due to side effects from ART. Results were used to implement mitigating actions in 2020 that helped solve the shortages in the country.

PROTECTION OF PEOPLE LIVING WITH HIV AND NUTRITIONAL SUPPORT

In 2020-2021, the Ministry of Public Health was supported to carry out data collection and monitoring of HIV and essential health services disruptions during the COVID-19 pandemic. Data on interruption of HIV prevention, including pre-exposure prophylaxis (PrEP), HIV testing, and treatment services among key populations and prevention of mother-to-child transmission were used for advocacy and programming efforts. Technical support was also provided to conduct two rapid assessments on the needs of people living with HIV during the COVID-19 pandemic. Results showed that 90% of people living with HIV who participated in the survey did not have access to social protection programmes and are eager to be included in these services to ensure food security for themselves and their families.

Amplified advocacy and technical assistance ensured inclusion of people living with HIV in social protection programmes created to curb the impact of the COVID-19 pandemic, which benefited 15 002 people living with HIV and their families (21% of all people living with HIV in the country) in 2021.

The Joint Team collaborated with the National Council for HIV and AIDS (CONAVIHSIDA) and the Ministry of Agriculture to improve treatment adherence, healthy diet, and nutrition security among people living with HIV in the Eastern region of the country. Through support provided to Grupo Paloma, an organization of people living with HIV, training was provided for 47 peer counsellors improving their knowledge and capacity on provision of food and nutrition counselling and support services. Furthermore, 300 people living with or affected by HIV were trained on food and nutrition security, and a total of 400 people living with HIV benefited from the integrated urban garden and peer nutritional counselling programme in 2020-2021. In 2020-2021, the Joint Team distributed 2200 daily food rations, 233 280 condoms, and 90 000 lubricants to people living with HIV and their families in Greater Santo Domingo, Puerto Plata, and San Cristóbal provinces.

Technical support was also provided to the Ministry of Public Health and partners to update the national nutrition counselling guidelines; and to generate evidence on nutrition and food security among people affected or living with HIV. A qualitative study revealed a lack of knowledge on nutrition and food security among this group and health care providers. It also showed a lack of information and education materials on food and nutrition value and healthy diets among people living with or affected by HIV, and wider communities. The study also revealed the absence of a nutrition specialist at Comprehensive Care Service units to provide basic nutritional counselling services.

Furthermore, the Joint Team provided nutritious food baskets to 1800 nutritionally vulnerable households during the COVID-19 pandemic—reaching a total of 8880 people, including people living with HIV, children aged five years and under, adolescents, pregnant women, elderly people, transgender persons, and migrants. The Joint Team continued advocating for more multilateral collaboration and resources to scale up nutrition and food support programmes needed to meet the high demand among vulnerable populations.

Technical support was provided for the development and roll out of information, education, and communication (IEC) strategy on HIV and COVID-19 prevention and management targeting people living with HIV. The initiative reached 8568 people improving their understanding of COVID-19 and HIV related policies, programmes, and services. A total of 4382 pieces of personal protective equipment (PPE) were distributed to ensure the safety of key and vulnerable populations, including men, women and pregnant women living with HIV and people who use drugs. Hygiene kits comprising sanitary napkins, nursing pads, disinfectant soaps, and condoms were distributed to 995 pregnant women, including 145 who were living with HIV. Additional 437 kits were delivered for people living with HIV, sex workers, and people living with HIV from the lesbian, gay, bisexual, transgender, and intersex (LGBTI) community who participated in the second rapid survey on the needs of people living with HIV during the COVID-19 pandemic.

ELIMINATION OF MOTHER-TO-CHILD TRANSMISSION OF HIV AND CONGENITAL SYPHILIS

The 2020-2021 Sentinel Surveillance Survey, which was supported by the Joint Team showed that 0.69% of the pregnant women in the Dominican Republic were living with HIV. Additionally, the Ministry of Health and the National Health Service were assisted in conducting operational research on the service route that pregnant women follow in hospitals starting from their first pre-natal consultation, in 20 Comprehensive Care Service hospitals. Results of this survey indicated that most pregnant women left the hospital at their first visit without receiving any HIV test, or that they experienced a delay between testing and starting treatment. Based on these findings, the care route for first-time pregnant woman was revised to ensure timely case detection and treatment initiation.

Only 77 of the 1800 public health centres in the country offer HIV services. To bridge this gap, the Joint Team supported the integration of prevention of mother-to-child transmission of HIV (PMTCT) and congenital syphilis into regular obstetrics services in five hospitals, 55 primary health care facilities, and six adolescent health units in Higuey, La Romana and Santo Domingo provinces. A total of 70 healthcare workers providing HIV services in the 55 primary healthcare facilities and 238 healthcare workers working on PMTCT in the five maternity hospitals were trained in rapid HIV testing service delivery.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

The Joint Team provided substantial support to the Ministry of Public Health for the integration of PrEP in HIV prevention services across the country. This included development of PrEP guidelines, provision of training materials for healthcare professionals, and awareness raising and information materials. In 2020, PrEP was offered to 1360 people from key population groups in six health service centres—representing a 50% increase by end of 2021 in the number of centres providing PrEP services.

In collaboration with the Ministry of Public Health, the national strategy for the prevention of HIV, STIs, and hepatitis for people who use drugs was developed to improve access to these services and reduce their risk to new infections. The strategy also seeks to establish effective linkages between these combination prevention and mental health services, including for drug use disorders. A total of 107 healthcare professionals were also trained on harm reduction, with focus on improving HIV prevention, care, and treatment services among people who use drugs.

Besides, the CONAVIHSIDA was supported to conduct the first behavioural surveillance survey among people in closed settings, strengthening evidence-based programming for this population group.

The Joint Team made significant contributions to scaling up sexual and reproductive health (SRH) and HIV prevention programmes tailored to address the needs of adolescent and young people. These included expansion of the Special Unit for the Promotion of Contraceptives (UEPA) in 66 First-Level Care Centres aimed at strengthening the provision of SHR services; development and implementation of an online supervision tool to monitor the quality of adolescent health care services at provincial level; and designing a comprehensive training programme on adolescent health for healthcare workers, in collaboration with the Ministry of Public Health, and the Autonomous university.

GENDER INEQUALITY AND GENDER-BASED VIOLENCE

In partnership with the Comprehensive Care Unit for Intrafamily Gender Violence and Sexual Crimes (UAIVGIDS), the Joint Team rolled out a national assessment on the implementation of post-exposure prophylaxis (PEP) in health centres programmes, with emphasis on services among survivors of sexual violence. Results highlighted the low integration of services and the lack of awareness of care protocols including PEP among health personnel who attend to survivors of sexual violence. Another study rolled out by the Joint Team on HIV and gender reported that 53.6% of the surveyed women who were married or in a union had been the object of various types of economic, emotional, physical, or sexual violence by their current or last sentimental partner.

The Office for Gender Equality at the Ministry of Public Health was supported to develop training workshops to improve the capacity of 72 healthcare professionals in the clinical management of survivors of gender-based violence (GBV) through an intercultural approach and a focus on Afro-descendant women in the provinces of Pedernales and Samaná, and in Santo Domingo. Technical assistance was also provided to the Office for Gender Equality for the reactivation of the GVB Committee to strengthen multisectoral coordination and the quality of existing physical and psychological services for survivors of violence—two committees are currently operating in two provinces.

Technical support was provided to networks of the LGBTI community and sex workers to raise awareness and address the human rights barriers faced by people living with HIV and key populations during the Pride Parade annual event, Santo Domingo OutFest—an international LGBTI film festival, and the international day for the elimination of violence against women. IEC materials, including infographics on violence and COVID-19 pandemic were produced and distributed to various stakeholders to support efforts promoting health and prevention of all forms of GBV. These included 1000 posters targeting healthcare personnel, 2000 posters and 5000 factsheets tailored for survivors of violence and communities, and 1000 factsheets for decision makers. The Joint Team also supported the development and implementation of a communication strategy aimed at reducing violence during the COVID-19 pandemic reaching an estimated 3800 people across the country.

HUMAN RIGHTS, STIGMA, AND DISCRIMINATION

Support was provided for the development of a proposal to amend the 1988 Law 50-88 on drugs and controlled substances to use a public health approach for the delivery of care and treatment services among people who use drugs. The proposal was presented to the Work Committee convened by the National Drug Council to discuss and incorporate inputs on the draft law. Additionally, 107 psychology nurses, social workers and psychiatry professionals were trained on the delivery of quality harm reduction services among people who use drugs.

The Joint Team provided technical assistance to the Management Committee of '*Quiero una ley contra la discriminación*' (I want an anti-discrimination law), a campaign to raise public awareness among communities, and members of the Permanent Commission on Human Rights and Congress and coordinate advocacy for the approval of the General Law of Equality and Non-Discrimination, which includes discrimination against people living with HIV and key populations.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team contributed towards the United Nations Sustainable Development Goals (SDG) 3 by strengthening the country's health systems and scaling up integration and availability of HIV and SRH services. Further contributing to SDG 3, the Joint Team also strengthened HIV prevention and treatment services for people who use addictive substances, including narcotics and alcohol, using a public health approach centred on human rights and gender.

Under SDG 3, efforts were made to boost investment and efficiency for HIV response among vulnerable and key populations through resource mobilization, programme prioritization, and strengthening of the supply chain to respond to arising challenges. These efforts were also linked to attaining gender equality (SDG 5), through training of officials and public policy makers, strengthening multi-sectoral coordination, and mobilizing communities for the elimination of sexual and gender-based violence.

In 2020-2021, the Joint Team contributed to implementation of various initiatives that sought to achieve food security, improve nutrition, and promote sustainable agriculture, such as the integrated urban garden and peer nutritional counselling programme in collaboration with national and international partners, in line with SDGs 2 and 17.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic disrupted implementation of planned activities, such as community engagement, training, and face-to-face consultations needed to move the national HIV response forward. While efforts were made to promote the continuity of health services, pandemic-related lockdown and social restriction measures affected SRH and HIV services, including demand for and access to condoms and contraceptives. Additionally, limited funding hampered the nationwide scale-up of the UEPA and HIV prevention programmes at a national level.

Coverage of PrEP services remains low and there is an urgent need to expand these services across the country to reduce the risk of new HIV infections among vulnerable and key populations. The COVID-19 pandemic has also increased sexual and GBV against women, and there is a need to further build capacity of health professionals in delivering PEP services. Capacity building is also needed to ensure implementation of the new guidelines for provision of care among people who use drugs.

The articulation of collective actions led by the Joint Team, such as those implemented as part of the emergency response to COVID-19, offered the opportunity to increase knowledge and offer a comprehensive and quality response to address two major epidemics—COVID-19 and HIV. These actions were taken as a best practice in the health area and allowed the Joint Team and partners to increase their capacity to respond to health emergencies.

Between 2019 and 2020, the number of antenatal consultations declined by more than 20%, meaning a high number of pregnant women did not attend their antenatal care visit, including HIV tests or treatments services. Besides, while the Dominican Republic has one of the highest teen pregnancies in the world—an estimated 20.5% of adolescent girls and young women aged 15-19 became pregnant in 2019 (ENHOGAR, 2019)—there is a lack of differentiated services to attend to their specific needs.

At 10.49%, the rate of non-seroconversion among HIV-exposed children in the country is low and remained the same since 2016. This has been attributed to the low availability of paediatric ART and a lack of integration between prevention of vertical transmission of HIV and congenital syphilis, and other maternal and child health services.

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