On July 30, 2008 the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) was implemented to help save the lives of those suffering from HIV/AIDS around the world. This historic commitment is the largest by any nation to combat a single disease internationally, and PEPFAR investments also help alleviate suffering from other diseases across the global health spectrum. PEPFAR is driven by a shared responsibility among donor and partner nations and others to make smart investments to save lives.

The Caribbean Regional PEPFAR Program works across 12 countries and supports two regional organizations to address HIV and AIDS in the region. Countries include Antigua, Barbados, Jamaica, Suriname, Trinidad and Tobago, and the six member countries of the Organization of Eastern Caribbean States. There are also six U.S. agencies cooperating in the implementation of the program. These include USAID, the Centers for Disease Control & Prevention (CDC), Department of State (DOS), Peace Corps, Health Resources and Services Administration (HRSA), and the Department of Defense (DOD).

Creating an AIDS-free generation is a shared responsibility. It requires commitment from partner countries, coupled with support from donors, civil society, people living with HIV, faith-based organizations, the private sector, foundations, and multilateral institutions.

We stand at a tipping point in the fight against HIV/AIDS, and working together, we can realize our historic opportunity to bring that fight to an end.

Barack Obama
U.S. President

Message by the U.S. Ambassador to Jamaica, Pamela E. Bridgewater

Building partnerships across many sectors is essential to achieving an AIDS-free generation.

PEPFAR is the largest effort by any nation to combat a single disease, and as the U.S. Ambassador to Jamaica I am honored to head this meaningful, life-changing prevention program in Jamaica. Since its inception as an emergency response to HIV in low-resource settings, PEPFAR has made significant strides in reducing the prevalence of this disease, and is now focused on advancing the sustainability of the response. With U.S. leadership, the global community has made groundbreaking progress in saving lives through HIV prevention, treatment, and care services.

In the Caribbean region, and specifically here in Jamaica, the PEPFAR program does not provide treatment. Instead, we focus on HIV prevention and education efforts, targeting marginalized and vulnerable populations engaged in high-risk behaviors. This was a strategic decision to help maximize our impact in reducing the number of new HIV infections through a select number of evidence-based HIV interventions. The most cost-effective way to combat this horrible disease is to ensure infections never occur. Therefore, we must continue our efforts to educate and encourage best practices to limit the transmission of the disease. We cannot fight this battle alone and strengthening our partnerships will yield positive results in the fight against HIV/AIDS. PEPFAR will continue to work in partnership with the Government of Jamaica and the people of Jamaica to support leadership in responding to this epidemic. We must work together, we must build on our successes to save even more lives and meet our shared responsibilities in order to achieve the goal of an AIDS-free generation.

The National HIV/STI Program

Jamaica’s HIV landscape features both a generalized and concentrated epidemic. This accounts for a low in HIV prevalence among the adult population of 1.7% to a high among men who have sex with men (MSM) of 32%. Currently, there is an estimated 32,000 persons living with HIV (PLHIV), half of which are unaware of their status. Since January 1982 and December 2011, twenty nine thousand and sixty nine (29,069) cases of HIV were reported to the Ministry of Health (Epidemic Update, 2011).

Currently, the National HIV/STI Program (NHP) is largely funded by a US$40 million grant from the Global Fund supported project 2008 – 2013. Expansion of programs for key populations such as Sex Workers (SW), Men who have Sex with Men (MSM) and Out of School Youth (OSY) would not have been possible without additional funding through a USAID Grant and a World Bank Loan.

Through this additional support from USAID, the NHP has broadened the reach of its Prevention programs through the mobile units and to key populations.

Mobile Units

In 2009, the National HIV/STI Program (NHP), through the global fund, purchased two mobile units. Since then, USAID has been supporting the payment of outreach officers who conduct testing in these buses. As a result of this, these two mobile units conduct an average of 1,400 rapid HIV tests per month in the South East Regional Health Authority (SERHA).

Sex Workers

The strategy for preventing the spread of HIV and other STIs within the sex work industry includes an all-encompassing approach that addresses the social, behavioural and economic factors driving the epidemic among sex workers. Our efforts target the clients, patrons and other workers within the sex work environment in order to stem the spread of infections among this group. This includes strengthening data collection and use, creating an enabling environment which addresses legislative and policy issues, improved quality and delivery of treatment care and support services, reduced social vulnerability and a comprehensive package of behaviour change communication based prevention interventions.

Out of School Youth

The Out of School Youth (OSY) program aims to enhance the risk reduction skills of condom negotiation and use. This program primarily includes HIV testing, condom access points, literacy and skills building, training and a mentorship program.
The Ambassador’s PEPFAR Program

The Public Affairs Section (PAS) of the U.S. Embassy locally administers the U.S. Ambassador’s PEPFAR Small Grants Program. It was formerly called the Ambassador’s HIV Prevention Program. Each year in March, PAS sends out a “Call for Proposals” inviting interested applicants to seek funding from the program.

This program has no allocations for a clinical component. However, it is designed to fund projects that focus on reducing stigma and discrimination. This grant is also intended to increase public awareness and provide education and assistance to existing or new community activities to combat HIV/AIDS.

The U.S. Ambassador leads the selection process for the review of proposals submitted for the U.S. Ambassador’s PEPFAR Small Grants Program. Such grants are seen as an integral part of the U.S. government strategy to support community and non-governmental based initiatives. This stance is to increase community awareness of HIV/AIDS and advocate for action at the individual, community and local level. To this end, the funds issued to successful recipients create opportunities to promote discussion and action to combat this pandemic and reduce stigma and discrimination against people living with HIV/AIDS.

Since 2011, eleven grantees have benefited from the Ambassador’s PEPFAR Small Grant Program, totaling US One hundred six thousand, five hundred & five dollars ($106,050.00). PEPFAR funding for these recipients has supported the training of at least 1,000 HIV/AIDS community level advocates through faith-based organizations, NGOs, CBOs and quasi-government agencies.

Peace Corps Jamaica...On a Mission to Zero

In 1961, United States President John F. Kennedy established the Peace Corps, an independent U.S. Government Agency, to promote world peace and friendship through the service of American volunteers abroad. Through the PEPFAR Program, Peace Corps recruits Volunteers to build human, technical and institutional capacity to effectively develop, implement, scale-up and sustain comprehensive “combinaton” HIV prevention strategies, that help address a broad range of factors contributing to HIV transmission.

Young Women Empowerment Convention

The Volunteer Activities Support and Training (VAST) grant is a PEPFAR funded grant administered by the Peace Corps and is available to volunteers working with community partners to address issues related to HIV. Jamaica’s first VAST grant supported the Young Women Empowerment Convention and was completed in June, 2012. The project worked closely with seven organisations including the Ministry of Education and the YWCA School Leaders Institute to assist 135 young women between the ages of 15 and 24 whose social and economic status make them vulnerable to HIV.

Drawing on the knowledge of local experts who volunteered their time, six workshops were held on a variety of topics including HIV and other STIs, myths about early sexual activities, negative health behaviors including early initiation to sex and unprotected sex, relationships, abstinence strategies, gender issues, social justice, rights, values, and the developmental needs of pregnant and parenting adolescents.

The Convention proved successful and the participants left with valuable knowledge and insights to help them avoid HIV infection as they negotiate the challenges of adulthood.

A Big Man Ting - A Personal Story by PCV Ali Nicklas, 2013

The men were leading by example and showing their sons that condom use is in fact “a big man ting”.

I was surprised to see how engaged the men were. They were all willing to do condom demonstrations. They asked questions about Sexual Transmitted Infections (STIs) and discussed the topic of HIV in order to better understand transmission and prevention. I was so amazed to see men in their 20’s, 30’s, and 40’s respectfully discussing such a taboo subject. The men were laughing and having fun. The game had actually transformed our HIV intervention into something that was fun and interactive.

What also contributed to the success of this intervention was the interest shown by their adolescent sons. The boys watched their fathers demonstrate correct condom use on a wooden model. The men were leading by example and showing their sons that condom use is in fact “a big man ting”. Simple things like this make our days in the community a success. Sometimes it only takes the right tools to cross the bridge.
The U.S. Department of Defense HIV Prevention Program (DHAPP) supported through PEPFAR plays a critical role in assisting partner militaries in the fight against HIV/AIDS. The global HIV/AIDS epidemic negatively affects many militaries worldwide by reducing military readiness and force protection, limiting deployments, causing physical and emotional decline in infected troops and their families, and impeding peacekeeping activities.

DHAPP works with two implementing partners: Population Services International/Caribbean (PSI/C) and Charles Drew University (CDU), to deliver peer education training & behavior change communication (BCC) messages, HIV voluntary testing and counseling services, support of HIV surveillance and risk behavior surveys and strengthen the health system for partner militaries across the Caribbean, including the Jamaica Defence Force.

The overall goal of this project is to focus on the drivers of the epidemic specific to the JDF and address knowledge, attitudes and practices related to HIV prevention. Since 2009, DHAPP has implemented an evidence-based, culturally-appropriate, military-specific HIV prevention program for the Jamaica Defence Force. While DHAPP focuses on HIV prevention within the military, the JDF educators also participate in civilian-driven activities, which enhance their skills and conveys the JDF’s commitment to serving and building within their communities. Towards this end, the health system strengthening, DHAPP will be deploying a Military Electronic Health Information Network (MeHIN) for the JDF, the first of its kind in Jamaica. The JDF will receive 25 portable net books and desktops to enable medical personnel access to electronic health information resources, data, communication, training and learning tools all aimed at strengthening the delivery of health services to military staff including HIV and STI services.

USAID is providing technical assistance and financial support to a number of community-based organizations implementing HIV prevention programs targeting key populations. The Healthy Policy Project (HPP) provides training and support in the area of behavior change communication to help improve the quality and range of services being offered, while World Learning provides grants and organizational development assistance to local partners to help strengthen and expand existing HIV prevention efforts. USAID is also working to address stigma, gender norms, and sexual and gender-based violence in relation to HIV prevention.

The Health Policy Project

To accomplish these goals, HPP has established partnerships with the government, academia, and civil society.

Stigma and Discrimination

HIV-related stigma and discrimination together threaten access to care and adherence to the national HIV/AIDS response. Fear of discrimination often prevents people from getting tested, seeking treatment or from admitting their health status publicly. Since 2011, HPP has worked closely with the Persons Living with HIV (PLHIV) community in Jamaica. The program worked closely with the Unit for Greater Involvement of Persons with HIV and AIDS (GI-PHA) of the Enabling Environment of the NHP and partners from the JLP in the development of a curriculum on Positive Health, Dignity and Prevention (PHDP). HPP also trained young PLHIV leaders in working with partners in health services and in the private sector to implement the elements of PHDP and continues to build social capital of marginalized populations to effectively participate in policy discussions and implementation.

Gender Based Violence

“Gender Based Violence (GBV) is often, but not always, violence against women and girls. Transgendered and transsexual people, homosexual or bisexual people, and boys or men who do not conform to society’s gender expectations are often also the targets of gender-based violence.” (Women Won’t Wait, 2010) Against this background, HPP Jamaica via a sub-award to Woman Inc., proposed to improve the health and social services for gender-based violence. This would be achieved via a pilot to support increased integration of gender-based violence into the HIV/STI clinic via a screening and referral program. The site being proposed is in Kingston, and key partners include the Kingston & St. Andrew Health Department (MOH), the Civil Society for Key Populations and Referral Agencies.

The World Learning Caribbean Grant Sodcection and Management (CGSM) team issues and manages grants to local NGOs to improve organizational capacity and the quality of HIV prevention programs, and to expand interventions reaching vulnerable populations. NGOs targeting people living with HIV/AIDS and members of stigmatized or vulnerable groups (out of school youth, sex workers, and men that have sex with men (MSM)) are support- ed to offer individual counseling sessions, mentorship and skills training to improve employability opportunities. Other interventions include sessions on self-val- ued and worth, combating stigma and discrimination, career planning and job placement, decision making and conflict negotiation. Many are also offered voluntary counseling and testing (VCT) and are encouraged to know their HIV status. NGOs that receive project grants also support a number of HIV/AIDS advocacy activities including work to reduce stigma and discrim- ination, the creation and publication of oral testimonies of targeted populations and work with the media to monitor and improve the reporting on issues related to HIV and key populations. At the end of the first 12 months of implementation, a total of 1,878 sex workers and 2,601 MSMs were reached with individual and/ or small group level evidence-based HIV preventive interventions. During this pe- riod it was noted that the perceived level of involvement and commitment shown by staff of the NGOs was clearly linked to the impact of the interventions on the tar- get populations. This level of involvement combined with programs that did not focus only on HIV prevention but dealt with a variety of issues, resulted in beneficiaries being more likely to commit. In addition to the provision and management of grants, a number of institutional strengthening ini- tiatives are undertaken to improve the abil- ity of NGOs to offer high quality programs to populations most at risk for HIV/AIDS.

These activities include technical assis- tance, monitoring & coaching, and training for both NGO grantees and other PEP- FAR-funded NGOs.
The Centers for Disease Control & Prevention (CDC)

The CDC Caribbean Regional Office (CDC CRO) in contributing to the call for an AIDS-free generation has provided financial support to the government of Jamaica for the following programs:

Prevention of Mother to Child Transmission (PMTCT) Program

The government of Jamaica has endorsed the global initiative to eliminate new HIV infections among children by 2015. To help achieve this goal, CDC CRO, in 2011, funded the training of 301 health care practitioners in how to use a standard plan for prevention of mother to child transmission (PMTCT) of HIV and how to make clinical decisions for HIV positive pregnant women and infants exposed to, or infected with the virus.

Positive Health Dignity and Prevention (PHDP) Program

PHDP programs aim to improve and maintain the dignity of individuals living with HIV and to support and enhance individuals’ physical, mental, emotional and sexual health. The hiring of 4 regional psychologists in 2011 enabled the integration of PHDP strategies into HIV prevention, treatment and care programs in Jamaica. Twenty-eight support groups were formed island wide to help strengthen positive prevention behaviors among HIV positive adults and adolescents and meet the psychological and clinical needs of PLHIV.

Laboratory Strengthening

CDC Caribbean Regional Office has been working with the Government of Jamaica to strengthen its national laboratory network and laboratory services and systems. Towards this end CDC CRO has funded the employment of a Modernization Manager; provided technical and financial support for development of a laboratory strategic plan; and continues to provide assistance and expertise to help laboratories in Jamaica achieve international accreditation.

CDC CRO has also helped to strengthen laboratory services and systems by procuring laboratory equipment to ensure uninterrupted, reliable, and consistent testing and efficient patient treatment and care. Jamaica will be one of only 2 Caribbean countries offering HIV drug resistance testing.

The inception of the Caribbean Health Leadership Institute (CHLI) was made possible through funding from the CDC and through PEPFAR. To date, 154 health care leaders from 18 Caribbean countries, and representing five cohorts, have graduated from CHLI’s leadership training program. From these 154 trained individuals, 36 were from Jamaica.

UWI Department of Medicine, AIHA in First Western Twinning Partnership in Health

In November 2012, the Department of Medicine at the University of the West Indies, Mona, was chosen as the site for the first twinning partnership for training in the field of health to be established by the Washington D.C., based American International Health Alliance (AIHA) in the Western Hemisphere.

The partnership, between the UWI and the University of South Carolina School of Medicine, will see the design, development and launch of an infectious disease post graduate fellowship program at the UWI. It is being funded initially by the HRSA through PEPFAR and will include the Departments of Medicine, Child Health and Microbiology at UWI and the Division of Infectious Diseases at the University of South Carolina.

CHLI’s mandate is to develop a core of dedicated leaders who will positively transform HIV/AIDS programs in particular and the health of regional populations in general. The leadership training program focuses on the “personal and professional development” of participants thus allowing persons without degrees and other academic credits to benefit from the program.

April 2012 saw the achievement of a significant landmark at UWI when the CHART Regional Coordinating Unit (RCU) received a five-year grant worth USD 9M from the U.S.-based Health Resources and Services Administration (HRSA) under PEPFAR. HRSA, an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable. The grant to UWI-CHART, which is being called “CHART II”, takes the form of a cooperative agreement with HRSA and is the first direct award from HRSA to an academic institution outside of the USA.

Road Map to Building Resilience

Between 2003 and March 2012, the RCU and the training centers were sub-awardees of grants received by the International Training and Education Center on HIV (I-TECH), a consortium led by the University of Washington (UW) at Seattle. The focus in the first few years (CHART I) was on training for prevention, care and treatment related to HIV, other sexually transmitted infections, tuberculosis and other complications of HIV infection.

The emphasis was on increasing knowledge and skills and reinforcing professional attitudes among frontline staff who needed to respond immediately to the emergency of HIV and related conditions. In 2008, PAN-CAP named the CHART RCU as the lead agency for coordinating capacity building in the region.

Under the new CHART II program, the scope of work will expand to include systematic health workforce development in participating countries utilizing a Road Map developed by the Pan-American Health Organisation (PAHO) and this will not be limited to HIV. The plan includes capturing the results of health sector needs assessments and providing technical assistance to participating countries and institutions as they conduct training, recruitment, appropriate placement and retention of personnel.

The aim is to work with Governments, PAHO, the Caribbean Public Health Agency and other regional and international agencies to build and retain a larger human resource pool as a key component of a broader approach to the strengthening of Caribbean health systems.

In 2012 the Brainwaite Resource Room, was established, a facility located at the CHART Jamaica office for students and Health Care professionals in need of information relating to care and treatment and support of HIV/AIDS; STI Management. There are also plans to conduct distance learning courses from the facility.