

## STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) began working with Haiti's Ministry of Public Health and Population (MSPP) in 2002 to address the growing HIV and AIDS epidemic. Initially focused on providing prevention and treatment services, CDC's HIV work in Haiti has grown substantially to include laboratory systems strengthening, health management information systems, workforce development and capacity building, and the integration of HIV and tuberculosis (TB) clinical services.

In 2017, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) included Haiti in its ambitious plan to achieve epidemic control of HIV in 13 priority, high-burden countries by 2020. To reach this goal, CDC and its partners are using data-driven strategies to accelerate efforts to identify positive cases, increase and retain the number of people living with HIV (PLHIV) enrolled on antiretroviral treatment (ART), and improve viral suppression through expanded viral load (VL) testing.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**Surveillance and Health Information Systems:** CDC has increased access to strategic information by supporting the development of integrated health management information systems, including an electronic medical records (EMR) system, a national case-based surveillance system, a national monitoring and evaluation platform, and fingerprint-based biometric coding linked with EMR and the national HIV database.

**HIV Case Finding:** CDC is intensifying efforts to identify positive cases by scaling up targeted testing strategies, including index testing (which involves identifying current and former partners and household members of PLHIV). In Fiscal Year (FY) 2018, CDC rolled out index testing to all health facilities within its network, identifying and linking nearly 1,500 new cases to care through index testing.

**Prevention of Mother-to-Child Transmission (PMTCT):** CDC supports efforts to improve PMTCT outcomes by enhancing perinatal surveillance through improved case reporting, case management, and linkage to care.

**Key Populations (KP):** CDC and partners are reaching KP with comprehensive HIV services by deploying mobile clinics to KP "hotspots" and utilizing a network of peer educators and medical personnel to conduct HIV screening sessions.

**Enrolling Patients in Care:** CDC supported MSPP to implement the World Health Organization's (WHO's) Test and Start strategy countrywide in 2016, ensuring that all patients with an HIV-positive diagnosis are immediately eligible for ART. Haiti was one of the first countries in the region to successfully roll out Test and Start, resulting in a substantial increase in the number of PLHIV enrolled in treatment. At the end of FY 2018, over 100,000 PLHIV were active on treatment within the PEPFAR Haiti network.

**Treatment Retention:** CDC has implemented several key strategies to promote patient retention in care including multi-month dispensing of ART and community drug distribution. CDC also developed a mobile patient tracking tool for identifying patients lost to follow-up.

**Laboratory Capacity:** CDC Haiti has worked with the National Public Health Laboratory (LNSP) to develop multiple HIV-related testing capacities including Early Infant Diagnosis of HIV and VL testing for treatment monitoring. CDC and partners supported providers to implement VL testing guidelines and to scale-up testing across sites. CDC also helped to re-launch the National Specimen Referral Network to improve transportation and processing of VL samples. As a result of these efforts, nearly 80,000 patients on ART received a VL test and results in FY 2018 – up from 12,703 patients in FY 2016. CDC is providing technical assistance in TB diagnostic practices and procedures, as well as in the renovation of Haiti's TB laboratory in order to make it operational and allow it to meet international norms for a TB Containment Lab.

**Quality Assurance:** CDC is working to improve the quality of HIV testing services by instituting a Rapid Test Continuous Quality Improvement (RT-CQI) program. The RT-CQI is a comprehensive package of quality assurance and improvement activities that supports and promotes accurate rapid HIV testing.

**TB/HIV:** CDC is scaling up the provision of ART to TB-HIV co-infected patients. In FY 2018, nearly 100 percent of TB patients received an HIV test and 100 percent of TB-HIV patients received ART.

## Key Country Leadership

President:  
Jovenel Moïse

Minister of Health:  
Marie Gréta Roy Clement

U.S. Ambassador:  
Michele J. Sison

CDC/DGHT Director:  
Yoran Grant-Greene

**Country Quick Facts**  
([worldbank.org/en/where-we-work](http://worldbank.org/en/where-we-work))

Per Capita GNI:  
\$800 (2018)

Population (million):  
11.12 (2018)

Under 5 Mortality:  
72/1,000 live births (2017)

Life Expectancy:  
64 years (2017)

**Global HIV/AIDS Epidemic**  
([aidsinfo.unaids.org](http://aidsinfo.unaids.org))

Estimated HIV Prevalence  
(Ages 15-49): 2% (2018)

Estimated AIDS Deaths  
(Age ≥15): 2,200 (2018)

Estimated Orphans Due to  
AIDS: 73,000 (2018)

Reported Number Receiving  
Antiretroviral Therapy (ART)  
(Age ≥15): 88,082 (2018)

**Global Tuberculosis  
(TB) Epidemic**  
([who.int/tb/country/data/profiles/en](http://who.int/tb/country/data/profiles/en))

Estimated TB Incidence:  
181/100,000 population (2017)

TB Patients With Known HIV-  
Status Who Are HIV-Positive:  
16% (2017)

TB Treatment Success Rate:  
82% (2016)

TB Mortality:  
12/100,000 population (2017)

**DGHT Country Staff: 65.5**

Locally Employed Staff: 59.5  
Direct Hires: 6  
Fellows & Contactors: 0

**Our success is built on the backbone of science and strong partnerships.**

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