

## **Country Situation Analysis**

The island of Anguilla is the northernmost of the Leeward Islands in the Eastern Caribbean. Anguilla is 26km (16 miles) long, with 91 sq. km (35 sq. miles) square miles, in land area. The island has a population of approximately 14,254<sup>1</sup> people, most of who are of African descent.

### **The Tourism Industry is the main source of Income.**

In the early 1980's Anguilla became aware of AIDS as a potential threat to humanity. As in most other parts of the world the response to HIV and AIDS was low. People thought it would go away. Twenty five (25) years later, HIV & AIDS have taken millions of lives, causing untold grief across the world.

Presently, more than forty million people around the world are living with HIV the virus that causes AIDS.

By December 31<sup>st</sup> 2007, 35 HIV/AIDS cases were recorded on the island. Due to under reporting Anguilla does not have a true sense of the real status of HIV or AIDS on the island. This is due to a perceived lack of confidentiality when tested. Residents seek most of their health care services overseas, in places such as St Martin, Puerto Rico etc. or in the private sector. Generally, as in most Caribbean islands the main mode of HIV transmission is heterosexual sex.

Every person living with HIV/AIDS in Anguilla, who pass through the health system is offered free antiretroviral treatment at a cost to the Government of US\$236 per person, with current provision being for 10 persons. Currently only 5 persons access this treatment. To date, no one has been denied treatment, care, and support, information or prevention services. The National programme ensures that persons living with HIV/AIDS are provided with the services they need. These include treatment, health care, food and counseling. CD4 count and Viral load testing are not provided on the island, but the Government of Anguilla provides for the testing to be done on the neighbouring island of French St. Martin. These tests are paid for by the Government of Anguilla. Additionally, the Anti-Retroviral treatment is provided by the Clinton Foundation. In addition the Government has put a Care & Treatment Coordinator in place to take care of the health needs of PLWHA's in a very confidential manner. In spite of the available services, residents are hesitant in using the services provided. This hesitancy is due in part to fear of disclosure, and fear of Stigma and Discrimination, associated with the virus.

### **The National STI HIV & AIDS Programme**

The National STI HIV & AIDS Programme was formalized in 1989. The goal of the programme is to facilitate and sustain an effective expanded response to HIV & AIDS through the stimulation and coordination of activities implemented by an alliance of a wide cross section of the community, private sector and civil society.

---

<sup>1</sup> Estimate for 2006

**Mission Statement:**

“To equip the Government and the people of Anguilla with information and services designed to reduce the transmission of HIV in Anguilla through the promotion of behaviour change and the development of treatment care and support services for persons infected and affected by HIV”

**Main areas of focus:**

- Health Promotion for Behaviour Change
- Prevention of Mother to Child Transmission
- Ensuring the safety of blood supplies
- Voluntary Counseling and Testing (VCT)
- Advocacy, Partnerships & Policy
- Treatment Care & support

Great emphasis within the programme is placed on Prevention. However the lack of evidence based data makes it difficult to assess the exact need for and coverage of existing HIV prevention programmes.

**Government HIV and AIDS policies**

The National programme has been soliciting support to put a National HIV/AIDS policy in place. To date two policies have been developed. These are the VCT and PMTCT policies. Support has been requested from PAHO and ILO for the development of a workplace policy. This is air marked to be accomplished this year.

**Strategic Plan**

With the assistance of CAREC, a strategic plan was developed in 2000 and is currently being reviewed. The priority areas are as follows; Health promotion for Behaviour Change and Empowerment; Treatment Care and Support; Advocacy and Human Rights. The reviewed plan has expanded the areas of focus and includes five priority areas. There are:

- Prevention,
- Care Treatment and Support,
- Advocacy,
- Human Rights,
- Stigma Reduction,
- HIV surveillance,
- Research, Programme Management,
- Monitoring and Evaluation.