

## STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) Dominican Republic (DR), through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), has three main goals related to reducing HIV and tuberculosis (TB) mortality and disease transmission: 1) increase the detection, treatment, and retention of people living with HIV (PLHIV); 2) improve the quality of HIV and TB care; and 3) increase access to, and uptake of HIV testing and counseling and other evidence-based interventions among key and priority populations (KP/PP). This is consistent with the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95-95-95 targets which aim to reach epidemic control by 2030 by: 95 percent of all PLHIV knowing their HIV status; 95 percent of all people with diagnosed HIV infection receiving sustained antiretroviral therapy (ART); and 95 percent of all people receiving ART having viral suppression. CDC's key strategies include supporting the Government of the DR (GoDR) in the transition to Test and Start for ART initiation; implementing community-based service delivery models that contribute to closing the treatment gap for all populations, particularly hard-to-reach priority populations (PP) such as migrants; and addressing system-wide challenges in the national HIV response, such as viral load (VL) monitoring, health information management, and workforce capacity development, with a focus on upskilling laboratory staff.

Through PEPFAR's equity, sustainability, systems strengthening/security, partnership, and science pillars, CDC's cornerstone approaches in the DR include: pairing local non-governmental organizations with public sector health facilities to foster exchanges that lead to better service quality and performance in both sectors; implementing diverse HIV testing and counseling modalities, including index testing, which involves reaching current and former partners and household members of PLHIV; and developing differentiated models of HIV treatment, notably through mobile clinics as part of community ART distribution efforts. CDC-DR also ensures that priority populations receive comprehensive services in a non-stigmatizing environment through Community Led Monitoring initiatives conducted jointly with UNAIDS and the active participation of civil society and the community.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

CDC-DR implements PEPFAR activities in 18 facilities and two mobile clinics in six high HIV burden provinces.

**Epidemiology and Surveillance:** CDC supports the Ministry of Health and National Health Service (SNS in Spanish) in monitoring its HIV/AIDS epidemic by assisting in the development and implementation of key Health Management Information Systems (HMIS), including the National HIV Patient Monitoring System (HPMS) and the National TB Patient Monitoring System. CDC also supported the development of the first HIV testing registry (SIREN-P in Spanish). Both systems collect key data and information that feed into real-time analysis of the HIV cascade.

**Laboratory Systems:** CDC works to strengthen the quality of laboratory services by providing accurate and reliable CD4 count and VL testing, as well as scale-up VL testing among all patients on ART. Through technical guidance and training, CDC supports the Ministry of Health in complying with International Health Regulations, establishing a robust public health laboratory network, and improving the role of laboratories in surveillance across diseases, building upon PEPFAR's platform. Through the COVID-19 supplement, CDC also supported the acquisition of two new PCR machines.

**TB/HIV:** CDC assists clinics in accurately collecting and reporting TB and TB/HIV co-infection data and provides technical assistance for TB preventive treatment implementation, including the roll-out of short-course TB preventive treatment (3HP).

### CDC Accomplishments:

- Pivoted to focus on priority populations most affected by HIV, including migrants. Applied same-day initiation strategies at the 18 sites that CDC supports.
- Executed a biometric patient system to monitor patients on ART across HIV care sites.
- Developed and implemented an electronic HIV testing register (SIREN-P).
- Implemented the first pre-exposure prophylaxis program for men who have sex with men and female sex workers in the country and expanded across PEPFAR provinces.
- Initiated community-led monitoring to heighten community engagement and reach.
- Trained more than 747 field epidemiologists at the basic and intermediate levels.

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

## Key Country Leadership

President:  
Luis Abinader

Minister of Health:  
Daniel Rivera Reyes

Chargé d'Affaires:  
Isiah Parnell

CDC/DGHT Director:  
Rachel Albalak

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

Per Capita GNI:  
\$9,050 (2022)

Population (millions):  
11.22 (2022)

Under 5 Mortality:  
33/1,000 live births (2021)

Life Expectancy:  
72.6 years (2021)

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

Estimated HIV Prevalence  
(Ages 15-49): 1% (2022)

Estimated AIDS Deaths  
(Age ≥15): 1,300 (2022)

Estimated Orphans  
Due to AIDS: 32,000 (2022)

Reported Number Receiving  
Antiretroviral Therapy (ART)  
(Age ≥15): 49,231 (2022)

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

Estimated TB Incidence:  
45/100,000 population (2021)

TB Patients with Known HIV-  
Status who are HIV-Positive:  
24% (2021)

TB Treatment Success Rate:  
84% (2020)

## DGHT Country Staff: 16

Locally Employed Staff: 13  
Direct Hires: 3

