

2014 Update

Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas

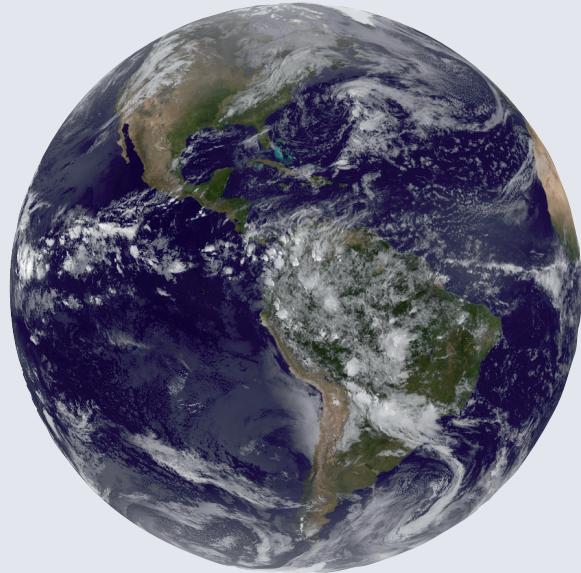


Pan American
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2014 Update

Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas

Unit of HIV, Hepatitis, Tuberculosis, and Sexually Transmitted Diseases.

Washington, D.C.

2014



Pan American
Health
Organization



REGIONAL OFFICE FOR THE Americas

unicef The logo for UNICEF, consisting of the word "unicef" in a lowercase sans-serif font next to a small globe icon.

Also published in Spanish (2014) with the title:
Eliminación de la transmisión materno-infantil del VIH y la sífilis en las Américas: actualización del 2014
ISBN 978-92-75-318-52-2

PAHO HQ Library Cataloguing-in-Publication Data

Pan American Health Organization.

2014 Update: Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas.

Washington, DC : PAHO, 2014.

1. HIV Infections – transmission. 2. HIV Infections – prevention & control. 3. Syphilis – transmission.
4. Syphilis – prevention & control. 5. Pregnancy Complications, Infectious. 6. Infectious Disease
Transmission, Vertical. I. Title. II. Alonso González, Mónica (ed.). III. Spaulding, Alicen (ed.).

ISBN 978-92-75-11852-8

(NLM Classification: WQ 256)

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PAHO and UNICEF have joined efforts in promoting and supporting the elimination of MTCT of HIV and syphilis in Latin America and the Caribbean.

Acronyms

3TC: Lamivudine
ANC: antenatal care
ARV: antiretrovirals
ART: antiretroviral therapy
AZT: Zidovudine
EFV: Efavirenz
FTC: Emtricitabine
HIV: human immunodeficiency virus
LAC: Latin America and the Caribbean
MTCT: mother-to-child transmission
NVP: Nevirapine
SRH: sexual and reproductive health
PAHO: Pan American Health Organization
PMTCT: prevention of mother-to-child transmission
TDF: Tenofovir
UK: United Kingdom
US: United States of America
WHO: World Health Organization

1. Executive Summary

Countries in the Americas committed to eliminating mother-to-child transmission (MTCT) of HIV and syphilis by 2015 in resolution CD 50.R12 [1]. The Pan American Health Organization (PAHO) monitors country and regional progress towards elimination and the current report summarizes progress towards elimination goals between 2010 and 2013. Data on sexual and reproductive health, policies and provision of services, and outcomes regarding pediatric HIV and congenital syphilis cases in the Americas are provided in this report. The analysis presented may assist policymakers and health care workers in their efforts to achieve elimination of MTCT of HIV and syphilis in the Americas.

Regarding sexual and reproductive health and primary prevention of HIV and syphilis, slight improvements have been made in increasing contraceptive use and decreasing unmet need for family planning in the Americas over the last decade, yet unmet need remains high in some populations such as young women. Condom use among people ages 15-49 reporting more than one sexual partner has increased among both men and women, and initiation of sexual activity before age 15 has decreased over time in some countries while remaining high in others. The fertility rate among adolescents in the Americas has declined slightly over time but the percentage of adolescents who are pregnant or have children has

remained relatively unchanged despite significant commitments to prevent adolescent pregnancies in the Americas. Young people in the Americas have steadily improved their knowledge about HIV, but still less than half were able to correctly answer five basic questions about HIV and its transmission in recent surveys.

Access to antenatal services in the Americas is high: in 2013, 94% of pregnant women attended at least one antenatal (ANC) care visit with trained health personnel, but this regional figure may hide lower antenatal care coverage in a small number of countries and at subnational and local levels. In countries with less than 90% coverage of one or more ANC visit no substantial improvements have been reported in the past decade. While coverage of one ANC visit is high, fewer women are covered when considering more meaningful and comprehensive antenatal care using the proxy of four or more ANC visits by trained health personnel.

HIV testing and counseling among pregnant women in Latin America and the Caribbean (LAC) increased 18% from 2010 to 2013, with 74% of pregnant women in LAC receiving an HIV test in 2013. Access to antiretrovirals (ARV) also increased from 59% to 93% of HIV-positive pregnant women in LAC receiving ARVs for prevention of mother-to-child transmission (PMTCT) of HIV from 2010 to 2013. The provision of these HIV services led the MTCT rate of HIV in LAC

to decrease from an estimated 18% [14%-25%] in 2010 to an estimated 5% [2%-23%] in 2013. Nine countries and territories in the Americas report data compatible with meeting MTCT of HIV elimination goals in 2013, four more than in 2010. Although only 60% of countries in the Americas have implemented perinatal surveillance systems for monitoring HIV-exposed infants, all countries and territories have progressed in prevention of MTCT of HIV and availability of information for monitoring this progress has also increased over time.

Syphilis testing among pregnant women in LAC remains stable at 80% in 2013, while treatment for syphilis-positive pregnant women in LAC remains unreported by most countries and territories; it is between 13% and 100% among those reporting. Fifteen countries and territories in the Americas report data compatible with meeting the elimination of congenital syphilis goals in 2013, four more than in 2010. Seven countries and territories in the Americas report data compatible with dual elimination of MTCT of HIV and syphilis. Despite the improvement of surveillance systems in some areas, systematic reporting of data on congenital syphilis and provision of services to pregnant women in the Americas remains a challenge.

Progress closing service delivery gaps and a greater stability of country services will allow more countries to meet elimination goals for MTCT of HIV and syphilis. ■

2. Background

The Pan American Health Organization (PAHO) Member States in 2010 approved the Strategy and Plan of Action for the Elimination of Mother-to-Child Transmission (MTCT) of HIV and Congenital Syphilis by Resolution 50/12 at the 50th Directing Council Meeting [1] with goals by 2015 to:

- ◊ reduce MTCT of HIV to 2% or less,
- ◊ reduce the incidence of pediatric HIV cases to 0.3 or less per 1,000 live births, and
- ◊ reduce the incidence of congenital syphilis to 0.5 cases or less per 1,000 live births by 2015.

The program objectives are:

- ◊ coverage for prenatal care and births attended by skilled professionals ≥ 95%.
- ◊ coverage for detection of HIV and syphilis in pregnant women ≥ 95%.
- ◊ coverage of antiretroviral (ARV) use for PMTCT of HIV and treatment of syphilis among pregnant women and children ≥ 95%.
- ◊ first-level health care facilities providing services to prevent and diagnose HIV and sexually transmitted infection in an integrated way with other services (prenatal care, sexual and reproductive

health, adolescent health, prevention of and treatment for gender based violence) in ≥ 95%.

- ◊ countries having information systems to monitor progress towards eliminating MTCT of HIV and syphilis to support decision-making.

This document reports on progress towards elimination goals between 2010 and 2013. The results presented may assist policymakers and health care workers in their efforts to achieve elimination of MTCT of HIV and syphilis in the Americas. ■

3. Data Sources and Methods

Data from 38 countries and 14 territories in the Americas, herein referred to collectively as "countries," including Member States, Participating States, or Associated Members of PAHO were included in this report.¹

3.1. Primary Prevention of HIV and Syphilis and Sexual and Reproductive Health Data

For the section on progress in primary prevention, data from numerous sources were used. Each data source is outlined in detail at the end of each table, but most data come from nationally representative population surveys. These surveys may differ in regard to:

- ◊ Methodology used for data collection.
- ◊ Definition of "young people."
- ◊ Level of study quality between countries and year to year.
- ◊ Level of disaggregation by gender.
- ◊ Number of indicators collected.

Although these differences mean that comparisons between studies and years should be interpreted with caution, overall the data provide important information on the general

situation with respect to HIV prevention and sexual and reproductive health (SRH) in the Americas.

3.2. Elimination of MTCT of HIV and Syphilis Data

For the sections on MTCT of HIV and syphilis data come from the following sources:

- ◊ 2013 data from the 2014 Global AIDS Response Progress Reporting from countries was the primary data source for this report [2].
- ◊ Data for 2010, 2011 and 2012 were compiled from the PAHO reports: 2010 Situation Analysis: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis [3] and 2012 Progress report: Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas [4].
- ◊ Denominators for HIV testing and counseling among pregnant women and incidence rates of congenital syphilis and pediatric HIV were obtained from the UN Population Division (2013, the 2012 revision) [5] and the US Bureau of the Census estimates [6].
- ◊ Denominators for ARV coverage to prevent vertical

transmission in pregnant women were derived from UNAIDS 2014 estimates [2].

3.3. Modeling Assumptions

For the UNAIDS model used to estimate MTCT the following assumptions were used:

- ◊ HIV incidence among women ages 15-49 years at 0.6%.
- ◊ Percentage of pregnant women with HIV treated at CD4 cell counts above 350 cells/mm³ at 58% and below 350 cells/mm³ at 42%.
- ◊ Percentage of pregnant women with HIV receiving ARVs for PMTCT of HIV was 93%.
- ◊ Percentage of pregnant women with HIV receiving ARVs for PMTCT of HIV (93%) by regimen: single-dose NVP 0.07%, dual-dose AZT 5%, World Health Organization (WHO) Option A or B 62%, on ARVs before pregnancy 33%.
- ◊ Median duration of breastfeeding among puerperal women with HIV is 24 months. ■

¹In line with the resolution of the 28th Pan American Sanitary Conference (CSP28/28), Aruba, Curaçao, and Sint Maarten are considered separately, as well as the remaining Dutch territories (the islands of Bonaire, Saba, and Sint Eustatius).

4. Primary Prevention of HIV and Syphilis and Sexual and Reproductive Health

Data on various indicators of SRH among people in the Americas is presented below. While some indicators show improvement, particularly among adolescents, many outcomes are far from desired levels.

4.1. Contraceptive Use and Unmet Need for Family Planning

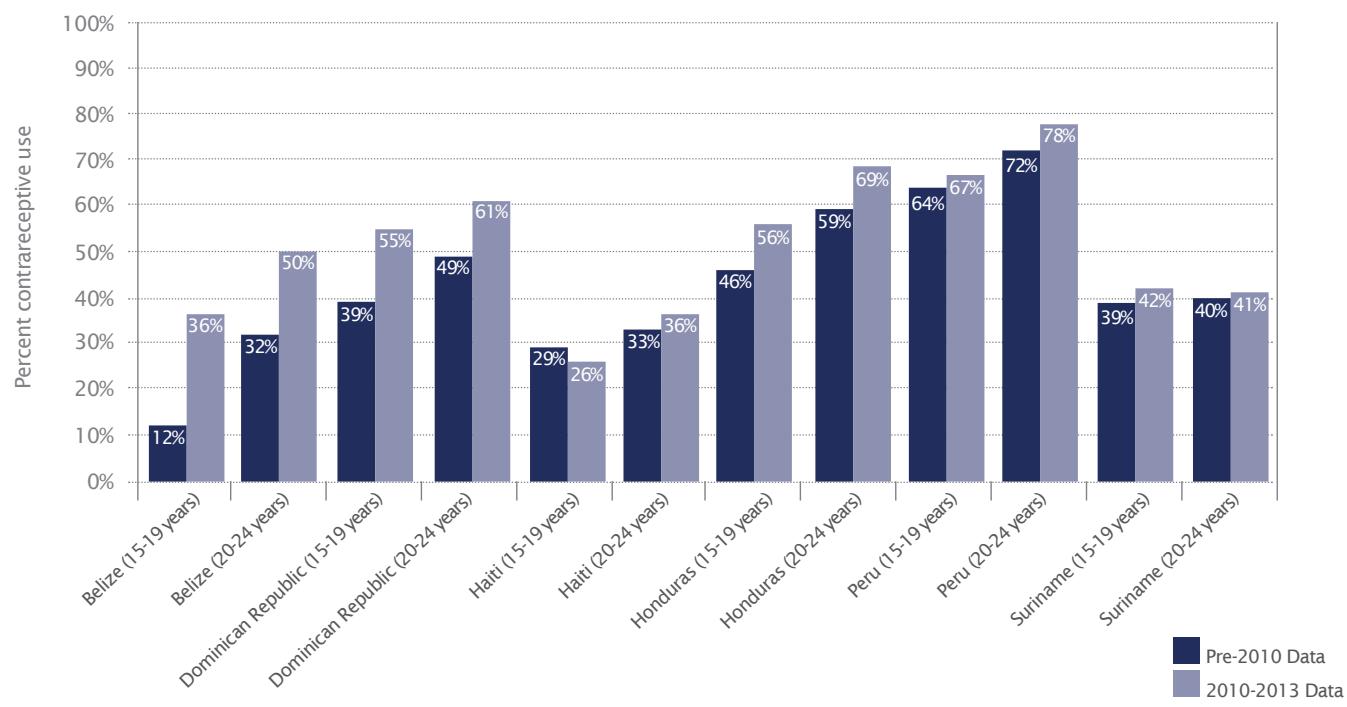
- ◊ From 2005-2013, in countries with data available for more than one year, contraceptive use of all types appears to have increased slightly over time among women ages 15-44 years. Countries such as Honduras and Nicaragua report significant increases over time, while in the remaining countries increases have been minimal.
- ◊ Use of modern contraceptive methods has also increased minimally over time. In six countries with recent data

for 2010-2013 over 70% of women report currently using some form of contraception (*Table 1*).

- ◊ Despite the slight increase in contraceptive use there is still considerable unmet need for family planning, defined as the gap between desired pregnancies and contraceptive use. Unmet need in the Americas currently ranges from 6% in Brazil (2006) to 35% in Haiti (2012).
- ◊ Among the four countries with data at two time points unmet need has remained stable in Peru, and has decreased over time in Belize, Honduras and Haiti. Half of the countries have unmet need above 12% (*Table 1*).
- ◊ Inequities in the use of contraceptives and unmet need for family planning exist based on socioeconomic and

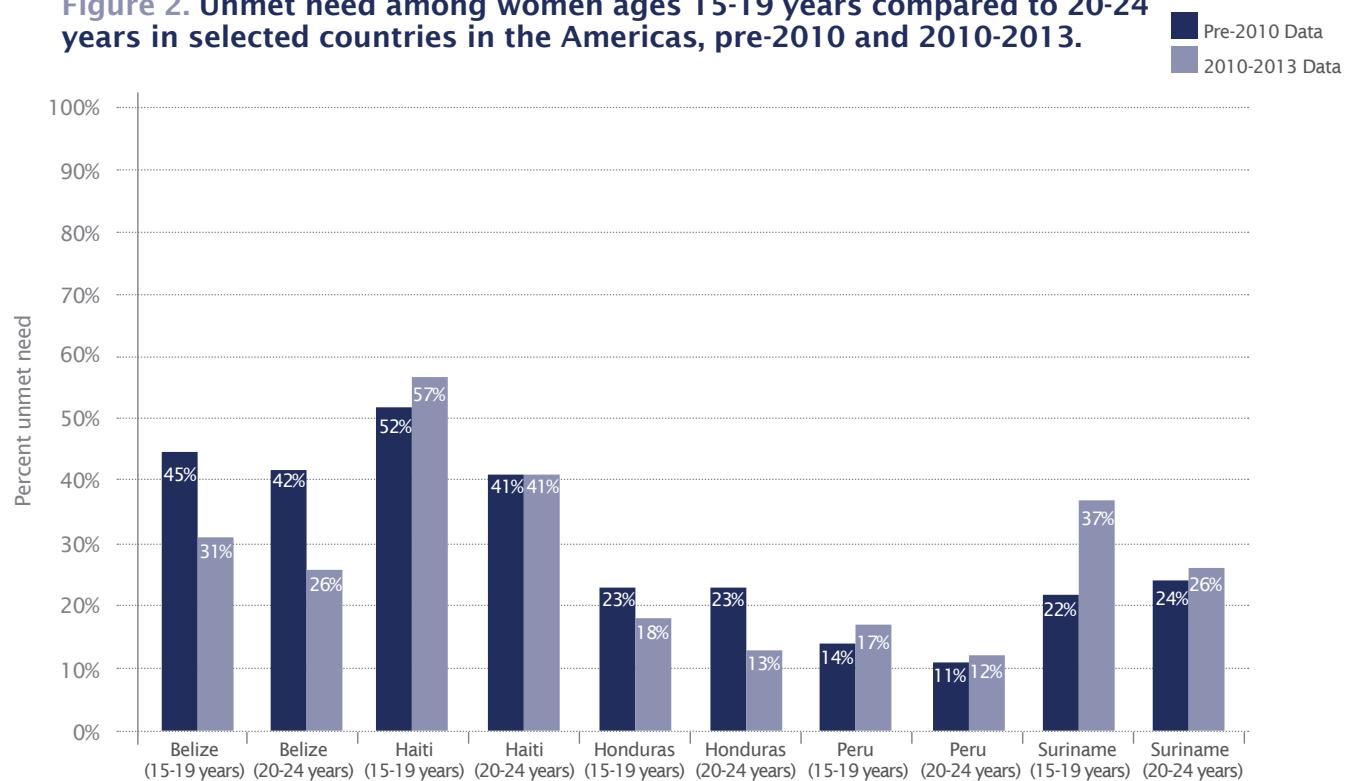
educational level, with higher unmet need and lower contraceptive use among the most disadvantaged populations (*Table 2*).
◊ Young women in the Americas report lower contraceptive use and greater unmet need compared to older women (*Table 3*). In addition, although contraceptive use among young women has increased over time, unmet need has also increased in many countries and remains quite high in some areas (*Table 4; Figure 1; Figure 2*). This discrepancy points to the importance of providing consistent, reliable, and high-quality sexual and reproductive health services, including access to contraceptives, particularly for young women and for women living in areas where there is limited access.

Figure 1. Contraceptive use among women ages 15-19 compared to 20-24 years in selected countries in the Americas, pre-2010 and 2010-2013.



Source: See Table 4.

Figure 2. Unmet need among women ages 15-19 years compared to 20-24 years in selected countries in the Americas, pre-2010 and 2010-2013.



Source: See Table 4.

Table 1. Unmet need for family planning and contraceptive use in women (15-49 years of age) in selected countries in the Americas, data available up to 2010 and from 2011-2013.

Countries	Available data to 2010				New available data 2011-2013			
	Prevalence of contraceptives		Unmet need		Prevalence of contraceptives		Unmet need	
	Data year	Any method (%)	Any modern method (%)	Any traditional method (%)	Data year	Any method (%)	Any modern method (%)	Any traditional method (%)
North America								
United States of America	2006/10	76	70	6	8	...	...	...
Mexico	2009	73	...	7	12	...	...	...
Central America								
Costa Rica	...	...	...	...	2011	76	75	2
El Salvador	2008	72	66	6	18	...	...	8
Guatemala	2008/09	54	44	10	21	...	...	...
Honduras	2005/06	65	56	9	17	2011/12	73	64
Nicaragua	2006/07	72	69	4	11	2011/12	80	77
Panama	2009	52	49	3	27	...	...	...
Andean Region								
Bolivia (Plurinational State of)	2008	61	35	27	20	...	...	...
Colombia	2009/10	79	73	6	8	...	...	...
Peru	2010	74	51	...	9	2012	76	52
Southern Cone and Brazil								
Argentina	...	...	...	...	2011/12	55	53	2
Brazil	2006	80	77	3	6	...	...	...
Chile	2006	64	...	...	...	...	...	...
Paraguay	2008	79	70	9	5	...	...	...
Caribbean								
Belize	2006	...	...	...	21	2011	55	52
Cuba	...	...	...	...	2010/11	74	76	1
Dominican Republic	2007	73	70	3	11	2013	72	69
Guyana	2009	43	40	3	29	...	...	...
Haiti	2005/06	32	25	7	37	2012	35	31

Table 1 (continued).

Countries	Available data to 2010				New available data 2011-2013			
	Prevalence of contraceptives				Prevalence of contraceptives			
	Data year	Any method (%)	Any modern method (%)	Any traditional method (%)	Data year	Any method (%)	Any modern method (%)	Any traditional method (%)
Jamaica	2008/09	72	68	...	10	...	...	...
Saint Lucia	...	...	...	...	2012	56	52	3
Suriname	2006	46	45	1	2010 ¹	48	47	0
Trinidad and Tobago	2006	43	38	5	...	...	...	...

Notes: Data for ages 15-44 years: The United States, Paraguay, and El Salvador. For Chile, the data correspond to men and women, and only to the most common contraceptive methods. Unmet need is defined as the number of women aged 15-49 who are currently married or in a common-law union, who are in their childbearing years, who wish to space births or limit the number of children they have, and who currently do not use contraceptives, as a proportion of all women aged 15-49 who are currently married or in a common-law union.

¹Most recent data available.

Sources: The source of available data since 2010 is: Pan American Health Organization, 2010 Situation Analysis: Elimination Mother-to-child Transmission of HIV and Congenital Syphilis in the Americas. Unless otherwise specified, the source of available data since 2010 for Colombia, El Salvador, Guatemala, Honduras, Bolivia, Peru, Paraguay, Haiti, Guyana, and Jamaica is: International framework. MEASURE DHS STATCompiler: <http://www.statcompiler.com/>.

-Argentina: Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

-Belize: Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.

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-Saint Lucia: Ministry of Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012: Final Report.

-Suriname: Ministry of Social Affairs and Housing and General Bureau of Statistics: Suriname Multiple Indicator Cluster Survey 2010, Final Report.

Table 2. Unmet need for family planning and current contraceptive use (women aged 15-49 years), by level of household wealth and educational level in selected countries in the Americas.

Countries	Data year	Current contraceptive use, any method				Current contraceptive use, any modern method				Unmet need for family planning			
		Level of household wealth		Highest level of education		Level of household wealth		Highest level of education		Level of household wealth		Highest level of education	
		Any method	At lowest level of household wealth	With no schooling	With secondary or higher studies	Any modern method	At lowest level of household wealth	With no schooling	With secondary or higher studies	Unmet need	At highest level of household wealth	With no schooling	With secondary or higher studies
North America		Mexico	2009	50	...	...	50	...	...	...	...	...	...
Central America													
Costa Rica	2011	76	69	78	59	77	75	67	78	59	75	8	12
El Salvador	2008	72	...	...	67	75	66	...	...	64	67	...	...
Guatemala	2008/09	54	36	72	40	70	44	26	62	30	60	21	32
Honduras	2011/12	73	67	76	64	75	64	55	67	49	66	11	14
Nicaragua	2006/07	72	...	...	66	76	70	...	...	65	72	...	...
Andean Region													
Bolivia (Plurinational State of)	2008	61	46	71	42	69	35	23	47	22	43	20	34
Colombia	2009/10	79	76	80	72	79	73	69	75	63	73	8	12
Peru	2012	76	73	74	66	76	52	41	58	40	55	9	14
Southern Cone and Brazil													
Argentina	2011/12	55	52	59	44	...	53	51	57	44	...	...	...
Paraguay	2008	79	77	79	71	81	71	...	...	66	72	...	...
Caribbean													
Belize	2011	55	42	63	42	58	52	41	57	38	54	16	26
Dominican Republic	2007	73	68	73	70	71	70	67	69	68	67	11	15
Guyana	2009	43	33	49	22	44	40	31	45	21	41	29	72
Haiti	2012	35	32	33	30	37	31	30	28	28	33	35	36

Table 2 (continued).

Countries	Current contraceptive use, any method				Current contraceptive use, any modern method				Unmet need for family planning			
	Level of household wealth		Highest level of education		Level of household wealth		Highest level of education		Level of household wealth		Highest level of education	
	Data year	Any method (%)	At lowest level of household wealth (%)	With no schooling (%)	With secondary or higher studies (%)	Any modern method (%)	At highest level of household wealth (%)	With no schooling (%)	With secondary or higher studies (%)	Unmet need	Any at lowest level of household wealth (%)	At highest level of household wealth (%)
Jamaica	2008/09	72	...	...	73	68	...	...	...	69	...	...
Saint Lucia	2012	56	54	56	46	59	52	50	53	44	56	17
Suriname	2010	48	32	56	19	52	47	32	55	19	52	17

Notes: Note: For Mexico data is for all women aged 15-49 (married or in union, previously married or in union, never married or in union). Data for El Salvador correspond to women aged 15-44.

Sources:
-Argentina: Secretaría Nacional de Niñez, Adolescencia Y Familia Y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

-Bolivia: Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.

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-Mexico: Instituto Nacional de Desarrollo Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012, Final Report.

Table 3. Unmet need for family planning and current contraceptive use (women aged 15-49), by age group in selected countries in the Americas.

Countries	Current use of any contraceptive method (%)		Unmet need (%)	
	Age in years			
	15-19	45-49	15-19	45-49
Argentina (2011/12)	34	42	...	...
Belize (2011)	36	52	31	6
Bolivia (Plurinational State of) (2008)	41	40	38	9
Colombia (2010)	61	76	20	6
Costa Rica (2011)	64	75	20	2
Cuba (2010/11)	67	72	11	9
Dominican Republic (2013)	55	77	...	...
El Salvador (2008)	55	...	...	...
Guatemala (2008/09)	33	44	26	17
Guyana (2009)	30	33	35	27
Haiti (2012)	26	20	57	24
Honduras (2011/12)	56	68	18	8
Jamaica (2008)	68	61	...	...
Panama (2009)	39	68	43	22
Peru (2012)	67	60	17	5
Paraguay (2008)	71	...	...	...
Saint Lucia (2012)	57	36	32	19
Suriname (2010)	44	44	37	8

Sources:

- Argentina:** Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.
- Belize:** Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.
- Bolivia:** Ministerio de Salud y Deportes/MEASURE DHS, Macro International: Encuesta Nacional de Demografía y Salud ENDSA 2008.
- Colombia:** Asociación ProBienestar de la Familia Colombiana. Profamilia: Encuesta Nacional de Demografía y Salud 2010.
- Costa Rica:** Ministerio de Salud, República de Costa Rica/Fondo de las Naciones Unidas para la Infancia: Encuesta de indicadores múltiples por conglomerados 2011: situación de la niñez y mujeres.
- Cuba:** Dirección Nacional de Registros Médicos y Estadísticas de Salud, Ministerio de Salud Pública, y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados (MICS) 2010/11, Informe Final.
- Dominican Republic:** Centro de Estudios Sociales y Demográficos (CESDEM)/ The Demographic and Health Surveys (DHS), ICF International: Encuesta Demográfica y de Salud (ENDESA) 2013 Informe preliminar.
- El Salvador:** Encuesta Nacional de Salud Familiar: FESAL-2008 Informe Final.
- Guatemala:** Ministerio de Salud Pública y Asistencia Social (MSPAS)/Instituto Nacional de Estadística (INE)/Centros de Control y Prevención de Enfermedades (CDC): Encuesta Nacional de Salud Materno Infantil 2008 (ENSMI-2008/09).
- Haiti:** Ministère de la Santé Publique et de la Population (MSPP): Enquête Mortalité, Morbidité et Utilisation des Services (EMMUS-V), Haïti, 2012.
- Honduras:** Secretaría de Salud. Instituto Nacional de Estadística / ICF Internacional: Encuesta Nacional de Demografía y Salud ENDESA 2011-2012.
- Jamaica:** Serbanescu F, Ruiz A, Suchdev DB. Reproductive Health Survey Jamaica 2008: Final Report.
- Panama:** Instituto Commemorativo Gorgas de Estudios de la Salud: Encuesta Nacional de Salud Sexual y Reproductiva 2009 Informe final.
- Peru:** Instituto Nacional de Estadística e Informática: Encuesta Demográfica y de Salud Familiar, Nacional y Departamental en Perú 2012.
- Saint Lucia:** Ministry of Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012: Final Report.
- Suriname:** Ministry of Social Affairs and Housing and General Bureau of Statistics: Suriname Multiple Indicator Cluster Survey 2010, Final Report.

Table 4. Unmet need for family planning and current contraceptive use in adolescent women, by age groups (15-19 years, 20-24 years) in selected countries in the Americas, available data until 2010 and from 2010-2013.

Countries	Use of any contraceptive method				Unmet need			
	15-19		20-24		15-19		20-24	
	Data to 2010 (%)	New data 2010-2013 (%)	Data to 2010 (%)	New data 2010-2013 (%)	Data to 2010 (%)	New data 2010-2013 (%)	Data to 2010 (%)	New data 2010-2013 (%)
Belize (2006; 2011)	12	36	32	50	45	31	42	26
Dominican Republic (2007; 2013)	39	55	49	61	24	...	27	...
Haiti (2005/06; 2012)	29	26	33	36	52	57	41	41
Honduras (2005/06; 2011/12)	46	56	59	69	23	18	23	13
Nicaragua (2005/06; 2011/12)	62	...	71	...	17	...	12	...
Peru (2010; 2012)	64	67	72	78	14	17	11	12
Suriname (2006; 2010)	39	42	40	41	22	37	24	26

Note: Years in parentheses correspond to year of survey.

Sources for data to 2010:

-**Belize:** Statistical Institute of Belize, United Nations Children's Fund (UNICEF): Belize Multiple Indicator Cluster Survey 2006.

-**Dominican Republic:** Centro de Estudios Sociales y Demográficos (CESDEM) y Macro International Inc.: Encuesta Socioemigrática y sobre VIH/SIDA en los Bateyes Estatales de la República Dominicana 2007.

-**Haiti:** Cayemites, Michel, Marie Florence Placide, Soumaïla Mariko, Bernard Barrère, Blaise Sévère, Canez Alexandre: Enquête Mortalité, Morbidité et Utilisation des Services, Haïti, 2005-2006.

-**Honduras:** Secretaría de Salud [Honduras], Instituto Nacional de Estadística (INE) y Macro International: Encuesta Nacional de Salud y Demografía 2005-2006.

-**Nicaragua:** Instituto Nacional de Información de Desarrollo (INIDE). Ministerio de Salud (MINSA): Encuesta Nicaragüense de Demografía y Salud ENDESA 2006/07, Informe final.

-**Peru:** Instituto Nacional de Estadística e Informática (INEI): Encuesta demográfica y de salud familiar, ENDES Continua, 2010: Informe Principal.

-**Suriname:** General Bureau of Statistics, Ministry of Planning and Development Cooperation and Ministry of Social Affairs and Housing: Suriname Multiple Indicator Cluster Survey 2006, Final Report.

Sources for data 2010-2013:

-**Belize:** Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.

-**Dominican Republic:** Centro de Estudios Sociales y Demográficos (CESDEM)/ The Demographic and Health Surveys (DHS), ICF International: Encuesta Demográfica y de Salud (ENDESA) 2013. Informe preliminar.

-**Haiti:** Ministère de la Santé Publique et de la Population (MSPP): Enquête Mortalité, Morbidité et Utilisation des Services (EMMUS-V), Haïti, 2012.

-**Honduras:** Secretaría de Salud. Instituto Nacional de Estadística / ICF Internacional. Encuesta Nacional de Demografía y Salud: ENDESA 2011-2012.

-**Peru:** Instituto Nacional de Estadística e Informática: Encuesta Demográfica y de Salud Familiar, Nacional y Departamental, Perú 2012.

-**Suriname:** Ministry of Social Affairs and Housing and General Bureau of Statistics: Suriname Multiple Indicator Cluster Survey 2010, Final Report.

4.2. Condom Use at Last Sexual Intercourse

◊ The use of condoms in recent high-risk intercourse varied substantially among countries from 17% (Nicaragua) to 83% (Argentina). At the subregional level the percentage of condom use at last sexual intercourse among people with more than one partner during the last year was higher in the Andean

countries and in the Southern Cone and Brazil than in the Caribbean and Central America.
 ◊ Among countries with more than one year of data, 14 had increases in condom use while only two countries had declines (*Table 5*).
 ◊ Condom use in high-risk intercourse is higher among men than women in all countries reporting data in

2014 except for Antigua and Barbuda.
 ◊ In the Americas it appears that condom use is increasing in both sexes among people with multiple sexual partners. Fourteen countries have reached 60% condom use at last high-risk sex for men, while eight countries have reached this level of condom use for women.

Table 5. Percentage of women and men (15–49 years) who had more than one sexual partner in the last 12 months and report having used a condom during last sexual intercourse (2012 and 2013).

Countries	2012				2013			
	Year	Men (%)	Women (%)	Both sexes (%)	Year	Men (%)	Women (%)	Both sexes (%)
North America								
Canada	2007	23	16	19	2011	72	62	68
Mexico	2007	20	...	...	...	...	...	...
United States of America	2007	42	32	...	2006/10	46	35	...
Central America								
Costa Rica	2007	15	11	13	2010	65	40	58
El Salvador	2008	...	21	...	...	...	...	...
Guatemala	2009	63	24	58	2008/09	63	24	58
Honduras	2005/06	38	27	37	2011/12	44	33	41
Nicaragua	2009	...	19	...	2013	19	12	17
Panama	2009	56	12	...	2009	56	12	...
Andean Region								
Bolivia (Plurinational State of)	2008	35	...	35	2013	69	62	67
Colombia	2009	...	31	...	2010	...	34	...
Ecuador	...	...	...	...	...	...	...	...
Peru	2009	72	25	64	2012	...	30	...
Venezuela (Bolivarian Republic of)	...	...	...	...	...	...	...	...
Southern Cone and Brazil								
Argentina	2007	48	44	46	2008	...	...	83
Brazil	2009	43	34	39	2013	68	53	64
Chile	2006	55	38	50	2009/10	57	52	55
Paraguay	2009	...	58	...	...	...	...	...
Uruguay	2007	69	65	68	2011	...	...	68

Table 5 (continued).

Countries	2012				2013			
	Year	Men (%)	Women (%)	Both sexes (%)	Year	Men (%)	Women (%)	Both sexes (%)
Caribbean								
Anguilla	...	...	...	...	...	...	...	...
Antigua and Barbuda	2007	...	...	55	2011	49	62	20
Aruba	...	...	...	...	...	...	...	...
Bahamas	...	...	...	...	2008	82	75	79
Barbados	2005	78	33	49	...	...	...	...
Belize	2009	15	5	9	2011	...	28	...
Bermuda	...	...	...	...	...	...	...	...
Cuba	2009	34	12	23	2012/13	51	40	47
Dominica	...	...	...	...	2010	66	57	64
Dominican Republic	2007	30	4	17	2013	46	38	45
French Guiana	...	...	...	...	...	...	...	...
Grenada	2007	30	13	21	2010	69	63	67
Guadeloupe	...	...	...	...	...	...	...	...
Guyana	2009	66	48	...	2009	66	48	...
Haiti	2005/06	42	26	45	2012	43	43	44
Jamaica	2009	62	17	39	2012	66	43	61
Saint Kitts and Nevis	2007	53	19	35	2010	56	48	54
Saint Lucia	2007	42	25	35	2009	48	39	45
Saint Vincent and the Grenadines	2009	24	10	17	...	...	...	...
Suriname	2007	...	49	...	2010	...	37	...
Trinidad and Tobago	2007	94	79	85	...	...	...	...

Note: Excludes countries with no available data: Venezuela (Bolivarian Republic of), Anguilla, Aruba, Bermuda, Bonaire, Cayman Islands, Curaçao, French Guiana, Guadeloupe, Martinique, Montserrat, Puerto Rico, Saba, Virgin Islands (UK), and Virgin Islands (US). Data for ages 15-69 years: Argentina (2014). Subregional percentages are averages.

Sources: The source for data reported in 2012 is: Pan American Health Organization, 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis in the Americas. Washington, D.C.: PAHO, 2013.

For data reported in 2014, unless otherwise specified, the source is each country's 2014 Global AIDS Response Report.

-**Belize:** Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.

-**Saint Lucia and Uruguay:** UNAIDS AIDS Info Database.

-**Suriname:** Ministry of Social Affairs and Housing and General Bureau of Statistics: Suriname Multiple Indicator Cluster Survey 2010, Final Report.

4.3. Initiation of Sexual Activity before Age 15

◊ Data shows varying levels of sexual initiation before age 15 ranging from 6% (US) to 38% (St. Kitts and Nevis) with consistently higher percentages of early sexual initiation among young women compared to young men (*Table 6*).

◊ Sexual activity before age 15 appears to be most common in subregions of the Southern Cone and Brazil and in the Caribbean.
 ◊ Among countries with data for more than one year no regional patterns are observed. Nevertheless, seven countries in the Americas had decreases

in sex before age 15 (Bahamas, Cayman Islands, Cuba, Haiti, Jamaica, Montserrat and the United Kingdom (UK) Virgin Islands, while three countries reported increases (Mexico, Honduras and Bolivia), and two had no changes (Argentina, Brazil).

Table 6. Percentage of women and men (15–24 years) who have had sex before age 15, by sex, reported in 2012 and 2014.

Countries	Reported in 2012				Reported in 2014			
	Year	Young men (%)	Young women (%)	Both sexes (%)	Year	Young men (%)	Young women (%)	Both sexes (%)
North America								
Canada	2009/10	10	8	9	2009/10	10	8	9
Mexico	2010	10	5	7	2012	10	5	8
United States of America	2009	...	...	6	2006/10	16	15	...
Central America								
Costa Rica	2010	16	10	13	2010	16	10	13
El Salvador	2008	...	21	...	2013	30	11	21
Guatemala	2008	17	8	11	2008	17	8	11
Honduras	2005	19	11	13	2011/12	25	11	14
Nicaragua	2010	36	15	25	2011/12	28	...	...
Panama	2009	23	11	17	2009	23	11	17
Andean Region								
Bolivia (Plurinational State of)	2008	13	7	8	2013	17	11	14
Colombia	2010	...	14	...	2010	...	14	...
Ecuador	2007	...	10	...	...	...	...	...
Peru	2010	...	6	...	2012	...	9	...
Venezuela (Bolivarian Republic of)	...	...	...	...	...	...	...	...
Southern Cone and Brazil								
Argentina	2008/09	...	...	19	2010/11	23	14	19
Brazil	2008	41	29	35	2013	42	26	35
Chile	2009/10	14	8	11	2009/10	14	8	11
Paraguay	2008	...	8	...	2008	...	8	...
Uruguay	2008	44	30	37	2008	44	30	37
Caribbean								
Anguilla	2009	...	...	26	2009	...	...	26
Antigua and Barbuda	2011	30	12	19	2011	30	12	19
Bahamas	2008	...	...	29	2012	32	9	27

Table 6 (continued).

Countries	Reported in 2012				Reported in 2014			
	Year	Young men (%)	Young women (%)	Both sexes (%)	Year	Young men (%)	Young women (%)	Both sexes (%)
Caribbean								
Barbados	2011	22	16	19	2011	22	16	19
Belize	2009	11	5	8	2012	...	5	...
Cayman Islands	2005/06	...	...	42	2012	27	22	25
Cuba	2010	26	14	20	2012/13	25	12	19
Curaçao	...	...	...	...	...	...	...	...
Dominica	2010	29	8	15	2010	29	8	15
Dominican Republic	2007	24	15	19	...	...	...	...
French Guiana	...	...	...	...	...	...	...	...
Grenada	2010	36	12	22	2010	36	12	22
Guadeloupe	...	...	...	...	...	...	...	...
Guyana	2009	19	10	14	2009	19	10	14
Haiti	2005/06	43	15	23	2012	35	13	22
Jamaica	2009	57	16	36	2012	50	14	31
Martinique	...	...	...	...	...	...	...	...
Montserrat	2005/06	...	...	45	2011	28	13	21
Saint Kitts and Nevis	2010	21	6	14	2010	21	6	14
Saint Lucia	2005	32	20	26	2012	...	6	...
Saint Vincent and the Grenadines	2005	31	14	22	...	...	...	...
Sint Eustatius	...	...	...	...	2011	51	27	38
Sint Marteen	...	...	...	...	2011	29	19	24
Suriname	2010	...	10	...	...	...	...	...
Trinidad and Tobago	2007	...	...	12	...	...	...	...
Virgin Islands (UK)	2005/06	...	...	42	2012	44	27	35

Notes: Excludes countries with no available data: Venezuela (Bolivarian Republic of), Aruba, Bermuda, Bonaire, Curaçao, French Guiana, Guadeloupe, Martinique, Puerto Rico, Saba, Turks and Caicos Islands, and Virgin Islands (US). Data for ages 13-17 years: Colombia (2012 and 2014); 14-19 years: Argentina (2014); 15-19 years: Virgin Islands (United Kingdom) (2014); Montserrat (2014), Sint Eustatius, Saint Lucia, Sint Maarten, Saint Vincent and the Grenadines (2012 and 2014), Antigua and Barbuda, Dominica, Montserrat, Saint Kitts and Nevis (2012), and Cayman Islands (2014); 15-17 years: Bahamas (2012).

Sources:

For data reported in 2012, the source is: Pan American Health Organization. 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis in the Americas. Washington, D.C.: PAHO, 2013.

For data reported in 2014, except where otherwise specified, the source is each country's 2014 Global AIDS Response Report.

-**Anguilla:** Centers for Disease Control and Prevention (CDC), Ministry of Social Development (Anguilla), World Health Organization (WHO). Anguilla Global School-Based Student Health Survey 2009.

-**Canada:** Rotermann M. Sexual behaviour and condom use of 15- to 24-years old in 2003 and 2009/2010. Health reports, 23(1), March 2012 Statistics Canada 2012.

-**Cayman Islands:** Ministry of Health, Environment, Youth, Sports and Culture. Adolescent Health and Sexuality: The report of the adolescent health and sexuality survey.

-**Montserrat:** Ministry of Health and Community Services. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey, Montserrat, 2012.

-**Paraguay:** UNAIDS AIDS Info Database.

-**Peru:** Instituto Nacional de Estadística e Informática: Encuesta Demográfica y de Salud Familiar (ENDES) 2012.

-**Sint Eustatius:** Department of Public Health. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. Sint Eustatius, 2012.

-**Saint Lucia:** Ministry of Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012: Final Report.

-**Sint Maarten:** Ministry of Public Health, Social Development and Labour. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. St. Maarten, 2013.

-**Virgin Islands (United Kingdom):** Ministry of Health & Social Development: Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey.

4.4. Adolescent Pregnancy and Fertility Rate

- ◊ According to data for 2010–2013, between 9% (Cuba) and 39% (Mexico) of adolescents 15–19 years in the Americas are pregnant or have children (*Table 7*).
- ◊ In six countries with more than one year of data, no substantial changes in adolescent pregnancy have been observed despite significant commitments to prevent adolescent pregnancies in the Americas such as the Mexico City Ministerial Declaration “Educating to Prevent” [7] and the Alliance for the Prevention of Pregnancy in Adolescents in the Americas [8].

- ◊ The prevalence of adolescent pregnancy remains high in Latin America and the Caribbean (LAC) and increases rapidly with age. Pregnancy in young women at age 15 varied between 2% and 8%, at age 18 between 9% and 39%; and at age 19 between 24% and 49% in 2010–2013.
- ◊ Adolescent pregnancy is also more prevalent among socioeconomically and educationally disadvantaged women.
- ◊ In all countries with data for more than one year, except Haiti, the gap by socioeconomic and educational status has widened, with pregnancy among adolescents further affecting women with

- less education and fewer resources.
- ◊ Data on adolescent fertility rates is available for most countries in the Americas and shows the adolescent fertility rate has declined minimally among the majority of countries, with Guyana registering the steepest decline (*Table 8*).
- ◊ Countries with the highest adolescent fertility rates in the Americas include Nicaragua, Honduras, Guatemala, Venezuela, Dominican Republic and Guyana. In the United States of America (USA), adolescent fertility has been declining in the last two decades [9] but the most recent rate (31) remains higher than in other industrialized countries [10].

Table 7. Pregnancy among adolescents (15–19 years) in selected countries in the Americas, by socioeconomic and educational indicators, available data until 2010 and from 2011–2013.

Countries	Year	Available data to 2010		New available data (2011–2013)	
		% of adolescents who are pregnant or have children	% of 19-year-olds who are pregnant or have children	% of adolescents who are pregnant or have children	% of 19-year-olds who are pregnant or have children
North America					
Mexico	...	...	...	...	...
Central America					
Costa Rica	2010	9	...	9	...
El Salvador	2008	23	...	42	...
Guatemala	2008/09	22	...	37	...
Honduras	2005/06	22	31	40	2011/12
Nicaragua	2006/07	25	...	35	49
Panama	2009	20	27	1	...
Andean Region					
Bolivia (Plurinational State of)	2008	18	31	8	52
Colombia	2010	20	30	7	55
Peru	2010	14	22	4	27
Southern Cone and Brazil					
Argentina	...	...	...	...	...
Paraguay	2008	12	...	33	8
Caribbean					
Belize	2006	19	29	2	...
Cayman Islands	...	...	...	...	...
Cuba	...	...	...	...	...

Table 7 (continued).

Countries	Year	Available data to 2010										New available data (2011-2013)									
		% of adolescents who are pregnant or have children	% of 15-yr-olds who are pregnant or have children	% of 18-yr-olds who are pregnant or have children	% of 19-yr-olds who are pregnant or have children	% of adolescents with no education	% of adolescent women (15-19 yrs) with secondary or higher studies	% of adolescent women (15-19 yrs) with no education	% at lowest level of household wealth	% at highest level of household wealth	% of adolescents who are pregnant or have children	% of 15-yr-olds who are pregnant or have children	% of 18-yr-olds who are pregnant or have children	% of 19-yr-olds who are pregnant or have children	% of adolescents with no education	% of adolescent women (15-19 yrs) with secondary or higher studies	% of adolescent women (15-19 yrs) with no education	% at lowest level of household wealth	% at highest level of household wealth		
Caribbean																					
Dominican Republic	2007	21	37	8	51	15	7	31	39	...	...	...	...	...	...	...	...	...	...	...	...
Guyana	2006/07	19	40	8	...	...	...	...	...	2009 ^a	18	38	4	81	16	2	33	35			
Haiti	2005/06	14	22	7	30	9	2	23	29	2012	14	15	5	27	9	3	22	31			
Jamaica	2008	14	...	...	14	4	25	28	2011	15	24	2	...	...	...	15	...	...	...	...	...
Montserrat	...	...	...	...	...	...	...	...	2011	16	...	...	...	...	...	...	...	...	...	...	...
Sint Eustatius	...	...	...	...	...	...	...	...	2011	31	...	...	...	...	...	...	...	...	...	...	...
Sint Maarten	...	...	...	...	...	...	...	...	2011	11	...	...	...	...	...	...	...	...	...	...	...
Virgin Islands (UK)	...	...	...	...	...	...	...	...	2012	31	...	...	...	...	...	...	...	...	...	...	...

Notes: Data for Argentina, Mexico, Costa Rica, Belize, Cuba, and Jamaica correspond to the percentage of women aged 20-24 who have children are before age 18. Sint Eustatius: 11-19 years old; Virgin Islands (United Kingdom), Sint Maarten: 12-19 years; Montserrat: 13-19 years.

Sources: The source for data prior to 2010 is: Pan American Health Organization. 2010 Situation Analysis: Elimination Mother-to-child Transmission of HIV and Congenital Syphilis in the Americas. Washington, D.C.: PAHO, 2012. Unless otherwise specified, the source of available data since 2010 is: International Framework. MEASURE DHS STATE Compiler.

-Argentina: Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

-Belize, Costa Rica, and Mexico: the source is: Fondo de las Naciones Unidas para la Infancia: El estado mundial de la infancia de 2014 en cifras, Todos los niños y niñas cuentan. -Cayman Islands: Ministry of Health, Environment, Youth, Sports and Culture. Adolescent Health and Sexuality. The report of the adolescent health and sexuality survey. Cayman Islands, 2013.

-Cuba: Dirección Nacional de Registros Médicos y Estadísticas de Salud, Ministerio de Salud Pública, Y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados (MICS) 2010/11, Informe Final.

-Montserrat: Ministry of Health and Community Services. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. Montserrat, 2012

-Sint Eustatius: Department of Public Health. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. Sint Eustatius, 2012

-Sint Maarten: Ministry of Public Health, Social Development and Labour. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. Sint Maarten, 2013.

-Virgin Islands (UK): Ministry of Health & Social Development. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. British Virgin Islands, 2012.

Table 8. Adolescent fertility rate (births per 1,000 women ages 15–19) in the Americas reported for 2010-2012.

Countries	Births per 1,000 women (ages 15-19)		
	2010 (%)	2011 (%)	2012 (%)
North America			
Canada	14	14	14
Mexico	66	65	63
United States of America	34	33	31
Central America			
Costa Rica	63	62	61
El Salvador	79	77	76
Guatemala	101	99	97
Honduras	88	86	84
Nicaragua	106	103	101
Panama	81	80	79
Andean Region			
Bolivia (Plurinational State of)	74	73	72
Colombia	71	70	69
Ecuador	80	78	77
Peru	52	52	51
Venezuela (Bolivarian Republic of)	86	85	83
Southern Cone and Brazil			
Argentina	55	55	54
Brazil	73	72	71
Chile	57	56	55
Paraguay	69	68	67
Uruguay	59	59	58
Caribbean			
Anguilla	...	...	...
Antigua and Barbuda	52	51	49
Aruba	29	28	27
Bahamas	30	29	28
Barbados	49	49	48
Belize	74	73	71
Bermuda	...	...	...
Bonaire	...	...	...
Cayman Islands	...	...	...
Cuba	44	44	43
Curaçao	29	29	28
Dominica	...	...	...
Dominican Republic	103	101	100
French Guiana	...	...	...
Grenada	38	37	35

Table 8 (continued).

Countries	Births per 1,000 women (ages 15-19)		
	2010 (%)	2011 (%)	2012 (%)
Caribbean			
Guadeloupe	...	...	...
Guyana	93	91	88
Haiti	44	43	42
Jamaica	73	72	70
Martinique	...	...	...
Montserrat	...	...	...
Puerto Rico	48	48	47
Saba	...	...	...
Saint Kitts and Nevis	...	...	...
Saint Lucia	58	57	56
Saint Vincent and the Grenadines	56	55	55
Suriname	37	36	35
Trinidad and Tobago	36	35	35
Turks and Caicos Islands	...	...	...
Virgin Islands (UK)	...	...	...
Virgin Islands (US)	51	51	51

Sources: World Bank. World Development Indicators.

4.5. Knowledge about HIV among Young People

- ◊ In 12 of the countries with available data reported in 2012-2014 the percentage of young people ages 15-24 years showing comprehensive knowledge and a correct understanding of HIV increased among men in six countries and among women in 11 countries.

- ◊ Mexico, El Salvador, Bolivia, Grenada, and Guyana reported substantial improvements among both sexes while decreases in HIV knowledge among men and women were reported in Chile and Barbados (*Table 9*).
- ◊ Young people in the Americas have steadily improved their knowledge about HIV but still in less

than half of countries (9 out of 25 reporting data in 2014) young men and women were able to correctly answer five basic questions about HIV and its transmission among countries reporting recent data; in Central America and Andean countries barely a third of young people have an adequate understanding of HIV prevention and transmission. ■

Table 9. Percentage of young people (15–24 years) who correctly identify the ways to prevent the sexual transmission of HIV and who reject the main erroneous ideas about HIV transmission, by sex, reported in 2012 and 2014.

Countries	Reported in 2012				Reported in 2014			
	Year	Young men (%)	Young women (%)	Both sexes (%)	Year	Young men (%)	Young women (%)	Both sexes (%)
North America								
Canada	...	...	...	...	2012	50	49	58
Mexico	2007	18	18	...	2011	82	82	81
United States of America	...	...	...	...	...	...	...	...
Central America								
Costa Rica	2010	21	21	21	2011	...	33	...
El Salvador	2008	27	30	...	2013	54	55	54
Guatemala	2008/09	24	22	23	2008/09	24	22	23
Honduras	2005/06	...	30	30	2011/12	35	33	33
Nicaragua	2010	...	...	72	2010	...	...	72
Panama	2009	12	15	17	2009	12	15	17
Andean Region								
Bolivia (Plurinational State of)	2008	28	22	24	2013	31	28	29
Colombia	2010	...	24	...	2010	...	24	...
Ecuador	2007	31	27	...	...	...	...	...
Peru	2010	...	34	...	2012	...	27	...
Venezuela (Bolivarian Republic of)	...	...	...	...	...	...	...	...
Southern Cone and Brazil								
Argentina	2007	83	89	...	2011/12	...	45	...
Brazil	2008/09	53	50	52	2013	48	50	49
Chile	2009	78	85	82	2012	48	57	53
Paraguay	...	...	...	...	...	...	...	...
Uruguay	2007	54	48	...	2008	48	52	34
Caribbean								
Anguilla	...	...	...	...	...	...	...	...
Antigua and Barbuda	2011	84	86	86	2011	84	86	86
Aruba	...	...	...	...	...	...	...	...
Bahamas	2008	12	21	17	2008	12	21	17
Barbados	2009	52	49	38	2011	36	39	28
Belize	2009	47	53	50	2011	...	43	...
Bermuda	...	...	...	...	...	...	...	...
Bonaire	...	...	...	...	...	...	...	...
Cayman Islands	...	...	...	...	2012	29	19	24
Cuba	2010	58	61	60	2013	61	60	64
Curaçao	...	...	...	...	...	...	...	...
Dominica	...	...	...	...	2010	48	56	...
Dominican Republic	2007/09	34	41	37	2007/09	34	41	37

Table 9 (continued).

Countries	Reported in 2012				Reported in 2014			
	Year	Young men (%)	Young women (%)	Both sexes (%)	Year	Young men (%)	Young women (%)	Both sexes (%)
Caribbean								
French Guiana	...	...	...	...	...	...	...	...
Grenada	2007	43	40	41	2010	60	65	...
Guadeloupe	...	...	...	...	...	...	...	...
Guyana	2007	34	44	...	2009	47	54	51
Haiti	2005/06	40	32	44	2012	28	35	32
Jamaica	2008	38	43	...	2012	34	43	39
Martinique	...	...	...	...	...	...	...	...
Montserrat	...	...	...	...	2011	31	34	32
Puerto Rico	...	...	...	...	...	...	...	...
Saba	...	...	...	...	...	...	...	...
Saint Kitts and Nevis	2010	50	53	51	2010	50	53	51
Saint Lucia	2009	61	57	60	2012	...	62	...
Saint Vincent and the Grenadines	2005/06	59	40	...	...	...	...	...
Sint Eustatius	...	...	...	...	2011	17	24	21
Sint Maarten	...	...	...	...	2011	34	25	30
Suriname	2006	...	41	...	2010	...	42	...
Trinidad and Tobago	2006	...	54	...	...	...	...	...
Turks and Caicos Islands	...	...	...	...	...	...	...	...
Virgin Islands (UK)	...	...	...	...	2012	11	20	15
Virgin Islands (US)	...	...	...	...	...	...	...	...

Notes: Data for ages 12-17 years: Mexico (2014); 15-17 years: Bahamas (2012 and 2014); 15-19 years: Cayman Islands, Virgin Islands (United Kingdom), Montserrat, Sint Eustatius, Sint Maarten; 16-24 years: Canada (2014). El Salvador 2012: data for men correspond are for year 2010. Subregional percentages are averages.

Sources:

For data reported in 2012, the source is: Pan American Health Organization. 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis in the Americas. Washington, D.C.: PAHO, 2013.

For data reported in 2014, except where otherwise specified, the source is each country's 2014 Global AIDS Response Report.

-**Argentina:** Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

-**Belize:** Statistical Institute of Belize/ United Nations Children's Fund: Belize Multiple Indicator Cluster Survey 2011 Final Report.

-**Canada:** Public Health Agency of Canada: 2012 HIV/AIDS Attitudinal Tracking Survey, Final Report.

-**Cayman Islands:** Ministry of Health, Environment, Youth, Sports and Culture. Adolescent Health and Sexuality. The report of the adolescent health and sexuality survey. Cayman Islands, 2013. Grand Cayman, Cayman Islands, 2013.

-**Costa Rica:** Ministerio de Salud, República de Costa Rica/Fondo de las Naciones Unidas para la Infancia: Encuesta de indicadores múltiples por conglomerados 2011, situación de la niñez y mujeres.

-**Dominica and Grenada:** Fondo de las Naciones Unidas para la Infancia: El estado mundial de la infancia de 2014 en cifras, Todos los niños y niñas cuentan.

-**Mexico:** Instituto Nacional de Psiquiatría Ramón de la Fuente Muñiz; Instituto Nacional de Salud Pública; Secretaría de Salud. Encuesta Nacional de Adicciones 2011: Reporte de Drogas.

-**Montserrat:** Ministry of Health and Community Services. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey, Montserrat, 2012.

-**Saint Lucia:** Ministry of Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012: Final Report.

-**Sint Eustatius:** Department of Public Health. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. Sint Eustatius, 2012

-**Sint Maarten:** Ministry of Public Health, Social Development and Labour. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. St. Maarten, 2013.

-**Suriname:** Ministry of Social Affairs and Housing and General Bureau of Statistics: Suriname Multiple Indicator Cluster Survey 2010, Final Report.

-**Virgin Islands (United Kingdom):** Ministry of Health & Social Development. Adolescent Health and Sexuality. A report on the adolescent health and sexuality survey. British Virgin Islands, 2012.

5. HIV Policies, Provision of Services, and Elimination Goals

5.1. HIV Policies

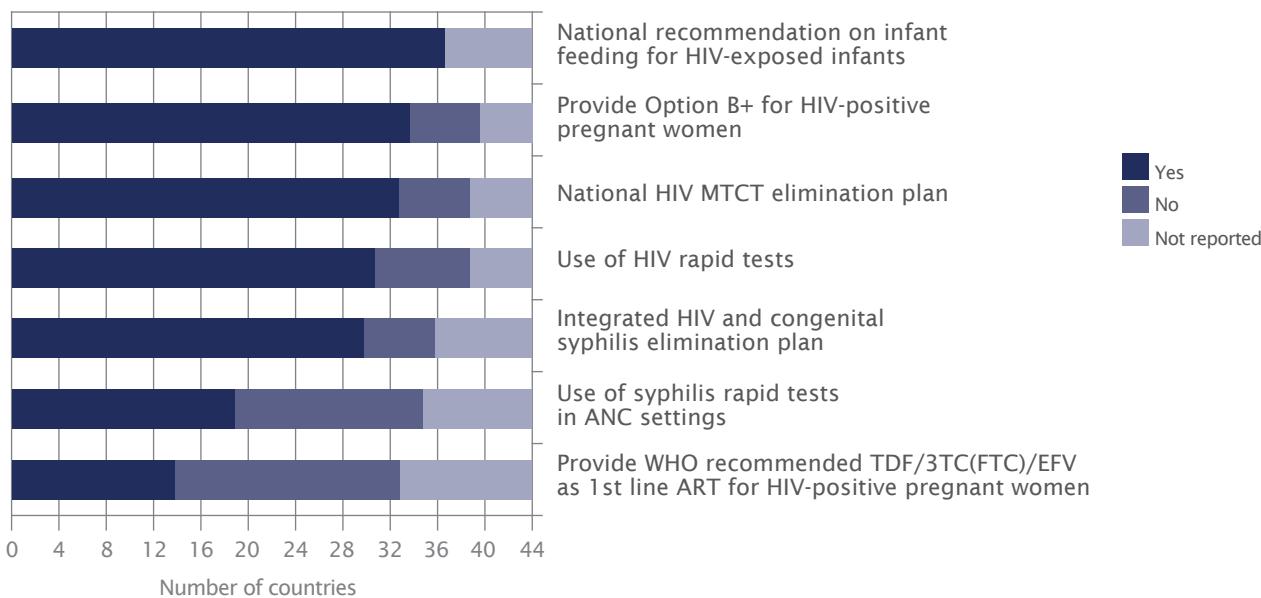
- ◊ Country-reported policy and programmatic elements to support the elimination efforts in Latin America and the Caribbean exist but are implemented to varying degrees. Data on rates of MTCT of HIV is available for 31 out of 52 countries² indicating that 60% of countries in the Americas have implemented perinatal surveillance systems for monitoring HIV-exposed infants.
- ◊ All countries have a national recommendation on infant feeding for HIV-exposed infants

(37 out of 37 countries reporting) and the majority have integrated national HIV and congenital syphilis elimination plans (30 out of 36 countries reporting). ◊ A majority offer rapid tests for HIV (31 out of 39 countries reporting) and Option B+ (defined as WHO-recommended life-long ARVs for all HIV-positive pregnant women) is currently provided by a majority of countries (34 out of 40 countries reporting)(Figure 3). ◊ Importantly only a minority of countries provide

WHO-recommended TDF/3TC(FTC)/EFV as first line antiretroviral therapy (ART) regimen for HIV-positive pregnant and breastfeeding women (14 out of 33 countries reporting). ◊ Gaps in information still remain as data on implementation of these policies is incomplete and not systematically available for all 52 countries in the Americas (*Appendix Table 1*).

²As mentioned in the Data Sources and Methods section, “countries” refers to both countries and territories in the Americas.

Figure 3. Country-reported policy and programmatic elements to support the elimination of MTCT of HIV and syphilis in the Americas, 2013.



Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

5.2. Provision of HIV Services

5.2.1. Antenatal Care

Coverage

- ◊ In 2013, an estimated 94% of pregnant women in the Americas (93% in LAC) received at least one antenatal care visit by trained personnel.
- ◊ In countries with less than 90% coverage of one or more ANC visit no substantial improvements have been reported in the past decade.
- ◊ In 2013, an estimated 90% of pregnant women in the Americas (87% in LAC) attended four or more ANC visits. Lower coverage was reported in Bolivia (59%), Nicaragua (75%), El Salvador (80%), the Bahamas (85%) and Peru (87%).
- ◊ The percentage of women attending four or more ANC visits compared to one ANC visit decreased by 10% or more in at least 11 countries.
- ◊ Lower coverage for four or more ANC visits compared to one ANC visit may be due to late presentation to ANC, quality of antenatal

care issues, and/or loss to follow-up of pregnant women.

- ◊ In 2013, an estimated 95% of pregnant women in the Americas (94% in LAC) were provided health care at birth by trained personnel, of which 94% gave birth at a hospital (92% in LAC). Countries with lower percentages of women provided health care at birth by trained personnel included Bolivia (74%) and Haiti (50%).
- ◊ Regional figures may hide lower antenatal care coverage in a small number of countries, and within countries at subnational and local levels.
- ◊ In regards to country specific ANC information systems, the majority of countries report data from established registries. For example, 68% of countries provide data from established registries reporting on pregnant women attending at least one ANC visit (31/46), 73% of countries have registries reporting on pregnant

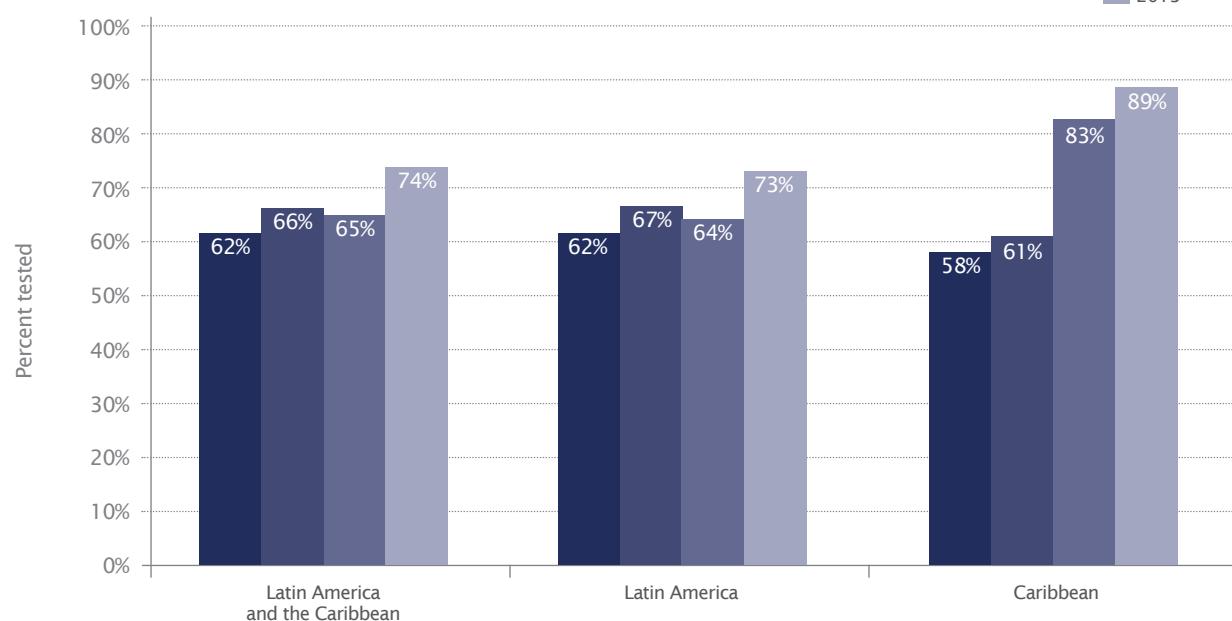
women attending four or more ANC visits (27/37), and 64% and 87% have registries reporting on pregnant women having health care at birth by trained personnel (30/47), and pregnant women giving birth in hospitals (40/46), respectively. The remaining data, from 6% to 22% of countries depending on the indicator, comes from data collected via surveys (*Appendix Table 6*, *Appendix Table 7*).

5.2.2. HIV Testing and Counseling among Pregnant Women

- ◊ HIV testing and counseling among pregnant women in LAC has increased 19% from 2010 to 2013 with 74% of pregnant women receiving an HIV test in 2013 (*Figure 4; Appendix Table 2*).
- ◊ Based on this data and ANC coverage data, approximately 17% of pregnant women who attended ANC did not receive HIV testing and counseling (*Figure 5*).

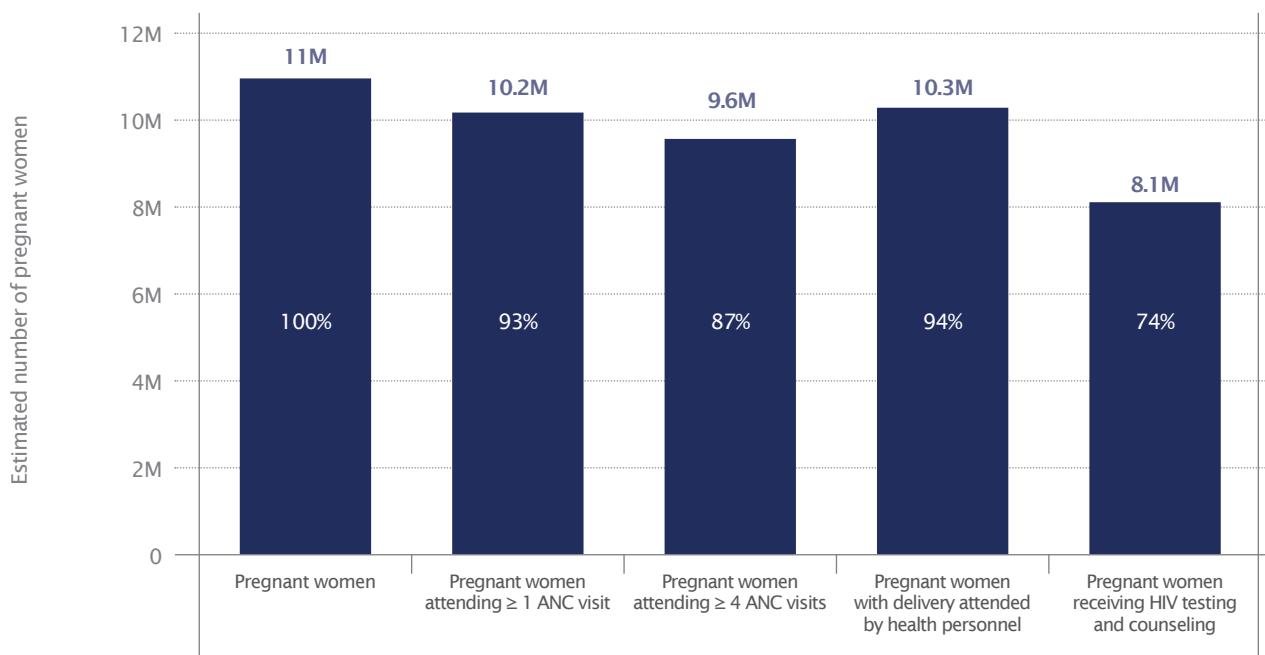
Figure 4. Trends in HIV testing and counseling among pregnant women in Latin America and the Caribbean, 2010-2013.

2010
2011
2012
2013



Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014) (numerator) and UN Population Division (2013, the 2012 revision) and the US Bureau of the Census estimates (denominator).

Figure 5. ANC care, delivery, and HIV testing for pregnant women in Latin America and the Caribbean, 2013.



Note: M=Millions.

Source: PAHO Health Information and Analysis project Regional Core Health Data Initiative, UNAIDS/WHO Country Global AIDS Response Progress Reports (2014), UN Population Division (2013, the 2012 revision) and the US Bureau of the Census estimates.

5.2.3. HIV Treatment among HIV-Positive Pregnant Women

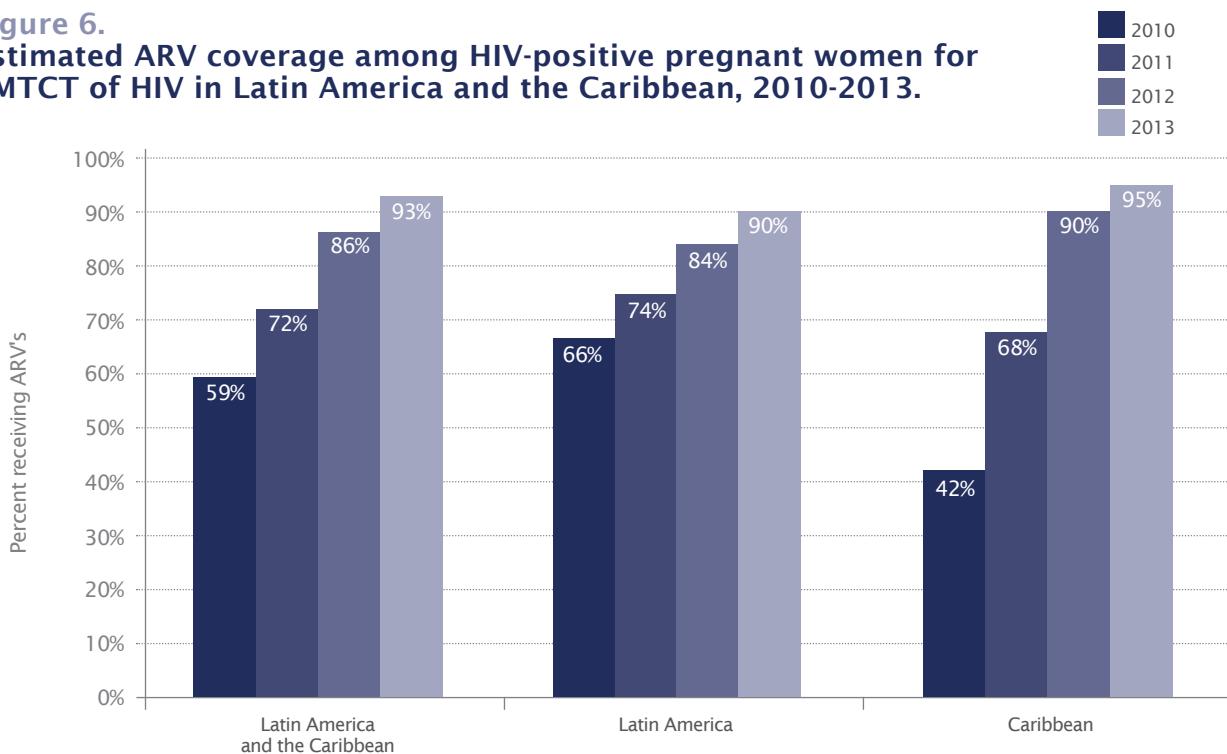
- In 2013, 93% [51%-100%] of HIV-positive pregnant women in low and middle income countries in the Americas received ARVs for PMTCT of HIV. This is almost a two-fold increase since 2010 (*Figure 6*).
- High coverage of ART for

PMTCT (93%) and low HIV testing and counseling coverage (74%) may coexist due to several factors. First of all, HIV testing services rendered by private practitioners may not be included in national information systems. Second of all, there may be different sources for

the denominators of each indicator. Third of all, targeted HIV testing may occur in which HIV-positive women have more chances of being tested. Lastly, repeat pregnancies among previously identified HIV-positive women that are already on ART may also affect this data.

Figure 6.

Estimated ARV coverage among HIV-positive pregnant women for PMTCT of HIV in Latin America and the Caribbean, 2010-2013.



Source: PAHO, Unpublished 2014 updated estimates, based on UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

5.3. Elimination of MTCT of HIV: Pediatric HIV Infections

- In LAC the number of new HIV infections among children ages 0-14 years old declined significantly from 2001 to 2013 (*Figure 7, Appendix Table 3*) with a 22% reduction in Latin America and a 72% reduction in the Caribbean from 2010 to 2013.
- In the Americas the percentage of HIV-exposed

infants undergoing early infant diagnosis testing within two months of birth in 2013 ranged from 1% to more than 95% testing (*Appendix Table 4*). This wide range may be due to gaps in testing coverage or reporting of testing, or may represent infants getting tested beyond 2 months of age.

In 2012, the most recent year for which data is available,

specific country-reported MTCT HIV transmission rates ranged from 0% to 8% (*Table 11*).

- Based on modeling tools developed by UNAIDS (see Data Sources and Methods section), and consistent with country-reported transmission rates and regional ARV coverage for PMTCT of HIV, the estimated rate of HIV-exposed infants contracting

HIV in LAC decreased from 18% (uncertainty bounds: 14%-25%) in 2010 to 5% (uncertainty bounds: 2%-23%) 2013 (*Figure 8*). This 5% transmission rate in 2013 is consistent with the high level of ART coverage among HIV-positive pregnant women in LAC (93% [51%-100%]), and the fact that almost all countries in LAC report having 7% or less MTCT HIV transmission rate in 2012.³

- ◊ This 2013 MTCT of HIV transmission rate corresponds to an estimated 1,200 newly HIV-infected infants [500-5,600] in LAC in 2013. Other estimates may vary due to data values, small numbers, assumptions, and uncertainty around estimates, i.e. UNAIDS estimates 2,300

[1,500-8,400] children (0-14 years old) newly infected with HIV in LAC in 2013 [11].

- ◊ In 2013 nine countries in the Americas report data compatible with meeting HIV MTCT elimination goals of ≤2% transmission rate and a pediatric HIV rate of <0.3 per 1,000 live births, four more than in 2010. These countries include Anguilla, Barbados, Canada, Cuba, Jamaica, Montserrat, Puerto Rico, St. Kitts and Nevis, and the US. In addition, eight countries in the Americas are close to meeting the elimination goals (*Table 10*).

Accurately determining progress is complex and requires comprehensive and sensitive surveillance and monitoring

systems. Fluctuations in transmission rates occur particularly in countries with small populations of HIV-positive pregnant women which may move them away or towards the goal. In such cases, multiple years of data may be used to better determine whether elimination goals have been met or not.⁴ Important to note is the fact that 19 countries had insufficient information to ascertain their progress towards meeting the elimination goals. ■

³In 2012, PAHO estimated 2,900 infants newly infected with HIV. ART coverage among pregnant women signals that rate of MTCT of HIV in LAC will decrease and cause the number of newly HIV-infected infants from 2012 to 2013 to also decrease.

⁴For validation purposes special considerations will be applied to countries with small numbers of HIV positive pregnant women, including pooling of data from multiple years (e.g. 3-5 years), calculating the transmission rate based on the pooled data, and in-depth review of each case of vertical transmission. If it is documented that all possible PMTCT measures were applied but transmission occurred anyway, such a case should not count against a country's achievement of elimination.

Table 10. Classification of countries and territories in the Americas regarding achievement of HIV MTCT elimination goals, 2013.

Met HIV MTCT elimination goal (≤ 2% estimated HIV MTCT rate)*	Close to HIV MTCT elimination goal (> 2% to ≤ 5% estimated HIV MTCT rate)	Progression to HIV MTCT elimination goal <th>Insufficient information to ascertain progress</th>	Insufficient information to ascertain progress
Anguilla Barbados Canada Cuba Jamaica 	Bahamas Brazil Chile Costa Rica Guyana Nicaragua Suriname Trinidad and Tobago	Antigua and Barbuda Argentina Belize Bolivia (Plurinational State of) Colombia Ecuador El Salvador Guatemala Haiti Honduras Mexico Panama Paraguay Peru Saint Vincent and the Grenadines Uruguay	Aruba Bermuda Bonaire Cayman Islands Curaçao Dominica Dominican Republic French Guyana Grenada Guadeloupe Martinique Saba Saint Lucia Sint Eustatius Sint Maarten Turks and Caicos Islands Venezuela (Bolivarian Republic of) Virgin Islands (UK) Virgin Islands (US)

Sources: PAHO indicators reported by countries in the UNAIDS/WHO Country Global AIDS Response Progress Reports (2014); PAHO 2010 Situation Analysis: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis (2011); PAHO 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas (2012).

Note: Based on 2012-2013 data

*Also meets pediatric HIV rate < 0.3 per 1,000 live births

Table 11. Data on infants exposed to HIV, diagnosed with HIV and estimated MTCT HIV rates, 2010, 2012 and 2013.

Countries	Number of infants perinatally exposed to HIV	Number of infants with indeterminate HIV status	Number of infants diagnosed with HIV	HIV MTCT transmission rate, approximated/un-corrected figure (%)	Number of infants perinatally exposed to HIV	Number of infants with indeterminate HIV status	Number of infants diagnosed with HIV	HIV MTCT transmission rate, approximated/un-corrected figure (%)	Country reported modeled HIV transmission rate (%)
	2010				2012				2013
North America									
Canada	...	...	...	1.7	225	34	0	0	...
Mexico	...	...	78	...	...	...	...	...	6.6
United States of America	...	...	...	1.7	...	...	...	2 ^a	...
Central America									
Costa Rica	35	...	1	2.9	35	0	1	2.9	5.3
El Salvador	113	...	3	2.7	129	26	8	7.8	24.8
Guatemala	...	...	...	...	...	...	...	...	24.7
Honduras	...	...	...	...	195 (2013)	0	10 (2013)	5.1	19.7
Nicaragua	90	...	4	4.4	120	31	4	4.5	3.6
Panama	123	25	1	0.8	173	13	8	5.0	5.5
Andean Region									
Bolivia (Plurinational State of)	...	...	...	...	145 (2013)	...	7 (2013)	5.2	8.7
Colombia	566	146	28	4.9	809 (2011)	...	39 (2011)	4.8	4.8
Ecuador	403	...	...	...	...	...	...	...	7.4
Peru	614 (2011)	...	27 (2011)	4.4	522 (2013)	...	39 (2013)	7.0	9.2
Venezuela (Bolivarian Republic of)	...	...	...	...	...	...	...	...	21.9
Southern Cone and Brazil									
Argentina	2,761	828	97	3.5	1376 (2011)	413	50 (2011)	5.2	4.3
Brazil	...	...	...	...	6876	102	307	4.5	3.6
Chile	196	13	5	2.6	159	5	6	3.9	5.3
Paraguay	165	46	5	3.0	160	33	7	6.0	14.3
Uruguay	77	7	6	7.8	135	...	7	5.2	5.2
Caribbean									
Anguilla	2	0	0	0	0 (2013)	0 (2013)	0 (2013)	0 ^b	...
Antigua and Barbuda	5	0	0	0	2	0 (2013)	1	50.0	33.3
Aruba	...	...	0	...	...	...	...	...	...
Bahamas	77	...	0	0	72	12	2	3.3	2.9
Barbados	20	0	0	0	22	0	0	0	0
Belize	61	0	4	6.6	47 (2013)	0 (2013)	3 (2013)	6.4	...
Bermuda	...	...	...	...	...	...	...	...	...
Bonaire	...	...	...	...	...	...	...	...	...
Cayman Islands	...	...	0	...	...	...	...	...	...

Table 11 (continued).

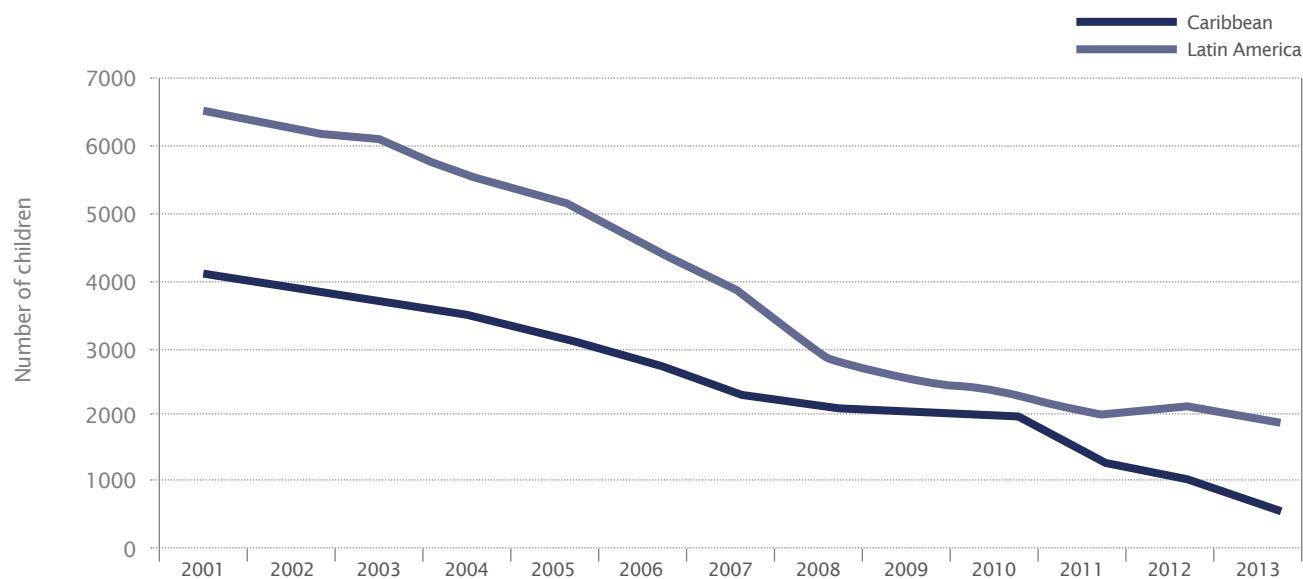
Countries	Number of infants perinatally exposed to HIV	Number of infants with indeterminate HIV status	Number of infants diagnosed with HIV	HIV MTCT transmission rate, approximated/un-corrected figure (%)	Number of infants perinatally exposed to HIV	Number of infants with indeterminate HIV status	Number of infants diagnosed with HIV	HIV MTCT transmission rate, approximated/un-corrected figure (%)	Country reported modeled HIV transmission rate (%)
	2010				2012				2013
Cuba	58	0	1	1.7	198	0	2	1.9	1.8
Curaçao	...	...	...	...	...	...	...	...	...
Dominica	3	0	0	0	3 (2013)	1	0 (2013)	0	...
Dominican Republic	522	367	30	5.7	...	...	...	...	...
French Guiana	...	...	...	...	...	...	...	...	...
Grenada	2	0	0	0	...	...	...	...	...
Guadeloupe	...	...	...	...	...	...	...	...	...
Guyana	201	0	5	2.5	192 (2013)	0	4 (2013)	2.1	1.6
Haiti	419	...	0	4.8	2944	...	2255	...	6.4
Jamaica	...	...	...	...	445 (2013)	5	8 (2013)	...	6.4
Martinique	...	...	...	...	...	...	...	...	...
Montserrat	...	...	0	...	0	0	0	0	...
Puerto Rico	...	...	...	...	24	9	0	0	...
Saba	...	...	...	...	...	...	...	...	...
Saint Kitts and Nevis	0	0	0	0	0	0	0	0	...
Saint Lucia	9	3	0	0	...	...	...	...	0
Saint Vincent and the Grenadines	15	2	1	6.7	15 (2013)	1	1 (2013)	7.1	...
Sint Eustatius	...	...	...	...	...	...	...	0 ^b	...
Sint Maarten	...	...	0	...	...	...	...	...	...
Suriname	79	25	4	5.1	108	1	5	4.7	5.0
Trinidad and Tobago	181	3	0	0	190	81	0	0	6.3
Turks and Caicos Islands	...	...	0	...	...	...	...	...	...
Virgin Islands (UK)	...	...	0	...	...	...	...	...	...
Virgin Islands (US)	...	...	...	...	...	...	...	...	...

^aData from Centers for Disease Control and Prevention: Enhanced perinatal surveillance-15 areas, 2005-2008. HIV Surveillance Supplemental Report 2011;16(No.2).^bNo HIV-positive pregnant women.

Note: Excludes countries with no reported data: Bonaire, Curaçao, and Saba. Year refers to column year unless otherwise indicated.

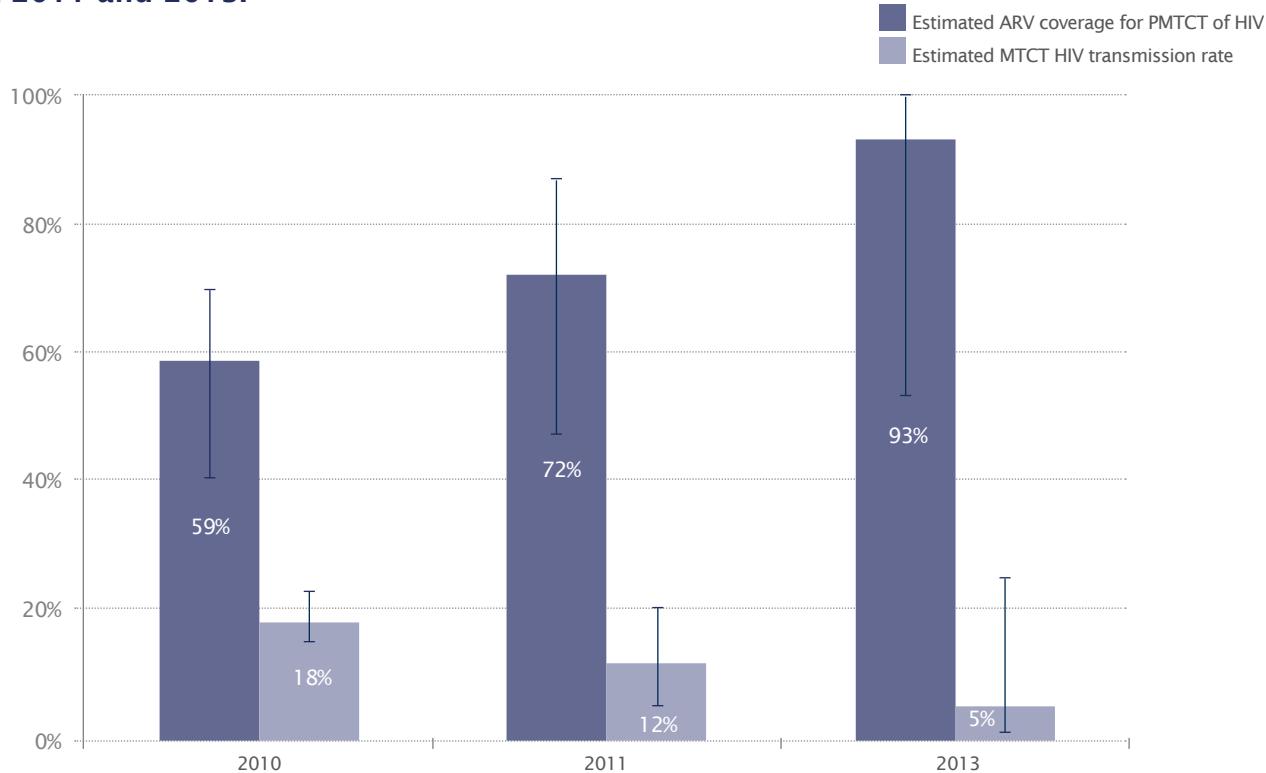
Sources: PAHO 2014 Country Reports and UNAIDS/WHO Country Global AIDS Response Progress Report 2014.

Figure 7. Estimated numbers of children (0-14 years old) newly infected with HIV in Latin America and the Caribbean, 2001-2013.



Source: 2014 UNAIDS Gap Report: HIV estimates with uncertainty bounds, 1990-2013.

Figure 8. Trends in estimated ARV coverage among HIV-positive pregnant women for PMTCT of HIV and estimated MTCT rate of HIV in Latin America and the Caribbean, 2010, 2011 and 2013.



Source: PAHO, Unpublished 2014 updated estimates, based on UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

6. Congenital Syphilis Policies, Provision of Services, and Elimination Goals

6.1. Congenital Syphilis Policies

- ◊ Rapid test technologies for syphilis diagnostic algorithms in antenatal care settings are currently available in 17 countries out of 33 reporting with an additional two countries

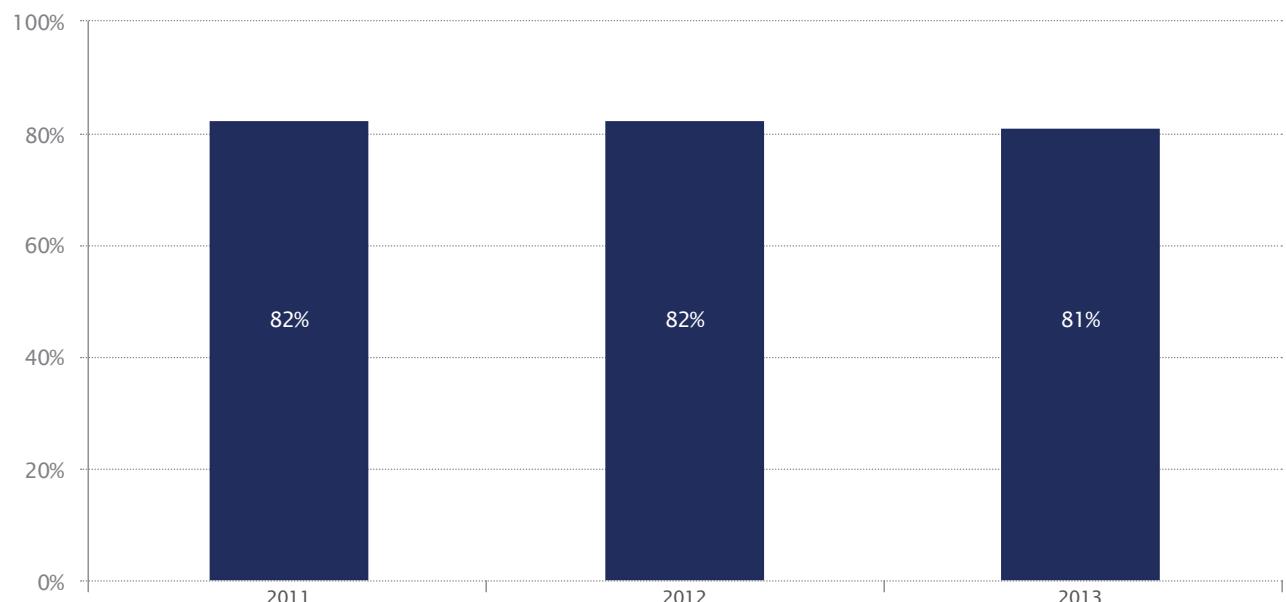
planning to incorporate this new technology soon (*Figure 3*).

6.2. Provision of Syphilis Services

6.2.1. Syphilis Testing among Pregnant Women

Syphilis testing among pregnant women has remained stable in LAC, from 2011 to 2013, at around 80% (*Figure 9*) and ranges in countries from 47% of pregnant women tested to more than 95% (*Table 12*).

Figure 9.
Syphilis testing among pregnant women attending antenatal care in Latin America and the Caribbean, 2011-2013.



Sources: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014); PAHO 2010 Situation Analysis: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis (2011); PAHO 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas (2012).

Table 12. Percentage of pregnant women tested for syphilis and prevalence of syphilis among those receiving antenatal care, 2011-2013.

Countries	Testing			Prevalence		
	2011 (%)	2012 (%)	2013 (%)	2011 (%)	2012 (%)	2013 (%)
North America						
Canada	...	...	...	...	...	...
Mexico	82	...	73	0.11	0.20	0.22
United States of America	83 ^a	...	...	...	...	...
Central America						
Costa Rica	88	...	...	0.30	...	...
El Salvador	76	90	91	0.24	0.25	0.20
Guatemala	14 ^b	42	47	0.25	0.41	0.10
Honduras	62 ^c	41	63	0.66 ^d	0.12	0.10
Nicaragua	35	...	>95	0.23	0.23	0.10
Panama	36 ^c	45	47	...	...	1.20
Andean Region						
Bolivia (Plurinational State of)	...	58	60	1.6	1.28	1.20
Colombia	74	83	...	1.0	0.60	...
Ecuador	...	...	...	0.25	...	...
Peru	73	79	...	0.33	0.47	0.60
Venezuela (Bolivarian Republic of)	...	...	...	...	...	...
Southern Cone and Brazil						
Argentina	91	91	98	1.09	1.09	1.11
Brazil	86	88	90	1.1 ^e	0.85	0.70
Chile	>95	>95	86	0.16	0.13	0.10
Paraguay	75	61	59	3.37	2.11	2.80
Uruguay	>95	...	>95	1.8 ^f	1.51	1.51
Caribbean						
Anguilla	>95	...	>95	0	...	0
Antigua and Barbuda	>95	72	>95	0	0.21	...
Aruba	...	...	...	...	...	...
Bahamas	>95	92	87	1.10	0.63	1.60
Barbados	83	>95	83	0.45	0.67	0.10
Belize	92	93	93	0.82	0.51	0.30
Bermuda	...	...	...	...	...	...
Bonaire	...	...	...	...	...	...
Cayman Islands	...	...	...	...	...	...
Cuba	>95	>95	>95	0.08	0.10	0.10
Curaçao	...	...	...	...	...	...
Dominica	>95	...	>95	2.33	...	1.90
Dominican Republic	...	14	...	...	3.36	0.60
French Guiana	...	...	...	...	...	...
Grenada	>95	...	>95	0.02	...	1.30

Table 12 (continued).

Countries	Testing			Prevalence		
	2011 (%)	2012 (%)	2013 (%)	2011 (%)	2012 (%)	2013 (%)
Caribbean						
Guadeloupe
Guyana	88	85	83	0.01	0.30	0.10
Haiti	62	...	3.90	3.50
Jamaica	...	86	87	1.25	...	2.10
Martinique
Montserrat	>95	0	...	0
Puerto Rico
Saba
Saint Kitts and Nevis	78	...	73	...	...	0
Saint Lucia	75	45	67	0.72	2.28	...
Saint Vincent and the Grenadines	0.65	...	...
Sint Eustatius	>95	...	...	0
Sint Maarten
Suriname	0.04
Trinidad and Tobago
Turks and Caicos Islands
Virgin Islands (UK)	0	...	...
Virgin Islands (US)

Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

^aGovernment Performance and Results Act (GPRA) Sexually Transmitted Diseases Goals, Measures, and Target.

^bThe denominator of pregnant women attending ANC used to calculate prevalence in 2012 and 2013 is the same as for 2011; the numerators for each year were 43,616 (2011), 133,277 (2012) and 150,297 (2013).

^cData from SIP database.

^d2008 data.

^e2004 data.

SIP 2012 report.

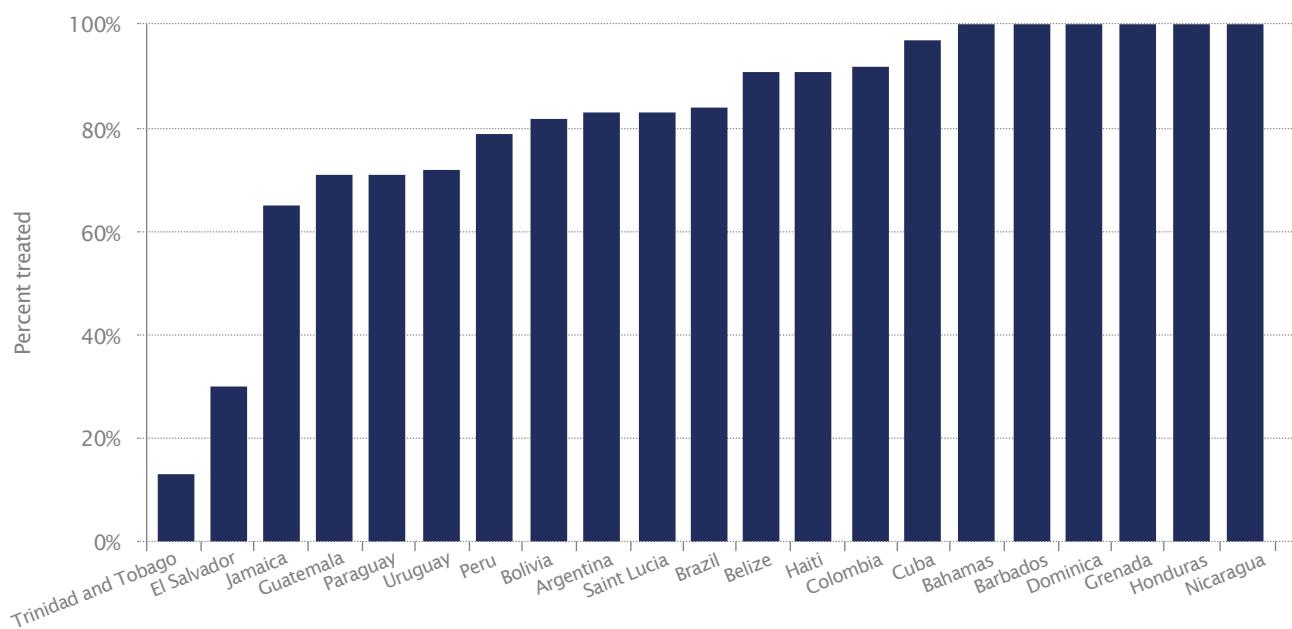
6.2.2. Syphilis Treatment among Pregnant Women

- ◊ Treatment for syphilis-positive pregnant women

in the Americas remains unreported by most countries. Appropriate syphilis treatment among countries reporting

data range from 13% to 100% with seven countries reporting > 95% treatment (*Figure 10*; *Appendix Table 5*).

Figure 10. Percentage of syphilis-positive pregnant women with documented appropriate syphilis treatment in Latin America and the Caribbean, 2013.



Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

6.3.Elimination of MTCT of Syphilis: Congenital Syphilis Cases

- ◊ In 2013, fifteen countries in the Americas report meeting the congenital syphilis elimination goal of ≤ 0.5 cases per 1,000 live births (*Table 14*), four more than in 2010.
- ◊ Congenital syphilis rates are triangulated with program coverage indicators (i.e. antenatal care coverage, syphilis testing and treatment among pregnant women)

and quality of surveillance system indicators as part of the assessment for reaching the syphilis MTCT elimination goal.

- ◊ Identification and systematic reporting of congenital syphilis cases and reporting on the provision of services to test and treat syphilis-positive pregnant women in the Americas remains a challenge, despite the improvement of surveillance systems in some areas (*Table 13*).

Some countries have changed the congenital syphilis case definition allowing it to be more sensitive (i.e. Brazil and Panama).

- ◊ Challenges to scale-up of services include: loss to follow up of pregnant women for syphilis testing, late access to antenatal care, frequent visits needed to health centers for diagnosis and treatment of syphilis, and limited use of rapid tests in point-of-care settings.

Table 13. Number of reported congenital syphilis cases and estimated rates of congenital syphilis in the Americas, 2009, 2010 and 2013.

Countries	2009		2010		2013	
	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births
North America						
Canada	8	0.02	...	...	3 (2012)	0.01 (2012)
Mexico	144	0.06	143	0.06	85	0.04
United States of America	429	0.10	377	0.09	322 (2012)	0.08 (2012)
Central America						
Costa Rica	72	0.98	69	0.94	83	1.13
El Salvador	21	0.20	12	0.10	47	0.05
Guatemala	59	0.13	...	...	12	0.03
Honduras	32	0.20	...	...	26	1.0
Nicaragua	10	0.07	5	0.30	1	0.01
Panama	32 (2008)	0.46	...	...	113	1.76 (2012)
Andean Region						
Bolivia (Plurinational State of)	...	...	...	...	...	...
Colombia	2,008	2.20	2,111	2.30	1,912	2.11
Ecuador	111	0.37	115	0.36	...	...
Peru	376	0.63	287	0.48	...	0.57 (2012)
Venezuela (Bolivarian Republic of)	170	0.28	...	...	28	0.05
Southern Cone and Brazil						
Argentina	644	0.93	656	0.95	731	1.05
Brazil	6,048	1.98	6,677	2.20	11,216	3.76 (2012)
Chile	64	0.26	62	0.25	55	0.22
Paraguay	390	2.50	...	...	...	2.3 (2011)
Uruguay	261	5.20	105	2.10	76	1.54
Caribbean						
Anguilla	0	0.00	0	0.00	0	0.00
Antigua and Barbuda	0	0.00	0	0.00	0	0 (2012)
Aruba	0	0.00	0	0.00	0	0.00
Bahamas	...	...	...	...	0	0.00
Barbados	1	0.25	0	0.00	0	0.00
Belize	0	0.00	6	0.80	0	0.00
Bermuda	0	0.00	0	0.00	0	0.00 (2012)
Bonaire	...	...	...	...	...	...
Cayman Islands	0	0.00	0	0.00	...	...
Cuba	0	0.00	3	0.03	3	0.03
Curaçao	...	...	...	...	...	...
Dominica	2	1.80	3	2.70	0	0.00

Table 13 (continued).

Countries	2009		2010		2013	
	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births	Number of reported congenital syphilis cases	Estimated congenital syphilis rate per 1,000 live births
Caribbean						
Dominican Republic	...	...	...	...	16	0.07
French Guiana	...	...	...	...	...	...
Grenada	0	0.00	3	1.50	9	4.40
Guadeloupe	0	0.00	...	...	...	...
Guyana	0	0.00	0	0.00	0	0.00
Haiti	...	...	...	...	...	...
Jamaica	4	0.08	6	0.12	...	0.41 (2012)
Martinique	...	...	...	...	...	...
Montserrat	0	0.00	0	0.00	0	0.00
Puerto Rico	5	0.10	2	0.04	1 ^a	0.02 (2012)
Saba	...	...	...	...	...	...
Saint Kitts and Nevis	0	0.00	0	0.00	...	...
Saint Lucia	...	...	...	...	1	0.36
Saint Vincent and the Grenadines	0	0.00	0	0.00	...	...
Sint Eustatius	...	...	...	...	0	0.00
Sint Maarten	...	...	...	...	...	...
Suriname	...	...	0	0.00	...	...
Trinidad and Tobago	45	2.3	...	...	...	...
Turks and Caicos Islands	0	0.00	0	0.00	...	...
Virgin Islands (UK)	0	0.00	0	0.00	...	...
Virgin Islands (US)	0	0.00	0	0.00	0	0.00 (2012)

Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

^aPuerto Rico data comes from CDC report: <http://www.cdc.gov/std/syphilis2012/PR12.pdf>.

Note: Year corresponds to column year unless otherwise indicated.

Table 14. Classification of countries and territories in the Americas regarding syphilis MTCT elimination goal, 2013.

Met syphilis MTCT elimination goal (≤ 0.5 per 1,000 live births*)	Progressing but not meeting syphilis MTCT elimination goal	Insufficient information to ascertain progress
Anguilla	Argentina	Aruba
Antigua and Barbuda	Belize	Bonaire
Bahamas	Bolivia (Plurinational State of)	Cayman Islands
Barbados	Brazil	Curaçao
Bermuda	Colombia	Dominican Republic
Canada	Costa Rica	Ecuador
Chile	El Salvador	French Guiana
Cuba	Grenada,	Guadeloupe
Dominica	Guatemala	Martinique
Montserrat	Guyana	Panama
Nicaragua	Haiti	Saba
Puerto Rico	Honduras	Saint Kitts and Nevis
United States of America	Jamaica	Saint Vincent and the Grenadines
Virgin Islands (UK)	Mexico	Sint Eustatius
Virgin Islands (US)	Saint Lucia	Sint Maarten
	Paraguay	Suriname
	Peru	Trinidad and Tobago
	Uruguay	Turks and Caicos Islands
		Venezuela (Bolivarian Republic of)

Sources: PAHO indicators reported by countries in the UNAIDS/WHO Country Global AIDS Response Progress Reports (2014); PAHO 2010 Situation Analysis: Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis (2011); PAHO 2012 Progress Report: Elimination of Mother-to-Child Transmission of HIV and Syphilis in the Americas (2012).

Note: Categories are based on analysis using 2011–2013 data.

*Congenital syphilis rate ≤ 0.5 per 1,000 live births and syphilis testing among pregnant women > 95% and treatment > 95%.

6.4. Dual Elimination of MTCT of HIV and Syphilis

In 2013, seven countries in the Americas, including Anguilla, Barbados, Canada, Cuba, Montserrat, Puerto Rico, and the USA, report data compatible with dual elimination of MTCT of HIV and syphilis. ■

7. Next Steps

While much progress has been made towards eliminating MTCT of HIV and syphilis in the Americas in recent years, improvements in policies and services to achieve elimination goals are still needed. Areas for action towards eliminating HIV and congenital syphilis include:

- ◊ Closing service delivery gaps and achieving greater stability of country antenatal care services and advancements.
- ◊ Accelerating efforts and political support to improve quality of maternal and child health services and expand HIV and syphilis testing and treatment and follow-up of exposed infants.
- ◊ Improving maternal and child health information systems.

- ◊ Implementing perinatal surveillance systems for monitoring HIV-exposed infants by adapting and/or enhancing existing systems in order to better monitor progress and ensure highly sensitive surveillance systems.
- ◊ Analyzing results at subnational levels and by specific sub-populations, which could help address the needs of vulnerable women such as young women, indigenous women, sex workers, and women who use drugs or are homeless as these women are more likely to fall through the cracks of the existing health services.
- ◊ Reviewing data on women living with HIV to and

improving strategies to identify and reach underserved groups.
◊ Countries reporting figures compatible with meeting HIV and syphilis MTCT dual elimination goals should consider initiation of the validation process through development of a country report. This process is also useful for countries further away from the goals, as this may help identify and address bottlenecks and gaps in service delivery [12].
◊ Targeted technical cooperation will be required to accelerate progress and, where appropriate, facilitate validation and PAHO will intensify resource mobilization efforts to continue this technical cooperation. ■

8. References

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9. APPENDIX TABLES

Appendix Table 1. Country specific information on policy and programmatic elements related to the Elimination Initiative among pregnant women in the Americas.

Countries	National elimination plan		Current nationally recommended PMTCT option		TDF/3TC(FTC)/EFV is current nationally recommended first line ART regimen for pregnant and breastfeeding women with HIV	National recommendation on infant feeding for HIV-exposed infants	Rapid tests for diagnosing gestational syphilis utilized in ANC settings	Rapid tests for diagnosing HIV
	HIV MTCT elimination plan	Integrated HIV and congenital syphilis elimination plan	Non-integrated elimination plans	Option B	Option B+			
North America								
Canada	...	...	...	...	...	...	...	...
Mexico	No	...	...	No	Yes	No	Yes	Yes
United States of America	Yes	...	...	...	...	...	...	...
Central America								
Costa Rica	Yes	Yes	No	No	Yes	No	Yes	No
El Salvador	Yes	Yes	No	No	Yes	Yes	Yes	Planned
Guatemala	Yes	Yes	No	No	Yes	No	Yes	Yes
Honduras	Yes	Yes	No	No	Yes	No	Yes	Yes
Nicaragua	Yes	Yes	No	Yes	No	No	Yes	Yes
Panama	Yes	Yes	No	No	Yes	No	Yes	Yes
Andean Region								
Bolivia (Plurinational State of)	Yes	Yes	No	No	Yes	Yes	Yes	No
Colombia	Yes	Yes	No	No	Yes ^a	No	Yes	Yes
Ecuador	Yes	No	Yes	Yes	No	Yes	Yes	No
Peru	Yes	Yes	No	No	Yes	No	Yes	Yes
Venezuela (Bolivarian Republic of)	Yes	Yes	No	No	Yes	No	No	Yes
Southern Cone and Brazil								
Argentina	Yes	Yes	No	No	Yes	No	Yes	Yes
Brazil	Yes	Yes	No	No	Yes	No	Yes	Yes

Appendix Table 1 (continued).

Countries	National elimination plan		Current nationally recommended PMTCT option		TDF/3TC(FTC)/EFV is current nationally recommended first line ART regimen for pregnant and breastfeeding women with HIV	National recommendation on infant feeding for HIV-exposed infants	Rapid tests for gestational syphilis utilized in ANC settings	Rapid tests for diagnosing HIV
	HIV MTCT elimination plan	Integrated HIV and congenital syphilis elimination plan	Option A	Option B+ Non-integrated elimination plans				
Southern Cone and Brazil								
Chile	Yes	Yes	No	No	Yes	No	Yes	No
Paraguay	Yes	Yes	Yes	Yes	No	No	Yes	Yes
Uruguay	Yes	Yes	No	No	Yes	No	Yes	Yes
Caribbean								
Anguilla	Yes ^a	No	Yes ^a	No	Yes ^a	Yes ^a	Yes ^a	Yes ^a
Antigua and Barbuda	No	...	...	No	Yes	Yes	Yes	...
Aruba	Yes ^a	Yes ^a	No	No	In progress ^a	Yes ^a	Yes ^a	Yes ^a
Bahamas	Yes	Yes	No	Yes	No	No	Yes	No
Barbados	Yes	Yes	No	Yes	No	...	Yes	Yes
Belize	Yes	Yes	No	No	Yes	No	Yes	Yes
Cayman Islands	Yes ^a	Yes ^a	No	Yes ^a	No ^a	In progress ^a	Yes ^a	No ^a
Cuba	Yes	Yes	No	No	Yes	Yes	No ^a	Yes
Dominica	No	Yes	No	Yes	Yes	Yes	Yes	Yes
Dominican Republic	Yes	Yes	No	No	Yes ^a	Yes	Planned	Planned
French Guiana	...	...	No	Yes ^a	...	...	...	...
Grenada	Yes	...	No	Yes ^a	...	...	...	Yes
Guadeloupe	...	...	No	Yes ^a	...	...	...	...
Guyana	Yes	Yes	No	Yes	Yes	Yes	No	Yes
Haiti	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Jamaica	Yes	Yes	No	Yes	No	Yes	Yes	Yes
Martinique	...	...	No	Yes ^a	...	...	...	...
Montserrat	Yes ^a	Yes ^a	No	No	Yes ^a	Yes ^a	No ^a	No ^a
Saint Kitts and Nevis	No	No	Yes ^a	...	...	...	No ^a	No ^a
Saint Lucia	...	...	...	...	...	Yes	...	...

Appendix Table 1 (continued).

Countries	National elimination plan		Current nationally recommended PMTCT option		TDF/3TC(FTC)/EFV is current nationally recommended first line ART regimen for pregnant and breastfeeding women with HIV	National recommendation on infant feeding for HIV-exposed infants	Rapid tests for gestational syphilis utilized in ANC settings	Rapid tests for diagnosing HIV
	HIV MTCT elimination plan	Integrated HIV and congenital syphilis elimination plan	Option A	Option B+ Non-integrated elimination plans				
Caribbean								
Saint Vincent and the Grenadines	No	No	Yes ^a	No	Yes ^a	Yes ^a	Yes ^a	No ^a
Sint Eustatius	...	No	Yes ^a	...	...	...	...	No ^a
Suriname	Yes ^a	Yes ^a	No	No	Yes ^a	Yes ^a	Yes ^a	No ^a
Trinidad and Tobago	Yes	Yes ^a	No	No	Yes ^a	Yes ^a	Yes ^a	Yes ^a
Turks and Caicos Islands	Yes ^a	Yes ^a	No ^a	No	Yes ^a	No ^a	Yes ^a	Yes ^a
Virgin Islands (UK)	No ^a	Yes ^a	No	No	Yes ^a	Yes ^a	Yes ^a	Yes ^a
Virgin Islands (US)	...	...	...	...	...	...	...	...

Note: Table data presented excludes countries not reporting data on any variables: Bermuda, Bonaire, Curacao, Puerto Rico, Saba, Sint Maarten, and Virgin Islands (US).

Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014) and direct communication to PAHO.

^aDirect communication to PAHO.

Appendix Table 2. Estimated percentage of HIV testing and counseling among pregnant women in the Americas, 2010, 2011 and 2013.

Countries	2010 (%)	2011 (%)	2013 (%)
North America			
Canada	97-98 ^a	...	...
Mexico	...	37	69
United States of America	98 (2008)	...	98 ^b
Central America			
Costa Rica	78	84	85
El Salvador	56	67	>95
Guatemala	21	30	35
Honduras	62	...	63
Nicaragua	65 ^c	>95	>95
Panama	85	>95	92
Andean Region			
Bolivia (Plurinational State of)	50	61	82
Colombia	49	61	62
Ecuador	92	94	87
Peru	78	78	61
Venezuela (Bolivarian Republic of)	...	...	60
Southern Cone and Brazil			
Argentina	>95	>95	>95
Brazil	79	...	80
Chile	46 (2010)	82	68 ^d
Paraguay	46	48	61
Uruguay	72	...	93
Caribbean			
Anguilla	>95	...	87
Antigua and Barbuda	71	55	59
Aruba	...	...	...
Bahamas	...	73	72
Barbados	61	63	47 ^e
Belize	81	87	82
Bermuda	...	...	...
Bonaire	...	...	...
Cayman Islands	...	...	...
Cuba	>95	>95	>95
Curaçao	...	...	...
Dominica	72	64	70
Dominican Republic	41	46	77
French Guiana	...	...	...
Grenada	>95 ^e	>95 ^e	87
Guadeloupe	...	...	...

Appendix Table 2 (continued).

Countries	2010 (%)	2011 (%)	2013 (%)
Caribbean			
Guyana	>95	>95 ^e	90
Haiti	51	... ^g	93
Jamaica	50 ^d	55 ^d	67 ^d
Martinique	...	...	...
Montserrat	68 ^f	68 ^f	>95 ^f
Puerto Rico	...	...	85 ^d
Saba	...	...	...
Saint Kitts and Nevis	...	56	75
Saint Lucia	62 ^h	65 ^h	72
Saint Vincent and the Grenadines	>95	>95	>95
Sint Eustatius	...	...	>95
Sint Maarten	...	...	...
Suriname	88	85	85
Trinidad and Tobago	76 ^d	70 ^d	69 ^d
Turks and Caicos Islands	...	60	...
Virgin Islands (UK)	75	84	...
Virgin Islands (US)	...	...	...

Note: Year corresponds to column year unless otherwise indicated.

Sources: PAHO Health Information and Analysis project, Regional Core Health Data Initiative, Washington DC, 2014; UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

^aCountry-reported value

^bData from Centers for Disease Control and Prevention. Enhanced perinatal surveillance—15 areas, 2005–2008. HIV Surveillance Supplemental Report 2011;16(No. 2).

^cNicaragua for 2011 considered that 142,087 pregnant women were tested out of 163,376 estimated pregnant women, which would indicate 87% HIV testing coverage. In 2010, the country reported that 56% of pregnant women were tested for HIV. Nicaragua conducted a study in 2011 that revealed that 88% of pregnant women who were tested received their results.

^dNumerator comes from public sector only. Barbados, Chile, Jamaica, Puerto Rico and Trinidad and Tobago report >95% HIV testing coverage among pregnant women in the public sector.

^eFigure reflects number of tests rather than number of pregnant women tested.

^fData reported directly to PAHO.

^gHaiti reported HIV testing coverage of 43% among pregnant women in 2010 and 78% in 2011.

^hSaint Lucia reported HIV testing coverage of 99% among pregnant women in 2010 and 96% in 2011.

Appendix Table 3. Number of women and children living with HIV and prevalence of HIV among young women in selected countries in the Americas, 2010-2013.

Countries	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	2010			2011			2012			2013		
				Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV
North America															
Mexico	34 000	<0.1	2300	34 000	<0.1	2300	9200	0.2	2500	36 000	<0.1	2200			
Central America															
Costa Rica	1300	<0.1	...	1400	<0.1	...	35 000	0.2	...	1400	<0.1	...			
El Salvador	8400	0.3	<1000	8600	<0.1	<1000	11 000	0.2	<1000	9200	0.3	<1000			
Guatemala	17 000	0.3	2600	18 000	0.3	2700	8900	0.3	<1000	19 000	0.3	3100			
Honduras	9800	0.1	3000	9500	0.1	2800	3800	1.0	...	9000	0.2	2200			
Nicaragua	1700	<0.1	<200	1800	<0.1	<200	35 000	<0.1	2300	2100	<0.1	<200			
Panama	4100	0.2	<500	4200	0.2	<500	2000	<0.1	<200	4600	0.3	<500			
Andean Region															
Bolivia (Plurinational State of)	4900	<0.1	1400	4700	<0.1	1300	1400	0.6	<500	4600	<0.1	1000			
Colombia	35 000	0.2	...	35 000	0.2	...	4700	<0.1	...	35 000	0.2	...			
Ecuador	10 000	0.2	1000	11 000	0.2	<1000	1400	<0.1	...	11 000	0.2	<1000			
Peru	19 000	0.2	3100	19 000	0.2	2900	4600	0.2	<500	20 000	0.2	2400			
Venezuela (Bolivarian Republic of)	32 000	0.3	3300	33 000	0.2	3200	2800	0.2	...	35 000	0.2	3000			
Southern Cone and Brazil															
Argentina	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Brazil	...	...	...	...	...	...	4600	<0.1	1100	210 000	0.2	...			
Chile	4100	<0.1	...	4400	<0.1	...	...	...	...	5000	<0.1	...			
Paraguay	3600	0.2	<500	4100	0.2	<500	4400	0.3	<500	5200	0.2	<500			
Uruguay	2700	0.2	...	2700	0.2	...	1500	0.3	...	2900	0.2	...			
Caribbean															
Bahamas	3700	2.0	<200	3700	2.0	<200	3700	1.9	<200	3700	1.9	<200			
Barbados	<500	0.3	...	<500	0.3	...	<500	0.3	...	<500	0.3	...			

Appendix Table 3 (continued)

Countries	2010			2011			2012			2013		
	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV	Estimated women (15+) living with HIV	Young women (15-24) prevalence (%)	Estimated children (0-14) living with HIV
Caribbean												
Belize	1300	0.7	<500	1300	0.6	<500	...	...	...	1400	0.6	<500
Cuba	2800	<0.1	...	3100	<0.1	...	3400	<0.1	...	3600	<0.1	...
Dominican Republic	23 000	0.3	...	23 000	0.2	...	22 000	0.2	...	22 000	0.2	...
Guyana	3500	1.0	...	3700	1.0	...	19 000	0.3	2900	4000	0.9	...
Haiti	73 000	0.9	17 000	74 000	0.9	16 000	74 000	0.9	15 000	74 000	0.9	13 000
Jamaica	11 000	0.7	<1000	11 000	0.7	<1000	11 000	0.7	<1000	11 000	0.6	<1000
Suriname	1500	0.3	...	1500	0.3	...	20 000	0.2	2600	1500	0.3	...
Trinidad and Tobago	7100	1.1	<500	7100	1.0	<500	7100	1.0	<500	7100	0.9	<500

Source: 2014 UNAIDS Gap Report: HIV estimates with uncertainty bounds, 1990-2013.

Appendix Table 4. Infants of HIV-positive women in the Americas reported to have undergone early infant diagnosis testing within 2 months of birth, 2011-2013.

Countries	Number (% range low-high ^a)		
	2011	2012	2013
North America			
Canada	...	...	...
Mexico	...	...	...
United States of America	...	...	...
Central America			
Costa Rica	35 (63->95)	43 (91->95)	38 (70->95)
El Salvador	108 (13-42)	...	125 (13-55)
Guatemala	228 (2-66)	206 (11-67)	140 (1-52)
Honduras	390 (57-90)	176 (28-44)	186 (31-51)
Nicaragua	149 (92->95)	66 (38-88)	79 (44->95)
Panama	123 (48-84)	65 (25-43)	121 (46-80)
Andean Region			
Bolivia (Plurinational State of)	151 (25-84)	...	...
Colombia	287 (13-23)	332 (15-27)	454 (21-38)
Ecuador	621 (68->95)	550 (58->95)	134 (13-39)
Peru	132 (8-18)	248 (15-35)	353 (21-52)
Venezuela (Bolivarian Republic of)	186 (7-24)	90 (3-12)	125 (5-16)
Southern Cone and Brazil			
Argentina	190 (13-22)	190 (12-22)	190 (12-22)
Brazil	4,163 (61-83)	2,241 (33-45)	4,095 (62-84)
Chile	183 (>95->95)	153 (73->95)	155 (65->95)
Paraguay	107 (20-64)	160 (26-90)	127 (18-69)
Uruguay	76 (46->95)	96 (55->95)	135 (72->95)
Caribbean			
Anguilla	...	...	...
Antigua and Barbuda	5 (...)	1 (...)	4 (...)
Aruba	...	...	...
Bahamas	...	66 (42-53)	65 (...)
Barbados	...	...	16 (...)
Belize	61 (63-86)	44 (46-65)	...
Bermuda	...	...	...
Bonaire	...	...	...
Cayman Islands	...	...	...
Cuba	93 (>95->95)	108 (>95->95)	111 (>95)
Curaçao	...	...	...
Dominica	...	...	2 (...)
Dominican Republic	522 (35-81)	552 (39-88)	671 (56->95)
French Guiana	...	...	...
Grenada	0 (...)	4 (...)	2 (...)

Appendix Table 4 (continued).

Countries	Number (% range low-high^a)		
	2011	2012	2013
North America			
Guadeloupe	...	...	...
Guyana	90 (26->95)	71 (20-85)	62 (17-75)
Haiti	...	2,255 (35-44)	2,088 (33-43)
Jamaica	...	...	...
Martinique	...	...	...
Montserrat	...	...	...
Puerto Rico	...	...	...
Saba	...	...	...
Saint Kitts and Nevis	...	...	0 (...)
Saint Lucia	3 (...)	7 (...)	5 (...)
Saint Vincent and the Grenadines	15 (...)	14 (...)	13 (...)
Sint Eustatius	...	...	...
Sint Maarten	...	...	...
Suriname	9 (11-15)	...	...
Trinidad and Tobago	...	69 (31-40)	117 (...)
Turks and Caicos Islands	...	...	...
Virgin Islands (UK)	...	...	...
Virgin Islands (US)	...	...	...

Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

^aCalculated for countries with available denominators.

Appendix Table 5. Percentage of syphilis-positive pregnant women with documented appropriate treatment in the Americas, 2011-2013.

Countries	2011 (%)	2012 (%)	2013 (%)
North America			
Canada	...	...	...
Mexico	...	...	...
United States of America	...	...	...
Central America			
Costa Rica	73	...	...
El Salvador	24	12	30
Guatemala	>95	...	71
Honduras	...	>95	>95
Nicaragua	>95	>95	>95
Panama	...	11	14
Andean Region			
Bolivia (Plurinational State of)	...	> 95	79
Colombia	89	92	...
Ecuador	...	...	...
Peru	91	73	72
Venezuela (Bolivarian Republic of)	...	...	...
Southern Cone and Brazil			
Argentina	74	74	83
Brazil	81	83	83
Chile	>95	...	...
Paraguay	60	64	61
Uruguay	...	81	71
Caribbean			
Anguilla	N/A ^a	...	N/A ^a
Antigua and Barbuda	>95	>95	...
Aruba	...	...	...
Bahamas	>95	>95	>95
Barbados	>95	>95	>95
Belize	67	79	91
Bermuda	...	...	...
Bonaire	...	...	...
Cayman Islands	...	...	...
Cuba	>95	>95	>95
Curaçao	...	...	...
Dominica	...	...	>95
Dominican Republic	...	...	...
French Guiana	...	...	...
Grenada	>95	...	>95
Guadeloupe	...	...	...

Appendix Table 5 (continued).

Countries	2011 (%)	2012 (%)	2013 (%)
Caribbean			
Guyana
Haiti	...	85	85
Jamaica	...	66	65
Martinique
Montserrat
Puerto Rico
Saba
Saint Kitts and Nevis
Saint Lucia	...	33	82
Saint Vincent and the Grenadines
Sint Eustatius	N/A ^a
Sint Maarten
Suriname
Trinidad and Tobago	13
Turks and Caicos Islands
Virgin Islands (UK)
Virgin Islands (US)

Source: UNAIDS/WHO Country Global AIDS Response Progress Reports (2014).

^aN/A: Not applicable

Appendix Table 6. Percentage of pregnant women attending at least one ANC visit and four or more ANC visits, 2008-2013.

Countries	Pregnant women attending at least one ANC visit with trained personnel (%)						Pregnant women attending at least four ANC visits with trained personnel (%)					
	2008	2009	2010	2011	2012	2013	2008	2009	2010	2011	2012	2013
North America												
Canada	...	...	...	...	...	...	...	...	...	...	...	...
Mexico	...	91	93	94	98	...	...	84	86	87	94	...
United States of America	98	99	99	99	...	...	96	97	97	97	...	...
Central America												
Costa Rica	...	82	94	98 ^a	...	...	...	...	87	90 ^a	...	...
El Salvador	...	83	...	91	85	77	...	...	...	75	70	80
Guatemala	93	...	...	...	...	...	...	...	...	...	...	...
Honduras	...	...	...	...	97	...	...	...	...	...	89	...
Nicaragua	...	...	92	...	96	100	61	...	80	70	71	75
Panama	82	96 ^b	...	...	...	...	...	...	94	...	...	...
Andean Region												
Bolivia (Plurinational State of)	90 ^c	...	...	83	83	84	72 ^d	...	...	59	56	59
Colombia	...	...	96	...	...	...	84	...	89	...	...	...
Ecuador	...	...	...	73	...	...	...	...	...	...	...	...
Peru	95	94	98	...	...	96 ^e	92 ^f	93	92	...	94	87
Venezuela (Bolivarian Republic of)	...	...	...	47	...	...	...	...	...	47	61	...
Southern Cone and Brazil												
Argentina	...	...	...	98 ^g	...	...	...	...	...	90 ^h	...	...
Brazil	96	97	97	97	96	...	...	90	99	90	89	...
Chile	96	...	...	...	...	...	...	...	...	...	...	...
Paraguay	87	...	94	...	93	...	...	68	70	73	71	...
Uruguay	...	97	97	95	96	96	...	...	92	91	92	95
Caribbean												
Anguilla	100	100	100	...	100	...	...	...	100	...	100	...
Antigua and Barbuda	100	100	100	100	100	100	...	...	100	100	100	100
Aruba	...	100	...	...	...	...	...	...	...	...	100	...
Bahamas	98	94	95	95	...	95	...	86	86	86	...	85
Barbados	100	...	...	90	99	...	...	...	...	89	81	...
Belize	100	95	92	99	97	96	...	...	...	83 ⁱ	...	...
Bermuda	...	...	100	100	100	99	...	...	99	99	99	98
Bonaire	...	...	...	...	...	...	...	...	...	...	...	...
Cayman Islands	100	99	98	99	99	99	...	95	97	93	99	98
Cuba	100	100	100	100	100	100	...	99	100	100	100	100
Curaçao	...	90	...	...	...	...	...	...	...	...	...	...
Dominica	100	100	100	100	100	100	...	...	...	...	...	...
Dominican Republic	...	96	...	...	...	99	...	...	...	...	...	...
French Guiana	...	98	98	...	...	...	...	55	86	...	...	...

Appendix Table 6 (continued).

Countries	Pregnant women attending at least one ANC visit with trained personnel (%)						Pregnant women attending at least four ANC visits with trained personnel (%)					
	2008	2009	2010	2011	2012	2013	2008	2009	2010	2011	2012	2013
Caribbean												
Grenada	100	100	100	100	100	99	...	...	...	...	...	...
Guadeloupe	...	...	...	...	...	...	...	...	...	...	...	...
Guyana	...	92 ^j	...	...	...	...	...	...	...	...	...	...
Haiti	...	...	...	...	90	...	...	...	...	...	67	...
Jamaica	98	...	...	98 ⁱ	...	...	87	...	...	86 ⁱ	...	...
Martinique	97	99	...	95	...	...	...	...	...	91	...	...
Montserrat	100	100	...	100	100	100	...	...	...	100	100	100
Puerto Rico	100	100	100	...	100	...	99	98	99	...	98	...
Saba	...	...	...	...	...	...	...	...	...	...	...	...
Saint Kitts and Nevis	...	...	...	...	...	...	...	...	...	...	...	...
Saint Lucia	99	99	...	...	97 ^m	...	...	99	...	...	90 ^m	...
Saint Vincent and the Grenadines	100	...	...	99	100	99	...	...	...	...	...	...
Sin Eustatius	...	...	...	...	...	...	...	...	...	...	...	...
Sint Maarten	...	...	...	...	...	95	...	...	...	...	...	90
Suriname	90	90	95	...	...	...	...	...	67	...	...	...
Trinidad and Tobago	...	...	...	...	100	100	...	...	...	...	100	100
Turks and Caicos Islands	96	97	...	100	100	99	...	...	...	92	98	91
Virgin Islands (UK)	99	99	100	100	100	100	...	...	...	100	100	100
Virgin Islands (US)	98	99	98	99	...	...	92	95	91	93	...	...
Subregional Values												
The Americas	95	94	95	94	94	94	...	89	88	88	90	90
Latin America and the Caribbean	93	93	94	92	93	93	...	85	84	84	87	87

Note: Subregional calculations were done using data imputed when missing from the previous year from which data was available.

Sources: Pan American Health Organization, Health Information and Analysis Unit. Regional Core Health Data Initiative, Washington DC, 2014; additional sources for country data are noted below.

ⁱCosta Rica, 2011: Ministerio de Salud, República de Costa Rica/Fondo de las Naciones Unidas para la Infancia: Encuesta de indicadores múltiples por conglomerados 2011: situación de la niñez y mujeres.

^jPanama, 2009: Instituto Conmemorativo Gorgas de Estudios de la Salud. ENASSER: Encuesta Nacional de Salud Sexual y Reproductiva 2009. Informe final.

Bolivia, 2008: Ministerio de Salud y Deportes/MEASURE DHS, Macro International: Encuesta Nacional de Demografía y Salud. ENDSA 2008.

Bolivia, 2008: Ministerio de Salud y Deportes/MEASURE DHS, Macro International: Encuesta Nacional de Demografía y Salud. ENDSA 2008.

^kPeru, 2013: Instituto Nacional de Estadística e Informática (INEI): Encuesta Demográfica y de Salud Familiar –ENDES. Perú, 2013.

Peru, 2008: Instituto Nacional de Estadística e Informática (INEI): Encuesta Demográfica y de Salud Familiar. Perú, 2007-2008.

^lArgentina, 2011: Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

^mArgentina, 2011: Secretaría Nacional de Niñez, Adolescencia y Familia y Fondo de las Naciones Unidas para la Infancia: Encuesta de Indicadores Múltiples por Conglomerados 2011/2012, Informe Final.

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Guyana, 2009: Ministry of Health (MOH), Bureau of Statistics (BOS), and ICF Macro. 2010: Guyana Demographic and Health Survey 2009.

Jamaica, 2011: Statistical Institute of Jamaica (STATIN) and United Nations Children's Fund (UNICEF): Jamaica Multiple Indicator Cluster Survey 2011: Final Report.

Jamaica, 2011: Statistical Institute of Jamaica (STATIN) and United Nations Children's Fund (UNICEF): Jamaica Multiple Indicator Cluster Survey 2011: Final Report.

ⁿSaint Lucia, 2012: Ministry of Social Transformation, Local Government and Community Empowerment and Central Statistics Office: Saint Lucia Multiple Indicator Cluster Survey 2012: Final Report.

Appendix Table 7. Percentage of pregnant women provided health care by trained personnel at birth and giving birth at hospitals, 2008-2013.

Countries	Pregnant women provided health care by trained personnel at birth (%)						Pregnant women giving birth at hospitals (%)					
	2008	2009	2010	2011	2012	2013	2008	2009	2010	2011	2012	2013
North America												
Canada	100	...	100	100	...	...	99	...	99	99	...	...
Mexico	94	97	97	98	96	...	...	...	98	98	98	...
United States of America	99	99	99	...	...	...	...	99	99	...	...	...
Central America												
Costa Rica	...	99	100	100	99	100	...	...	...	100	99	98
El Salvador	...	...	...	...	...	...	85	...	...	...	...	...
Guatemala	51	49	52	...	59	...	42 ^a	...	...	43	59	...
Honduras	...	...	...	...	83	...	...	...	...	64	60	67
Nicaragua	86	...	74	...	89 ^b	94	...	...	...	74	85	87
Panama	92	89	93	94	94	...	...	...	...	91	97	...
Andean Region												
Bolivia (Plurinational State of)	71 ^c	...	...	72	75	74	...	...	...	70	73	72
Colombia	98	98	99	99	...	...	...	98	99	99	...	...
Ecuador	71	...	70	91	93	...	...	...	63	...	61	...
Peru	79	83	95	...	87	90	...	...	...	...	87	89
Venezuela (Bolivarian Republic of)	...	...	...	98	96	...	...	...	...	98	96	97
Southern Cone and Brazil												
Argentina	100	98	99	99	100	...	...	...	99	100	100	...
Brazil	...	99	99	99	99	...	...	...	98	98	98	...
Chile	100	100	100	100	100	...	...	...	100	100	100	...
Paraguay	93	94	95	96	96	...	...	...	94	95	96	...
Uruguay	...	100	100	99	100	100	...	...	99	100	100	...
Caribbean												
Anguilla	100	100	100	...	100	100	...	...	...	...	100	98
Antigua and Barbuda	100	100	100	...	100	100	...	...	...	100	100	99
Aruba	...	100	...	...	100	...	...	...	...	...	...	...
Bahamas	99	99	99	99	...	98	...	...	99	98	...	98
Barbados	100	100	...	100	100	...	...	...	...	100	100	...
Belize	95	94	94	95	89	94	...	...	...	92	89	90
Bermuda	...	...	99	99	100	99	...	...	...	99	99	98
Bonaire	...	...	...	...	...	...	...	...	...	...	...	...
Cayman Islands	100	100	100	100	100	100	...	...	...	100	100	100
Cuba	100	100	100	100	100	100	...	...	...	100	100	100
Curaçao	...	...	...	...	...	...	...	90	...	...	...	...
Dominica	100	100	100	100	100	100	...	...	...	97	97	97
Dominican Republic	...	97	...	...	...	99	...	96	...	...	...	99
French Guiana	...	99	99	...	...	...	...	...	99	...	...	...

Appendix Table 7 (continued).

Countries	Pregnant women provided health care by trained personnel at birth (%)						Pregnant women giving birth at hospitals (%)					
	2008	2009	2010	2011	2012	2013	2008	2009	2010	2011	2012	2013
Caribbean												
Grenada	...	100	100	100	99	99	...	...	...	...	98	99
Guadeloupe	...	99	...	...	...	...	...	...	...	...	...	...
Guyana	...	92	...	...	...	...	...	...	...	...	...	...
Haiti	...	...	...	...	38	50	...	...	...	...	36	50
Jamaica	...	96	90 ^a	99	99	...	...	...	99	...	100	...
Martinique	100	100	...	100	...	...	...	...	...	100	...	...
Montserrat	100	100	100	100	100	98	...	...	...	100	...	100
Puerto Rico	100	100	100	...	100	...	...	99	100	...	99	...
Saba	...	...	...	...	...	...	...	...	...	...	...	...
Saint Kitts and Nevis	100	100	100	100	100	100	...	...	...	100	100	100
Saint Lucia	100	...	99	...	99 ^b	...	...	...	99	...	...	...
Saint Vincent and the Grenadines	99	99	98	99	99	99	...	...	...	99	99	99
Sin Eustatius	...	...	...	...	...	...	...	...	...	...	...	...
Sint Maarten	...	...	...	...	...	100	...	...	...	...	...	97
Suriname	90	90	93	...	...	...	...	...	92	...	...	...
Trinidad and Tobago	100	100	100	92	100	98	...	...	...	100	100	98
Turks and Caicos Islands	...	...	...	...	100	100	...	...	...	...	100	99
Virgin Islands (UK)	100	100	100	100	100	100	...	...	...	100	100	100
Virgin Islands (US)	99	...	...	...	...	...	...	99	99	...	...	...
Subregional Values												
The Americas	93	94	94	95	95	95	...	...	...	94	94	94
Latin America and the Caribbean	89	89	90	91	92	94	...	...	...	92	92	92

Note: Subregional calculations were done using data imputed when missing from the previous year from which data was available.

Sources: Pan American Health Organization, Health Information and Analysis Unit. Regional Core Health Data Initiative, Washington DC, 2014; additional sources for country data are noted below.

^aGuatemala, 2008: Ministerio de Salud Pública y Asistencia Social (MSPAS)/Instituto Nacional de Estadística (INE)/Centros de Control y Prevención de Enfermedades (CDC). Encuesta Nacional de Salud Materno Infantil 2008 (ENSMI-2008/09).

^bNicaragua, 2012: Instituto Nacional de Información de Desarrollo Ministerio de Salud: Encuesta Nicaragüense de Demografía y Salud 2011/12. Informe Preliminar. Bolivia, 2008: Ministerio de Salud y Deportes/MEASURE DHS, Macro International: Encuesta Nacional de Demografía y Salud. ENDSA 2008.

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