



U.S. Agency for  
International  
Development

Bureau for  
Global Health

# COUNTRY PROFILE

HIV/AIDS

## DEMOCRATIC REPUBLIC OF EAST TIMOR

HIV prevalence in East Timor remains extremely low, presenting an important opportunity to prevent a full-fledged epidemic. The first case of HIV/AIDS was reported in East Timor in 2001, and as of 2002, there were only six confirmed cases. However, inadequate testing and insufficient research thus far mean that the problem could be more serious than it appears.

According to the country's health minister, HIV prevalence was estimated to be as low as 0.64 percent in 2002. This cited prevalence estimate is based on a random blood survey of 982 samples, and some experts question its validity. The estimate is quoted in Timor only in the absence of more reliable data.

Compared to sub-Saharan Africa, HIV prevalence is low in East Timor, in particular, and in the Asia Pacific region, in general. Nonetheless, individual Southeast Asian countries are experiencing explosive nationwide or localized epidemics fueled by high-risk behavior and high levels of population mobility. Indeed, many of the necessary ingredients for an HIV epidemic are already present in East Timor. Several social factors could exacerbate the spread of the disease throughout the country; they include massive social dislocation, cross-border migration, a high level of unemployment, an ineffective HIV/AIDS awareness program, inadequate health facilities, and a low awareness of HIV/AIDS.

East Timor is coming out of 425 years of colonial rule and more than 20 years of occupation by the Indonesian government. One of the poorest countries in the world, East Timor had a gross domestic product of \$378 per capita in 2001. More than 40 percent of the population was living below the poverty line at that time. The literacy rate is 40 percent, and life expectancy at birth is 57 years. In

addition, there are high incidences of other diseases such as tuberculosis, malaria, dengue fever, and Japanese encephalitis. The health system is struggling to cope with these problems as well as the challenge of HIV/AIDS.

### NATIONAL RESPONSE

According to East Timor Minister of Health Dr. Rui Maria de Araujo, health is a high priority for the government, and the political leadership of the nation views HIV/AIDS as one of the biggest threats to development. Recognizing that the country has a window of opportunity in which to prevent an epidemic, the Ministry of Health developed a National Strategic Plan for HIV/AIDS and

Estimated Number of Adults and Children Living with HIV/AIDS (2002)	6*
Total Population (2002)	800,000
Adult HIV Prevalence (2002)	0.64%
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, patients with a sexually transmitted infection, or others with known risk factors)	Not available
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	Not available

Sources: \*Ministry of Health, United Nations Development Programme



Map of Democratic Republic of East Timor: PCL Map Collection, University of Texas

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Sexually Transmitted Infections for 2002–2005. The plan was subject to a yearlong multiphase consultation process that included input from 139 community stakeholders, 12 district-based focus-group discussions, international experts, the United Nations, international private and voluntary organizations, and bilateral donors. A key component of the plan is an HIV/AIDS-awareness and education campaign which features condom distribution; the establishment of a voluntary counseling and testing facility; a blood screening program; and a case-reporting system. Successful implementation will require effective partnerships with diverse sectors of government, including education, communication, transport, maritime, public works, finance and planning, social welfare, labor, law and judiciary, tourism, and uniformed services.

A unique feature of East Timor's response to HIV/AIDS is extensive engagement of local community and government resources and infrastructure. In addition, the Catholic Church plays an integral role in supporting HIV/AIDS awareness and prevention efforts. In collaboration with the Catholic Youth Commission of the Dili Diocese, the Ministry of Health has coordinated a pilot peer-outreach HIV/AIDS-awareness campaign in the parishes of the Dili Diocese, reaching nearly 1,700 youth.

One of the primary challenges to implementing an effective response to HIV/AIDS is the overall lack of human resources and the underdeveloped infrastructure of the Ministry of Health. The health system is inadequately staffed to cope with the challenge of HIV/AIDS. There are fewer than 24 Timorese doctors and very few trained laboratory technicians. Further, limited research data impede an understanding of the nature of vulnerability to HIV, and no reliable data exist on the nature of sexual behaviors among the populations.

## **USAID SUPPORT**

In FY02, USAID allocated \$1 million for HIV/AIDS program in East Timor. As part of its economic revitalization objective, USAID is working to expand the network and sustainability of cooperative health clinics that provide affordable health services, including HIV/AIDS-prevention information and services. USAID's HIV/AIDS support program in East Timor operates under the IMPACT Project carried out by Family Health International. The project is designed to work with local public and private organizations, including faith-based organizations, to provide an expanded and comprehensive response to the prevention, care and mitigation of HIV and AIDS. Activities also support the core elements of East Timor's National Strategic Plan for HIV/AIDS 2002–2005: 1) create an enabling environment for prevention and care; 2) provide coordination, research, and evaluation mechanisms; and 3) promote development responses to reduce HIV vulnerability. USAID's program is responsive to the Council of Ministers development priorities and works to mitigate the intersectoral impact of an HIV epidemic, which would compromise other development objectives in education, trade, economic growth, agriculture, and security. USAID supports broad activities designed to create an enabling environment for prevention and care.

### ***Advisory support***

A Family Health International resident adviser provides advisory support to the Ministry of Health and the National AIDS Advisory Council, focusing on 1) strategic design and management of health systems in a resource-constrained environment; 2) the importance of keeping HIV/AIDS on the agenda (given competing priorities and capacity constraints); and 3) the multisectoral aspects of HIV and AIDS. Technical assistance guides ministry development of a treatment and care plan for HIV infections. Key government and civil society members have been supported for attendance at international HIV/AIDS conferences and to participate in study tours to learn from other countries' experiences.

### ***Prevention, awareness, and advocacy***

USAID supports development of a strategy and campaign to increase HIV/AIDS awareness in the general population, and to provide precisely targeted communications to encourage vulnerable groups to adopt healthier behavior. Activities include advocacy workshops with religious, government, and civil society leaders, training for journalists and media personnel in HIV/AIDS issues, and the development and dissemination of evidence-based, culturally appropriate materials. The IMPACT Project has conducted the first significant research on rates of HIV and sexually transmitted infections in East Timor; and behavior surveillance, HIV prevalence, and mapping of vulnerable populations. This research guides targeted behavior change communications.

## ***Capacity building for nongovernmental organizations***

USAID is offering a number of training and communication opportunities to nongovernmental organizations that have the interest and potential to be effective in HIV prevention or treatment. USAID helps such organizations to develop materials and to design and carry out activities focusing on the ABCs method of HIV prevention (Abstain, Be faithful, or use a Condom). Where appropriate, nongovernmental organizations receive training in project management and implementation; staff from high-potential nongovernmental organizations will visit similar programs in Indonesia, where they will work side-by-side for two weeks.

## ***Improved syndromic management and infection control***

Health care professionals are being trained in syndromic management of sexually transmitted infections and are given follow-up support; and USAID will support advocacy for a national surveillance system for sexually transmitted infections. The IMPACT Project continues to provide training in infection control involving laboratory diagnostic services and blood safety.

## **FOR MORE INFORMATION**

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USAID Websites:

[http://www.usaid.gov/locations/asia\\_near\\_east/countries/etimor/etimor.html](http://www.usaid.gov/locations/asia_near_east/countries/etimor/etimor.html)

[http://www.usaid.gov/our\\_work/global\\_health/aids/Funding/FactSheets/ane.html](http://www.usaid.gov/our_work/global_health/aids/Funding/FactSheets/ane.html)

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*For more information, see [http://www.usaid.gov/pop\\_health/aids](http://www.usaid.gov/pop_health/aids) or <http://www.synergyaids.com>.*

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