The good news? Treatment quality and coverage have improved and HIV positive people are living longer.

The news you don't often hear? Twenty percent of people living with HIV in the Caribbean are aged 50 and older. According to UNAIDS, in 2017 the region was home to an estimated 62,000 HIV positive seniors.

Yesterday Jason Shepherd, Senior Project Officer for the Caribbean Regional Network of People Living with HIV and AIDS (CRN+) participated in a special panel discussion, “The Gray Zone: Ageism as a Human Rights Issue in the Global Response to HIV”.

The discussion focused on older adults living with, or vulnerable to, HIV with a focus on discrimination against the elderly and HIV stigma. Shepherd was joined by three other panellists who discussed how HIV responses compromise older people's right to health. The panel explored potential strategies to promote social justice for this population.

Shepherd specifically challenged regional advocates to place a spotlight on older adults living with HIV and the negative health outcomes they experience because of stigma and discrimination.

Spotlight on Caribbean HIV treatment

Last evening a mini-symposium was held to share best practices and experiences of HIV treatment in the Caribbean. The platform was meant to create pathways for collaborations in order to achieve the 90-90-90 treatment goals for the region. Among the experts were Jamaican researcher, Professor Peter Figueroa of Jamaica and Dr. Jean Pape of the Haitian Study Group for Kaposi's Sarcoma and Opportunistic Infections (GHESKIO).

UNAIDS' new report advises that the Caribbean must quicken the pace if it is to meet the testing and treatment targets that become due in two years. To reach the benchmarks the region has to diagnose 54,800 more people, get 74,400 more on treatment and achieve viral suppression among 103,000 more people living with HIV.

Professor Clive Landis of the University of the West Indies, Cave Hill, presented on the experiences of the Caribbean Cytometry & Analytical Society (CCAS) in supporting medical staff training in small island developing states. He revealed that after 15 years of workshops CCAS has trained more than 1500 professionals in a holistic care approach that includes monitoring, treatment and care for the whole person. Based on the Barbados experience which he considers a best practice, Landis made the case for continued free access to care and treatment on public health grounds as well as for consistent viral load testing as an important monitoring and evaluation tool. According to Landis the region's biggest challenge is recruiting patients into care—a dilemma directly linked to stigma and discrimination.
Yesterday Kim Simplis Barrow, Chair of the Spouses of CARICOM Leaders Action Network (SCLAN) addressed the Session “Prioritized yet Dying: Addressing the Needs of Children and Adolescents Living with HIV”.

With a mandate to reduce adolescent pregnancy and eliminate cervical cancer, SCLAN’s challenge is to convince key stakeholders—including their decision-making husbands—that the sexual and reproductive health needs of children and young people should be addressed. And that includes those already living with HIV.

Though the Caribbean is on the Fast Track to end paediatric HIV transmission, there were an estimated 9900 children living with HIV who were below age 15 in 2017. Of these, only 52% were on treatment last year.

An estimated one-third (32%) of new infections in the Caribbean in 2017 were among individuals who did not report any HIV-related risk behaviour.

In total, key populations and their sexual partners represented two thirds of new infections last year. Gay men and other men who have sex with men accounted for nearly a quarter of new infections.

Emphasis must be placed on the knowledge and service access gaps facing young people, men and key populations in the Caribbean in order to turn the tide.

What about youth living with HIV?

昨日，CARICOM领导人的配偶行动网络（SCLAN）主席Kim Simplis Barrow博士出席了“优先但濒临死亡：儿童和青少年艾滋病毒感染者的需求”会议。

SCLAN面临的挑战是说服关键利益相关者——包括他们的决策性丈夫——重视儿童和年轻人的性与生殖健康需求。这包括那些已经感染HIV的人。

尽管加勒比地区已经处于终结儿童艾滋病传播的快速轨道上，但2017年估计有9900名15岁以下的儿童感染了HIV。其中只有52%的人接受了治疗。

2017年，估计有32%的新感染发生在未报告任何HIV相关风险行为的人中。

总的来说，关键群体及其性伴侣代表了新感染的三分之二。同性性行为者和与男性发生性行为的男性占近四分之一。

必须重视年轻人群、男性和关键群体的知识和医疗服务差距，以扭转这一趋势。

"我们不能忽视心理社会支持的好处，”Simplis Barrow警告道。“需要采取人权为基础的方法进行检测、护理和治疗。”

她说，同伴、监护人、家人、教师和社区必须帮助支持处于风险中的或HIV阳性儿童。同时，青少年应被赋予“领导、参与和塑造青年友好服务、政策和研究”的能力。

"我们必须重视儿童和青少年在青少年和成年期的过渡中获得的益处，“Simplis Barrow说。"需要采取人权为基础的方法进行检测、护理和治疗。"