



CENTRAL AMERICA

IntraHealth International began working in Central America in 1993, partnering with communities to improve health care for women and children. Since 2006, IntraHealth has worked in partnership with the US Agency for International Development (USAID) to strengthen the region's HIV prevention and treatment efforts.

Central America's HIV epidemic is currently concentrated among key populations, such as men who have sex with men, transgender women, and sex workers. Widespread unfamiliarity with HIV, stigma, limited access to health care, and migration all make the region vulnerable to a growing epidemic.

Our interventions focus on training and equipping health workers to deliver high quality HIV care, reducing stigma toward key populations and people living with or at risk for HIV, and improving adherence to antiretroviral treatment (ART). We provide technical assistance to ministries of health on evidence-based interventions and how to reach epidemic control.

IntraHealth has worked closely with governments, non-governmental organizations, and civil society in Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama to improve quality of life for people living with HIV and other vulnerable populations. We follow the recommendations of UNAIDS and PEPFAR to provide technical assistance under The Fast Track approach to achieve the 90-90-90 goals.



**100 hospitals used
IntraHealth's OPQ approach
to improve health worker
performance**



**10,400+ health workers
improved their HIV care and
treatment skills**



**74% of HIV+ patients adhered
to treatment in project-
supported health facilities
compared to 56% in others**

HIV Care and Treatment Project (2018–Present)

The HIV Care and Treatment Project supports health facilities, partners, and community-level organizations that work with key populations to set, prioritize, and sustain interventions and address barriers to treatment adherence. We collaborate with ministries of health, social security institutes, national AIDS programs and non-governmental organizations in Guatemala, Honduras, El Salvador, Nicaragua, and Panama.

IntraHealth strengthens HIV-related policies at central and local levels to encourage stigma- and discrimination-free clinics. During the first year, 30 HIV clinics received technical assistance, 60% enrolled in an SMS reminder intervention, and 36% implemented a differentiated model of care. A total of 2,642 patients started ART and 39,006 were on ART. **Community liaisons** reengaged 1,841 (39%) HIV patients lost to follow-up. **Adherence promoters** provided counseling and 83% of their clients reached viral suppression, including in Honduras, which reached 89%—the highest in the region.

In human resource development, 493 health care workers were trained on HIV-related topics and 284 on stigma- and discrimination-free care.

Central America CapacityPlus Project (2011–2018)

The Central America CapacityPlus Project (CAMPLUS) worked with local, national, and regional health facilities to ensure key populations and people living with HIV received a full range of services. The project helped communities improve HIV services and discouraged discrimination against people at risk for or living with HIV.

CAMPLUS worked with 100 hospitals, 37 HIV clinics, and 65 health centers to assess and improve staff skills and knowledge of HIV using IntraHealth's **Optimizing Performance and Quality (OPQ)** approach. The OPQ teams identified over 300 performance standards in 18 service areas and pinpointed gaps in staff performance. With IntraHealth's support, health facilities trained 10,480 health workers in biosafety, stigma and

discrimination prevention, HIV counseling and testing, human rights, nutrition, conflict resolution, and assertive communication.

More than 35,000 people living with HIV received attention, medical care, or laboratory tests. Facilities supported by the project reported higher viral suppression (74%) compared to units that were not supported (56%). The project trained and supported community liaisons who conducted home visits to clients who dropped out of treatment as well as adherence promoters in 30 hospitals. More than 4,000 people at risk of dropping out of treatment were retained and more than 2,750 people who had dropped out of treatment were recovered.

The project also used mobile technology to promote adherence. An SMS platform was developed to send messages to remind HIV clients of their scheduled appointments and when to take their medication. Patients receiving SMS reminders were almost 80% more likely to reach viral suppression than those who were not.

Using IntraHealth's **Learning for Performance** methodology, the project also empowered trainers at universities, nursing schools, and ministries of health to quickly and cost-effectively teach health workers and students new skills and prepare them to perform on the job. CAMPLUS revised HIV curricula for 22 universities, medical schools, and nursing schools throughout the region.

Past projects and funders

- Central America Capacity Project, 2009-2013 (USAID)
- Capacity Project, 2006-2009 (USAID)
- PRIME and PRIME II, 1993-2004 (USAID)

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