

IntraHealth International is committed to surpassing PEPFAR's 95-95-95 goals and achieving an AIDS-free generation by 2030. We leverage our leadership and technical excellence in human resources for health, service delivery, capacity building, and digital health to make this vision a reality. In partnership with communities, local entities, and governments, our programs aim to:

- Aggressively scale-up client-centered interventions to identify people living with HIV and make treatment services more accessible, retain clients in care, and maintain viral suppression.
- Optimize use of digital solutions and data for continuous quality improvement and effective targeting of program resources.
- Strengthen health workforces to meet national HIV/AIDS goals and targets.
- Build the capacity of local organizations in support of PEPFAR's goal of transitioning its funding to local partners.

In 2020, IntraHealth's programs provided HIV testing and test results to 939,753 people and antiretroviral therapy (ART) to 150,931 HIV-positive individuals.



OUR APPROACHES IN ACTION

Client-centered interventions

IntraHealth helps countries deliver high-quality, accessible HIV prevention, care, and treatment services that are designed with the client in mind. Our programs use peer-led approaches to scale up optimized HIV testing approaches including index testing and partner notification services, self testing, and recency testing to reach key and priority populations and more efficiently link them to either HIV prevention or antiretroviral treatment. Applying a test and start approach, we link individuals who test positive to treatment and ensure same-day antiretroviral treatment (ART) initiation.

In **South Sudan**, for example, an extensive network of trained peer educators and navigators supports venue-based and index testing services for female sex workers and their contacts, and immediately links people who test positive to treatment. High-risk clients who test negative are initiated on pre-exposure prophylaxis (PrEP) and survivors of gender-based violence receive counseling and post-exposure prophylaxis (PEP) to prevent HIV infection. In **Uganda**, self-test kits are distributed to mothers attending antenatal and postnatal care, key populations, sex workers' partners, and mobile workers such as truck drivers, to reach men who are reluctant to use health services.

In **Tanzania** IntraHealth has helped 16 target districts reach 80% prevalence of voluntary medical male circumcision (VMMC) to prevent HIV. Training health workers to provide high-quality circumcision services safely and efficiently, combined with strong community mobilization by VMMC champions, has resulted in 1,045,000+ men and boys opting for VMMC. In response to COVID-19 we've shifted our approach from outreach services and campaigns—which attract large crowds—to making services available at static sites and training community volunteers to identify clients, using infection-prevention measures and social distancing, and help book their appointments.



Our care and treatment programs offer differentiated service delivery models to meet our clients with the right services, in the right places, and at the right times to retain people living with HIV on treatment and ensure viral suppression. To maintain viral suppression for our clients, we dispense ARVs in multimonth quantities and aggressively transition people living with HIV onto more optimized Dolutegravir based regimens.

In **Central America**, **Namibia**, **South Sudan**, and **Uganda**, IntraHealth is using community-based models to improve low retention of HIV clients in care, including through community drug distribution points and support groups and facility-based fast-track refills for stable clients to decongest health facilities. In Uganda, retention in one district improved from 40% to 97% over 12 months.

For PEPFAR's 2020 Country Operational Plan, IntraHealth is receiving over \$9 million in ambition funding for our work in **Senegal**, **Tanzania**, and **Uganda** to introduce innovative programs, such as treatment adherence workshops for HIV-positive children and adolescents held during school holidays in Uganda.

Digital health solutions and data use

Our approaches promote the continuous use of data to improve the quality and efficiency of services. In partnership with the Ministry of Health in **South Sudan**, we are strengthening national capacity to generate, analyze, and use integrated HIV/AIDS data and strategic information to inform evidence-based programming and strategic planning. This has included strengthening the district health information and electronic medical records systems and HIV case-based surveillance and conducting biobehaviorial surveys of female sex workers in the capital (Juba) and three other large towns.

In **Tanzania**, **we use GIS mapping** to pinpoint communities most in need of VMMC services. This approach involves triangulating census projections, male circumcision prevalence estimates, and program performance data, then pairing these data with advice from community experts to microtarget areas with greater numbers of uncircumcised men and craft localized interventions. Our project also developed a mobile app,

Tohara Journey, which trained community opinion leaders use together with uncircumcised men to help them overcome barriers to VMMC.

Health workforce development

IntraHealth draws on its extensive expertise in human resources for health to help countries strengthen their health workforce for HIV/AIDS service delivery. Our focus in **Kenya** includes building health worker capacity in 27 counties that have high HIV disease burden and transforming health professional education and training systems. The **Afya Elimu Fund**, a public-private partnership established with IntraHealth's support, has provided tuition fee loans to 20,000+ health professional students, emphasizing cadres critical for HIV/AIDS services.

In Namibia, we helped the government in the first-ever national application of the World Health Organization's Workload Indicators of Staffing Need (WISN) method. Results led to expanding nurse-initiated management of ART and introducing differentiated care models for stable ART clients. This work was part of IntraHealth's comprehensive assistance since 2006 toward epidemic control in Namibia—one of only six countries worldwide that has surpassed its UNAIDS 90-90-90 fast-track targets in advance of the 2020 deadline.

Capacity-building for local partners

IntraHealth leads the USAID global project, Accelerating Support to Advanced Local Partners (ASAP), which strengthens local entities to transition to direct PEPFAR financing. Since 2019, ASAP has equipped 21 organizations in 11 countries with knowledge and skills to manage, implement, and monitor high-quality HIV/AIDS programs in areas such as finance, procurement, HR, and data quality and use. Over 1,900 participants from 63 countries attended 10 ASAP capacity-building webinars over the past year. In 2019, ASAP hosted the first-ever local partners meeting, which gathered 75 delegates from 40+ local partners and 185 USAID staff from 20 missions.

Funding for the work referenced in this brief came from PEPFAR, USAID, and the US Centers for Disease Control and Prevention.

