

A community health worker makes a home visit to a client in Coatepeque, Guatemala. Photo by Anna Watts for IntraHealth International.



7,630 newly identified PLHIV linked to ART



43,104 PLHIV on an optimized ART regimen



95% of ART clients virally suppressed

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, care, and treatment efforts.

Central America's HIV epidemic is concentrated among key populations, such as men who have sex with men, transgender women, and sex workers. Stigma and discrimination, limited access to health care, and migration all make the region vulnerable to a growing epidemic. Other priority populations include adolescent girls and young women and indigenous people with limited access to services.

IntraHealth has worked closely with governments, local organizations, and civil society in Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama to strengthen health systems, train and equip health workers to deliver high-quality HIV care, reduce stigma toward key populations and people living with HIV (PLHIV), and improve adherence to antiretroviral therapy (ART).

Through our HIV programs, we have developed approaches to optimize health worker performance and program management from the facility to national level:

- ▶ Optimizing Performance and Quality (OPQ), a continuous quality improvement methodology that supports clinic and national HIV program management and health worker performance to improve overall service quality
- ▶ **alerTAR**, a mobile-phone based digital tool that supports client case management at the clinic level
- ▶ **Data to Action (D2A)**, a data-driven methodology that supports clinic and project management in decision-making and prioritization of interventions.

USAID HIV Prevention, Care, and Treatment Project (2023–2028)

This five-year project supports the governments of El Salvador, Guatemala, Honduras, and Panama to strengthen HIV prevention, care, and treatment services for key populations and priority populations. Through a subaward to the Pan American Social Marketing Organization (PASMO), the local USAID implementing partner, IntraHealth provides technical support to increase access to these services at 36

sites, focusing on diagnosis, linkage to treatment, retention, viral suppression, and reducing stigma and discrimination.

IntraHealth leads quality-improvement programming at the sites, in coordination with health ministries, using our OPQ and D2A methodologies and the alerTAR patient management tool. We also contribute to annual quality measurements at the sites, strengthening local and regional quality committees, institutionalizing the OPQ process, and conducting user satisfaction evaluations. Collectively, these methodologies will strengthen the capacity of facility teams to provide quality HIV services across the continuum of care and analyze routine site-level data to ensure PLHIV enroll in treatment and receive a range of person-centered services to achieve and sustain viral load suppression.

USAID HIV Care and Treatment Project (2018–2025)

The USAID HIV Care and Treatment Project supports ministries of health, social security institutions, national AIDS programs, and nongovernmental organizations in El Salvador, Guatemala, Honduras, and Panama to address gaps in the continuum of care and barriers to treatment adherence.

From 2018-2023, IntraHealth provided technical assistance and direct service delivery to 36 HIV clinics in achieving the UNAIDS 95-95-95 goals. We conducted 213,385 HIV tests and shared results, including with 7,630 people who newly tested positive; linked 19,647 PLHIV to ART; and increased the number of ART clients on an optimized treatment regimen from 36,523 to 43,104.

To prevent treatment interruption the project used SMS messages through alerTAR to remind clients about appointments and return to care and to access additional services. When necessary, the project also engaged community liaisons to make home visits and implemented differentiated care models. To improve the quality of life of clients the project provided psychosocial and cervical cancer screenings, and strengthened the clinics' capacities to diagnose, treat, and register opportunistic infections. To reduce HIV transmission the project engaged adherence promoters and extended viral load testing coverage from 54% to 94% of clients, and increased viral load suppression from 81% to 95%, through intensified adherence counseling, virological failure management, differentiated attention models for viral load sampling, and promotion of the Undetectable = Untransmittable approach.

During the COVID-19 pandemic and hurricanes, IntraHealth activated an emergency response plan to give health workers and clients additional support, including providing health workers with mental health services and personal protective equipment, and adapting alerTAR to help find clients on the move and connect them to care and treatment services.

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USAID Central America Capacity*Plus* **Project** (2011–2018)

The Central America Capacity*Plus* Project (CAMPLUS) worked with local, national, and regional health facilities to ensure key populations and PLHIV 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 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 PLHIV 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. We developed and used alerTAR 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 instructional design 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)



IntraHealth International partners with governments and local organizations to improve the performance of health workers and strengthen the systems in which they work. IntraHealth is a subsidiary of **Global Communities**, integrating a broad range of international health expertise across the humanitarian and sustainable development sectors. Together, we envision a world where crises give way to resilience and all people have the health care they need to thrive.