

## Data Sheet

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|-------------------------------------|----------------------------------|
| <b>USAID Mission:</b>               | Central America Regional Program |
| <b>Program Title:</b>               | Investing in People              |
| <b>Pillar:</b>                      | Global Health                    |
| <b>Strategic Objective:</b>         | 596-023                          |
| <b>Proposed FY 2004 Obligation:</b> | \$4,950,000 CSH                  |
| <b>Prior Year Unobligated:</b>      | \$0                              |
| <b>Proposed FY 2005 Obligation:</b> | \$4,950,000 CSH                  |
| <b>Year of Initial Obligation:</b>  | FY 2003                          |
| <b>Year of Final Obligation:</b>    | FY 2008                          |

**Summary:** HIV/AIDS continues to threaten development in Central America and Mexico. Regional migration due to past civil unrest, the demand for seasonal labor, greater economic integration, more open border policies, and improved regional transportation routes exacerbate the spread of HIV/AIDS both within the region and towards the North. The overall cumulative prevalence of AIDS cases for the region, as well as under-reporting of the number of cases, shows considerable variation across countries. The limited existing data indicates that all the countries except Honduras fall into the "Concentrated" category with certain sub-groups of the population being particularly affected. In Honduras, the pandemic has spread to the general population and is the leading cause of death among women of reproductive age. As HIV/AIDS becomes well established in the heterosexual population, transmission from mother to unborn/newborn child clearly increases. However, there is still an opportunity to contain the spread of the pandemic in Central America through sound targeted prevention practices and avoid a full blown epidemic and loss of life and cost to society. Therefore, the Regional HIV/AIDS Program, under the Central America and Mexico Regional Strategy, focuses on: 1) increasing use of prevention practices and services to combat HIV/AIDS; 2) implementing improved HIV/AIDS policies and surveillance; and 3) effective and efficient delivery of comprehensive care and treatment for people living with HIV/AIDS.

### Inputs, Outputs, Activities:

#### FY 2004 Program:

HIV/AIDS prevention (\$1,935,000 CSH). USAID will continue to support targeted behavior change interventions to high-prevalence and other vulnerable populations that will result in reduction of risky behaviors (e.g., reduction of multiple partners, delayed initiation of sexual activity, and increased condom use in high-risk relations). USAID will expand interpersonal education services to reach higher-prevalence populations, while making affordable condoms available by increased nontraditional sales in high-risk zones. A revamped media campaign will strongly support the ABC (abstinence, be faithful, use condoms) strategy. Pending the results of an external evaluation, USAID may also support community-based planning through technical assistance, training, and small grants to municipalities with rapidly growing HIV/AIDS epidemics. Principal grantees are Population Services International and the Academy for Educational Development (AED).

HIV/AIDS policies (\$1,546,300 CSH). USAID will continue to provide technical assistance to support implementation of improved HIV/AIDS policies, strategic plans, and monitoring and evaluation strategies. USAID has supported the national strategic planning processes as well as development of proposals to the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM), and will continue to work closely with countries in the modification of pending proposals, preparation of future proposals, and implementation, management, monitoring and evaluation, and coordination of GFATM activities in the context of the national strategic plans. Development and dissemination of projection models and socioeconomic impact studies will inform discussion on these issues. USAID-funded training and technical assistance will strengthen strategic alliances and existing legal rights service groups to work in HIV/AIDS-related areas and help people living with HIV/AIDS and other vulnerable groups under existing legislation. Principal grantees are: AED (prime) and The Futures Group International (sub).

Surveillance and data (\$1,268,700 CSH). USAID-funded technical assistance will help improve and implement national and regional surveillance systems. USAID will fund situation assessments, technical assistance, training, and rapid tests. The improved regional and national surveillance systems will ensure that: 1) AIDS and HIV case data are complete and accurate; 2) seroprevalence data are collected periodically from appropriate populations, analyzed and disseminated; 3) behavioral and special case-investigation studies are conducted periodically; 4) program and other relevant data are incorporated into the surveillance system; and, 5) information from the surveillance system is used to influence decision makers and other audiences. Principal agency will be the Centers for Disease Control/Global AIDS Program through an Inter-Agency Agreement.

Comprehensive care (\$200,000 CSH). USAID will fund the development of in-service training curricula for health professionals, as well as implementation of a graduate-level diploma course. A balanced ABC prevention component will be integrated into all of the activities. Contractor/grantee has not yet been selected.

**FY 2005 Program:**

HIV/AIDS prevention (\$1,935,000 CSH). USAID will continue to support targeted behavior change interventions to high-prevalence and other vulnerable populations.

HIV/AIDS policies (\$1,546,300 CSH). USAID plans to continue funding technical assistance activities to support implementation of improved HIV/AIDS policies, strategic plans, and monitoring and evaluation strategies as described above.

Surveillance and data (\$1,268,700 CSH). USAID expects to continue funding activities to improve and implement national and regional HIV/AIDS surveillance systems as described above.

Comprehensive care (\$200,000 CSH). USAID plans to continue funding the development of in-service training curricula for health professionals, as well as implementation of a graduate-level course.

**Performance and Results:** USAID has developed a pool of highly-qualified Central American professionals capable of providing guidance and leadership for the development and implementation of strategies and HIV/AIDS programming. All governments in the region have committed to expanding access to antiretroviral therapy, and all countries except Panama have been approved for funding by the Global Fund to Fight AIDS, Tuberculosis, and Malaria. These commitments lay the foundation for comprehensive care and prevention programs. Furthermore, all of the governments except Belize have positive legislation protecting the rights of people living with AIDS. Seven new positive policy changes were recorded in FY 2003, including clinical protocols, commitment to expand access to low-cost generic medicines, and derogation of a discriminatory article on hiring people living with HIV/AIDS. These policies have contributed significantly to making antiretroviral therapy accessible to people living with HIV/AIDS, a key element in AIDS control. The number of people receiving antiretroviral therapy in the four core countries (Panama, El Salvador, Nicaragua and Guatemala) increased from 2,906 to 3,987, a gain of 37%. The policies have also helped reduced stigma and discrimination by emphasizing human rights for people living with HIV/AIDS. In December 2003, USAID completed a behavioral study which provides information on changes in behavior compared to 2000. The study also serves as a baseline for attitudes and knowledge of human rights, and will be used to develop a standardized questionnaire that can be compared internationally.

By program completion, USAID expects reduced incidence of HIV among high-prevalence groups and prevalence in the general population age 15 to 49 (male and female) maintained below 1%.

## US Financing in Thousands of Dollars

### Central America Regional Program

|                                       |        |
|---------------------------------------|--------|
| 596-023 Investing in People           | CSH    |
| <b>Through September 30, 2002</b>     |        |
| Obligations                           | 0      |
| Expenditures                          | 0      |
| Unliquidated                          | 0      |
| <b>Fiscal Year 2003</b>               |        |
| Obligations                           | 764    |
| Expenditures                          | 0      |
| <b>Through September 30, 2003</b>     |        |
| Obligations                           | 764    |
| Expenditures                          | 0      |
| Unliquidated                          | 764    |
| <b>Prior Year Unobligated Funds</b>   |        |
| Obligations                           | 0      |
| <b>Planned Fiscal Year 2004 NOA</b>   |        |
| Obligations                           | 4,950  |
| <b>Total Planned Fiscal Year 2004</b> |        |
| Obligations                           | 4,950  |
| <b>Proposed Fiscal Year 2005 NOA</b>  |        |
| Obligations                           | 4,950  |
| Future Obligations                    | 32,336 |
| Est. Total Cost                       | 43,000 |