

HONDURAS

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
By the end of 2021, all the necessary treatment protocols and guidelines are in place in line with the standard for the implementation of the new Dolutegravir-based treatment regimen.	WITHIN REACH	In 2020, Honduras adopted Dolutegravir as the first-line treatment regimen for HIV and completed the development of regulations and guidelines for the transition. It is estimated that 2360 people living with HIV will be transitioned to Dolutegravir by 2021.
By the end of 2021, the transition to dolutegravir will be strengthened through the implementation of new technologies (telemedicine and e-health) within the framework of the first level of care.	ON TRACK	Intensive work was initiated in 2020 to establish telemedicine in Honduras, including with the assessment of necessary equipment in care services, and trainings were launched in September 2020 to prepare implementation.
By 2021, a pilot dual testing programme is implemented to reach afro-descendant populations.	ON TRACK	The Ministry of Health initiated the validation process of dual rapid diagnostic test for syphilis and HIV, and pilot programmes will be launched upon completion.
By the end of 2021, an innovative community-led approach to service delivery, will be in place to engage the most vulnerable people in a timely manner.	ON TRACK	Work with civil society organizations is ongoing to assess strengths and weaknesses and build their capacity. A community-led service delivery feasibility assessment will be conducted in 2021 to identify the best approach to reach most vulnerable people with HIV services in Honduras.
By 2021, healthcare providers will have strengthened capacity and skills in sexual and reproductive health, HIV, stigma, discrimination, and sexual and reproductive health rights.	ON TRACK	Capacity building activities towards health personnel have been taken place in 2020 and are further scheduled for 2021.
By the end of 2021, a costed five-year (2020-2024) strategic plan for the HIV response with a roadmap for implementation and monitoring will be in place.	NO PROGRESS	The National HIV Strategic Plan (PENSIDA) 2015-2019 was extended until 2024 due to insufficient funds.

JOINT TEAM

UNICEF, UNFPA, WHO-PAHO, UNAIDS SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

The Joint Team supported the Government's efforts to enrol people living with HIV to the preferred Dolutegravir-based treatment regimen, which has higher efficacy and reduced side effects. This included identification of eligible people living with HIV eligible for transition and developing a plan for implementation of the programme. Assistance has also been provided to train healthcare workers in eight health regions improving their knowledge around sexual and reproductive health, and HIV and COVID-19 prevention. Supported by the Joint Team, the transition from paper-based HIV data reporting to a central and integrated database will improve programming, decision-making and monitoring of progress towards the 90-90-90 targets and the end of AIDS in Honduras.

HIV PREVENTION, TESTING AND TREATMENT**ADVOCACY; TECHNICAL SUPPORT; FOSTERING PARTNERSHIPS**

Honduras initiated treatment optimization and transition to Dolutegravir to ensure better outcome of antiretroviral therapy and quality of care among people living with HIV. In 2020, the Joint Team supported the process of identifying people living with HIV who meet the criteria of transition to Dolutegravir and developed regulations and national guidelines needed to roll out the transition plan in 2021. In addition, a diagnostic manual was completed to standardize and support interpretation of tests, allowing the correct etiological diagnosis of syphilis and other sexually transmitted infections (STIs) by health services at national level.

In 2020, the Joint Team provided support to include HIV data from the sentinel surveillance of sexually transmitted infections (VICITS) and comprehensive care services in the HIV component of the Integrated Health Information System (SIIS) managed by the Ministry of Health, transitioning from manual processing to an integrated central system. Realtime data from SIIS will facilitate programme planning, implementation and monitoring, generate cascades at national level, and support decision making processes.

Digital messages were developed to promote provision of rights-based, equitable, and dignified HIV care and treatment services and disseminated in care and service networks across the country. Three virtual training sessions on HIV, sexual and reproductive health (SRH), and COVID-19 were developed and rolled out strengthening the capacity of 761 healthcare workers in the first level of care from around 50 municipalities in eight health regions of the Dry Corridor. The sessions also addressed ART adherence among people living with HIV affected by the COVID-19 pandemic.

CONTRIBUTION TO THE COVID-19 RESPONSE

In Honduras, the multi-month dispensing of ART and the house-to-house delivery of medicines were adopted to mitigate the impact of the COVID-19 pandemic and related restrictions on people living with HIV and their access to treatment. The Joint Team provided support to civil society organizations and volunteers for the implementation of this delivery method, reaching more than 1500 people affected by the movement restrictions and the challenges posed by the hurricanes Eta and Iota.

The Joint Team conducted an assessment to identify human resource gaps in six comprehensive care services and surveillance centres in San Pedro Sula and Cortés—high HIV burden cities in Honduras—and propose solutions to ensure the continuity of HIV services during the pandemic. The study highlighted that although there was minimal COVID-19 infection among healthcare workers to cause significant disruption of services, there was shortage of personal protective equipment (PPE) to ensure the safety of health workers and their clients. In this view, 11 171 N95 face masks were procured and distributed to HIV service sites in San Pedro Sula and Cortés.

Pandemic-related total lockdown, which lasted over six months, resulted in closures of many informal and small-scale businesses, and losses of livelihoods. People living with HIV who lost their incomes were unable to provide food or safety and hygiene commodities for themselves and their families. In partnership with World Vision, the Joint Team provided 460 people living with HIV from seven priority HIV care centres with food coupons covering food expenses for an average household with five to seven family members for one month.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

Contributing to SDG 3 on Health and Wellbeing, the Joint Team's actions in 2020 increased access to health services for all and contributed to closing existing gaps. For instance, three webinars were held to strengthen the skills and knowledge of health personnel on human rights and HIV, sexual and reproductive health among adolescents, and the intersecting COVID-19 and HIV pandemics. More than 300 health professionals working in the first level of care of four prioritized health regions (Atlántida, Cortés, Francisco Morazán, and Olancho) participated in these sessions. Furthermore, communication materials were developed and disseminated among health providers during the COVID-19 pandemic to ensure an equal and stigma-free access to comprehensive healthcare services for all and that no one would be left behind, including adolescents and young women, and people living with HIV and their families.

Through the provision of N95 face masks to vaccination healthcare workers in 16 regional health facilities during the COVID-19 pandemic, the Joint Team also provided support to a government-led immunization programme for children under five years across the country, contributing to SDG 3 and ensuring healthy lives in Honduras. As a result, 175 000 children under five years received vaccinations, including Bacillus Calmette–Guérin (BCG), measles, mumps, rubella (MMR), Pentavalent, Rotavirus, and diphtheria, pertussis, and tetanus (DPT) to protect them from various high-impact childhood diseases. Additionally, 8663 adolescents, 36 927 pregnant women, 146 580 elderly people, and 19 625 people from other age groups also received various vaccinations, including tetanus, human papillomavirus, and influenza in six comprehensive care services and surveillance centres.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>Honduras faced multiple challenges in 2020, including, COVID-19 pandemic, hurricanes Eta and Iota, and political tensions, which disrupted HIV prevention, care, and treatment services.</p>	<p>Continue to support the national authorities in responding to challenges, including the COVID-19 pandemic.</p>
<p>Lack of finance remains a challenge in the implementation of prevention of mother-to-child transmission of HIV (PMTCT), syphilis prevention and treatment, and community-led HIV prevention and care services.</p>	<p>Continue to support efforts to reduce mother-to-child transmission of HIV and Syphilis infection in Honduras, including through the implementation of the PMTCT grants secured.</p> <p>Provide technical support to boost access and coverage to community-led HIV prevention and care services using online tools/ mobile applications.</p>
<p>Shortage of trained technical personnel and weak governance within the Ministry of Health, and lack of a comprehensive approach to the HIV response continue to present significant challenges in programme planning and implementation, impacting progress towards the 90-90-90 targets.</p>	<p>Provide technical support to strengthen the capacity and skills of healthcare workers to ensure provision of rights-based, and stigma and discrimination free HIV and SRH services at the first level of care.</p> <p>Assist with the implantation of telehealth and telemedicine to ensure smooth transition to dolutegravir and optimization of treatment within the existing care and treatment service delivery framework.</p>

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