

Country progress report - Honduras

Global AIDS Monitoring 2017



the 1990s, the number of people in the world who are illiterate has increased from 1.2 billion to 1.5 billion.

There are many reasons for this. One is that the population of the world is growing so fast that the number of people who are illiterate is increasing. Another reason is that the quality of education is so poor that many people who are literate are unable to read and write.

There are many ways to reduce the number of illiterate people in the world. One way is to improve the quality of education. Another way is to provide more opportunities for people to learn to read and write.

It is important to reduce the number of illiterate people in the world because illiteracy is a major barrier to economic and social development. People who are illiterate are unable to read and write, which makes it difficult for them to find jobs and to improve their lives.

There are many organizations that are working to reduce the number of illiterate people in the world. One of the most well-known is the United Nations Educational, Scientific and Cultural Organization (UNESCO). UNESCO has a program called the Global Education Monitoring Report (GEMR) that tracks progress on education around the world.

Another organization is the World Bank, which also has a program called the World Education Indicators (WEI) that tracks progress on education around the world. The WEI provides data on a wide range of education indicators, including enrollment rates, literacy rates, and quality of education.

There are many other organizations that are working to reduce the number of illiterate people in the world. These organizations are working to improve the quality of education and to provide more opportunities for people to learn to read and write.

It is important to continue to work to reduce the number of illiterate people in the world. Illiteracy is a major barrier to economic and social development, and it is important to ensure that everyone has the opportunity to learn to read and write.

There are many ways to reduce the number of illiterate people in the world. One way is to improve the quality of education. Another way is to provide more opportunities for people to learn to read and write.

It is important to reduce the number of illiterate people in the world because illiteracy is a major barrier to economic and social development. People who are illiterate are unable to read and write, which makes it difficult for them to find jobs and to improve their lives.

There are many organizations that are working to reduce the number of illiterate people in the world. One of the most well-known is the United Nations Educational, Scientific and Cultural Organization (UNESCO). UNESCO has a program called the Global Education Monitoring Report (GEMR) that tracks progress on education around the world.

Another organization is the World Bank, which also has a program called the World Education Indicators (WEI) that tracks progress on education around the world. The WEI provides data on a wide range of education indicators, including enrollment rates, literacy rates, and quality of education.

There are many other organizations that are working to reduce the number of illiterate people in the world. These organizations are working to improve the quality of education and to provide more opportunities for people to learn to read and write.

It is important to continue to work to reduce the number of illiterate people in the world. Illiteracy is a major barrier to economic and social development, and it is important to ensure that everyone has the opportunity to learn to read and write.

the 1990s, the number of people in the world who are illiterate has increased from 1.2 billion to 1.5 billion.

There are many reasons for this. One is that the population of the world is growing so fast that the number of people who are illiterate is increasing. Another reason is that the quality of education is so poor that many people who are literate are unable to read and write.

There are many ways to reduce the number of illiterate people in the world. One way is to improve the quality of education. Another way is to provide more opportunities for people to learn to read and write.

It is important to reduce the number of illiterate people in the world because illiteracy is a major barrier to economic and social development. People who are illiterate are unable to read and write, which makes it difficult for them to find jobs and to improve their lives.

There are many organizations that are working to reduce the number of illiterate people in the world. One of the most well-known is the United Nations Educational, Scientific and Cultural Organization (UNESCO). UNESCO has a program called the Global Education Monitoring Report (GEMR) that tracks progress on education around the world.

Another organization is the World Bank, which also has a program called the World Education Indicators (WEI) that tracks progress on education around the world. The WEI provides data on a wide range of education indicators, including enrollment rates, literacy rates, and quality of education.

There are many other organizations that are working to reduce the number of illiterate people in the world. These organizations are working to improve the quality of education and to provide more opportunities for people to learn to read and write.

It is important to continue to work to reduce the number of illiterate people in the world. Illiteracy is a major barrier to economic and social development, and it is important to ensure that everyone has the opportunity to learn to read and write.

There are many ways to reduce the number of illiterate people in the world. One way is to improve the quality of education. Another way is to provide more opportunities for people to learn to read and write.

It is important to reduce the number of illiterate people in the world because illiteracy is a major barrier to economic and social development. People who are illiterate are unable to read and write, which makes it difficult for them to find jobs and to improve their lives.

There are many organizations that are working to reduce the number of illiterate people in the world. One of the most well-known is the United Nations Educational, Scientific and Cultural Organization (UNESCO). UNESCO has a program called the Global Education Monitoring Report (GEMR) that tracks progress on education around the world.

Another organization is the World Bank, which also has a program called the World Education Indicators (WEI) that tracks progress on education around the world. The WEI provides data on a wide range of education indicators, including enrollment rates, literacy rates, and quality of education.

There are many other organizations that are working to reduce the number of illiterate people in the world. These organizations are working to improve the quality of education and to provide more opportunities for people to learn to read and write.

It is important to continue to work to reduce the number of illiterate people in the world. Illiteracy is a major barrier to economic and social development, and it is important to ensure that everyone has the opportunity to learn to read and write.

Contents

Overall - Fast-track targets

3

Commitment 1 - Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Commitment 2 - Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Commitment 3 - Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Commitment 4 - Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Commitment 5 - Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 10000 per year	19
Commitment 6 - Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020	21
Commitment 7 - Ensure that at least 30% of all service delivery is community-led by 2020	23
Commitment 8 - Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers	24
Commitment 9 - Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights	27
Commitment 10 - Commit to taking AIDS out of isolation through people-centered systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C	29

Overall

Fast-track targets

Progress summary

Situación actual de la epidemia de VIH en Honduras

Según el informe estadístico de VIH desde 1985 a diciembre 2016 se notificó un acumulado de 34,258 personas con VIH. En el 2016 se reportaron 755 nuevas infecciones, 306 son infecciones avanzadas de VIH y 449 son VIH asintomáticos, la razón hombre-mujer es de 1.8:1. Los departamentos que reportaron el mayor número de casos de VIH e infección avanzada son **Cortés, Atlántida, Colon, Francisco Morazán, Islas de La Bahía, Gracias a Dios y Yoro.**

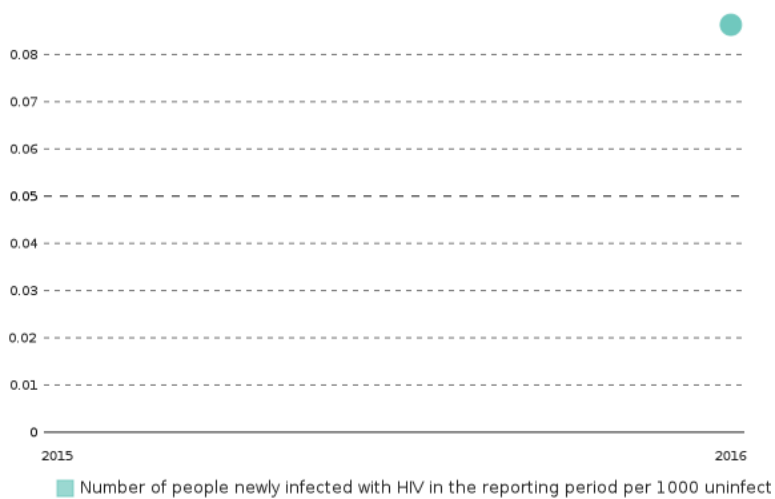
El país, tiene una epidemia concentrada en hombres que tienen sexo con hombres, mujeres Trans y mujeres Trabajadoras sexuales, aunque existen otras poblaciones vulnerables como la población garífuna en la que se encuentran tasas de prevalencia mayores a las de la población general. El patrón más común de transmisión de la epidemia de VIH es por vía sexual.

El sistema de vigilancia de la SESAL en el año 2016 reportó 162,215 embarazadas que asistieron a los servicios de atención prenatal, de los cuales el 97.8% se les realizó la prueba del VIH (158,910), se diagnosticaron 174 embarazadas VIH con una positividad fue de 0.1% de las cuales el 96.5% recibieron TAR (168).

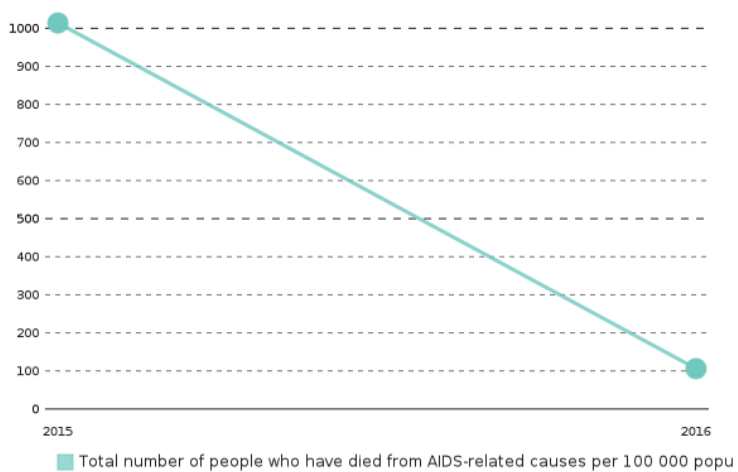
El Continuo de Atención a personas con VIH en Honduras a diciembre 2016, utilizando como punto de partida las estimaciones del total de casos de VIH vivos para el año 2016 (21,461) según Spectrum 5.51 (pilar 1). El pilar 2 alcanzó al 61% (12,995) que son las personas que conocen su estatus serológico y están vivas, lo que muestra una gran brecha en relación al pilar 1. El pilar 3 alcanzó al 52% (11,118) del total de personas con VIH que son las que se acercaron a los servicios de atención de VIH. El 51% del total de casos de VIH están activas en TAR en los SAI (pilar 4) y el 33% (7,152) han logrado la supresión de su carga viral < a 1000 copias (pilar 5)

Para el cierre del 2016 se tenían ***10,848** personas recibiendo terapia antirretroviral de estos 538 son niños menores de 15 años y 10,310 son mayores de 15 años.

3.1 HIV incidence, Honduras (2015-2016)



3.1 AIDS mortality, Honduras (2015-2016)



Commitment 1

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Progress summary

Ampliar el testeo hacia las poblaciones claves intensificando las estrategias de la oferta de la prueba de VIH e involucrando a las comunidades y a la sociedad civil, contribuirá al diagnóstico oportuno de los casos de VIH y el acceso a la terapia independientemente de su estado inmunológico y virológico, contribuirá a cumplir en alguna medida con las metas propuestas para el país.

Policy questions

Is there a law, regulation or policy specifying that HIV testing:

a) Is solely performed based on voluntary and informed consent

Yes

b) Is mandatory before marriage

Yes

c) Is mandatory to obtain a work or residence permit

No

d) Is mandatory for certain groups

No

What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?

≤350 cells/mm³; Implemented countrywide

Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?

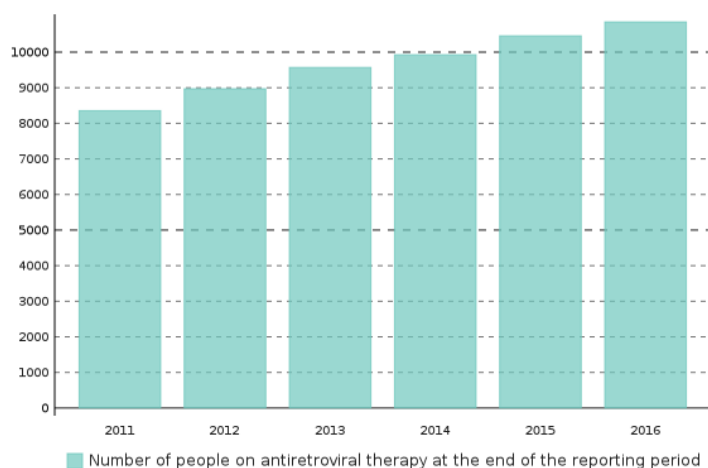
a) For adults and adolescents

Yes, fully implemented

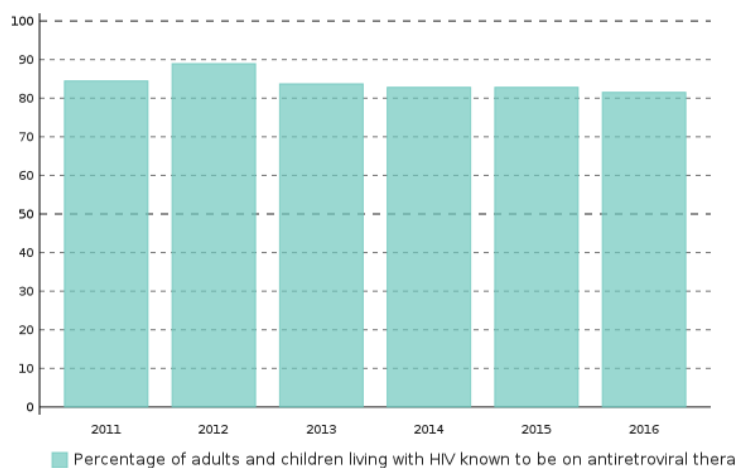
b) For children

Yes, partially implemented

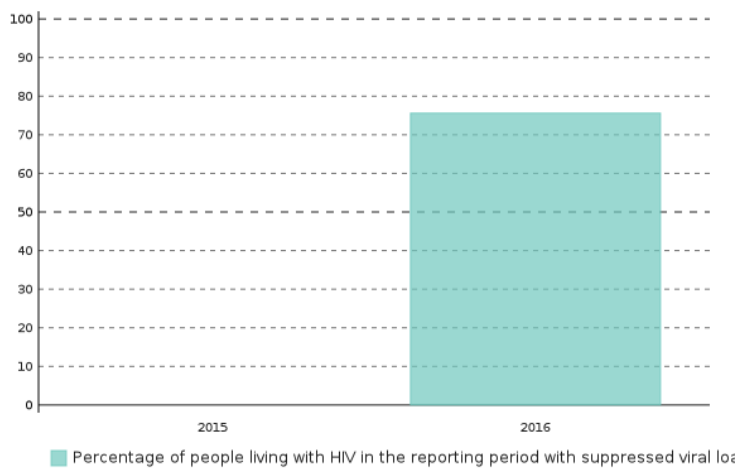
1.2 People living with HIV on antiretroviral therapy, Honduras (2011-2016)



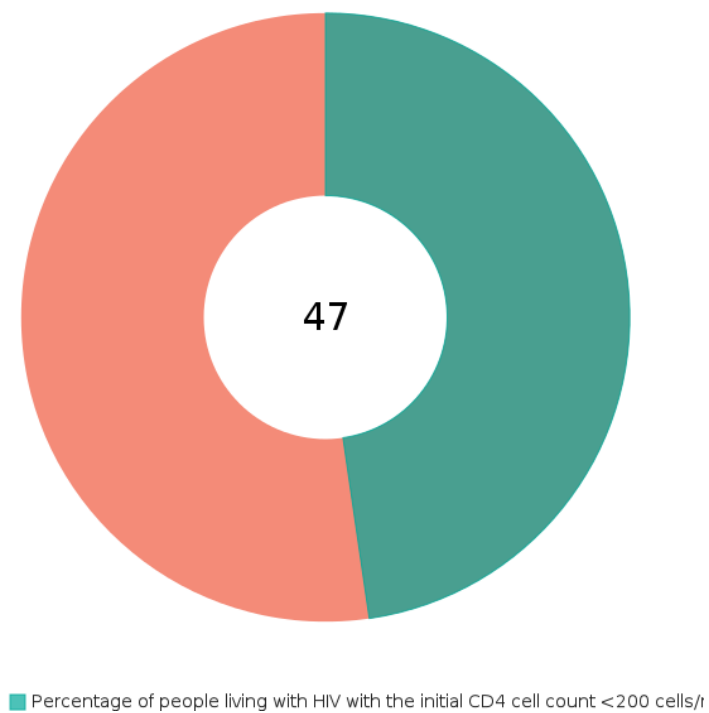
1.3 Retention on antiretroviral therapy at 12 months, Honduras (2011-2016)



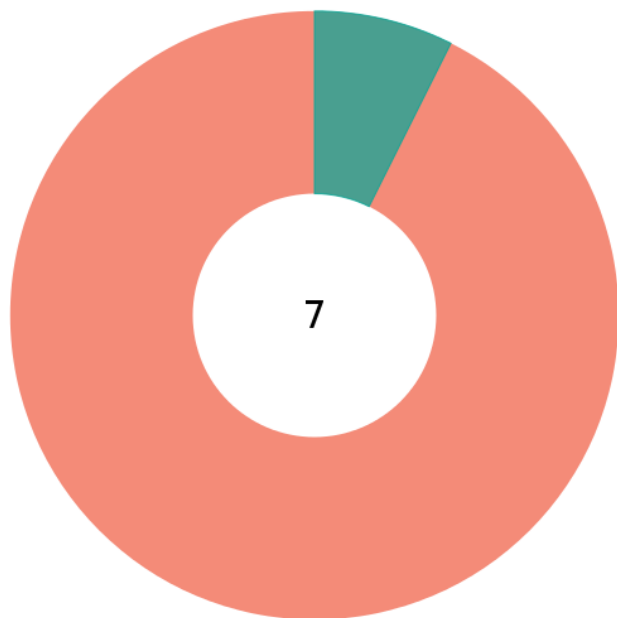
1.4 People living with HIV who have suppressed viral loads, Honduras (2015-2016)



1.5 Late HIV diagnosis, Honduras (2016)



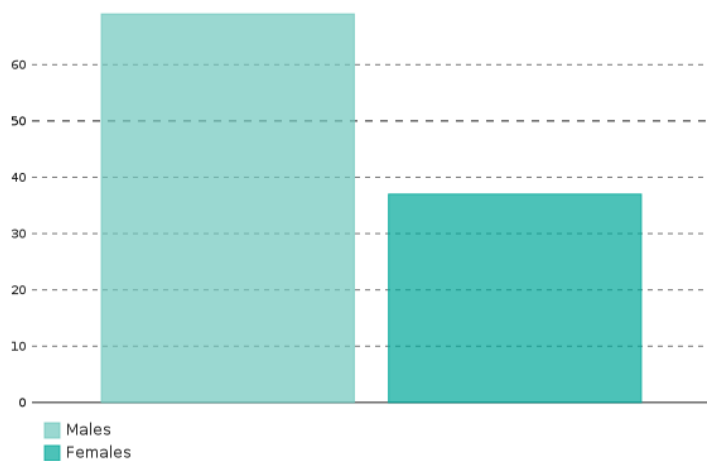
1.6 Antiretroviral medicine stock-outs, Honduras (2016)



■ Percentage of treatment sites that had a stock-out of one or more required antiretroviral medicines

1.7 AIDS mortality, Honduras (2016)

Number of people dying from AIDS-related causes in 2016



Commitment 2

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Progress summary

La ampliación de la cobertura del programa de prevención de la transmisión del VIH de madre a hijo e hija a los establecimientos de salud, con el fin de ofertar todos los beneficios con que el programa cuenta (diagnóstico oportuno, terapia ARV a la madre durante el embarazo, la profilaxis al recién nacido y la sustitución de la lactancia materna) y el acceso a la terapia independientemente de su estado inmunológico y virológico contribuirá a alcanzar la meta de eliminación de nuevas infecciones infantiles.

Policy questions

Does your country have a national plan for the elimination of mother-to-child transmission of HIV?

Yes

Target(s) for the mother-to-child transmission rate and year: 30 a 23 /1000 nv

Year: 2015

Elimination target(s) (such as the number of cases/population) and Year: 0

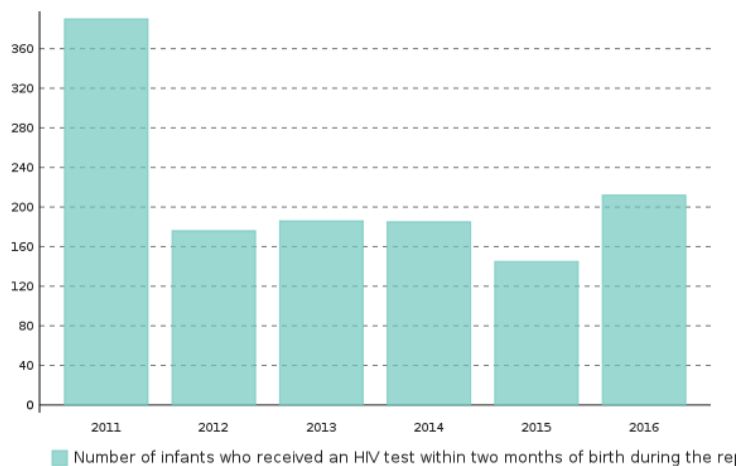
Year: 2030

Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?

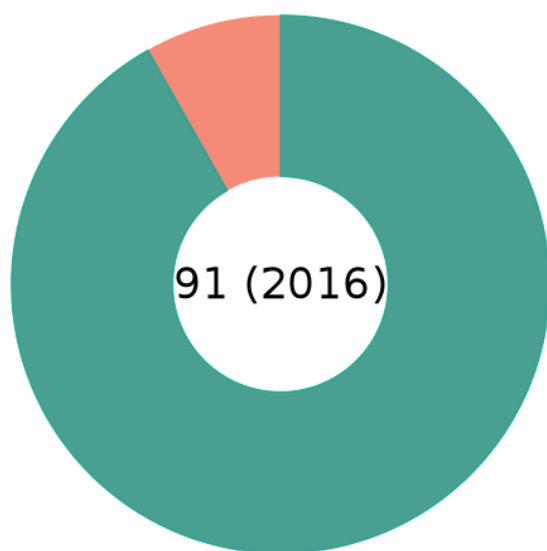
Yes, with an age cut-off to treat all of <5 years

Implemented countrywide

2.1 Early infant diagnosis, Honduras (2011-2016)



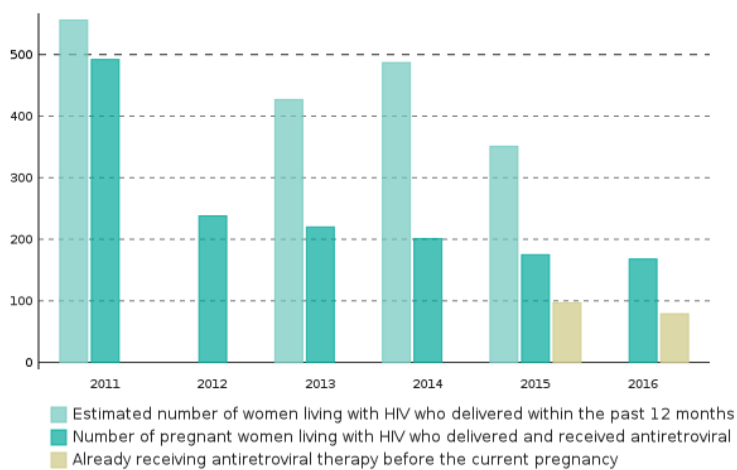
2.1 Early infant diagnosis, Honduras (2015-2016)



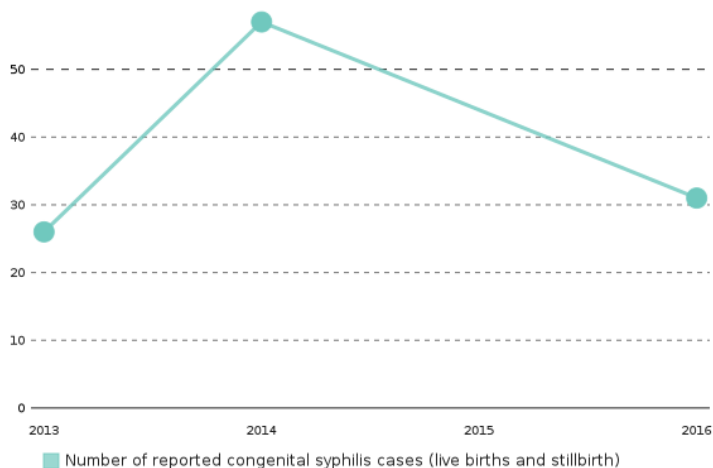
↑ 41.3 (2015)

■ Percentage of infants born to women living with HIV receiving a virological test

2.3 Preventing the mother-to-child transmission of HIV, Honduras (2011-2016)



2.5 Congenital syphilis rate (live births and stillbirth), Honduras (2011-2016)



Commitment 3

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Progress summary

Incrementando el acceso a los condones asegurando el abastecimiento continuo y un plan de distribución que sea respaldado con un presupuesto que se adapte a la necesidad real de país, se podrá lograr que la población general y población clave cuenten con esta opción para la prevención.

El país actualmente no brinda la profilaxis previa a la exposición ni la circuncisión masculina voluntaria.

Policy questions: Key populations

Criminalization and/or prosecution of key populations

Transgender people

Neither criminalized nor prosecuted

Sex workers

Sex work is not subject to punitive regulations or is not criminalized

Men who have sex with men

No specific legislation

Is drug use or possession for personal use an offence in your country?

There is compulsory detention for drug offences

Legal protections for key populations

Transgender people

No

Sex workers

No

Men who have sex with men

Prohibition of discrimination in employment based on sexual orientation

People who inject drugs

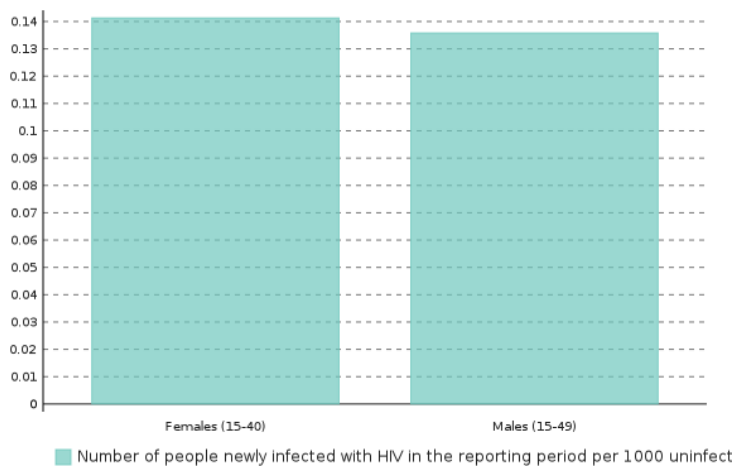
Yes

Policy questions: PrEP

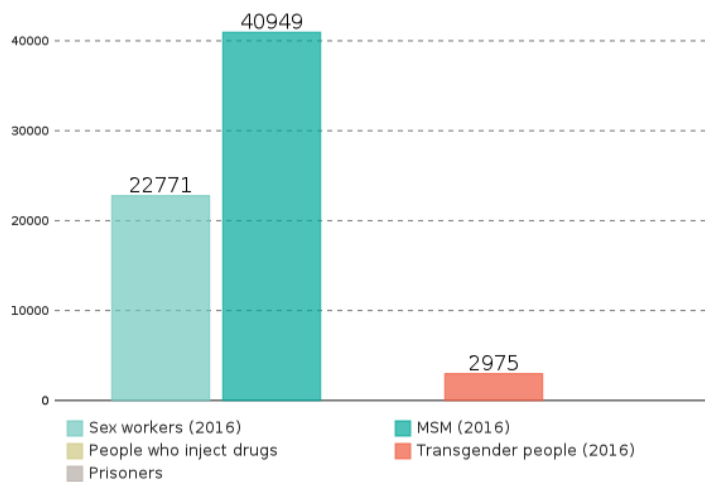
Is pre-exposure prophylaxis (PrEP) available in your country?

No

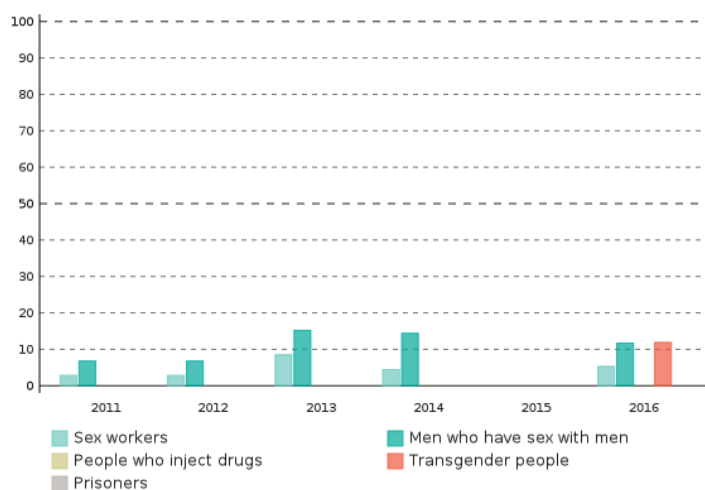
3.1 HIV incidence, Honduras (2016)



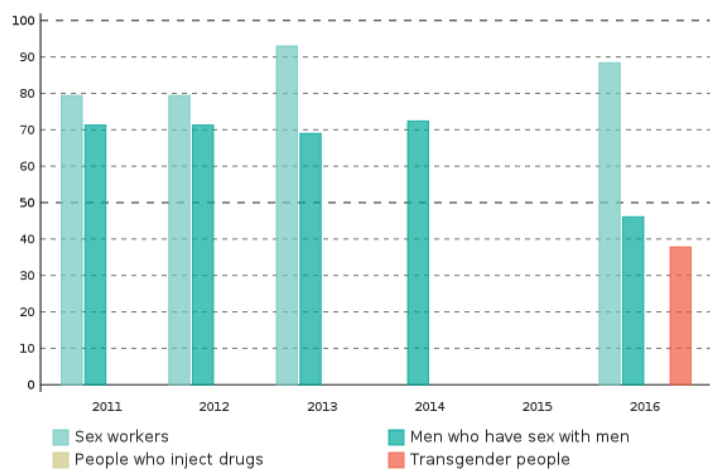
3.2 Estimates of the size of key populations, Honduras



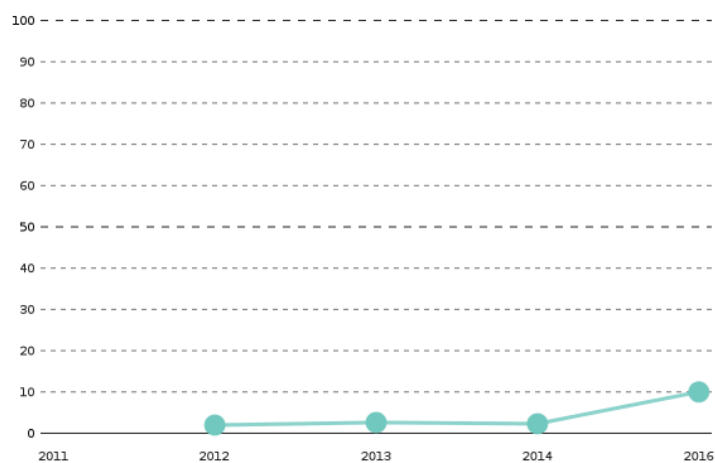
3.3 HIV prevalence among key populations, Honduras (2011-2016)



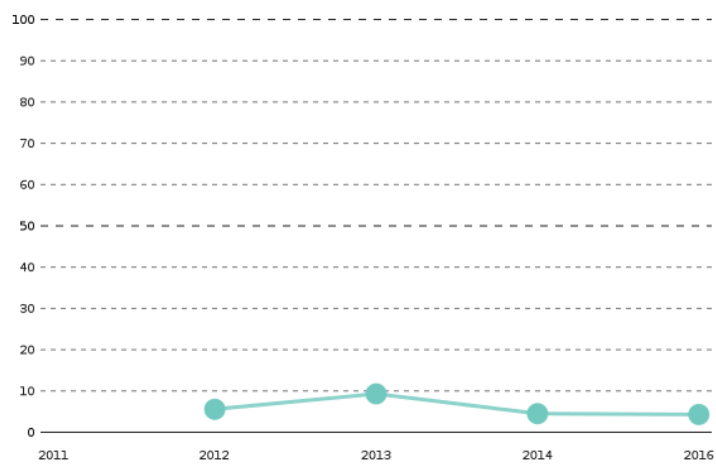
3.6 Condom use among key populations, Honduras (2011-2016)



3.11 Active syphilis among sex workers, Honduras (2011-2016)



3.12 Active syphilis among men who have sex with men, Honduras (2011-2016)



Commitment 4

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Progress summary

Actualmente se cuenta con una "Política Nacional de Género" donde se garantiza el respeto a los derechos e igualdad de los hombres y mujeres que se ha socializado a nivel todas las regiones de salud para lograr la transversalización de género desde el año 2016.

A la vez la Secretaria de Salud inicio la implementación de la "Guía para proveer servicios de salud libres de estigma y discriminación a personas trans e intersexuales, trabajadores y trabajadoras sexuales, hombres que tienen relaciones sexuales con hombres y personas con VIH"

Policy questions

Does your country have a national plan or strategy to address gender-based violence* and violence against women that includes HIV

Yes

Does your country have legislation on domestic violence*?

Yes

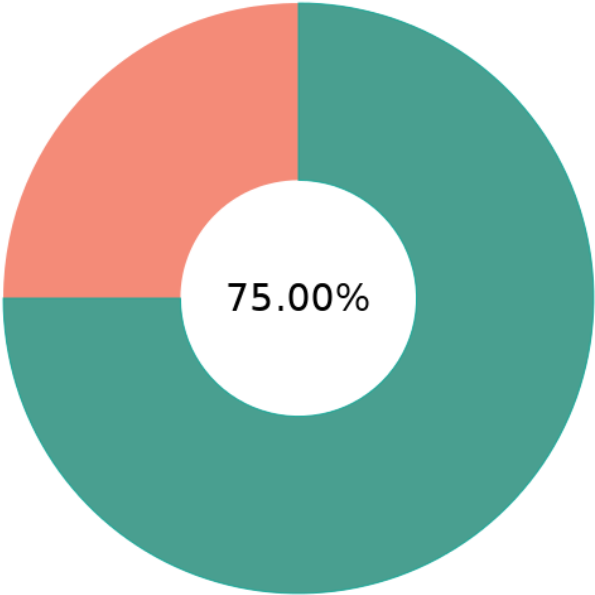
Does your country have any of the following to protect key populations and people living with HIV from violence?

-

Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

Yes, policies exist but are not consistently implemented

Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



6 / 8

Commitment 5

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Progress summary

En coordinación con la Secretaria de educación se dará seguimiento a la implementación de las "Guías de Salud Sexual y Reproductiva" en todos los centros educativos a nivel nacional y ya se cuenta con la "Política de Salud Sexual y Reproductiva" que reforzara la temática de la prevención del VIH y de otras ITS.

Policy questions

Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education*, according to international standards*, in:

a) Primary school

Yes

b) Secondary school

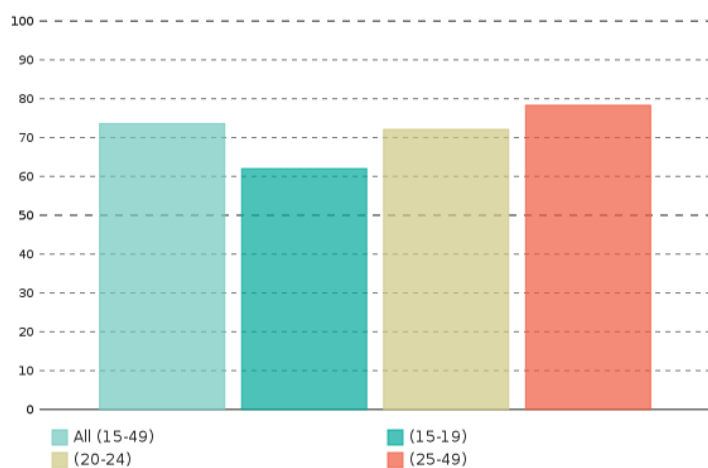
Yes

c) Teacher training

Yes

5.2 Demand for family planning satisfied by modern methods, Honduras (2016)

Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods



Commitment 6

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Progress summary

Actualmente el país cuenta con una ley de protección social, que aun no ha sido implementada, pero beneficiará a la población que no tiene acceso a los servicios que ofrece la seguridad social y que incluye a los diferentes grupos vulnerables.

Policy questions

Yes

a) Does it refer to HIV?

Yes

b) Does it recognize people living with HIV as key beneficiaries?

Yes

c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?

Yes

d) Does it recognize adolescent girls and young women as key beneficiaries?

Yes

e) Does it recognize people affected by HIV (children and families) as key beneficiaries?

Yes

f) Does it address the issue of unpaid care work in the context of HIV?

Yes

Do any of the following barriers limit access to social protection* programmes in your country

Lack of information available on the programmes
Complicated procedures
Fear of stigma and discrimination
High out-of-pocket expenses

Commitment 7

Ensure that at least 30% of all service delivery is community-led by 2020

Progress summary

El Involucramiento de la comunidad con el apoyo de los equipos de salud familiar contribuirán en algunas intervenciones de la prestación del servicio especialmente en la promoción de la salud y prevención del VIH y otras ITS así como del sistema de referencia respuesta.

Policy questions

Does your country have a national policy promoting community delivery of antiretroviral therapy?

No

Are there any of the following safeguards in laws, regulations and policies that provide for the operation of CSOs/CBOs in your country?

Registration of HIV CSOs is possible

Number of condoms and lubricants distributed by NGOs in the previous year

a) Male condoms:

23683674

b) Female condoms:

7750

c) Lubricants:

193600

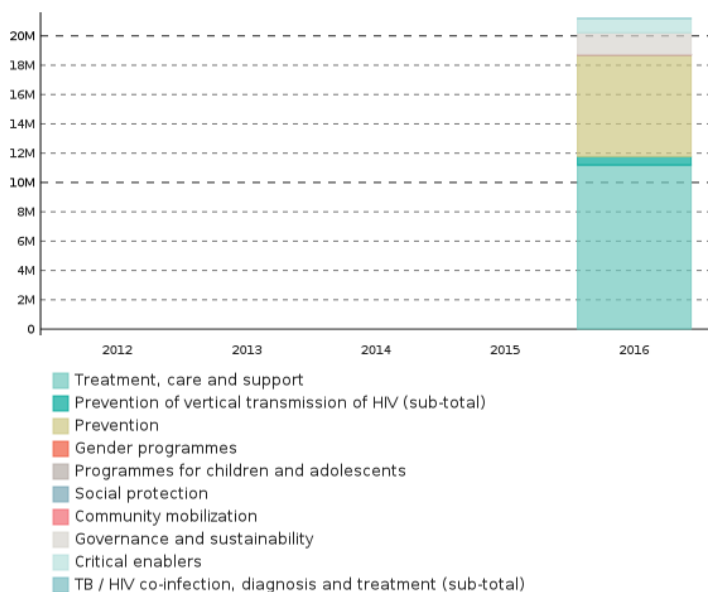
Commitment 8

Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers

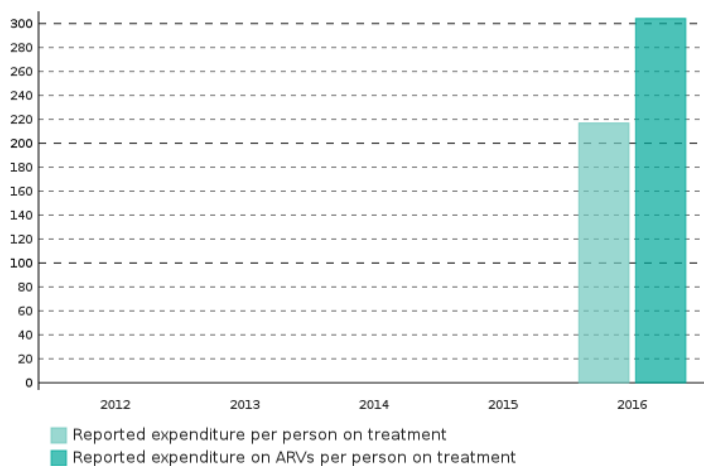
Progress summary

El presupuesto destinado para el tema de VIH se invierte en una buena parte en la compra de medicamento e insumos, sin embargo actualmente se esta elaborando el documento "Marco de inversión VIH en Honduras", lo que facilitara la toma de decisión el tema de la distribución de los recursos.

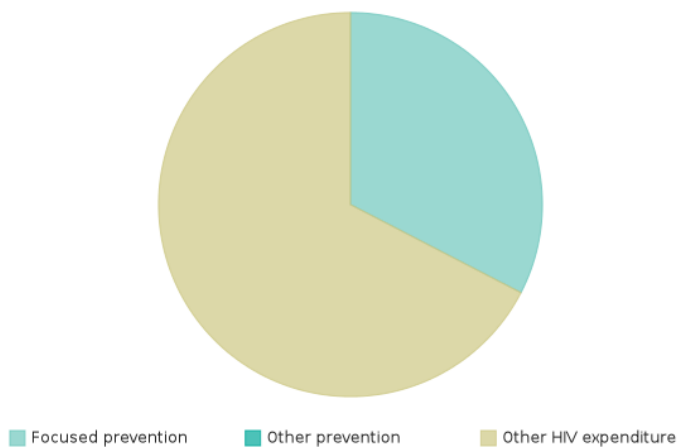
8.1 Domestic and international HIV expenditure by programme categories and financing sources, Honduras (2012-2016)



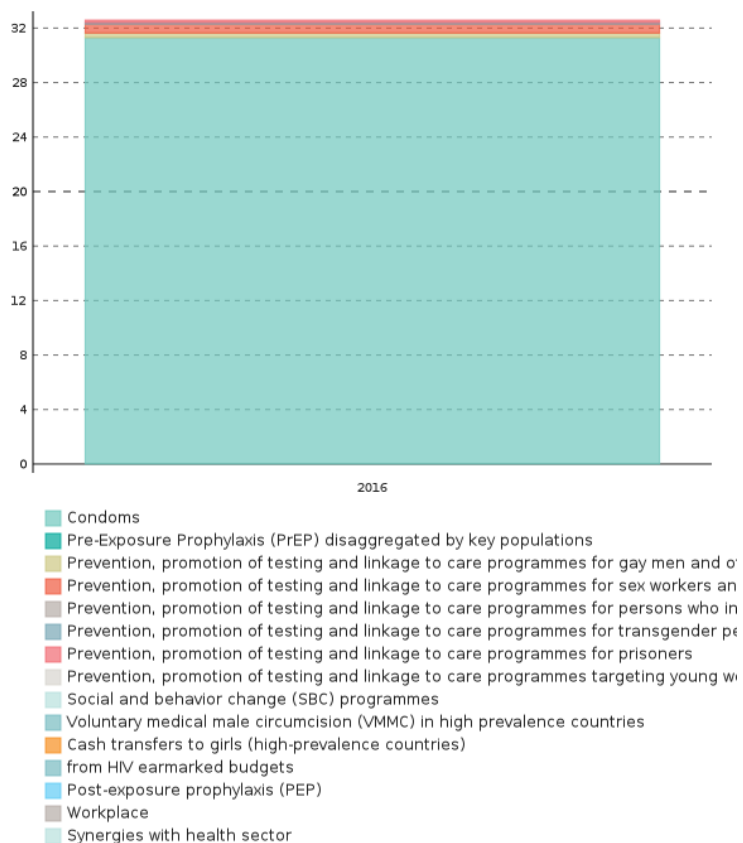
Expenditure per person on treatment, Honduras (2016)



Share of effective prevention out of total, Honduras (2016)



Structure of investments on effective and other prevention programmes (%), Honduras (2016)



Commitment 9

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

Progress summary

Se realizaron en el 2015 reformas a la ley del VIH que contribuirá a reforzar el empoderamiento en la temática de derechos humanos a las personas con VIH. Con la implementación de la "Guía para proveer servicios de salud libres de estigma y discriminación a personas trans e intersexuales, trabajadores y trabajadoras sexuales, hombres que tienen relaciones sexuales con hombres y personas con VIH" se aborda el derecho de las personas con VIH a un trato digno que respete sus derechos humanos.

Policy questions

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at scale at the national level

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

en personas con VIH hay estigma y discriminación en 40.3%, este dato corresponde al estudio de Índice de Estigma y discriminación realizado en el 2015 que esta basado en el informe de Fundacion LLaves y revision documental

Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings?

Complaints procedure

Does your country have any of the following barriers to accessing accountability mechanisms present?

Mechanisms do not function

Affordability constraints for people from marginalized and affected groups

Awareness or knowledge of how to use such mechanisms is limited

Commitment 10

Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Progress summary

El país en su plan estratégico nacional PENSIDA IV ha incorporado el tema de Hepatitis B y C dentro del marco del monitoreo de los indicadores y actualmente esta en fase preliminar el plan de vigilancia de las Hepatitis a nivel nacional, donde se ha conformado una mesa técnica, para conducir este proceso.

En el caso de la tuberculosis se esta en proceso de implementación del modelo de integración de los servicios de atención a las personas con VIH y Tuberculosis.

Policy questions

Is cervical cancer screening and treatment for women living with HIV recommended in:

a. The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)

No

b. The national strategic plan governing the AIDS response

Yes

c. National HIV-treatment guidelines

Yes

What coinfection policies are in place in the country for adults, adolescents and children?

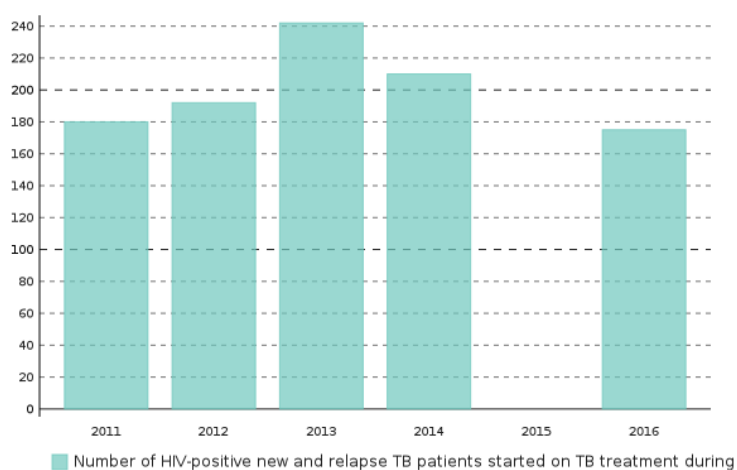
Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV

Intensified TB case finding among people living with HIV

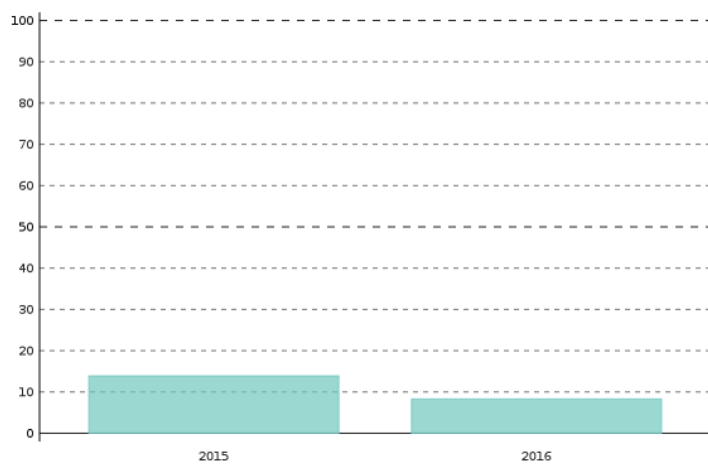
TB infection control in HIV health-care settings

Co-trimoxazole prophylaxis

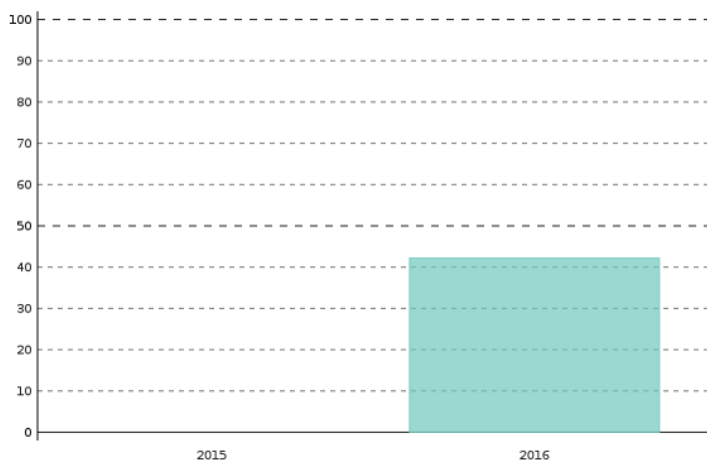
10.1 Co-managing TB and HIV treatment, Honduras (2011-2016)



10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Honduras (2015-2016)



10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Honduras (2015-2016)



10.4/10.5 Sexually transmitted infections, Honduras (2013-2016)

