HIV/AIDS in El Salvador and USAID Involvement

El Salvador is still recovering from 1998’s Hurricane Mitch and two major earthquakes in January and February 2001. The economic and social impact of the earthquakes was enormous, and the country faces a significant loss of homes, schools, health units, and municipal infrastructure. Ministry of Health data from 2001 suggest that HIV infection is increasing most rapidly among young people (ages 15 to 24), and that the disease is most prevalent among men. According to the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the Salvadoran National HIV/AIDS Program, as of June 2001:

- In total, 7,560 people have been diagnosed with HIV or AIDS;
- Men account for approximately 75 percent of adult HIV/AIDS cases;
- 266 children are living with AIDS and 274 with HIV infection; and
- 361 people have died from AIDS in El Salvador.

Information on HIV prevalence in El Salvador is limited. According to the Ministry of Health, between 1984 to June 2001, infection rates among high-risk groups ranged from 10 percent among commercial sex workers to 6 percent among sexually transmitted infection (STI) clinic patients. A seroprevalence study conducted at the national maternity hospital in 2001 measured a 1 percent HIV infection rate among pregnant women. HIV infection among blood donors is thought to be low.

According to UNAIDS, by the middle of 2001:

- 70.8 percent of AIDS cases were reported to be due to heterosexual contact;
- 5.4 percent of cases were reported to be transmitted via men who have sex with men (MSM);
- 4.6 percent were transmitted from mother to child;
- 1.5 percent occurred through injecting drug use (IDU); and
- 0.5 percent occurred through blood and blood products.

It is important to note that homosexual and bisexual transmission are thought to be underreported, and heterosexual transmission overreported. The male-to-female HIV infection ratio is 3:1.
NATIONAL RESPONSE

The first official case of HIV/AIDS in El Salvador was detected in 1984. The government began initial prevention activities in 1988 and implemented the first HIV/AIDS strategic plan in 1999. Currently, the second strategic plan is being carried out.

In recognition of the growing problem of HIV/AIDS in El Salvador and the adverse effects a widespread epidemic could have on the country’s development, the government is promoting a unified, multisectoral response to HIV/AIDS, including cooperation with nongovernmental organizations (NGOs), national donors and international organizations such as UNAIDS. As of 2001, in collaboration with these groups, the Government of El Salvador had:

- Developed a strategic plan for the prevention and control of HIV/AIDS and STIs;
- Passed national AIDS legislation to protect patient rights and guarantee treatment for persons living with HIV/AIDS;
- Strengthened and expanded efforts to care for those affected by HIV/AIDS;
- Updated national HIV/AIDS and STI treatment protocols; and
- Initiated provision of antiretroviral therapies to treat people living with HIV/AIDS and prevent transmission from mother to child.

El Salvador is committed to collective action among the countries of Central America to combat HIV/AIDS in the sub-region.

USAID SUPPORT

The U.S. Agency for International Development (USAID) allocated $500,000 for HIV prevention efforts in El Salvador in FY 2001. USAID’s strategy emphasizes HIV prevention and related behavior change interventions. The strategy includes surveillance and voluntary counseling and testing (VCT) activities that target vulnerable groups such as commercial sex workers, MSM, the National Civilian Police, and pregnant women.

Beginning in 1999, USAID/El Salvador incorporated an AIDS component into its bilateral “Healthy Salvadorans” activity. To date, USAID-funded HIV/AIDS activities and technical assistance in El Salvador have supported the following:

- Development of the National HIV/AIDS Program;
- Development of HIV/AIDS treatment protocols and STI norms;
- Initiated provision of antiretroviral therapies to treat people living with HIV/AIDS and prevent transmission from mother to child.

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Key Population, Health, and Socioeconomic Indicators

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<tr>
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<th>U.S. Census Bureau 2000*</th>
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<tbody>
<tr>
<td>Population</td>
<td>6.2 million</td>
<td>U.S. Census Bureau 2001</td>
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<tr>
<td>Growth Rate</td>
<td>1.9%</td>
<td>U.S. Census Bureau 2000*</td>
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<td>Life Expectancy</td>
<td>Males: 66</td>
<td>U.S. Census Bureau 2000*</td>
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<td></td>
<td>Females: 74</td>
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<tr>
<td>Total Fertility Rate</td>
<td>3.6</td>
<td>FESAL 1998**</td>
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<td>Infant Mortality Rate</td>
<td>35 per 1,000 live births</td>
<td>FESAL 1998</td>
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<tr>
<td>Maternal Mortality Ratio</td>
<td>120 per 100,000 live births</td>
<td>FESAL 1998</td>
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<tr>
<td>GNP per capita (US$)</td>
<td>$1990</td>
<td>World Bank 2000</td>
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<tr>
<td>Public health expenditure as % GDP</td>
<td>2.6%</td>
<td>World Bank 1998</td>
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<tr>
<td>Adult Literacy (% of people 15 and above)</td>
<td>Males: 82.1%</td>
<td>UNESCO 2001</td>
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<tr>
<td></td>
<td>Females: 76.8%</td>
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* From U.S. Census Bureau 2000 HIV/AIDS country profiles, which included data from U.S. Census Bureau, Population Reference Bureau, UNAIDS and WHO.

** From National Family Health Survey (FESAL), April 2000, El Salvador, C. A. USAID, CDC, MSPAS, UNICEF, UNFPA, PAHO, DIGESTYC. 
HIV/AIDS in El Salvador

- Training in HIV/AIDS counseling, STI management, and management of pediatric HIV/AIDS patients for private and public sector health personnel; and
- Establishment of an HIV/AIDS information hotline.

In addition to direct bilateral assistance, El Salvador benefits from USAID’s Central American Regional HIV/AIDS program. As the largest regional HIV/AIDS donor, USAID allocated $3.7 million toward Central American regional HIV/AIDS activities in FY 2001. The objectives of the regional program are to:

- Assist in the implementation of appropriate HIV/AIDS policies and strategic plans at the regional and national level;
- Increase civil society participation in the creation of HIV/AIDS legislation, recently approved by the National Assembly;
- Facilitate the implementation of improved prevention and support systems and other services; and
- Maintain support for an effective regional condom social marketing effort, with a focus on non-traditional condom distribution and correct and consistent condom use in high-risk populations.

In addition, USAID is working with several Central American countries to formulate a regional approach to HIV/AIDS prevention for mobile populations. The activity targets geographic “hot spots” where mobile populations converge, such as truck routes, border towns, ports, and trade centers.

USAID-SUPPORTED NGOS

USAID’s Central American HIV/AIDS Prevention Project (Proyecto Acción SIDA de Centroamérica, or PASCA) is designed to strengthen Central America’s capacity to respond to the AIDS epidemic. PASCA is implemented through the Academy for Educational Development (AED) in collaboration with The Futures Group International (TFGI). The project provides technical assistance on HIV prevention to governments, NGOs, and the private sector in five Central American countries: Panama, Nicaragua, Honduras, El Salvador, and Guatemala. Project activities primarily center around policy dialogue, NGO strengthening, and grant provision for Central American NGOs working on HIV/AIDS/STI prevention.

Through Population Services International (PSI), USAID funds the Pan American Social Marketing Organization (PASMO), active in Guatemala, Costa Rica, El Salvador, Belize, and Nicaragua since 1996. The program creates sustainable and effective condom social marketing programs through partnerships with commercial, public, and non-profit groups. PASMO primarily targets groups at high risk of contracting HIV/AIDS, and sexually active adolescents. In July 1998, PSI launched the sale of VIVE (Live!) condoms in Guatemala, El Salvador, and Nicaragua. More than 8.1 million condoms have been sold throughout the region.

DONOR SUPPORT

Along with USAID, UNAIDS in 2000 provided technical assistance for the development of HIV/AIDS care and treatment guidelines in El Salvador, in collaboration with the Ministry of Health, the Social Security Institute (ISSS), and FUNDASIDA, a local HIV/AIDS NGO.

In 2001, the Canadian International Development Agency (CIDA) contributed $100,000 for rural HIV/AIDS education, commercial sex worker prevention activities, strengthening of laboratory capacity, and HIV/AIDS training for medical and nursing staff.

Several additional donors provide HIV/AIDS support in the Central American region:

Norway and Sweden are providing approximately $3.6 million over three years to support HIV/AIDS programs targeting prevention among women and youth in Guatemala, Nicaragua, El Salvador, and Honduras.
UNAIDS contributed $450,000 to national programs in Central America during 1998-99, and is beginning to provide funding for regional activities, such as the USAID-supported mobile populations initiative.

CHALLENGES

According to USAID, El Salvador faces several challenges that may hamper HIV/AIDS prevention and care efforts:

- A dense population through which HIV/AIDS may spread quickly;
- A highly mobile population, which facilitates cross-border spread of disease; and
- A legacy of disaster. In the wake of Hurricane Mitch and two major earthquakes in early 2001, social infrastructure is dangerously weak. The disasters caused at least $2 billion in damage, and more than 1.5 million Salvadorans (or one-quarter of the population) were affected.
SELECTED LINKS AND CONTACTS

1. National AIDS Program, Dr. Gladys Bonilla, Ministerio de Salud, Calle Arce No. 827 San Salvador, El Salvador. Tel: (503) 221-0994/0966, Fax: (503) 221-5150

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For more information, see www.usaid.gov/pop_health/aids/ or www.synergyaids.com.

Please direct comments on this profile to: info@synergyaids.com.

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