

I-TECH India implements all its activities with support from the Human Resources and Services Administration (HRSA), the University of Washington (UW), and the Center for Disease Control and Prevention (CDC) under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). I-TECH India collaborates with NACO to support intervention across NACP through technical assistance.

TECHNICAL ASSISTANCE FOR CARE SUPPORT & TREATMENT SERVICES

National Review meeting on HIV Care, Support and Treatment Services

I-TECH India provided technical support to NACO in organizing the national review meeting on Care, Support and Treatment (CST) services held for all States/UTs at Bhubaneswar, Orissa from 25 - 28 April 2023. Officials from NACO, State AIDS Control Societies (SACS), members of the Technical Resource Group, and representatives from I-TECH India and other partners attended the meeting, which focused on strengthening the existing service delivery and follow-up mechanisms, fast-tracking interventions on HIV case detection and linkages, improving coordination with integrated public health programs (like NTEP), and scaling up decentralized antiretroviral dispensation models for decongesting treatment centres.



National CST Review Meeting (Bhubaneswar, Orissa)

Capsular Training for ART Centre Staff on HIV Care in Delhi

I-TECH India in collaboration with NACO, Delhi State AIDS Control Society (DSACS), Center of Excellence (CoE) at Maulana Azad Medical College (MAMC) and the Center for Disease Control and Prevention (CDC), organized a two-day in-person capsular training for ART centre staff (medical officers, staff nurses and counselors) of Delhi. The training aimed to promote peer participation and cross learnings for improved knowledge and ownership among the staff. The training sessions, including clinical and programmatic aspects, were facilitated by the experts from NACO, CDC, CoE, pediatric CoE, I-TECH India, and partner organizations. Conducted in three batches, the training reached to around **100 participants** from the Delhi ART centres.



Capsular training for ART centre staff (Delhi)

Supportive Supervision of ART Centres in Delhi

Under the guidance of CST Division, NACO, supportive supervision of the ART centres is being undertaken by a team of technical experts in Delhi. Senior medical experts of I-TECH India are also part of this team. The activity provides on-site mentoring and supportive supervision support to the staff of ART centres, identifying and reviewing the existing gaps, and providing support, while simultaneously ensuring the compliance with the national guidelines.



Supportive Supervision at ART centres - GTB and AIIMS (Delhi)

National ART Directory

The national ART Directory, listing out the contact details of the **713 ART centres** across the country, was developed under the guidance of NACO.

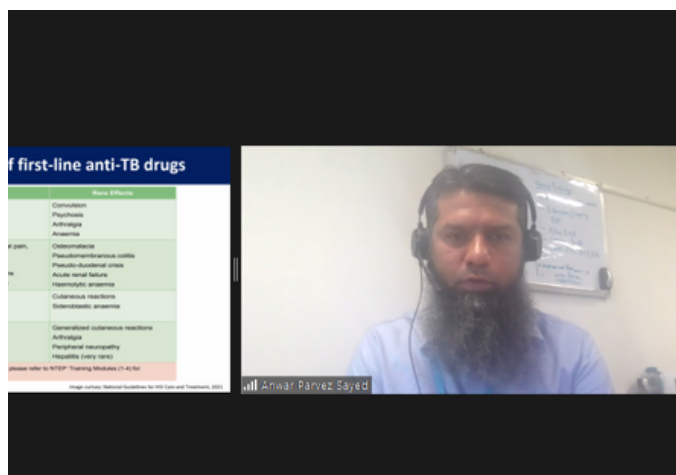
The national ART Directory is available on the [NACO website](#).

HEALTH SYSTEM STRENGTHENING

Distance Learning Seminars

I-TECH India continues to support NACO in the dissemination of the 'National Guidelines for HIV Care and Treatment' to all ART centres across the country through a series of regional distance learning seminars (RDLs). A total of **34 regional sessions** were conducted which were attended by **10,787 participants**.

In addition, **five national distance learning seminars (NDLS)** were also conducted by national experts on (a) case-based discussions on ART initiation and clinical consultations for unsuppressed viral load among Children Living with HIV (CLHIV), (b) prevention and management of diseases associated with ageing, (c) disseminating learning from patient-centric models implemented in PEPFAR geographies, (d) counselling of sero-discordant couples and (e) HIV TB Co-infection in children: case scenarios. These sessions reached to a total of **4,645 participants**.



Snapshots of Distance Learning Seminars

University of Washington Online Courses

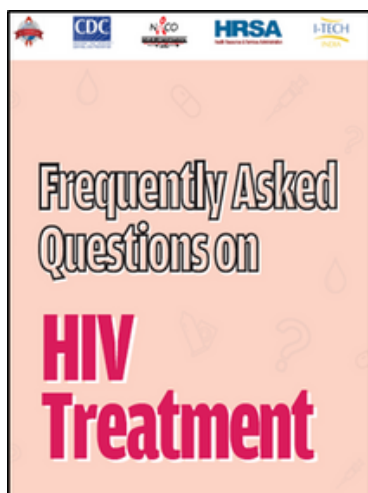
I-TECH India is a registered site for offering UW online courses (eDGH) to healthcare professionals. These online courses provide a global platform for cross-learning and building in-depth knowledge and skills for improving clinical acumen, service delivery, and patient-centric care.

- **April - June 2023:** 103 participants were enrolled in courses on **Leadership and Management in Health and Clinical Management of HIV** from across the country, and 88 participants have successfully completed with 84 participants scoring over 90%.
- **June - September 2023:** 99 participants were enrolled in the course on **Project Management in Global Health and Global Mental Health** which started in June-July 2023.

KNOWLEDGE AND RESOURCES

FAQ on HIV Treatment

The FAQ is intended to generate awareness and provide information about HIV care support and treatment services for the PLHIV community and their caregivers.



FAQ on HIV Treatment



To access the FAQ,
scan the bar code OR access [here](#)

I-TECH at INTERNATIONAL AIDS SOCIETY CONFERENCE- 2023

I-TECH India presented four e-posters at the IAS 2023 conference, Brisbane, Australia. The presenting authors were from CDC India and Mumbai Districts AIDS Control Society (MDACS). The title of the e-posters and their abstracts are as follow-

- Saturation of Tuberculosis Preventive Therapy among People Living with HIV, Mumbai, India([Abstract](#))
- Implementation of Person-Centered Strategies to Improve Re-Engagement in Care in Mumbai, India([Abstract](#))
- Improved Treatment Outcomes Using Family-Centric Care among PLHIV, Nagaland, India 2022([Abstract](#))
- Feasibility of implementing advanced disease management package as part of the routine, the standard of HIV care at ART centres in Mumbai, India ([Abstract](#))

From this edition onwards, the newsletter will carry a contribution from a guest on various relevant topics of Public Health. The current edition's guest author, Lydia Chwastiak writes on integration of mental health screening in HIV care model.

Integrating Mental Health Care in HIV Setting

- by Lydia Chwastiak

Principal Investigator, I-TECH, Department of Global Health, University of Washington

Mental disorders contribute significantly to morbidity, mortality, and diminished quality of life. Globally, people with mental disorders have a mortality rate that is more than twice that of the general population, with more than a decade of years of potential life lost. Mental disorders result in nearly one in five of years of healthy life lost due to disability; in 2019, depression was the second leading cause of disability worldwide. Effective treatments exist for mental disorders, but the majority of those in need in India and globally do not receive effective care. Low availability of human resources to deliver mental health services and stigma towards mental disorders contribute to this large unmet need for mental health care.



Building capacity for mental health treatment within primary care and other medical settings where people already seek care is an efficient strategy for increasing access to effective mental health treatment. People living with chronic medical conditions, such as Human Immunodeficiency Virus (HIV), have significantly higher rates of mental disorders than the general population, and regular care for these conditions provides medical practitioners opportunities to identify and engage people in care. Integrated care models involve trained mental health specialists supporting providers and staff in primary or secondary care settings to deliver education, chronic disease management and effective mental health treatments. Key characteristics include co-located care delivered by a multi-disciplinary team, a joint treatment plan with structured communication, and care coordination.

Research studies of integrated care models have shown that they improve access to effective mental health treatment and significantly improve clinical outcomes, including among people living with HIV. Integrating care for mental disorders into HIV medical care settings can reduce the fragmentation and complexity of care, creating an opportunity for a more person-centered healthcare experience. Integrated care can facilitate screening for mental disorders and increase the likelihood that people will connect to the care they need—and has the potential to improve quality of life, self-care, adherence to treatment, and HIV outcomes. But treatment for mental disorders is rarely integrated into essential packages of care for HIV prevention and treatment. HIV clinical providers must bridge this gap between what is known from research and what is done in practice.

Person-centered HIV care requires a comprehensive approach that addresses stressors (e.g., stigma and discrimination, trauma, intimate partner violence) and co-occurring chronic medical, mental health and substance use disorders. The World Health Organization's 2030 goal to achieve universal health coverage calls for integrated services that focus on the needs of individuals and communities and are provided in the most appropriate settings. Integrating mental health care into outpatient HIV clinics is an effective strategy to address the tremendous global mental health treatment gap.

Lydia Chwastiak MD, MPH is a psychiatrist and internal medicine physician and Professor in the Department of Psychiatry and Behavioral Sciences, Washington. Her research for the past 21 years has focused on improving the care and outcomes of people with chronic medical conditions and serious mental disorders.