Over one dozen countries have implemented HIV teleECHO™ programs since 2015.

Just about every day of the week there are clinicians participating in multiple HIV ECHOs somewhere in the world now.

The Namibia Ministry of Health and Social Services implemented the first teleECHO program in Africa in 2015. The HIV ECHO began connecting 10 spokes for a 9-month pilot. Between 80 and 120 participants joined the weekly sessions with Namibian HIV experts. The successful pilot inspired many more high HIV burden countries to use the ECHO model™ of telementoring for capacity building in HIV care and treatment.

Many programs were made possible through funding from the President’s Emergency Plan for AIDS Relief (PEPFAR). ECHO supports the countries in reaching the goal of epidemic control.

Partners:
- Academic Model Providing Access to Healthcare (AMPATH)
- Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)
- Health Resources & Services Administration (HRSA)
- ICAP Columbia University
- International Training and Education Center for Health (I-TECH)
- Jhpiego
- Lighthouse in Malawi
- Ministries of Health
- Partners in Hope Malawi
- University of Maryland
- US Centers for Disease Control and Prevention and various country offices
- Universidad de la Republica Uruguay

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HIV Care and Treatment ECHOs

### Programs in Africa
- Namibia (2015)
- Kenya (2016)
- Tanzania (2017)
- Cote d’Ivoire (2018)
- Nigeria (2018)
- South Sudan (2018)
- Zambia (2018)
- Malawi (later in 2018)
- Democratic Republic Congo (in development)

### Programs in Latin America
- Uruguay (2015)
- Jamaica (2017)
  - Spokes from Trinidad, Suriname and Barbados

### Programs in Asia
- India
- Kazakhstan (2016)
- Kyrgyzstan (2016)
- Tajikistan (2017)
- Myanmar (2018)

These programs are run by local HIV experts and multidisciplinary teams. Participants come from all cadres: Physicians, nurses, pharmacists, counselors, community healthcare workers.

Many programs offer Continuing Professional Education credits. Evaluations found ECHO resulted in gain of knowledge and reduced feelings of professional isolation for providers.

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