

DIRECTIONS

IN GLOBAL HEALTH

July 2012 Volume 9, Issue 2

SPECIAL ISSUE ON
HIV/AIDS



PATH/Mike Wang

Strengthening community capacity to respond to HIV/AIDS

PATH's work sets the stage for broader health and development efforts

Strengthening community-level responses is a powerful strategy to reduce HIV risk and better link people with the health services they need. This is particularly true in developing countries where health systems are weak.

PATH's evidence-based interventions to address HIV/AIDS employ a range of approaches. A key element is partnering with communities to provide assistance and build local capacity for community-based action.

CONTINUED ON PAGE 4 »

Sharing PATH's
work with global
health colleagues



PERSPECTIVE: Julie Pulerwitz on turning the tide against AIDS
PAGE 2 »



Addressing gender
norms to reduce
HIV risk
PAGE 3 »



Integrating services
for maximum
health impact
PAGE 6 »

IN BRIEF
PAGE 7 »
NEWS AND
NOTES
PAGE 8 »

Turning the tide against AIDS

More than 25,000 people from nearly 200 countries are descending on Washington, DC, this month for AIDS 2012, the 19th International AIDS Conference. Following a 2010 shift in US policy that lifted a travel ban for foreigners living with HIV, the biennial event is returning to its birthplace in the United States after 22 years abroad. This special issue of *Directions in Global Health* celebrates this homecoming and invites reflection on our progress, as an international community, in the global response to the disease.

The conference theme is “Turning the Tide Together.” This theme begs the question, what will it take to turn the tide against AIDS?

We already have a host of effective tools to fight the disease: nearly 30 lifesaving antiretroviral drugs, a range of field-tested biomedical and behavioral prevention approaches, and increasingly integrated care and support services for HIV/AIDS and tuberculosis, the leading cause of death among people with HIV. We still need more efficient service delivery systems and technologies, program scale-up in resource-limited settings, and a focus on tackling the tough issues that reduce program effectiveness, such as gender inequities and stigma and discrimination directed at marginalized populations.

We especially need further investments in operations research and program monitoring and evaluation (M&E) to determine which strategies are most effective and cost-effective in various contexts. Operations research and M&E build the evidence base that enables donors and countries to make smart investments in an uncertain global financial climate. This evidence base also provides the foundation for

innovation to develop even better tools to address the complex determinants and consequences of HIV/AIDS.

Strong, evidence-based interventions are essential to designing programs that work, and rigorous, data-driven evaluation is essential to knowing why they work. As this newsletter shows, PATH is deeply engaged in many countries—including the Democratic Republic of Congo, Ethiopia, India, Kenya, Namibia, Senegal, and Tanzania—to further develop the evidence base underlying effective interventions and to build the capacity of local partners for both M&E and the implementation of high-quality interventions.

Collaboration among us all is crucial for continued progress. PATH currently partners with dozens of community-based organizations, governments, global bodies, and the private sector to confront the epidemic. Engagement at the community level—including communities affected by HIV—is especially important for identifying, planning, and implementing interventions and for ultimately making these interventions sustainable.

This month at AIDS 2012, PATH is renewing our commitment to partnership by joining the International AIDS Society’s call to action. Only by working together can we turn the tide against AIDS.


Julie Pulerwitz, ScD, ScM,
is the director of PATH’s
HIV/AIDS and Tuberculosis
Global Program.



NEW ON PATH.ORG

 **PATH’s online annual report**
www.path.org/annual-report/2011/index.php

This is our annual snapshot of PATH’s work—plus our financial information.

 **Love, sex, money, and an HIV-free generation**
www.path.org/blog/2012/03/love-sex-money/

The Partnership for an HIV-Free Generation, housed at PATH, is producing a second season of a fast-paced TV serial set in Nairobi and aimed at reaching a young audience with information about HIV and AIDS.

 **Safe water for Vavilala**
www.path.org/media/slideshow-waterfilters-india/index.php

See our slide show about how microfinance is helping women provide their communities with clean drinking water.

 **Changing the face of global health**
www.path.org/media/changing-face.php

Watch our video to see how PATH is working in partnership with the people of India to make childbirth safer, babies stronger, and families healthier.

Addressing gender norms to reduce HIV risk

PATH changes behaviors through communication and improves the evidence base for interventions

The risk of HIV infection is tied to underlying social norms that support inequitable gender roles, attitudes, and gender-based violence. To reduce this risk, PATH promotes gender-equitable behaviors for men and women and strengthens understanding of approaches that can successfully address violence and other gender-related risk factors.

Communicating to change behaviors

PATH and our partners have designed, implemented, and evaluated behavior change strategies focused on changing gender norms. In Chongqing, China, for example, we recently designed and implemented educational sessions for male factory workers and vocational students to reduce HIV risk and prevent gender-based violence by promoting positive notions of masculinity. Surveys of participants before and after the intervention showed significant positive changes in gender-related attitudes and behaviors. This project, called Breaking Gender Barriers, was done in partnership with the China Family Planning Association.

In Kenya, PATH implemented a similar program with Boy Scouts and Girl Scouts in the Coast Province to encourage critical thinking on a range of topics relating to HIV/AIDS, gender norms, gender-based violence, and communication. PATH and the Kenya Scouts Association collaboratively developed and tested a new curriculum and gender badge to be integrated within the overall Scouting badge scheme. Evaluations showed increased support for equitable gender norms among Scouts and increased self-esteem and confidence to refuse sexual intercourse.



In Ethiopia, PATH has evaluated interventions to address harmful gender norms and prevent violence against women.

Richard Lord

Applying expertise in research and evaluation

PATH conducts rigorous research and evaluation to identify and support effective approaches for transforming gender norms, reducing HIV risk, and preventing violence. Recent examples include:

- Providing technical assistance to the United Nations Trust Fund to End Violence against Women to strengthen monitoring and evaluation frameworks for a cohort of seven projects to address the links between gender-based violence and HIV in various countries.
- In Ethiopia, Namibia, and Tanzania, evaluating group education and community mobilization interventions conducted under the US President's Emergency Plan for AIDS Relief (PEPFAR) to address harmful gender norms and violence against women.
- In the Democratic Republic of Congo, promoting community-based efforts to address violence and inequities in personal relationships that put women and girls at risk of HIV infection.


- In Senegal, evaluating a community health and human rights education program led by Tostan, a nongovernmental organization, to determine the program's impact on knowledge, attitudes, and behaviors related to gender-based violence, women's empowerment, HIV awareness, and other health issues.

PATH's work to evaluate programs and approaches is contributing to the evidence base on how to effectively address gender inequities and gender-based violence to improve health. These efforts—as well as our work to change behaviors through communication and education—are helping to reduce HIV risk in many countries. ■

FOR MORE INFORMATION

Dr. Elizabeth Rowley, gender specialist, at erowley@path.org.

This work has been funded by the Canadian International Development Agency, Nike Foundation, US President's Emergency Plan for AIDS Relief through the US Agency for International Development, and other donors.

 Read more about PATH's gender-related work at www.path.org/publications/detail.php?i=1808.

Strengthening community capacity to respond to HIV/AIDS ...

» CONTINUED FROM PAGE 1

Working in the Democratic Republic of Congo

In the Democratic Republic of Congo (DRC), years of violent conflict devastated public services and left health systems with limited capacity to deliver HIV/AIDS services to highly fragmented communities. The situation has created opportunities for community-based efforts to link people with the services they need.

Under the US President's Emergency Plan for AIDS Relief (PEPFAR), PATH leads a consortium working to reduce the transmission of HIV and deliver integrated HIV/AIDS services in the DRC. The DRC Integrated HIV/AIDS Project (widely known as ProVIC, for *Projet Intégré de VIH/SIDA au Congo*) supports community-centered interventions in five geographic areas with high rates of infection. The project's hallmark "Champion Community" approach helps communities organize, assess, plan, implement, and monitor their own responses to the epidemic.

PATH and our partners have worked intensively with 40 communities to improve outcomes, especially for vulnerable populations such as sex workers, men who have sex with men, truck drivers, and miners. We have trained thousands of Congolese volunteers and community workers in HIV/AIDS knowledge, community mobilization, interpersonal communication, and techniques for reaching marginalized and vulnerable groups. These individuals have subsequently led activities such as:

- Establishing self-help groups for people living with HIV/AIDS and supporting them to leverage local resources and help each other to access needed services. Child-to-child groups have given children opportunities to discuss common problems—such as lack of access to drinking water and safe places to play—and become involved in decisions that affect them.
- Conducting home visits for people living with HIV/AIDS to provide nutritional guidance, supply

medications, answer questions about at-home care, and offer other forms of help.

- Supporting income-generating activities—such as tailoring and small-scale farming—that enable people with HIV/AIDS and their family members to become financially independent.
- Addressing gender-based violence and power inequities in personal relationships that put girls and women at risk for HIV infection. PATH is leading the project's efforts to link victims of violence with the services they need, train health care providers how to deliver those services, and prevent new instances of violence. Staff are also facilitating community-level discussions that engage men in transforming potentially harmful attitudes and behaviors related to gender.

By mid-2012, the project's community-level interventions had reached more than a million people. Results include:

- Providing HIV counseling and testing services to nearly 311,000 people, including almost 52,000 pregnant women, through community centers and other facilities.
- Training 40 community workers in each of the 40 Champion Communities in behavior change communication and family planning and boosting their capacity to engage their own communities and raise awareness of HIV/AIDS.
- Reaching more than 21,400 people living with HIV/AIDS and 27,250 orphans and vulnerable children with care and support services.
- Fostering increased social cohesion, political will, and community enthusiasm and commitment to address the epidemic.

The project is expanding its activities and will collaborate over the next year with nearly 60 public and private partners, including health facilities and nongovernmental organizations. Major international partners include Chemonics International, the Elizabeth Glaser Pediatric AIDS Foundation, and the International HIV/AIDS Alliance.



Helping communities in Ethiopia

In Ethiopia, the HIV/AIDS epidemic has decreased life expectancy, weakened the country's health system, and greatly reduced the workforce. An estimated 1.5 percent of adults 15 to 49 years old—up to 800,000 people—are living with HIV.

Through a project called Strengthening Communities' Responses to HIV/AIDS, PATH supported civil-society organizations across the country to build their capacity to deliver high-quality HIV/AIDS interventions. These interventions included community-based care and support, prevention through community mobilization and HIV counseling and testing, and health systems strengthening.

The project also addressed poverty. Economic strengthening activities have been integrated with health interventions so people affected by HIV/AIDS will gain business and financial skills, increase their assets, and improve their ability to provide for their families.

Project highlights include:

- Reaching more than 700,000 people with a package of palliative care services.
- Providing economic strengthening activities for 65,000 households.
- Providing HIV counseling and testing for 384,000 people.
- Training 9,600 people in palliative care, counseling and testing, and economic strengthening activities.
- Supporting nearly 200 civil-society organizations to implement this work.

Project partners include the International HIV/AIDS Alliance, International Training & Education Center for Health, International Relief & Development, Westat, and numerous local organizations.

Meeting children's needs in South Africa

South Africa is home to an estimated 3 million children who have lost one or both parents to AIDS. In collaboration with the South African Department of Social Development, PATH is supporting Health and Development Africa and the HIV/AIDS Alliance to enhance the capacity of community caregivers to care for vulnerable children.

The Thogomelo Project ("thogomelo" means "to care for" in South Africa's Venda language) offers caregivers accredited training in psychosocial support and child protection. It has included:

- Developing resource guides, toolkits, and training materials.

Addressing tuberculosis through a community-based approach

Tuberculosis (TB) is the leading cause of death among people with HIV. PATH's work to build capacity for community-based responses to TB includes:

- Training civil-society leaders and former TB patients from multiple African countries in advocacy, communication, and social mobilization for TB control.
- In the Democratic Republic of Congo, supporting training of 250 community health volunteers from 25 groups to increase TB case detection.
- In Tanzania, collaborating with community-based health workers to expedite TB diagnosis and treatment and improve adherence to long-term therapy.
- Increasing community access to TB services for nearly 800,000 people in the Indian state of Maharashtra.

As the leader of the Tuberculosis Control Consortium—which includes academic institutions, private firms, and nongovernmental organizations—PATH supports work to scale up the World Health Organization's Stop TB Strategy in high-burden countries around the globe.

- Providing psychosocial support for caregivers.
- Training more than 1,600 caregivers across nine provinces.

Thogomelo's work is designed to be adopted and scaled up by the government to become an enduring part of South Africa's child protection efforts.


Building a foundation for future health and development efforts

Communities are key players in effective, sustainable interventions for HIV/AIDS, and strengthening community-based responses is a vital element of PATH's work. Building community capacity to address HIV/AIDS will not only help to sustainably reduce the global burden of this epidemic but also provide a foundation for other health and development efforts. ■

FOR MORE INFORMATION

Contact Sujata Rana, deputy director, at srana@path.org.

This work is funded by the US President's Emergency Plan for AIDS Relief through the US Agency for International Development, and by other donors.

 Read more about PATH's spectrum of work related to HIV/AIDS and tuberculosis at <http://sites.path.org/hivaidsandtb/>.

Integrating services for maximum health impact

PATH's cross-cutting approach effectively tackles HIV/AIDS and other health issues

People living with HIV and AIDS have a range of health needs. PATH is at the forefront of efforts to integrate HIV/AIDS services with those addressing maternal and child health, family planning, tuberculosis (TB), and other health issues.

Integration of services encompasses a variety of approaches and activities, such as simultaneously addressing co-occurring infections, providing a comprehensive package of services to tackle a single health issue, and forging links and leveraging resources across a health system. Benefits include increased efficiency, expanded access to services, and improved health outcomes. PATH's work to integrate services includes projects in three countries of sub-Saharan Africa.

Kenya: A comprehensive strategy

In Kenya, PATH leads East Africa's largest initiative to integrate health services—the AIDS, Population, and Health Integrated Assistance Plus project. Launched in 2011, this five-year effort in two provinces links services such as testing for HIV and TB, antiretroviral therapy, family planning, malaria diagnosis and treatment, and interventions to improve maternal and child health. Our approach focuses on increasing the availability of HIV treatment and services while strengthening overall health systems.

Tanzania: Solutions for dual epidemics

Although TB is the leading cause of death among people with HIV, services to prevent, diagnose, and treat the two health threats have traditionally been separate. PATH

and our partners use a patient-centered approach in working with health systems to bring TB and HIV services together in one place to improve service quality and reach.

We support integrated TB and HIV counseling and testing services in 955 health facilities across Tanzania. We also help to improve TB and HIV diagnostic services, accelerate the delivery of care and treatment services, and mobilize communities to reduce the stigma associated with these conditions.

Uganda: HIV and family planning services

Under the Arise program, PATH works with Pathfinder International and local partners in northern Uganda to address unmet need for contraception among HIV-positive women. The program integrates family planning with existing services for HIV counseling and testing, prevention of mother-to-child transmission, and antiretroviral therapy. It builds demand for integrated services, provides family planning training for health workers, strengthens contraceptive supply chain and logistics systems, and promotes contraception that also prevents HIV transmission.

Getting results

Integration of health services helps providers and clients make the most of every health care encounter, maximizing the impact of efforts to fight HIV/AIDS and other health threats. In Kenya, we have seen an 80 to 100 percent increase in HIV-positive mothers enrolled in follow-up care. In Tanzania, nearly 90 percent of TB patients in project

districts have been counseled and tested for HIV, resulting in more than 2,000 people being identified with TB-HIV co-infection over a six-month period. And our work in Uganda has reached more than 10,000 HIV-positive women with family planning and HIV services.

PATH's cross-cutting approach to address interconnected health issues is amplifying our impact on patients, providers, and health systems and providing new opportunities and commitments to fight HIV/AIDS. ■




Wendy Stone

Service integration requires better collection and use of health information to make the most of each contact with the health system.

FOR MORE INFORMATION

Contact Stefania Slabyj, deputy director, at sslabyj@path.org.

This work is funded by the Canadian International Development Agency and the US Agency for International Development.

 Read more about PATH's work on health services integration at www.path.org/publications/detail.php?i=2022.

Advancing technologies to address HIV/AIDS

PATH develops innovative, low-cost tools to curb HIV/AIDS in developing countries. Recent examples include technologies to detect HIV in infants and to reduce HIV risk among women.

Babies can acquire HIV from their mothers during pregnancy or through breastfeeding. Rapid treatment of infected infants is critical to their survival. The most commonly used blood test for HIV, however, can only be used for children 18 months or older, and the complex logistics of newer DNA-based testing, even if available, can delay reporting of results.

PATH is leading two approaches to develop a rapid, simple test for HIV in infants. We are collaborating with the Fred Hutchinson Cancer Research Center and TwistDx to

develop a point-of-care DNA test that uses a single drop of blood and provides results in 30 minutes. PATH is also working with the US Centers for Disease Control and Prevention on a chemical heater for incubating DNA-based assays without electricity in rural clinics.

To help protect women from sexually transmitted infections, including HIV, and unintended pregnancy, PATH designed the Woman's Condom with input from couples in several countries. PATH



The Woman's Condom is being introduced in China and sub-Saharan Africa.

has licensed the product—approved for use in China and the European Union—to a Chinese manufacturer. Now we are developing markets in China and sub-Saharan Africa for the product, which improves upon existing female condoms. ■

FOR MORE INFORMATION

Infant testing: Contact Dr. Gonzalo Domingo, research scientist, at gdomingo@path.org.
Woman's Condom: Contact Dr. Patricia Coffey, group leader, at pcoffey@path.org.

The work on HIV testing has been supported by the Bill & Melinda Gates Foundation, the National Institutes of Health, and the US Agency for International Development (USAID). Funding for the Woman's Condom has been provided by CONRAD, the Netherlands Ministry of Foreign Affairs, USAID, and other donors.



Read more about PATH's work on health technologies at <http://sites.path.org/technologysolutions/>.

Evaluating the impact of HIV projects

PATH prioritizes the generation of evidence to support decision-making about HIV interventions in various contexts. Our work varies in scope and methodology and ranges from helping a local organization evaluate the impact of its work on the community level to generating reliable evidence on scaled-up interventions to support national- and global-level decision-making.

The Arise program implements rigorous evaluations of HIV prevention programs for at-risk groups to determine the most cost-effective strategies. PATH and our partners are working on program evaluations with sex workers in Senegal, discordant couples in

Zambia, injecting drug users in India, and HIV-positive women in Uganda, among others. We are rigorously assessing indicators of program impact, including HIV incidence, and tens of thousands are being reached with the programs themselves.

Another area of focus for PATH is evaluating interventions to change harmful gender norms and behaviors. For example, we recently assessed the Male Norms Initiative in Ethiopia, Namibia, and Tanzania (see related article on page 3).

PATH also develops monitoring and evaluation (M&E) tools that address the challenges of coordinating data across multiple partners and regions. For the Integrated HIV/AIDS Project (also known as ProVIC) in the Democratic Republic of Congo, we

recently launched a web-based M&E database to track progress against dozens of indicators. The database builds on Salesforce software to allow teams in five regions to share, analyze, and extract data in real time. The information will support planning and decision-making to ensure the project increases access to health services and saves lives. ■

FOR MORE INFORMATION

Contact Dr. Ibou Thior, deputy director of the Arise program, at ithior@path.org.

This work has been supported by the Canadian International Development Agency, the US President's Emergency Plan for AIDS Relief through the US Agency for International Development, and other donors.




Read more about the Arise program at <http://sites.path.org/hivaidsandtb/arise/>.

NEWS AND NOTES

PATH NEWS

Global vaccine plan receives World Health Assembly endorsement


The World Health Assembly in May approved the Global Vaccine Action Plan developed by the Decade of Vaccines Collaboration, opening the way to saving more than 20 million lives by 2020. The plan calls for lifesaving vaccines for those most in need, a strong pipeline of new vaccines, and strengthened public support for these efforts. Implementation will begin later this year. PATH co-hosts the Decade of Vaccines Collaboration secretariat.

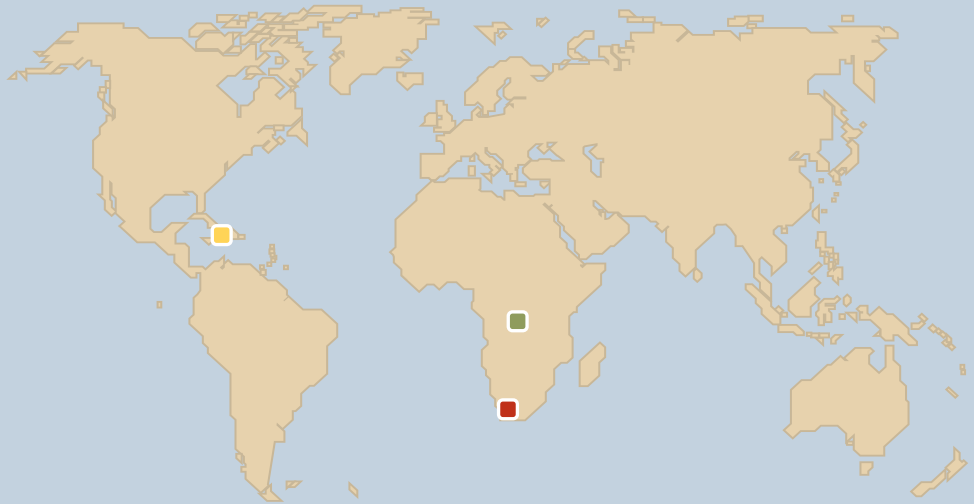
 Read more on PATH's blog at www.path.org/blog/2012/05/better-vaccines-better-access/.

PATH receives honors for meningitis, malaria work

Dr. F. Marc LaForce, founding director of the Meningitis Vaccine Project—a partnership between PATH and the World Health Organization (WHO)—has received the 2012 Albert B. Sabin Gold Medal Award for his role in developing a revolutionary meningitis vaccine for Africa. More than 54 million people have been vaccinated since the vaccine's introduction in December 2010.

The Meningitis Vaccine Project also received the 2012 Vaccine Industry Excellence Award for best vaccine partnership. The PATH Malaria Vaccine Initiative received an honorable mention for its public-private partnership with GlaxoSmithKline Biologicals.


 Read more at www.path.org/news/an120427-sabin.php and www.path.org/news/an120502-vie-award.php.



PROGRAM NOTES

■ DEMOCRATIC REPUBLIC OF CONGO: Moonlight HIV services


PATH and our partners have provided nighttime HIV counseling and testing to more than 100,000 people in the Democratic Republic of Congo. To reach commercial sex workers, truckers, miners, and others at high risk, the DRC Integrated HIV/AIDS Project has set up mobile tents at night in four provinces.

 Read more about the project at <http://sites.path.org/hivaidsandtb/provic/>.

■ SOUTH AFRICA: Policy changes to improve infant survival


South Africa recently decided to promote exclusive breastfeeding for all mothers, including those with HIV, as the country tackles a rising infant mortality rate. PATH and our partners have supported the Department of Health in improving infant feeding practices within the context of HIV. As part of this effort, PATH has helped to

scale up human milk banking to provide lifesaving nutrition for vulnerable infants.

 Read more about human milk banking at www.path.org/publications/detail.php?i=1988.

■ DOMINICAN REPUBLIC: Potential value of paper microbicide applicators

PATH studied women's use of paper compared to plastic applicators for delivering tenofovir gel—a candidate microbicide for HIV prevention. The paper applicators delivered gel safely and accurately and were acceptable to women. The applicator data may be used in future regulatory submissions for tenofovir, and the low cost of the paper applicators may enable more women to use the gel in the future.

 Read more at www.path.org/projects/microbicide_applicators.php.

PATH is an international nonprofit organization that transforms global health through innovation. We take an entrepreneurial approach to developing and delivering high-impact, low-cost solutions, from lifesaving vaccines and devices to collaborative programs with communities. Through our work in more than 70 countries, PATH and our partners empower people to achieve their full potential.

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