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February-March 2005

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Partner News



Integrating Social Services with Primary Healthcare: Successful Demeu Model to Be Disseminated in Kazakhstan

A Memorandum of Understanding among the Kazakh Ministry of Health, Ministry of Labor and Social Welfare, and AIHA signed on December 3, 2004, marked the launch of a national expansion of the successful community-oriented primary care model (COPC) first pioneered by AIHA's Astana/Pittsburgh partners in 2000 at the Demeu Family Medicine Center in Astana.

According to Kazakh Minister of Health Yerbolat Dosayev, the government's decision to replicate the Astana model was based on its demonstrable success in delivering high-quality primary care services and achieving improved health outcomes in the catchment area through the practice of integrating social services into the comprehensive healthcare programs offered at Demeu.

Thanking AIHA and its partners during the signing ceremony for establishing the Demeu model, which serves as a unique example of a medical facility with a broad range of services that address the overall needs of the population and can be replicated on a broader scale, Dosayev



At the press-conference following the MoU signing ceremony James P. Smith, AIHA's executive director and the Kazakh government officials Yerbolat Dosayev, minister of health, and Gulzhan Karagusova, minister of labor and social welfare talk to jornalists. (Photo courtesy of Assel Terlikbayeva.)

explained. "In striving to improve healthcare in Kazakhstan, we look to model programs such as Demeu to provide examples of viable solutions in which primary care services can be delivered in the most effective and comprehensive way."

Because it combines high-quality clinical services with social programs tailored to the needs of all social groups in the community—including patients of all ages and socio-economic levels and those affected by chronic diseases or physical disabilities, as well as members of high-risk populations such as injecting drug users and commercial sex workers—Demeu stands out as a model of excellence not only in Kazakhstan, but also in most other countries of the former Soviet Union. Multidisciplinary teams of physicians, nurses, social workers, and volunteers from local NGOs collaborate closely with each other to better address the psychological, social, and medical needs of Demeu's diverse patient base. This contributes greatly to the Center's success and its popularity with patients. It also ensures a high level of consistency and efficacy in the care provided at Demeu.

Commenting on the value of the family-based primary care model established at Demeu, AIHA Executive Director James P. Smith noted that the integration of socially-oriented services into primary care settings is a very important step in reforming the healthcare delivery process in Kazakhstan. "Improvements in a population's health status depend not only on the quality of healthcare services available, but also on the local community's capability to effectively address social issues and concerns that can affect a person's well-being," he explained, underscoring the fact that replicating Demeu's comprehensive model is consistent with AIHA and USAID's shared commitment to improve both the quality and availability of integrated primary care services throughout Kazakhstan in the most efficient and cost-effective manner possible.

Smith went on to say that the USAID funding received by AIHA for this project will be used first to open COPC centers in Semipalatinsk and Uralsk then to establish similar centers in Kokshetau and Southern Kazakhstan during the second phase of nationwide replication. AIHA and the Demeu Family Medicine

Center will provide technical support, expert consultations, and training for each of the new facilities and are already working to procure necessary equipment and supplies.

From its part, the Kazakh Ministry of Health will provide the pilot sites with a wide range of equipment and benefits that will enable them to offer high-quality primary care services—including early diagnostic screening tests, treatment for various common illnesses and conditions, and prevention and patient education programs—thereby greatly improving the efficiency of clinical service delivery in these communities.

Through its local departments, the Ministry of Labor and Social Welfare will provide the replication sites with social workers and pay their salaries, which will facilitate the integration of social services into the multidisciplinary team approach to care that is the hallmark of the COPC model. These professionals will be educated at a Social Work Training Center that will be established with AIHA's support at the Demeu Family Medicine Center by Columbia University's School of Social Work (CUSSW)—the organization which has been working in Central Asia for nearly a decade with support of the Soros Foundation.

It is expected that as early as March, CUSSW faculty will carry out an assessment of Demeu's training capacity and assist with the development of a curriculum to train social workers for the replication sites. In addition, American experts will conduct a train-the-trainers workshop for the Demeu social workers, who will then assist with building a national cadre of social service professionals in the region and, at the same time, act as mentors for the replication site specialists during the period of the COPC project implementation.

Paying tribute to AIHA's numerous programs in Central Asia following the signing ceremony—which was attended by some 40 people, including US Ambassador to Kazakhstan John Ordway and USAID representative in Kazakhstan Almaz Sharman—Kazakh Prime Minister Daniyal Akhmetov expressed deep gratitude to AIHA for its continuous contribution to the development of highly-qualified medical professionals and primary healthcare sector reform. "AIHA's assistance to the Kazakh healthcare and medical education system has been critical in the past and I am sure that this new project will provide a solid foundation for the successful development of effective primary care delivery in the country," he concluded.

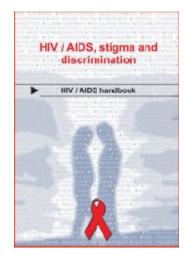


Fighting HIV/AIDS-related Stigma and Discrimination in Croatia

"Public awareness and understanding of HIV/AIDS is the best remedy against the discrimination and stigmatization that people living with the virus face every day," explains Stipe Oreskovich, director of the "Andrija Stampar" School of Public Health in Zagreb, Croatia, noting that educating the public on the topic is an important first step toward erasing the myths, misconceptions, and negativity that shroud the disease and those who have contracted it.

With the publication of a handbook co-authored by Oreskovich and titled "HIV/AIDS, Stigma and Discrimination," Croatians are showing their commitment to changing the situation by "drawing public attention to problems that violate human rights and combating the stigma and discrimination surrounding HIV/AIDS," he continues. A ceremony held in Zagreb on December 3, 2004 marked the widespread release of the handbook and, hopefully, the first seeds of that change.

The idea of producing such a handbook took root during a discussion begun at the AIHA-sponsored HIV/AIDS Stigma and Discrimination Workshop and Roundtable held in the Croatian capital last April. (For more information about the event see "Common sense vs. prejudice: Croatia moves to root out discrimination against PLWH/As")



HIV/AIDS, Stigma and Discrimination Handbook

The event brought together representatives from various public sectors, including public health professionals, policymakers, journalists, and staff from local NGOs, who spoke about the widespread and unacceptable use of offensive terms in reference to people living with HIV/AIDS and other vulnerable groups—a practice that commonly occurs in the media. All participants agreed that this enforces any negative perceptions that the public may have and virtually guarantees that the cycle of stigma and discrimination will continue. They also agreed to form an Interdisciplinary Committee on HIV/AIDS to address the issue, charging them with the task of creating the handbook.

The book itself explains basic concepts related to HIV/AIDS and provides examples of appropriate, nonjudgmental terms that are considered acceptable throughout English-speaking countries and much of the Western world specifically because they do not contribute to stigma and discrimination. To illustrate how language can be a powerful weapon either for or against discrimination, the book contains two versions of the same article—one that uses derogatory and offensive terminology and a second that uses more suitable, tolerant language.

The authors also highlighted the dangerous fact that HIV/AIDS-related stigmatization and discrimination contributes significantly to the spread of the epidemic by undermining prevention programs and forcing people living with HIV or at the greatest risk of contracting the virus to avoid testing and treatment because they fear they will become outcasts in their own communities. Too often this results in untimely and preventable death. The book also warns that associating HIV solely with certain social groups generates a false sense of security in people outside those groups, which may result in heightened levels of risky behavior.

The handbook is a small step forward in Croatia's fight against stigma and discrimination. The information it contains can help people begin to understand HIV/AIDS and come to the realization that those who are living with the virus do not deserve fear, condemnation, prejudice, or rejection. It is up to readers to

take follow the authors' advice to "make these steps today!"

The HIV/AIDS, Stigma and Discrimination Handbook can be accessed at: ftp.aiha.com/private/us/HIV AIDS handbook/



Building a Sustainable Infrastructure to Fight HIV/AIDS in Tomsk

The Tomsk Regional Center for AIDS and Other Infectious Diseases (TRCAID) in Russia was recently awarded a \$107,000 grant from the National Institute of Allergy and Infections Diseases (NIAID), a division of the US National Institutes of Health (NIH) in Bethesda, Maryland. TRCAID Director Alexander Chernov—who participated in AIHA's Open World/Community Leadership Development Program in 2003—is the principal investigator of the grant. He is widely recognized as a leading administrator of successful HIV/AIDS prevention programs in the Tomsk region.

Administered by NIH's Comprehensive International Program of Research on AIDS (CIPRA), this two-year planning and organizational grant will allow TRCAID to develop a broad HIV/AIDS prevention, treatment, and research agenda relevant to its growing HIV patient population and to further enhance the infrastructure necessary for the Center to conduct such research.

"With the rapid spread of the epidemic in Russia, the development of a formal research infrastructure has become a real necessity for us," Chernov says. "This planning grant will help us build a self-sustaining foundation for comprehensive programs related to epidemiological, clinical, and laboratory research and will lead to the development and application of practical and cost-effective methods of HIV/AIDS prevention and treatment among adults and children in our region," he emphasizes.

Discussing the epidemiological situation in the Tomsk region, Chernov points out that although there are roughly 1,000 registered HIV/AIDS cases in the Oblast, the actual number is likely to be several times higher than that. Only two years ago, injecting drug use was the main cause of HIV transmission, but the tendency observed over the past 12 months indicates that heterosexual intercourse now accounts for approximately 40 percent of all newly registered cases.



Alexander Chernov in his office at TRCAID. (Photo courtesy of Susan Miller.)

This, he stresses, means that the epidemic is quickly making its way into mainstream society.

Acknowledging the contributions of his American colleagues from the Chronic Disease Prevention and Control Research Center (CDRC) at Baylor College of Medicine in Houston, Texas—in particular, Associate Professor and Director of International Medicine Susan Miller, M.D.—Chernov explains that TRCAID's

successful bid for the CIPRA grant was truly a collaborative effort. The pair first met in 1998 when Miller, who serves as lead consultant of the CDRC and Baylor's International Medicine program, came to Tomsk as part of the Russian Peace Foundation project. Since then, they have built a strong collegial relationship.

"Susan usually visited Tomsk once or twice a year," remembers Chernov. "During our meetings, we would work on educational, planning, and clinical issues related to HIV. Each of her visits strengthened our professional relationship and personal success in addressing HIV/AIDS," he says.

Miller agrees, noting, "We both have a clear understanding of HIV/AIDS and its ramifications for society and, as the epidemic in Russia began to spread, the urgent need for effective, logistically feasible measures of HIV/AIDS treatment and prevention became obvious. At some point, we recognized that these issues could not be addressed without building the kind of comprehensive research capacity and infrastructure capable of responding to the population's growing demands for HIV-related services. That's when we decided to apply for CIPRA support and, in 2002, we began the formal grant-writing process," she explains.

Looking back at that time, Miller recalls the many challenges she and Chernov had to address—from the extensive translations of the grant requirements and day-to-day correspondence to the numerous early morning and late night telephone calls necessitated by the 12-hour time difference between Houston and Tomsk. The entire process of planning, writing, translating, and editing grant documentation involved the expertise of 15 individuals from both institutions and the estimated time dedicated to the endeavor exceeded 1000 hours.

The partners, however, do not intend to stop there. "This is a planning grant, so our goal is to use it to build a strong foundation for an additional research grant application in approximately two years," explains Chernov. The current funding will allow TRCAID to develop its institutional research infrastructure, in part by funding the purchase of appropriate equipment and supplies, providing salary support for new investigators, covering communication costs, and allowing for the creation of a data collection and analysis system. It will also cover the cost for Baylor faculty to provide TRCAID's personnel with training on topics such as HIV/AIDS prevention and treatment, medical ethics, and protection of human research subjects.

"Because our research will involve human subjects, CIPRA requires us to formalize the institution's commitment to protect the rights and welfare of test participants," Chernov explains. "To comply with this requirement, we have established an Institutional Review Board/Ethics Committee and are in the process of preparing the paperwork necessary to obtain a Federal Wide Assurance from the US Department of Health and Human Services. This is an NIH administrative requirement which formalizes our institution's commitment to the protection of human subjects. It is also an infrastructure requirement to receive future research grants from DHHS agencies. As soon as we are certified, we will apply for additional research grants."



Miller and Chernov discuss issues of medical ethics with TRCAID's staff during the initial exchange in December. (Photo courtesy of Alexander Chernov.)

Because their research agenda is so ambitious, TRCAID's first priority will be addressing two of the region's most pressing problems related to its growing HIV/AIDS epidemic: preventing motherto-child transmission of the virus and treating HIVassociated opportunistic infections. "There are only three people in Tomsk who are currently receiving antiretroviral therapy, while several dozens more are in immediate need of such treatment," Chernov explains, noting that he hopes the grant will provide his staff with the resources necessary to identify optimal HIV/AIDS drug regimens and ensure their availability—both of which should go a long way toward improving the quality of care for people living with HIV/AIDS and helping to diminish its spread.

The results of the research projects funded through the CIPRA grant will be published in

Russia and the United States and will be made available to medical schools as a training tool for the next generation of scientists and future epidemiologists, according to Chernov.

With regard to the project's prospects and sustainability, Miller emphasizes that the development of a research infrastructure will both formalize and enhance the region's ability to obtain additional research funding and set up a mechanism for collaboration with other regional and international organizations. "We hope this becomes a model for international collaboration that can be replicated in other Russian oblasts," she explains.

Over the course of the two-year grant period, there will be approximately 15 exchange visits between participants from Tomsk and Houston. The first of these exchanges took place in December 2004 and focused on medical ethics related to scientific research studies that involve patients, as well as financial and institutional management issues key to the successful implementation and development of research programs.

Baylor College of Medicine gained extensive experience working with medical institutions in the former Soviet Union through three highly successful AIHA healthcare twinning partnerships in Semipalatinsk, Kazakhstan, Sakhalin, Russia, and Baku, Azerbaijan. Tomsk, for its part, is no stranger to international collaboration; the Oblast also participated in a very successful partnership that paired the regional health administration and several community policlinics with their counterparts in Bemidji, Minnesota.

Director of AIHA's Donetsk EMS Training Center Dies

Savaliy Chirakh, director of the Donetsk EMS Training Center and a key member of AIHA's now-graduated Donetsk/Orlando partnership, died on February 8 of a heart attack.

An extraordinarily talented and skillful trauma surgeon, Chirakh managed some of the most complicated cases at Donetsk Trauma Hospital where he worked saving lives and preventing disabilities in his patients for more than 40 years. No less significant were the contributions he made as director of the Donetsk EMS Training Center, a position he held since the facility was established in 1997 through the efforts of the Donetsk/Orlando partnership. Under his guidance, the Center has provided hands-on emergency medical training for more than 3,000 urgent care providers, rescue teams, and other first-responders who now utilize the knowledge and skills they acquired there in their everyday work throughout Ukraine's perilous Donbass region, which includes Donetsk and Lugansk oblasts where the bulk of the nation's coal and ferrous metals industries is located.



Saveliy Chirakh. (Photo courtesy of Tatiana Chirakh.)

According to his many colleagues, friends, and grateful patients, Chirakh was a born trauma surgeon who genuinely believed in the power of medicine and demonstrated that conviction with his mastery of the knowledge and skills required of the difficult specialty. In one interview with AIHA, Chirakh said that his true reward was to see strong and healthy people who could have spent the rest of their lives in a wheelchair or—worse still, have lost their lives entirely—if it weren't for what he did to help them. At that time, he counted this as one of the greatest accomplishments of his life.

Chirakh's phenomenal skill as a surgeon, charismatic personality, and ability to lead others toward positive change made him a key player in all the endeavors of the Donetsk/Orlando partnership and gained him the love and respect of his American colleagues. Noting that the US and Ukrainian communities remain bound together by the professional camaraderie and personal friendships despite the partnership's official graduation in 1998, Tim Bullard, medical director of emergency services at Orlando Regional Healthcare System in Orlando, Florida, commented on Chirakh's passing. "We are deeply saddened and grief-stricken by the news of our beloved Saveliy's death," he said, calling his Ukrainian colleague and friend a man of great strength and dignity who was respected by all who knew him. "He was a rock and we all leaned on him for strength. We always knew that everything would be okay when Saveliy was there. He was more than a great partner to us and he was more than a great friend; he was part of our family and we will miss him terribly. We can only say that our lives are so much better for having the privilege of his presence and the beauty of wonderful memories."

Regional News

Experts Appeal to Russian Government to Notice Devastating Pace of HIV/AIDS Epidemic

A new report released by researchers from the Woodrow Wilson International Center for Scholars shows that approximately one million people in Russia are infected with HIV/AIDS, while almost 13 thousand have already died from the virus, reports *The Associated Press*. These figures exceed official statistics almost three-fold.

Although the authors of the report urge Russian authorities to take immediate action to stop the epidemic, Moscow remains silent much to the consternation of international experts who have long been perplexed by the indifference of the Russian government to this severe problem. "The consequences will be devastating to the society, family formation, to the military, and labor productivity already within two or three years," warns Murray Feshbach, coauthor of the report, stressing that more than 80 percent of HIV infected Russians are under the age of 30.

Despite all the appeals of international organizations, Russia has not increased funding for HIV/AIDS. On the contrary, spending "has been reduced because of inflation," says Vadim Pokrovsky, head of the Federal AIDS Center. He indicates that the 2005 national budget provides \$4.3 million for HIV/AIDS-related programs, while the actual amount needed is nearly 40 times higher at \$161.7 million. In addition, all financial responsibility for HIV testing has been transferred to the already overburdened regional budgets, thereby significantly decreasing the number of tests that can be performed.

Pokrovsky also stressed the fact that the epidemic is shifting from mainly injecting drug users to mainstream society through sexual contact, explaining, "In some regions as many as half of all new infections are the result of heterosexual intercourse."

UNICEF Fights for the Rights of Romania's Abandoned Children

"A nurse at the maternity hospital told me that it would be better for me to try not to get attached to my baby, to leave him there and start a new life," recalls a 17 year-old single mother who did not know where she could find support for herself and her son and was advised to give him up.

Roughly two percent of all women giving birth in Romania abandon their children immediately after delivery, leaving their newborns at maternity hospitals and pediatric institutions and making them wards of the state. The majority of these women are very young, poorly educated, and live below the poverty line, according to a recent UNICEF report cited in an article in *Medical News Today*.

Societal factors also play a role in perpetuating this practice, explains Pierre Poupard, a UNICEF representative in Romania. "Unfortunately, young mothers going into hospitals are confronted with conservative attitudes and practices. The system remains very traditional and penalizes the poor and marginalized," he acknowledges.

According to the report, financial difficulties prevent most unmarried women from raising their children on their own. Many single mothers lose both shelter and their families' support because of the crushing stigma society attaches to

bearing a child out of wedlock. In a country with little or no social programs or community services for young mothers, these women see no way out but to leave their newborns in state care.

Another problem highlighted by the report is the fact that more than 30 percent of abandoned children have not had their births officially registered. Those living without identity papers can easily become victims of child trafficking and other crimes because of their legal "invisibility."

UNICEF experts believe that the immediate implementation of new child protection legislation adopted on January 1, 2005, will help improve the nation's social and healthcare services to vulnerable groups, including young mothers and abandoned children. The new law stipulates the establishment of a unified child protection system, which will integrate the resources and efforts of different public sectors, including educational, healthcare, and social services in the provision of comprehensive support to all children and their families within their local communities.

According to Poupard, the new legislation is in line with the spirit of the Convention on the Rights of the Child and UNICEF stands ready to play its part. "We are offering support to the institutions that will be putting the new legislation into practice and, for desperate situations such as the institution housing more than 230 children under one year of age, we can immediately support individual evaluations and develop tailor-made plans to protect each child," he says, reiterating UNICEF's commitment to helping Romania develop a protective environment for its children. "This environment will shield all children from social harm in the same way that good nutrition and healthcare shield them from disease," Poupard concludes.

Workshops, Conferences, Opportunities and Grants

World Health Day 2005

"Make every mother and child count" is the slogan for World Health Day 2005, which will be commemorated on April 7. The World Health Organization selected the 2005 theme specifically to draw the attention of governments and the international community to key maternal and child healthcare issues that have been overlooked by many nations in the past decade. For more details about World Health Day, please visit: www.who.int/world-health-day/2005/en/

7th Congress of European Association for Clinical Pharmacology and Therapeutics

The Congress, which will host approximately 1,000 delegates from around the globe, will take place June 25-29, 2005 in Poznan, Poland, under the auspices of that country's President Aleksander Kwasniewski. The event's numerous plenary sessions and workshops will address a vast number of topical issues ranging from legal and economical aspects of the drug industry to clinical research and trials in pharmacology. For more information, please, see:

www.eacpt.pl/page.php/2/show/935

3rd IAS Conference on HIV Pathogenesis and Treatment

The Conference will cover all aspects of basic and clinical science in the field of HIV/AIDS, as well as provide recent insights into HIV disease development, prevention, and care that can lead to new research directions, help advance translational research, and move theoretical advances into clinical practice and prevention programs. The event will take place in Rio de Janeiro, Brazil, July 24-27, 2005. For more information, please go to: www.ias-2005.org/

11th World Conference on Lung Cancer

The International Association for the Study of Lung Cancer (IASLC) will host the 11th World Conference on Lung Cancer July 3-6, 2005 in Barcelona, Spain. More than 200 specialists will provide delegates with information on the latest achievements in early detection of lung cancer, pharmacogenomic research, and clinical trials, among other topics. For more information, please visit: www.2005worldlungcancer.org/

Features

AIHA Launches National Anti-TB Awareness Campaign in Moldova

Posters, advertisements, and brochures depicting a milkweed seed flying off into the sky, buoyed by a soft breath of air and accompanied by the optimistic slogan: "Tuberculosis Can Be Treated!" set the tone for a national public awareness campaign launched by AIHA in Moldova this past January.

In a country where rates of infection with the lifethreatening disease have skyrocketed by 98 percent over the course of the past 12 years, the need to increase public knowledge about tuberculosis and the importance of seeking treatment at the first signs of symptoms is more critical than ever, according to Irina Zatusevski, AIHA's senior health communications specialist in Moldova.

"With this public awareness campaign, our goal is to ensure that people know more about tuberculosis, its symptoms, and how it can be treated and prevented," Zatusevski explains, stressing that an equally important message being conveyed to the public is the fact that people need to seek prompt medical advice and treatment if they suspect they may have been exposed to TB or recognize some of the telltale symptoms.



The nationwide education campaign is part of AIHA's Strengthening TB Control in Moldova Project, which is supported by USAID and was launched in 2003. The purpose of the project is to

develop an effective infrastructure for TB-related services, including disease monitoring and surveillance, laboratory diagnostics, and clinical training focusing on primary care providers, as well as outreach activities designed to keep the public well-informed. (For details of the program, see www.aiha.com/index.jsp?sid=1&id=8562&pid=4739)

From the outset, public education was recognized as a key component that would be integral to the success of the project. With that in mind, a series of surveys were conducted to determine what the main content and direction of educational and outreach work should be. By evaluating the population's knowledge, attitudes, and practices related to TB, the campaign could be better tailored to meet the specific needs of the public. Although the research showed that most people living in Moldova know the main symptoms of tuberculosis, it also indicated that an overwhelming majority of them believe that the disease cannot be treated. The data also revealed that this misconception prevented people from seeking prompt medical care and greatly increased the likelihood of negative outcomes. Moreover, the research brought to light several prevailing myths about TB. For example, one-third of those surveyed expressed the belief that tuberculosis can be transmitted through casual social contact such as shaking hands, while 20 percent think that having TB is something to be ashamed of. In addition, almost a quarter of the people surveyed acknowledged that they would

change their attitude toward an acquaintance if they found out he or she had TB.



Viorel Soltan presents a booklet of TB survey results at a press conference marking the launch of the new TB awareness campaign in Moldova while Liviu Vovk, head of the Chief Department of Medical Technologies and Medical Insurance at the Moldovan Ministry of Health, and Silviu Sofronie, director of Republican Institute of Phthisiopulmanology, look on. (Photo courtesy of Irina Zatusevski)

"Based on what the surveys revealed, we were able to determine an appropriate direction for our education and outreach campaign and design materials that could answer people's questions and clear up their misconceptions," says Zatusevski. Two brochures-one targeting the public at large titled "Tuberculosis: Questions and Answers" and a second titled "A Guide for People with Tuberculosis, Their Families, and Friends" that is geared toward those already diagnosed with the disease along with other printed material such as posters, leaflets, and stickers were produced in anticipation of the campaign's launch, according to Zatusevski. And, because the research

also indicated that most Moldovans get their health information from the media, video and audio clips with information about the symptoms of tuberculosis and appeals to seek medical attention were prepared for airing on television and radio stations across the country.

The campaign kicked off in January at a press conference featuring Ministry of Health officials, staff from many of the nation's TB service organizations, and representatives of international agencies and NGOs working on tuberculosis control in Moldova. During the event, an epidemiological overview of tuberculosis

was provided along with details about national efforts to control the disease and other pressing problems related to TB. The event was attended by 23 journalists from major media outlets spanning the country.

According to Zatusevksi, the participation of such a wide range of TB and public health specialists made the press conference a perfect venue for journalists to get all of their questions about tuberculosis answered, not only those related to the public awareness campaign and AIHA's project. The event, she says, resulted in extensive media coverage about tuberculosis. "During the two weeks in January when we carried out the first stage of the campaign, it was covered in about 20 radio broadcasts and eight television reports of various lengths and formats," she explains. "Project staff, tuberculosis specialists, and representatives of our international partner agencies were interviewed for both print and broadcast stories and news round-up reports on all wire services and major radio stations discussed the project," Zatusevski notes with satisfaction.

Furthermore, Moldova's leading television and radio stations agreed to provide free air time for video and audio public service announcements that have the potential to reach tens of thousands of people and the Patria Movie Theater Network and the Chisinau Association of Private Carriers also offered support for the AIHA initiative. As a result, video clips on TB have been included with the line-up of short features that are shown before the start of movies and posters with the campaign logo and



Representatives of various mass media listen to speakers at the press conference in Chisinau. (Photo courtesy of Irina Zatusevski.)

information on TB symptoms have been placed on buses traveling the most popular routes in the capital city. And, "Posta Moldovei," the national postal service, has agreed to mail leaflets informing the public about the symptoms of tuberculosis free of charge.

The accomplishments of the first stage of the public awareness campaign are currently being assessed in anticipation of its continuation in March, which is the traditional month for tuberculosis-related activities, including World TB Day. Nevertheless, some early progress has already been observed. According to the National Center for Disease Prevention, the number of people who visited primary healthcare facilities to get TB counseling and diagnostics in January 2005 was 30 percent greater than last year.

Initial impact indicators are encouraging, Zatusevski admits, noting, "Before the campaign, we struggled to find ways to get information about our programs and tuberculosis in general on television, but now several channels have come to us with proposals for broadcasts on various aspects of the fight against TB. Additionally, different print and broadcast journalists have been calling our offices to ask for help preparing materials because they are being bombarded by readers and listeners who have questions about the disease," she says. Of course, we are happy to help them with this. After all, a good beginning is half the battle, as the saying goes."

—Unless otherwise noted, all stories in this issue are written by AIHA Staff Writer Vira Illiash who is based in Kiev, Ukraine.