

Connections

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Partner News



New Caucasus Partnerships to Focus on Primary Care Delivery, Professional Training for Clinicians

Three new primary healthcare partnerships are joining AIHA's network of 17 current and graduated partnerships in the Caucasus. These latest alliances pair Ganja, Azerbaijan, with Livermore, California; Gori, Georgia, with Milwaukee, Wisconsin; and Guria, Georgia, with La Crosse, Wisconsin.

"AIHA partners have been at the forefront of health systems reform in Armenia, Azerbaijan, and Georgia, making positive changes in healthcare service and delivery since we first began working in these countries in 1992. These three new partnerships join a strong network that is dedicated to improving the health

status of people living in the region," says Kate Schecter, AIHA program officer for the Caucasus.

Ganja/Livermore

ValleyCare Health System—a Livermore, California-based non-profit dedicated to providing high-quality, accessible, community healthcare services—and the Alameda County Public Health Department will team up with the Ganja City Health Administration to restructure the existing ambulatory care delivery system in Ganja, the second largest city in Azerbaijan. A city with a long industrial heritage dating back to Soviet times, Ganja has a population of roughly 330,000 people—including 40,000 internally displaced persons and refugees. Its surrounding rural area is home to an estimated population of 1.5 million.

Working together to involve multiple sectors, disciplines, and interests within the community in their efforts to design appropriate health-related programs, the Ganja/Livermore partners will focus on providing high-quality evidence-based care within a family-centered primary care environment, according to US partnership coordinator David H. Mertes. Partners will also integrate a broad range of health promotion, disease prevention, and social services that are tailored to the unique needs of the community.

A member of ValleyCare's Board of Directors and coordinator of AIHA's graduated Snezhinsk (Russia)/Livermore partnership, Mertes says that training—and in some cases re-training—primary care physicians, nurses, social workers, and other allied health professionals will play an important role in partnership activities, as will the creation of an integrated health referral system in the region. "We are very enthusiastic about this new project and believe that it will make a significant improvement to the quality of life for the people of Ganja," he states.

Gori/Milwaukee

Building human resource capacity is the goal of the twinning relationship between the Center for International Health, which leads the Milwaukee-based consortium of public and private higher education and professional training institutions, and the Shida Khartli Regional Health Administration in central Georgia. Partners will collaborate to develop training programs for physician-nurse family health teams who will provide integrated curative and preventive services to Gori's population of approximately 49,000, as well as to an additional 100,000 individuals living in the greater Shida Khartli district.

The Gori/Milwaukee alliance will build on the achievements of the Mtskheta-Mtianeti/Milwaukee partnership, according to Mark Anderson, president and chief executive officer of the Center for International Health. "The Mtskheta Family Medicine Training and Demonstration Center is designed to help Georgians continue training clinicians and our success with training doctors, nurses, and dentists there has been recognized by the international community," he says, noting that this experience will be a boon to the new partners as they work together to implement a primary care approach in the Gori Region. Specifically, the partnership will focus on creating a family medicine and nurse training center at the Gori Central District Polyclinic and Specialty Consultation Services facility located on the grounds of the Gori Adult General Hospital. This training center will focus on improving the clinical and management competencies of the primary care staff at 12 ambulatories with ties to the Polyclinic.

Guria/La Crosse

"We are excited to begin our work in the Guria region," says Sandra J. McCormick, president and chief executive officer of World Services of La Crosse, a non-profit organization that manages several international grants focused on capacity building in the health and civil society sectors. World Services will join forces with the Guria Regional Healthcare Administration Department and a number of Georgian healthcare institutions to establish a model primary healthcare center at the regional Ozurgeti Polyclinic, in addition to developing a skills-based training center for rural care providers, and implementing community-based health projects targeting the specific needs of the local population. Approximately 169,000 people reside in Guria, a subtropical region of Georgia that stretches from the Black Sea to the Caucasus Mountains and is made up of both rural and urban areas.

Gundersen Lutheran Medical Center, Franciscan Skemp Mayo Health System, Viterbo University, the University of Wisconsin-La Crosse, Western Wisconsin Technical College, and the City of La Crosse will join World Services as supporting organizations for the partnership. Many of these institutions were involved in past AIHA partnerships that paired La Crosse with Dubna, Russia, and Kharkiv, Ukraine.

"Our goal is to share our past experiences in integrating primary healthcare and healthy communities concepts into the health systems of Eurasian countries with our colleagues in a collaborative effort to improve the quality of health-related services available to the people of Georgia," McCormick says.

Working together, Guria/La Crosse partners will examine factors critical to the restructuring of the existing primary care delivery system. Following this assessment, they will develop a process for implementing change that involves multiple sectors, disciplines, and interests within the community.

Noting that all three lead partner institutions in the United States have been involved with international health partnerships in the past, Schechter says, "their understanding of the existing infrastructure and the challenges that face healthcare policymakers and practitioners in Eurasia will greatly benefit these new partnerships."

Partners from the United States will travel to their respective Caucasus partnership communities later this month to attend formal ceremonies marking their new alliances and to finalize work plans for the coming year.

—by Kathryn Utan, AIHA staff writer



Common Sense vs. Prejudice: Croatia Moves to Root Out Discrimination Against PLWH/As

Breaking down the stigmatization of people living with HIV/AIDS (PLWHAs) and discrimination against them are two particularly high-priorities for Croatia.

What makes this fact surprising is that the country only has approximately 400 registered cases of the virus in a population of approximately 4.5 million. But, the traditional stance of the Catholic Church—which enjoys great authority throughout society—on this matter, the lack of information about HIV/AIDS in the media, and the media's preference to focus on the sensation around the problem instead of the facts, as well as the absence of HIV prevention education in schools, creates a situation where many citizens remain totally ignorant about how the virus is transmitted. In actuality, many citizens subscribe to the "myth of death" that has been built up around HIV/AIDS and believe that the infection can be spread through casual social contact. At the same time, even people who discount the myth lack comprehensive information on the nature of the disease and its transmission routes. This puts them and others at risk of infection.



Posters announcing the HIV/AIDS Stigma and Discrimination Workshop and Roundtable were posted all over the city and in local newspapers. They promote "Knowledge Against Fear."

Thus, the population's ignorance about HIV/AIDS on the one hand, and the absence of appropriate laws to assure the confidentiality of HIV-positive individuals and protect their rights, on the other, creates fertile ground for the stigmatization of and discrimination against this vulnerable group. According to experts, changing the picture will require, at minimum, systematic, targeted measures to educate the population about HIV/AIDS—including how it is transmitted—and the development of appropriate legislation defending the rights of PLWHAs.

This general opinion of the situation in Croatia became apparent during the HIV/AIDS Stigma and Discrimination Workshop and Roundtable, held in Zagreb, April 26-27, 2004. The AIHA-sponsored meeting was designed to move the country one step closer toward protecting the rights of PLWHAs and rooting out discrimination against them. Taking part were doctors; law professors; representatives of the mass media, national legislature, international AIDS organizations, and USAID; and staff from faith-based and nongovernmental organizations (NGOs) working to stop the spread of HIV/AIDS and oppose the stigmatization of HIV-positive persons. US Ambassador to Croatia Ralph Frank attended a roundtable session on the 27th. In discussions held over two days, participants attempted to identify the causes of stigmatization and discrimination in Croatia, as well as to determine what should be done and how to coordinate efforts to eliminate them.

Deliberations produced a consensus among attendees that several laws should be drafted to defend the rights of PLWHAs. Participants shared the opinion that such laws need to guarantee the confidentiality of medical information, including a patient's HIV status; protect an HIV-positive person's right to continue to work in a job where there is no risk of transmission; and provide PLWHAs with appropriate treatment, as well as social and psychological support.



One discussion focused on the Catholic Church's stance on offering HIV prevention education programs to schoolchildren.
(Photo: Vira Illiash)

To achieve these goals, attendees agreed on the need to establish an Interdisciplinary Committee on HIV/AIDS, which will include representatives of different social spheres, the media, legislature, and NGOs who will lobby to defend the rights of PLWHAs. This Committee is also expected to coordinate the joint efforts of medical and educational institutions, the media, and NGOs as they work to mobilize large-scale education campaigns designed to inform Croatians about HIV infection and its transmission.

In addition to providing various organizations with the chance to coordinate their efforts, conference organizers hosted the viewing of "Pandemic: Facing AIDS," a documentary film that tells the stories of individuals living with HIV in the hardest hit areas of the globe: Brazil, India, Russia, Thailand, and Uganda. A production of Moxie Firecracker Films, with support from the Bill and Melinda Gates Foundation and HBO, the movie documents the almost incomprehensible scale of the HIV/AIDS epidemic, which has already struck approximately 40 million people worldwide. Interested local residents, as well as conference participants, were invited to the screening.



Mario Harapin, head of an association of journalists specializing in healthcare issues, listens to remarks by Drazen Lalic, professor of political science at the University of Zagreb, who says that by stigmatizing HIV-positive individuals society tries to justify its cruelty toward this vulnerable group. (Photo: Vira Illiash)

The personal stories of each individual profiled in the film are different, as are the circumstances that led them to become infected. What they have in common is the pain and confusion they experience due to lack of knowledge about how the spread of HIV can be prevented.

"Many of the people in the film talked about how they were not aware of the danger of becoming infected," said Nikolina Ivanovic, a medical student invited to the show by a friend. "They became infected because none of them knew all the different transmission routes of HIV. Some of them thought it was something that only affects drug addicts, while others thought it was only a problem for sex workers. In my opinion, the main message of the film was really important, because we saw how easy it is to become a victim of this disease if you don't know anything about it." Commenting that every country should set goals for educating their population about HIV/AIDS, the Croatian

disease, which is still incurable, by teaching people preventive measures."

Summing up the conference during its final session, Stipe Oreskovic, head of the Croatian HIV Epidemiological Surveillance Center, said "The decisions we reached inspire optimism. I would very much like to think that the strategy we have developed will have a positive impact and that meetings like this will become a regular feature of our activity." He noted that stigmatization threatens to compound the problem of HIV/AIDS because it causes people to become socially isolated just when they need not only medical care, but knowledge about how to avoid transmitting the virus to others. "Since stigmatization is a social phenomenon, we need joint efforts to address it," he concluded. "This meeting showed us that very clearly."

Editor's Note: The 2004 issue of CommonHealth will include a feature looking at the problem of stigmatization and discrimination of people living with HIV/AIDS and report more on this conference.



EMS Workshop Introduces New Curriculum and Encourages Collaboration

"The EMS Training Centers opened within AIHA's partnership program in Eurasia have been functioning for up to 10 years, training thousands of medical and non-medical personnel, resulting in potentially vast numbers of saved lives, and proving the indisputable effectiveness of this program," says Robert Freitas, program director of Emergency Medicine at Harvard Medical Faculty Physicians. Freitas served as one of the two facilitators during the EMS Training-of-Trainers workshop held in Tbilisi, Georgia.

Convened, April 5-9, 2004, this five day event brought together some 27 directors and instructors from 13 AIHA-established EMS Training Centers and oriented them to the new *First Responder EMS Curriculum for Training Centers in Eurasia*, which had been developed by AIHA partners at Emergency Management Visions International in July 2002.

During the meeting, participants discussed the content of the manual, which includes 15 chapters and builds upon practical skills-based materials, training algorithms, case studies, and pre- and post-tests targeted to enhance the professional capacity of both students and instructors.



Instructors Robert Freitas and Milana Boukhan demonstrate techniques for controlling bleeding. (Photo: James Willis)

Among other topics, the workshop's theoretical and practical sessions covered issues related to airway ventilation; bleeding control; using slings, splints, and immobilization devices; dressing injuries; techniques for lifting and moving patients; and providing assistance during delivery. Upon completion of the workshop each attendee received Russian-language copies of the new First

Responder student and trainer manuals, along with the printouts of cases discussed during the workshop and a CD-ROM containing the curriculum.



Marina Gogidze, an instructor at the Tbilisi EMSTC in Georgia, practices the recovery positioning on Freitas (Photo: James Willis)

As this event was the first AIHA-sponsored activity held for staff of the EMSTCs in more than two years, the workshop also enabled emergency medicine specialists to share recent developments at their Centers, to discuss issues related to sustainability and the impact of EMS training on their region's ability to respond to the needs of the population. The meeting also included opportunities to review roles and identify the professional status of first responders. In this regard, the participants agreed upon the necessity of creating legislation mandating that policemen and firefighters respond to medical emergencies. In order to lobby this issue at the government level, the EMS trainers decided to establish the First Responder Association, which will facilitate the development and implementation of a corresponding law in countries throughout Eurasia. "If successful, this will result in thousands of lives saved each year," says Freitas.

"Even better results can be achieved if the EMSTCs are able to start educating local citizens in emergency care delivery," says Mailk Abbasov, head of the Department of Curative and Preventive Medicine at the City Emergency Station (CES) in Baku, Azerbaijan, and one of the workshop's attendees. Being an emergency physician for some 30 years, Abbasov explains that there are many medical conditions that require appropriate care to be delivered immediately. For this to happen, care needs to be provided by those present when an accident occurs.

Abbasov says that it was thanks to the skills and materials he and his CES colleagues gained through their relationship with AIHA that they were able to start educating local schoolchildren and restaurant service workers in basic emergency care techniques, in addition to offering specialized training to healthcare providers. "The Tbilisi workshop has provided us with additional valuable knowledge, specifically in a training methodology that can be used to educate non-medical personnel. It also gave us an opportunity to collaborate with colleagues from other countries in order to assure effective networking in improving emergency healthcare provision," he said, noting that CES hopes to establish an emergency training center in next year.



Malik Abbasov acts as the patient in a demonstration on how to create slings. (Photo: James Willis)

Commenting on the seminar, co-facilitator and Harvard Medical Faculty Emergency Department Physician Milana Boukhman says that she was impressed by the energy and enthusiasm of the Eurasian trainers, as well as by their ability

as a group to grasp new concepts and strategize to implement change. "This capacity underscores why this AIHA program is such a success and demonstrates its potential to prevent thousands of mortalities, as well as to improve the health of millions across Eurasia."



Volgograd/Little Rock Dissemination Conference Shares Best Practices in Family Medicine Reform

The two AIHA Volgograd/Little Rock partnership institutions—Volgograd State Medical University (VSMU) and University of Arkansas Medical School (UAMS)—have collaborated in the area of family practice for more than a decade. In 1993, during the first year of the partnership, VSMU launched a new family medicine residency program drawing on UAMS's experience in training family physicians. It was a critical step in building a cadre of family medicine practitioners capable of providing high-quality, patient-oriented primary care services to people living in the city of Volgograd and its oblast. Thanks to the partnership's efforts, to date more than 100 healthcare providers have been trained in family medicine through partnership exchanges and the VSMU residency program.

Recently, the partners shared their accomplishments and lessons learned with 85 oblast- and city-level officials and healthcare providers and managers from Rostov, the Republic of Kalmykia, and Volgograd, at a two day Best Practice Dissemination Conference held March 16-17, 2004.

In his conference address, VSMU Rector Vladimir Petrov acknowledged the critical role the partnership played in supporting regional health reform efforts. He noted that despite the lack of a generally-accepted family practice curriculum in Russia, VSMU faculty had been able to use the experiences of their US colleagues and train "a unique group of general practitioners capable of providing a broad spectrum of healthcare services, including general surgery and obstetrical care." He went on to conclude that "Our collaboration with UAMS contributed to the evolvement of a new medical speciality in Russia—family practice."



VSMU Rector Vladimir Petrov speaks about partnership development while Charles Cranford (far left), UAMS vice-chancellor for regional programs, Nikolay Maksyuta, Volgograd Oblast governor, and Evgeniy Anischenko, head of the Volgograd oblast HC Department look on. (Photo: Elena Zaitseva)

Talking about developing and integrating both a new teaching methodology and regional family practice guidelines into VSMU's family medicine curriculum, Sergey Nedogoda, vice-rector of the institute and chair of the Family Medicine Department established in 1994 as a result of the partnership's efforts, noted that there is still a need to address some crucial issues at the national level. He specifically cited the need to develop separate training programs for urban and rural family physicians, as well as a set of nation-wide standardized family medicine guidelines appropriate for the Russian healthcare system as its undergoing reform.

The progress of the newly-opened rural family medicine clinics in the towns of Dubovka, Mikhailovka, and Volzhsky—all located in the Volgograd Oblast—was also discussed. These sites were established by the regional administration and, in addition to providing primary care services, are used to train VSMU family medicine residents who choose to practice in rural areas; partners provided these clinics with funding for some supplies.

Other presentations and discussions delivered during the conference examined the issues of behavioral health in family medicine, the social impact of having family practitioners in a community, and the role of a family physician in promoting healthy lifestyles choices and chronic and occupational disease management.

In addition, conference participants had the chance to learn about the partnership's successful collaboration with the regional Poison Control Center with whom they worked to establish a "hot line." The call-in phone service is designed to provide accurate information regarding poisoning and poison antidotes to both medical providers and citizens; no such service has ever before been available in the oblast. Personnel at the newly established service uses the Toxicological and Drug Database provided by UAMS to assure quality and effectiveness of care.

Attributing the success of the partnership program to the concerted efforts of both healthcare providers and educators, Charles Cranford, UAMS vice-chancellor for regional programs, stressed the importance of having the support of the oblast administration, saying such support was instrumental to the partnership program's success. In turn, Volgograd Oblast Governor Nikolay Maksuta emphasized the crucial role the partnership played in increasing access to high-quality care, delivering social services, and improving the health status of persons living in the Volgograd Oblast.

Regional News

HIV/AIDS Continues to Rage in Russia While Appropriate Treatment is Unavailable for Vast Majority of Patients

As *Interfax News* reports, Russia is presently facing an increasing number of sexually transmitted cases of HIV/AIDS. According to statistical data recently released by the Russian Ministry of Health's AIDS Prevention and Treatment Center, in 2003 sexual transmission accounted for 19.4 percent of all HIV cases in Russia; in 2001 this number was only 4.7 percent.

As cited by the report, the Russian government allocated more than \$944,000 in 2003 to fight HIV/AIDS. Despite this fact, a large number of oblasts in the country do not budget funds for HIV/AIDS prevention programs in their local communities. In addition, the report says that the high annual costs of treating HIV/AIDS—ranging from \$5,000 to \$15,000 per person—makes medicine unavailable for most HIV-positive Russians and impedes an effective curb of the infection.

Interfax News also reports that fewer than 50 percent of HIV-positive persons living in Russia received treatment in 2003 and that even though the Russian

government allocated \$3 million to purchase antiretroviral drugs in 2004, this amount will only cover the treatment expenses for several hundred patients, leaving many without any medication and doing little to stop the continuation of the infection' spread.

In addition, the report says that the [Global Fund to Fight AIDS, Tuberculosis, and Malaria](#) has agreed to grant \$80 million over the next five years to a consortium of six nongovernmental organizations active in Russia to address HIV/AIDS. However, according to the report, the effects of the funding will not be seen for at least three years.

Romania Receives Help From Global Fund

As was announced by Romanian authorities and reported in the *Associated Press*, the country will receive approximately \$40 million from the [Global Fund to Fight AIDS, Tuberculosis, and Malaria](#) to support HIV/AIDS and TB programs in the country where the estimated number of people living with HIV/AIDS has reached 10,000.

According to the agency, the country will receive approximately \$21.8 million over the next two years to develop 61 programs to fight HIV/AIDS. The remaining \$16.8 million will be spent on 20 programs to contain the spread of TB. Created in cooperation with nongovernmental organizations, many of these programs will develop prevention and education campaigns targeted at high-risk groups or train of medical personnel to provide high-quality healthcare services to infected individuals. Other programs will work to educate students and the military about preventive measures to reduce the transmission of HIV.

The Romanian Minister of Health Ovidiu Brinzan has said that this is the first time public agencies are collaborating with NGOs to fight HIV/AIDS.

Workshops, Conferences, Opportunities and Grants

Antimicrobial Therapy Conference

The European Society of Clinical Microbiology and Infectious Diseases (ESCMID), the Karolinska Institutet, and the Swedish Institute for Infectious Disease Control will sponsor a conference "Antimicrobial Therapy in the 21st Century." The meeting will take place in Stockholm, Sweden, June 1-2, 2004. For more information, please visit www.escmid.org.

International Scientific Conference on Childhood Leukemia

The charity Children with Leukemia will organize a meeting to examine environmental and other factors affecting the incidence of leukemia and other childhood cancers. Topics will include the effects of ionizing and non-ionizing radiation, pollutants in air and food, infections, and modern lifestyles. The conference will be held in London, September 6-10, 2004. For more information, see www.leukaemiaconference.org/main.asp

Conference on Patient Care Safety

The Royal College of Physicians in London will share its successful initiatives and innovations in patient safety and practical solutions for implementing safer working practices at two day conference "Making Healthcare Safer" in London,

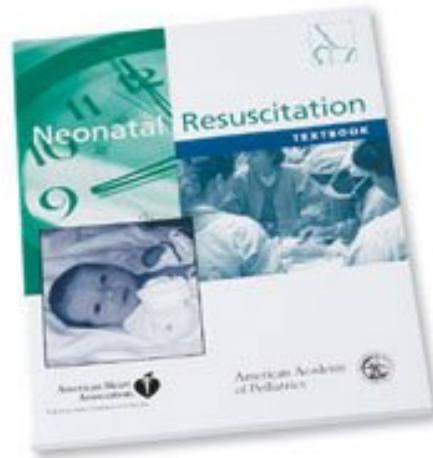
October 21-22, 2004. For more information, please go to www.quality.bmjpub.com

Features

L'viv/Detroit Partners to Provide Ukrainian Neonatologists Latest NRP Manual in Ukrainian

Belief in the value of human life is shared by the vast majority of all people and, without a doubt, by those medical specialists whose job it is to provide resuscitation to those struggling for breath. This is especially true for neonatologists whose mission is to protect the health of the most vulnerable of our species—newborns.

As a specialty, neonatology began to evolve in the United States in the late 1970s. At that time, healthcare professionals concluded that the resuscitation of newborns required a different method than that used for adults and that this procedure should focus on ventilation rather than cardiac defibrillation, which had been the previous method of choice. In 1985, the American Academy of Pediatrics (AAP) and American Heart Association (AHA) announced a joint commitment to develop a standardized training program to teach the principles of neonatal resuscitation to practitioners across the United States. A committee was convened to determine the appropriate format for the program and materials to be included in a new neonatal resuscitation textbook, the first edition of which was published in 1987.



The fourth edition of the "Textbook of Neonatal Resuscitation Training."

To share the procedures and techniques described in the manual, leading pediatric specialists developed a dissemination strategy that included the establishment of a national-level faculty comprised of a nurse and physician from each American state. Once trained, national-level faculty conducted a series of seminars to train additional instructors within their home state; these instructors, in turn, shared their knowledge with hospital-based trainers using the uniform approaches put forth in the nationally adopted textbook. Thus, by the end of 1998 more than one million US medical professionals had been taught standardized neonatal resuscitation techniques. Since its first edition, the neonatal resuscitation training manual has seen constant updates and changes as medical science and related technologies have evolved. To date, four editions of the book have been released, the last one appearing in 2000.

Replication of US Model in Ukraine Stimulates Significant Improvements in Neonatal Care and Delivery

The implementation of AIHA's Neonatal Resuscitation Program (NRP) began in Ukraine in 1994 at the L'viv Oblast Clinical Hospital (LOCH) through the efforts of the L'viv/Detroit partnership. According to Dmytro Dobriansky, associate professor at Danilo Galitsky L'viv National University and director of the L'viv Regional Neonatal Resuscitation Training Center (NRTC) opened at LOCH by AIHA, prior to the partnership neonatologists from the LOCH Intensive Care Unit (ICU) for Premature and Sick Babies had been trying to improve neonatal care by training staff using the second edition of the AHA/AAP manual, which had been given to the hospital by the Malteser, a German charitable foundation.

However, after becoming involved in the partnership and meeting with neonatal specialists from the Henry Ford Healthcare System (HFHS) in Detroit, Dobriansky says that "LOCH was able to develop a formal neonatal resuscitation curriculum that included both didactic and practical training materials, along with testing and certification." Supported by the skills and expertise of the US partners—namely Christine Newman, a neonatal nurse practitioner, and her colleague, Sudhakar Ezhuthachan, director of neonatology at HFHS—the newly trained ICU staff instructors introduced the NRP course to practitioners from all the birth houses in the L'viv Oblast and provided trainees with a translated copy of the AHA/AAP neonatal resuscitation manual, slides, and video tapes. As a direct result of this, by 2003 the rates of poor early neonatal neurological outcomes and early neonatal mortality had decreased by approximately 50 percent in comparison to figures observed in 1995, when the program started.

The success of the NRP in the L'viv Oblast was noted by the Ministry of Health (MOH) of Ukraine, which ordered the program's nationwide replication. In 1997, with the support of AIHA and the MOH, the first NRTC was officially opened in the country at LOCH. Within a few years, Center faculty, with assistance provided by the US partners, were able to prepare a cadre of instructors to support the opening of five additional NRTCs in the largest oblasts of Ukraine. By the end of 2003, more than 10,000 healthcare providers throughout the country had been certified to provide neonatal resuscitation at their respective places of employment.

HFHS Neonatal Specialists Help Partners Obtain the Latest Version of the NRP Manual in Ukrainian

In spite of the fact that the L'viv/Detroit partnership formally "graduated" from the AIHA program in 2000, the US neonatal specialists and their Ukrainian colleagues have continued to stay in touch. "We think it is important to keep our Ukrainian friends abreast of the latest information related to neonatal technology and medical science," says Newman, "which is why, when AAP and AHA updated the NRP manual in 2000, we applied for copyright permission to print the manual for the Ukrainian partners." AHA and AAP generously granted permission for the translation into Ukrainian, which is much appreciated by AIHA and its partners, as are the efforts of Newman and Ezhuthachan to bring the project to fruition.

According to Newman, despite the fact that AIHA is providing a Russian-language version of the manual to all the NRTCs opened within its Neonatal Resuscitation Initiative in Eurasia—reasoning that all former Soviet Union nations understand this language—the Ukrainian partners felt that it was important to have a textbook in their native tongue, which would be more comprehensible to local healthcare providers.

As Newman explains, the California Association to Aid Ukraine and the Children's

Medical Care Foundation were among those organizations who agreed to allocate funding for the Ukrainian translation and formatting of the manual. Funding to print 2,400 copies, is being provided by AIHA, with funding for an additional 600 copies provided by Nestle, the food and beverages company.

Dobriansky says that the authors of the fourth edition used updated graphics and visuals to improve how the information is conveyed. "The manual is grounded in evidence-based approaches and, in comparison to previous manuals, it contains more effective graphics, including full-color images of different neonatal conditions that are imperative for the training process because they provide trainees with the visual features and characteristics of any given case." In addition, as Dobriansky explains, "The text book contains new, more efficient neonatal resuscitation protocols and simplifies some of the guidelines that had proved to be confusing in previous editions."

The partners expect that the 3,000 copies of the Ukrainian version of the textbook will be released before summer and will be distributed to all the maternity houses in Ukraine by Nestle, who agreed to provide delivery to more than 2,000 institutions in all the oblasts of the country.

"This project became a reality thanks to the commitment of many different organizations and people who recognize the value of neonatal resuscitation," says Newman. Noting that the implications of a newborn not receiving immediate resuscitation help can be fatal or lead to lifelong health problems, Newman emphasizes the vital importance of learning the standardized techniques and procedures.

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