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For Tuberculosis Patients in Moldova, Community-based Support Group Leads to Improved Outcomes

Sometimes called the northern capital of Moldova, Balti is the country's second largest city and, as such enjoys a sound economy with many business and industrial enterprises, as well as several universities, colleges, and medical institutions. Unfortunately, Balti also has one of the country's highest rates of new TB infections, with 200 cases per 100,000 inhabitants.

AIHA launched a public awareness campaign, "TB is Curable: See a Doctor," in Balti in fall 2005 through its USAID-supported Strengthening Tuberculosis Control in Moldova Project. An unexpected result came in the form of a group of patients who realized the importance of peer support to the recovery process.

Speranta Terrei — Earth's Hope — launched its work in March 2006 and was officially registered as an NGO later that year. Founded

by a small group of healthcare providers, social workers, and patients with AIHA's assistance, *Speranta Terrei* began training volunteers to monitor the treatment of TB patients undergoing out-patient care. They also oversee preventive treatment for children who have been exposed to tuberculosis with the blessing of the management of the TB Dispensary.

Speranta Terrei currently has a core group of 12 volunteers who provide support to some 60 patients. The organization even has "pinch hitters" who have been trained and can fill in when any of the regular volunteers are unavailable. In addition to DOTS — or directly observed therapy — volunteers offer guidance and advice on a host of topics such as nutrition, prevention, hygiene, and even referrals for legal counseling. Equally important for many TB patients is the kindness



Volunteer Sergei Tinica (left) visits a TB patient and ensures that he takes his medication.

and social support the volunteers provide.

"Our medical staff is very small and we wouldn't be able to visit patients in their homes," says TB Dispensary Chief Physician Aglaya Cracium. "We're very grateful to *Speranta Terrei*."

Regional Knowledge Hub Teams Up with Clinton Foundation to Build HIV/AIDS Treatment Capacity in Dnipropetrovsk



Clinicians attend a lecture during the Introduction to HIV Care course conducted in Dnipropetrovsk in April.

AIHA and the Regional Knowledge Hub for the Care and Treatment of HIV/AIDS in Eurasia are collaborating with the William J. Clinton Foundation's HIV/AIDS Initiative to train infectious disease specialists from primary care facilities in Ukraine's Dnipropetrovsk Oblast how to better diagnose and treat PLWH.

Following site assessment visits in late 2006 and early 2007, AIHA and Knowledge Hub experts worked closely with the Clinton

Foundation to develop a three-course training package that emphasizes primary level HIV screening, diagnosis, and care.

Based on the Knowledge Hub's ART courses, which largely target AIDS Center clinicians and HIV specialists, the HIV Care curriculum also features an introductory course, a mentoring component, and an advanced course.

The first training was conducted Feb. 12-16 for polyclinic infectious

disease specialists. With the overall goal of improving rates of early diagnosis and treatment referral, the course covered topics such as HIV symptoms, patient counseling, prevention, and opportunistic infections commonly occurring in PLWH.

A second introductory course was conducted April 2-6 and a third May 14-18. Mentoring is slated to take place in June and advanced courses in the fall.

AIHA Partners from Azerbaijan Meet in Baku



Saadat Mahmudova, a member of AIHA's Baku/Portland partnership, discussed Azerbaijan's efforts to improve primary care and family medicine during her presentation.

With USAID support, AIHA and the Ministry of Health of Azerbaijan co-hosted a Health Partnership Program Dissemination Conference in Baku on May 7 to showcase the many health system improvements made through its partnerships in Azerbaijan.

Saadat Mahmudova, national coordinator on primary healthcare and family medicine, and David Mertes, a US partner from Livermore, California, joined Azerbaijani Ministry of Health officials, AIHA staff, USAID Mission Director Scott Taylor, and some 100 local partners and contributors to discuss the status of healthcare service delivery in

this Caucasus nation of 8.1 million people.

Participants talked about the many model programs implemented through AIHA's partnerships and programs in Azerbaijan and shared strategies for future development and expansion.

AIHA's USAID-supported Health Partnerships Program has been operating in the Caucasus Region since 1992. In Azerbaijan, four partnerships — three in Baku and one in Ganja — have linked local healthcare institutions and care providers with counterparts in the United States in a collaborative effort to improve the quality

and scope of healthcare services available to the Azerbaijani people.

Marked improvements in both the scope and quality of healthcare services have been made by the dedicated volunteers involved with AIHA's partnerships in Azerbaijan.

According to USAID's Taylor, "The success of AIHA's partnership program is the result of the extraordinary commitment and expertise of participating US and host country partner institutions and volunteers [that have laid] a strong foundation for programmatic endeavors."

Tbilisi Conference Showcases 15 Years of Successful Partnerships in the Caucasus Region



At the conference, members of graduated partnerships — such as the Gori-Mtskheta/Milwaukee partnership shown here — were presented with plaques in recognition of their dedicated service during an awards ceremony featuring Vladimer Chipashvili, Rauf Agayev, George Tsereteli, USAID's Andrea Yates, and AIHA Executive Director James P. Smith.

AIHA hosted a conference in Tbilisi May 2-3 to highlight 15 successful years of USAID-supported healthcare partnerships and programs in the Caucasus Region. During the event, AIHA paid tribute to the dedicated volunteers and collaborating organizations that have contributed to this success, giving particular attention to the accomplishments of its most recent partnerships in Azerbaijan and Georgia.

Georgian Minister of Labor, Health, and Social Affairs Vladimer Chipashvili welcomed participants, saying that AIHA and its partners have been instrumental in his country's health system reform efforts by helping build much-needed human resource capacity.

"AIHA has trained more than 3,000 people through its workshops and other courses in Georgia, Chipashvili said, citing nursing, neonatal care, infection control, healthcare management, and emergency medicine as key areas of improvement. "AIHA's partnership model has always focused on our priority issues

and, as a result, its programs and activities have corresponded with the needs of the Georgian health system," he continued.

Professor and Deputy Head of the Azerbaijani Ministry of Health's Department of Science, Education, and Human Resources Rauf Agayev, Head of the Georgian Parliament's Committee on Health and Social Issues George Tsereteli, and US Ambassador to Georgia John Tefft also spoke during the opening ceremony.

More than 100 members of AIHA's partnerships from Georgia and Azerbaijan, government officials, and representatives of USAID, other donor agencies, and local and international NGOs working in the region attended the conference.

The event provided an opportunity for international donors and implementing agencies, national ministries of health, and the local governmental and nongovernmental sectors to share best practices and lessons learned, as well as to discuss ideas for future cooperation. It also featured a graduation ceremony for partners

from many of the institutions involved in AIHA's recent programs in the region.

Sessions highlighted not only the accomplishments of individual partnerships, but the program's overall impact as a vehicle for strengthening health systems in both countries as well.

Since AIHA began supporting USAID's primary care strategy in 1998, partners have conducted 600 exchanges and trained more than 10,000 healthcare professionals from the Caucasus. Partnership primary care and family medicine centers in all three countries in the region have cumulatively logged nearly half a million patient visits for screening, diagnosis, treatment, education, and counseling during that time.

Over the past 15 years, US communities, institutions, and health professionals have contributed more than \$39 million in professional time, direct and indirect costs, and donated supplies and equipment to the region, more than matching the \$26 million in contributions from the American people through USAID.



Conference participants attend the opening session.

Irkutsk Workshops Focus on Improving Reproductive Health Services for Women in Russian Prison System

In collaboration with the Red Cross National Society of the Russian Federation (RRC), AIHA recently conducted two trainings designed to improve the quality of reproductive health services for women in Irkutsk Oblast penal colonies and settlements.

A training for eight correctional system medical workers from the East Siberian oblast was held April 16-19. The workshop focused on upgrading participants' clinical skills in areas such as STI diagnosis and treatment,

contraception and family planning, reproductive rights of inmates, HIV, ART, patient counseling and support, and helping women prisoners make a successful transition following their release.

A workshop for 22 non-medical professionals — such as inmate team chiefs, prison psychologists, NGO representatives, and others who work with inmates — was conducted April 18-20. Topics discussed during this training included STIs and HIV, stigma and

discrimination, contraception and family planning, reproductive rights, behavior change, peer counseling, and treatment adherence, as well as effective adult learning strategies.

This project directly benefits a total of 1,804 women living in three penal colonies in Bozoi, as well as women living at a prison system settlement in Taishet, and may serve as a model for improving reproductive health services in other parts of the Russian Federation.



Russian Red Cross trainer Ekaterina Dvorak leads an exercise during the training for medical professionals. Participants were asked to write down what they hoped to gain from the workshop thereby creating a "tree of expectations."

PMTCT Project Helps Reduce Vertical Transmission in Ukraine, Improves Care for Women and Children with HIV

Since February 2005, AIHA's USAID-supported "Capacity Building to Prevent Mother-to-Child Transmission of HIV in Ukraine Project" has been contributing to USAID's goal of providing comprehensive PMTCT services to 90 percent of at-risk women in eight high-burden oblasts by 2008.

Preliminary assessments and mentoring workshops indicate that the project has resulted in marked increases in key performance indicators, including prenatal registration of HIV-positive pregnant women, ARV prophylaxis for HIV-positive mothers and their newborns, family counseling for women living with HIV, and referral to NGOs for follow up care and support at all project sites.

In addition to demonstrating the many positive outcomes of the project, the assessment visits also revealed some of the key challenges pilot sites face as they work to implement prevention, treatment, and care activities. In particular, unreliable supplies of medications and testing reagents, lack of gloves and other supplies

to help ensure the safety of healthcare workers, poor access to laboratory diagnostics to determine viral load, PCR, and CD4 counts, and lack of free family planning services emerged as the biggest obstacles for most sites.

These best practices and lessons learned were disseminated at a one-day conference conducted by AIHA on May 15 in Kyiv.

During the event, Dr. Nadiya Zhylyka, head of the Mother and Child Health Department at the Ukrainian Ministry of Health, talked about the important role partnerships between the Ministry and various international organizations are playing in the country's efforts to reduce vertical transmission of HIV and otherwise improve treatment and support services available to women living with HIV — or those at risk of becoming infected — and their families.

"AIHA has helped us greatly in our efforts to implement effective, appropriate PMTCT services at the community and oblast levels," Zhylyka said, explaining that one of the critical

strengths of the project was its focus on integrating care and services across a broad spectrum of providers, including maternal/child health, AIDS care, and other clinical specialties, as well as professionals working with NGOs that provide social support to PLWH and their families.

Another Ukrainian expert, Dr. Alla Scherbinskaya, director of Ukraine's National AIDS Center, discussed the impact the HIV/AIDS epidemic is having on Ukraine's women and children while delegates from project sites in Crimea, Cherkassy, Chernigiv, Dnipropetrovsk, Kherson, Kyiv, Mykolaiv, and Odessa oblasts provided updates on the status of PMTCT services — as well as other related treatment, care, and support services — that are available in their regions as a result of the project.

Summing up the outcomes, Zhylyka concluded, "Each pilot site achieved substantial and sustainable results, and we are very grateful to AIHA — together with our caregivers — who helped many Ukrainian babies to be born without HIV."



"This project has made a significant impact not only at the pilot site in Kryvyi Rig, but throughout the whole oblast as well. Now we continuously disseminate information and work to expand the skills of our caregivers. The clinical results we've achieved have resulted in marked improvements in the quality of healthcare delivery to women with HIV at our maternity houses."

—Dr. Valentyna Ginsburg, deputy head of the Dnipropetrovsk Oblast Health Administration and AIHA project coordinator in the oblast.

Ganja/Livermore Partnership Nurtures Strong Community Involvement in Azerbaijan's Primary Healthcare Reforms



Partners meet with members of the Community Advisory Board to determine the most pressing health-related issues facing Ganja's citizens and set priorities for future work.

Initially, the American idea of forming a Community Health Advisory Board was rejected by a majority of local partners in Azerbaijan. They found the concept of inviting people outside the medical profession too foreign and downright strange.



During a partnership exchange to California, board members get a first-hand look at how individuals from the local community contribute to ValleyCare's planning processes.

In 2004 when the first groups of US healthcare professionals arrived in Ganja as part of a newly established community-based primary care partnership, the specialists from Livermore and Oakland were eager to share their experiences working hand-in-hand with the California communities they served to better identify key health concerns and develop effective, targeted interventions. After all, ValleyCare Health System — the lead US member of AIHA's Ganja/Livermore partnership — was established with assistance from local residents who banded together to raise money to supplement federal grants. This money was used to build the first Valley Memorial Hospital and, even to this day, ValleyCare still depends on private contributions to keep pace with expanding community health needs.

Initially, the American idea of forming a Community Health Advisory Board was rejected by a majority of local partners in Azerbaijan. Finding the concept too foreign and downright strange, the Ganja physicians balked at the idea of inviting patients, teachers, journalists, and other members of the community to join them — trained medical professionals — on a board whose main purpose is to solve health problems. Physicians, they reasoned, know perfectly well what kind of health problems the population faces and what should be done to solve them.

The mentality shift the US partners sought did not happen overnight. During their first few exchange trips to the United States, Ganja physicians and nurses learned so much about the role communities play in US healthcare, most specifically in their partner city of Livermore. In addition, professionals from Alameda County Public Health Department shared their vision on things like coping with conflict, public health ethics and principles, and fundraising.

It was this first-hand look at how clinicians in California effectively work with a broad range of local stakeholders to design and implementation programs that helped the Ganja partners begin to embrace the idea of integrating community representatives into their own efforts to shape the health system back home in Azerbaijan.

Ganja partners agreed to recruit and train members of a Community Health Advisory Board that included not only doctors, but nurses, a journalist, patients, a legal specialist, an engineer, a teacher, and local residents.

Clinicians were committed to making the board work because they recognized the importance of improving the city's primary care system and wanted to be involved in the process. Many liked the new commitment to community involvement while others were attracted by the idea that the board would play a crucial role in the project. They wanted to gain new knowledge and skills and have a place where problems could be discussed openly and solved by the whole community.

Board members have been meeting regularly for three years now to discuss ongoing health issues and provide recommendations on how to improve the partnership project. They helped identify four health concerns that were most pressing — bronchial asthma, hypertension, diabetes, and women's health — and helped design wellness programs.

Any initial "strangeness" about engaging community members in the process of making improvements to Ganja's primary care system has disappeared.

The Community Health Advisory Board has taken on a leading role in the partnership's work, so it was no surprise that members became very concerned when local budget constraints caused a problem with remodeling Poly-clinic No. 6 where a model Pri-

mary Healthcare Center was to be established. The project was in danger of failing due to lack of funds, but once again ValleyCare's history and experience served as a reference point.

Through their excellent networking skills, board members launched an intensive search for those who could help them solve this problem. The group came up with ideas on how to raise money and awareness about the new center among local residents.

The Livermore partners helped the renovation project with a large cash donation from physicians in the United States for the clinic renovations. Then, a local private donor was found and funds to complete the renovations were acquired. The extensive remodeling project was completed in August 2006 under the close supervision of board members. They also helped develop criteria to determine what items should be purchased with the donated funds, keeping a close watch on both cost and how the new equipment would help further the goals of the center. They even made recommendations about who should work in the new facility, planned the grand opening ceremony, and helped select a name for the clinic.

It was largely due to the dedication and support of the board that the model Primary Healthcare Demonstration and Training Center was able to open its doors in Ganja on September 12, 2006. Poised to play an important role in advancing the development of family and community-oriented primary care, the center consolidates curative and preventive services at the primary level and serves as a training resource for upcoming government initiatives in primary healthcare.

There is no doubt that the board members who helped make the center a reality are proud of this achievement.



The American International Health Alliance

Creating vision, strengthening systems, and making a difference through volunteer-based partnerships and initiatives

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AIHA, its partnerships, and programs represent one of the US healthcare sector's most coordinated responses to a broad range of issues affecting global health. Our programs contribute to sustainable change by providing the broad-based management and programmatic support necessary to help donor institutions and health systems coordinate other forms of government or privately-sponsored development assistance.

AIHA operates under various cooperative agreements and grants from US and international donor agencies including the United States Agency for International Development (USAID); the US Department of Health and Human Services, Health Resources and Services Administration (HRSA); the World Health Organization (WHO); the Global Fund to Fight AIDS, Tuberculosis and Malaria; and the German Society for Technical Cooperation (GTZ).

For more information about AIHA, please visit us on the Web at www.aiha.com

Volga River Alliance Project Focuses on Human Resource Development in Russia's Samara and Saratov Oblasts

AIHA has joined forces with AIDS Healthcare Foundation (AHF) — the largest NGO provider of HIV/AIDS services in the United States — to help develop replicable, integrated models of HIV/AIDS treatment and care through pilot projects in the Saratov Oblast cities of Saratov and Engels, and in the city of Togliatti in Samara Oblast.

Supported by USAID through its Global Development Alliance, the Volga River Alliance is a public-private project that links AIHA and AHF with the Saratov Oblast Ministry of Health and Togliatti City Administration. The goal of project is to strengthen local capacity to provide HIV-related treatment, particularly at the primary care level.

The joint initiative builds on the many accomplishments of AIHA's USAID-funded Saratov/Bemidji and Togliatti/Providence partnerships, which were established in 2004 to create model HIV and AIDS care, treatment, and support programs that could be replicated throughout the Russian Federation.

As implementing partner under the project, AIHA leads the training and monitoring and evaluation components, while AHF provides expertise in clinic operations and management, as well as professional mentors and faculty and substantial amounts of pharmaceuticals and supplies.

Thanks to the Global Fund to Fight AIDS, Tuberculosis and Malaria, both Samara and Saratov oblasts are receiving more reliable supplies of antiretroviral (ARV) medications, which necessitates the rapid training and development of healthcare providers and allied professionals capable of providing treatment, care, and support services to people living with HIV (PLWH) — including the management of often complex ARV regimens.

The Volga River Alliance is supporting Saratov and Togliatti as they work to scale up HIV and AIDS-related treatment and care by — among other things — initiating antiretroviral therapy (ART) for 1,500 individuals living with HIV in these regions by the end of 2007.

Under the project, trainings target HIV/AIDS care teams from local AIDS Centers, as well as infectious disease specialists and other clinical experts from medical institutions that provide care to PLWH.

Trainings commenced in both Saratov Oblast and Togliatti in December 2006. Subsequent training and mentoring courses were conducted in March and April 2007 for clinicians from Togliatti and the cities of Balakovo, Engels, Komsomolsk, and Volsk in Saratov Oblast. Additional activities are planned for May and September.

USAID's Global Development Alliance represents a new approach to implementing the agency's assistance mandate. It mobilizes the ideas, efforts, and resources of governments, businesses, and civil society by forging public-private alliances to stimulate economic growth, develop businesses and workforces, address health and environmental issues, and expand access to education and technology.



Clinicians from Engels City Clinic No. 2 honed their clinical skills during an on-site mentoring course conducted in April.



Practitioners from Saratov Oblast learn about ARV regimens and other care and support services for PLWH during a training course held in April.