



HIV/AIDS Twinning Center

Field Notes

Inside this issue:

ART Training Leads to National Certification for Russian Physicians	2
Media Partners Launch HeartsMinds Campaign in Botswana, Zambia	3
Developing a Cadre of HIV/AIDS Clinical Experts in Russia	4
Association Building Strengthens Nursing in Mozambique	5
Kenya Partners Pilot Families Matter! Program	6
In Zambia, Road-side Clinics Bring Palliative Care to Communities	7
Mozambique PLWH Peer Support Group Awarded \$15,000	7
Conferences, Grants, and Opportunities	8

Twinning Center Partner and Award-winning African Singer "Lily T" Dies in Zambia

AIHA was deeply saddened by the loss of one of our partners, award-winning Zambian recording artist Lily Tembo, known to her fans as "Lily T." Tembo, 27, died September 14 in Lusaka as a result of severe gastritis and anemia.

Born November 20, 1981 in the Kabwe, Zambia, Tembo worked at the Lusaka-based radio station 5FM before pursuing a singing career. She recorded her first album in 2004 and earned a Ngoma Award for best female vocalist for her second in 2006. She was working on her third album at the time of her death.

Tembo collaborated with the Twinning Center through a PEPFAR-funded partnership working to improve HIV/AIDS media coverage and public awareness in Botswana.

Collaborating with partners at the Zambian Institute of Mass Communication (ZAMCOM), the Media Institute of South Africa (MISA) in Botswana, and the University of Kentucky, Tembo recorded a song about HIV/AIDS for the partnership's "HeartsMinds Campaign" in August.

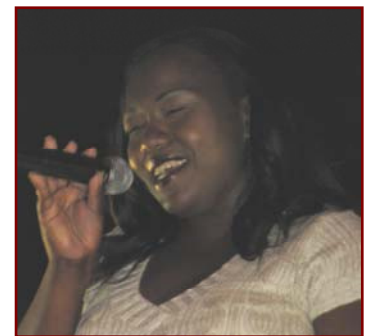
Designed to educate the public about the HIV and help decrease stigma and discrimination, the HeartsMinds Campaign was showcased at the Highway Africa Conference in Grahamstown, South Africa, September 6-8. Tembo attended the event

with AIHA staff and partners. She performed the song with fellow artist, Botswana folklore musician Nitirelang Berman, at the opening reception, singing "Change your hearts, change your minds. Love and care for each other. Don't just hear it on the radio, don't just read it in the paper, don't just see it on TV. Do something about it!"

A passionate AIDS activist, Tembo spoke with conference participants at the HeartsMinds exhibit, challenging them to strengthen reporting on the epidemic.

"Lily Tembo lent her considerable talent and energy to the HeartsMinds Campaign to raise public awareness about HIV," says AIHA Executive Director James P. Smith. "Her dedication and commitment to combating AIDS and improving the lot of people Affected by the epidemic was evident in not only her words, but her actions as well. We had been looking forward to collaborating with her in the year to come and mourn her passing."

ZAMCOM Director Daniel Nkalamo echoed these sentiments, saying, "We are so saddened by the passing of our celebrated singer Lily T. She was creative, passionate, and so involved her own heart and mind in this campaign. Her untimely death is a blow to our efforts, but we can draw strength from her



Lily T. singing "HeartsMinds" in Grahamstown the week before her death.

enthusiasm and passion for the fight against HIV/AIDS and keep working on this most worthwhile cause. I think that is what she would love for us to do."

Thapelo Ndlovu, National Director of MISA/Botswana, mourned his colleague and friend, saying "Lily T. has made an indelible presence in our hearts and in our minds. May her soul rest undisturbed."

"I was privileged to meet Lily at Highway Africa and was especially impressed by her wholehearted embrace of the HeartsMinds Campaign," says Beth Barnes, Director and Professor at University of Kentucky's School of Journalism in Lexington. "She was a marvelous musician and a warm and lovely person. Her contributions to HeartsMinds are immeasurable and I will miss her spirit, enthusiasm, and talent."

ART Training Program Leads to Nationally Accepted Certification in St. Petersburg, Russia



A key objective of AIHA's HIV/AIDS Treatment, Care, and Support Project in Russia is to help transition management of care for PLWH to the primary care level by training clinicians such as infectious disease physician Olga Dunova, who works at Outpatient Clinic No. 107 in St. Petersburg's Krasnogvardeysky District.

With support from Russia's national HIV/AIDS program and international donor organizations such as the Global Fund, availability of antiretroviral medications in Russia has increased dramatically in recent years. To support scale up of high quality HIV treatment and care, including the provision of ART, AIHA began rolling out successful HIV treatment, care, and support models with the support of the American people through PEPFAR and USAID/Russia in 2006.

AIHA's activities focused on the PEPFAR priority regions of St. Petersburg and Orenburg Oblast, largely replicating and expanding on the accomplishments of two USAID-supported partnerships linking healthcare institutions in St. Petersburg and Orenburg with counterparts in New Haven, Connecticut, and New York, New York, respectively. In both regions, training

infectious disease physicians from primary care polyclinics to manage ART for adult patients has a primary focus of AIHA's capacity-building activities, which are now being implemented through its HIV/AIDS Twinning Center Program.

Training on ART for these primary level practitioners reached 100 percent coverage in St. Petersburg — an achievement made all the more impressive by the fact that Pavlov State Medical University has institutionalized the program, issuing a nationally recognized postgraduate education certificate to physicians who complete the 72-hour series of courses.

"The HIV medicine trainings conducted by AIHA in collaboration with the St. Petersburg AIDS Center and other medical institutions throughout the city are very important for professional development of different specialists — not only infectious disease physicians, but also social workers, psychologists, and other members of the multidisciplinary teams that provide care to PLWH," says Dr. Aza G. Rakhmanova, chief infectious disease specialist at the St. Petersburg City Health Committee and deputy director of the St. Petersburg AIDS Center.

"These trainings range from the basic to advanced levels and include lectures and practical sessions. They provide healthcare professionals with comprehensive knowledge of caring for patients living with HIV or AIDS," explains Rakhmanova, who is also a professor at Pavlov State Medical University.

As of October 2009, 80.3 percent of infectious disease

physicians working at district polyclinics in St. Petersburg have completed the series of three courses, which are designed to improve care and treatment for HIV patients.

Pavlov State Medical University has to date issued government certificates to 50 doctors from 16 districts of the city who completed the series, including a five-day course on initiation of ART for adult patients; a two-day clinical mentoring course; and a five-day advanced course, Rakhmanova reports.

For physicians such as Olga Dunova — an infectious disease specialist practicing at the newly organized HIV/AIDS Unit of Outpatient Clinic No. 107 in St. Petersburg's Krasnogvardeysky District who completed all three courses and received certification from Pavlov State Medical University — the advanced knowledge and skills gained through the training is indispensable.

"I found training and onsite mentoring very useful. I believe that a deep understanding of HIV disease and the specifics of treatment for patients living with the virus, as well as hands-on practical experience, significantly influence the attitude of clinicians toward these patients," Dunova explains.

"I refreshed my knowledge about HIV infection and received a lot of new information. In particular, the clinical practicum helped me to better understand my role and responsibility as infectious disease specialist at a district outpatient clinic. I would love to spend more time in clinic with experienced practitioners such as those I trained with to better understand ART regimens and the nuances of treating patients with HIV/AIDS."



AIHA's Twinning Center project in Russia supports some 3,800 patients who are currently receiving ART at pilot sites in St. Petersburg. Sustainability of the program has been enhanced by its institutionalization at Pavlov State Medical University, which issues national certificates of postgraduate education to physicians who successfully complete a three-course training package on the provision of ART for adult patients.

HeartsMinds: A New Approach to Reporting on HIV/AIDS in Botswana, throughout Africa

The HIV/AIDS pandemic has been described as the biggest development challenge facing Africa. Everybody on the continent is — if not infected — affected by the virus in one way or another. HIV/AIDS affects all sectors of the continent's economy, posing the greatest obstacle to economic progress and development. In fact, it is a multi-sectoral problem that requires a multi-sectoral solution in which the mass media play a critical role.

With support from PEPFAR through BOTUSA the Media Institute of Southern Africa (MISA) in Gaborone is working with the Zambia Institute of Mass Communication Educational Trust (ZAMCOM) and the University of Kentucky School of Journalism and Telecommunications in Lexington to implement "HeartsMinds," a campaign designed to improve public access to timely, high quality information on HIV/AIDS by strengthening mass media reporting on the epidemic. The innovative partnership is managed by the HIV/AIDS Twinning Center and supported by PEPFAR through BOTUSA and USAID/Zambia.

"HIV and AIDS is continually evolving, affecting society in new ways. As a result, the media must become proactive and devise new ways to talk about the pandemic to help society fight it," says MISA Botswana National Director Thapelo Ndlovu.

The challenges of HIV stigma and discrimination have been described as pandemics in and of themselves, Ndlovu continues, noting, "Stigma is making people shy away from life-saving facilities and services. People hide their HIV status and live in denial because of the shame that would come if others knew they were living with the

virus. This, and a whole host of other problems, represents just some of the challenges we face as a society."

The goal of HeartsMinds is to raise the quality of HIV/AIDS reporting in Africa. To accomplish this, partners are working to motivate reporters, while at the same time engaging a broad range of NGOs, community and faith-based organizations, and international development agencies in a concerted effort to change the way people receive and react to information about HIV/AIDS. This includes providing training workshops for media professionals, as well as workshops on how to effectively engage with journalists for NGOs and other stakeholders.

To spread the spirit of HeartsMinds throughout the region, partners commissioned an original song with the powerful message to "change your heart, change your mind," which was recorded by Botswana musician Berman and the late Zambian artist Lily T. They showcased the campaign, song, and related materials at the 2009 Highway Africa Conference in Grahamstown, South Africa, September 6-8.

Mwiika Malindima, a lecturer and HIV/AIDS and Gender Media Specialist at ZAMCOM, agrees with Ndlovu, explaining that the media has a huge role to play in the fight against the pandemic — if they will rise to the challenge. "HIV and AIDS has been a presence in Africa for more than 25 years now and there is ever-increasing media fatigue in dealing with news related to the epidemic," Malindima says.

"Reporters and editors feel there is nothing more to say about it, but this is at odds



Twinning Center partners and staff prepare for the launch of the HeartsMinds Campaign at Highway Africa, a pan-African media conference, which was conducted in Grahamstown, South Africa.

with the magnitude of the pandemic's impact on society, not to mention advances in medical treatment, which represent a source of exciting new material for journalists and hope for people living with HIV."

According to Beth Barnes, director of the University of Kentucky School of Journalism and Telecommunications, "The HeartsMinds Campaign is really all about changing people's perceptions, or hearts, by putting a human face on HIV by encouraging people living with the virus to share their stories. At the same time, there is still the need to provide accurate information to help overcome prevailing misconceptions and change people's mindset about HIV and AIDS. This combination of human-based informative reporting is a primary focus of HeartsMinds."



Mwiika Malindima and Justina Phiri of ZAMCOM and Thapelo Ndlovu of MISA/Botswana staff the partners' exhibit at Highway Africa.



Lily T. and Berman sing the Hearts and Minds theme song at Highway Africa's opening reception. Sadly, Lily T. died near her home in Lusaka soon after the event.

Public-Private Partnership Develops Cadre of Russian Clinical Leaders in HIV Medicine



Dr. Olga Shirobokova, an infectious disease physician at Samara Oblast AIDS Center, shares her thoughts during a Russia Professional Development in HIV Medicine Program workshop. The public-private partnership provides advanced training and professional development opportunities to young Russian physicians who provide treatment to PLWH.

With a caseload of 2,200 HIV patients — 260 of whom currently receive highly active antiretroviral therapy (HAART) — saying that Dr. Natalia Kusheva is busy is a gross understatement.

“The epidemiological situation in Russia cannot be characterized as positive,” says the 34-year-old infectious disease specialist at Chelyabinsk Oblast AIDS Center.

“We’re seeing an increase in the number of patients. HIV is affecting more age and social groups now, yet stigma has not decreased at all... really, the demand is very great,” she explains.

At Sverdlovsk Oblast AIDS Center in Ekaterinburg, Dr. Elena Romanchenko, 31, also an infectious disease specialist, paints a similar picture.

“In my district, we have 3,100 officially registered people living with HIV and 2,300 come to Center,” she reports, noting that 380 of these patients are on ART.

“I see anywhere from 25 to 50 patients daily, which is really overwhelming at times. Every month we register 45-70 people with low CD4 cell count, which at least means that our prevention and outreach work in

schools, universities, and other parts of the community is having a positive effect,” Romanchenko says.

Dr. Olga Shirobokova, 34, an infectious disease physician at Samara Oblast AIDS Center, has also noticed changes in the face of the epidemic.

“Increased drug use has led to an equivalent increase in people living with HIV throughout the country,” she says. “Unfortunately, more and more people who seek treatment are already at the AIDS stage. We’re also seeing more people over the age of 50, as well as many more infected pregnant women ... women in general, for that matter,” she admits.

With funding from PEPFAR through USAID/Russia, a public-private partnership between AIHA and GlaxoSmithKline (GSK) is working to provide advanced training and support to young Russian clinicians such as these, bolstering their ability to provide comprehensive, high quality care to people living with HIV/AIDS in Russia.

Launched in October 2007, the goal of the “Russia Professional Development in HIV Medicine Program” is to foster a cadre of HIV/AIDS experts and opinion leaders capable of expanding Russia’s clinical knowledge base on HIV treatment and care.

In the second year of the program’s activities, 24 competitively selected clinicians from 19 Russian regions continued to improve their knowledge and expertise in HIV/AIDS treatment and care through a series of workshops led by international faculty and Russian specialists.

These skills-building sessions focused on topics including managing patients co-infected with tuberculosis, hepatitis B and C, cytomegalovirus, herpes, and other opportunistic infections.

Participants also learned about drug resistance and switching treatment regimens; improving adherence among patients who are active drug users; defining treatment failure; and looking into HIV drug resistance and side effects and interactions of ARVs and other commonly used medications.

In 2008, participants provided ART to 3,750 adults and PMTCT services to 356 pregnant women. By December 2009, those numbers are projected to increase to 5,453 and 733 respectively, thus demonstrating the significant impact the program is having on the accessibility of quality HIV care and treatment in Russia.

Kusheva, Romanchenko, and Shirobokova all report increased clinical knowledge and confidence in their ability to provide high quality, evidence-based care to people living with HIV or AIDS.

“The program has improved my overall knowledge, which allows me to respond better to my patients,” Romanchenko explains.

“I am more confident in treating various conditions, such as cryptococcal meningitis and toxoplasmosis, and I’m also better at defining side effects and switching therapy regimens. I have also been working more closely with psychologists to find ways of providing effective psycho-social support for patients.”

“The program has improved my overall knowledge, which allows me to respond better to my patients. I am more confident in treating various conditions, such as cryptococcal meningitis and toxoplasmosis, and I’m also better at defining side effects and switching therapy regimens.”

— Dr. Elena Romanchenko, Infectious Disease Specialist, Sverdlovsk Oblast AIDS Center, Ekaterinburg.

Working to Improve Nursing in Mozambique by Strengthening National Professional Association

Mozambique is home to some 21.6 million people, roughly 12.5 percent of whom are living with HIV, according to UNAIDS. Life expectancy in this African nation is slightly more than 41 years and the chances of contracting an infectious disease, such as HIV, TB, or malaria are very high.

Like other countries in Africa, Mozambique's health system is gravely overstretched. Last June, Mozambican Minister of Health Dr. Ivo Garrido reported that there were 925 physicians currently practicing in Mozambique, which translates to one doctor for every 23,000 inhabitants. Nurses are more plentiful — there are some 4,000 — the equivalent of one per every 5,400 people.

Mozambican nurses work in one of five types of health-care institutions. These range from the country's three Central Hospitals — tertiary care facilities located in Maputo, Beira, and Nampula — to Provincial Hospitals, General Hospitals, Rural Hospitals, and Health Centers, then finally down to Health Posts, which are the most geographically remote. Nurses with the least experience generally work at Health Posts, Health Centers, and Rural Hospitals.

Although nurses are likely the first healthcare worker to see a patient, as medical professionals, nurses are not viewed in a positive light. For the most part, physicians treat them like handmaidens rather than a valuable member of the healthcare workforce. Society makes little or no distinction among nurses and lower-level caregivers — a practice that is reinforced by the mass media who regularly refer to ancillary health workers as nurses. And, nurses

themselves contribute to the problem by harboring negative views of counterparts who work at different levels of the system.

Against this backdrop, Twinning Center partners at the Associação Nacional dos Enfermeiros de Moçambique (ANEMO) — the National Mozambique Nurses Association — and St. Luke's Hospital School of Nursing at Moravian College in Pennsylvania are working together to strengthen the nursing profession in Mozambique.

Established in late 2008 with support from PEPFAR and CDC/Mozambique, the partnership focuses on building ANEMO's capacity as a membership and advocacy organization.

To date, partners have conducted three professional exchanges. During the initial exchange to Mozambique in January 2009, they performed an assessment and situational analysis, which helped direct their goals and strategies for the first year of collaboration.

In March-April, ANEMO President Matilda Basilio and Executive Director Lidia Modlane were accompanied by Olga Novela, Nursing Director at the Mozambican Ministry of Health, on an exchange to St. Luke's Hospital School of Nursing in Bethlehem, Pennsylvania. During their stay, delegates visited a host of local health-care institutions. They also traveled to the state capital of Harrisburg where they met with representatives from the State Board of Nursing and the Pennsylvania State Nurses Association.

A delegation from St. Luke's traveled to Mozambique in July to participate in ANEMO's regional conference in

Inhambane, as well as to provide technical assistance with developing ANEMO's business plan and budgeting.

Throughout the year, the partners have worked to increase ANEMO's visibility; strengthen its linkages with national and provincial health ministries; and redefine its business plan. They have also focused on developing membership recruitment and retention criteria.

ANEMO currently boasts a membership of some 2,500 nurses nationwide, but the majority of these do not pay the organizational dues of US \$1 per month. This is one of the many issues that ANEMO is dealing with as it seeks to build itself into a viable nursing organization.

ANEMO will celebrate its 25th anniversary this December, hosting a gala event. Together, partners are laying the groundwork to ensure the organization has the capacity it needs to help nursing in Mozambique grow and thrive in the decades to come.

In 2009, a reported 4,000 nurses were working in Mozambique — the equivalent of one nurse for every 5,400 people living in the country.

These nurses — 17 percent of whom are living with HIV themselves — face many challenges as they provide front-line care to patients.

ANEMO is striving to strengthen nursing as a profession and empower nurses with opportunities for continuing education, development, and support.

Their Twinning Center partnership is helping ANEMO build its own organizational capacity so it can better meet it's goal of improving nursing care in Mozambique.



ANEMO/St. Luke's partners Michele August Brady, Matilda Basilio, Olga Novela (Mozambican Ministry of Health Nursing Director), Romao Xavier (AIHA/Mozambique), Lori Hoffman, Lidia Modlane, and Maria Schantz during a Spring 2009 exchange in Pennsylvania.

Since 2006, the MLRC Program delivered through KEC-CS Commission for Education and Religious Education has reached 263,166 primary school pupils between the ages of 10-14 with their faith-based ABY intervention in Kenya. The program has also trained 2,422 teachers and is being implemented in 1,541 schools across the country.

Kenya Partners Launch Families Matter! Program to Complement School-based ABY Intervention

Twinning Center partners from the Kenya Episcopal Conference Catholic Secretariat (KEC-CS) in Nairobi and DePaul University in Chicago piloted the Families Matter! Program in May-June 2009, training a group of 33 parents whose children attend two primary schools in Machakos Diocese.

Families Matter! is an evidence-based intervention designed to educate parents, guardians, and caregivers of children between the ages of 9 and 12 about sexuality, HIV and STIs, drug and alcohol

abuse, peer pressure, and other issues young people confront. The program focuses on positive parenting, arming caregivers with the knowledge and skills they need to more effectively communicate about these sensitive, often taboo, topics.

This pilot training marked the culmination of more than two years of multilateral collaboration to adapt the CDC-developed "Parents Matter!" Program for use in Kenya.

Families Matter! complements the highly successful school-based Abstinence and Behavior Change for Youth (ABY) intervention — Making Life's Responsible Choices (MLRC) — that partners have already delivered to some 263,166 primary school pupils in more than 1,500 schools spanning Kenya with the support of PEPFAR through CDC/Kenya.

"We were first exposed to the Families Matter! Program when some of our staff were trained as facilitators in 2007 and 2008 through CDC in Nairobi," recalls Augusta Muthigani, National Executive Secretary of the KEC-CS, Commission for Education and Religious Education.

That introduction planted a seed that partners carefully nurtured for nearly two years, working together "through a very careful, thorough, thoughtful, and collaborative process to ensure that we developed and implemented a culturally appropriate intervention," says DePaul University Professor Dr. Gary Harper.

"While adapting the program to both a Kenyan and Catholic context, we worked carefully to maintain the scientific integrity of intervention," he continues, explaining that partners began the process in earnest in January 2008,

working closely with CDC staff in Kenya and the United States, as well as members of an expert advisory board that included specialists from the Institute of Tropical Medicine in Antwerp, Belgium and the Kenya Medical Research Institute.

According to Harper, the program's potential to have an impact at the individual, family, and community levels necessitated extensive training to ensure that the facilitators had the proper training, as well as that all community stakeholders were educated about Families Matter! prior to the launch.

Post-intervention surveys show that parents who attended the pilot training in Machakos are universally supportive of the program. Nearly all the participants reported that they felt better able to establish an open, trusting dialogue about HIV, human sexuality, and other sensitive topics with their children, and 97 percent said they felt the program should be widely implemented.

"The importance of getting families to talk about human sexuality and other key topics — to really communicate about these things — cannot be emphasized enough," says DePaul University Associate Professor Dr. Alexandra Murphy, who helped facilitate the pilot training.

"It was truly inspiring to see how passionate these parents were ... to see the difference Families Matter! was already making in their lives. It felt like we were witnessing a real cultural change in the making," Murphy says.

Muthigani agrees.

"For us," she concludes, "Launching this program was like a dream come true!"



Some of the parents and children participating in one of the Families Matter! Program sessions piloted by partners at St. Mary's Primary School for Boys in Machakos Diocese.



A group of Kenyan and US partners pose with some of the parents at the pilot training in Machakos Diocese.

In Zambia, Road-side Clinics Bring Palliative Care into the Community

Access to palliative care in Zambia and much of Africa is inadequate due to many factors.

There are a limited number of hospices and other palliative care providers. Most health-care professionals and other caregivers lack knowledge and a clear understanding of palliative care and how they can link patients with existing services. And, many times, opiates and other necessary painkillers are unavailable or even illegal.

All too often, patients in rural areas cannot access critical health services — including palliative care — for extended periods of time due to impassable roads during the rainy season. In Zambia, the rainy season can last as long as six months, making it nearly impossible for many people to get the care and support they so desperately need.

In 2005, with support from PEPFAR through USAID/Zambia, the HIV/AIDS Twinning Center launched a partnership between the Lusaka-based Palliative Care Association of Zambia (PCAZ) and the African Palliative Care Association (APCA) in Kampala, Uganda.

Since then, the partners have worked to make PCAZ the preeminent palliative care advocacy organization in Zambia. They've also focused on elevating palliative care on the national healthcare agenda and ensuring patients have access to high quality care, appropriate medications, and other forms of support during an illness or at the end of life.

PCAZ provides informational workshops to inform health-care providers and members of the community about palliative care and conducts skills-based trainings for caregivers. One institution that has been strengthened through PCAZ's training and human resource capacity building activities is Jon Hospice in Lusaka.

Earlier in 2009, staff from Jon Hospice attended a training on the "Road-side Model of Delivering Palliative Care" conducted jointly by PCAZ and Catholic Relief Services.

Inspired, and armed with the right knowledge and technical skills, they launched their own road-side clinics in the Kanyama, Chawama, and John Leing compounds. Designed to overcome one of the major barriers clients who

need palliative care face — access to services — the road-side clinics bring care directly to the community.

Hospice workers inform clients in advance of when they will be traveling to their communities and a palliative care team comprised of a nurse, clinical officer, and trained caregivers arrive on those dates at a set location close enough to provide easy access to those who need care and services.

"The road-side clinics have benefited our clients because the services are brought close to their communities," says Emelia Mwemba, Hospice in Charge at Jon Hospice. "Even those who are unable to come to the hospice during the long rainy season due to impassable roads are able to access palliative care at our road-side clinics."

With this model, Jon Hospice provides palliative care to an average of 15 clients per visit. This is indeed one of the many strategies palliative care providers are implementing in their efforts to provide palliative care as they strive to improve the quality of life of the clients with life-limiting illnesses.

"The road-side clinics have benefited our clients because the services are brought close to their communities. Even those who are unable to come to the hospice during the long rainy season due to impassable roads are able to access palliative care at our road-side clinics."

*— Emelia Mwemba,
Hospice in Charge,
Jon Hospice,
Lusaka, Zambia.*

US Embassy in Mozambique Awards Esperanza VCT Support Group \$15,000 Grant

Twinning Center partners from Esperanza-Beluluane Voluntary Counseling and Testing Center's patient support group received a \$15,000 grant from the US Embassy in Mozambique to assist with their efforts to become a nationally registered organization.

The VCT Center operates a "prevention with positives"

program in partnership with the University of California - San Francisco with support from PEPFAR and CDC/Mozambique.

The support group conducts bi-weekly peer meetings for PLWH with the goal of preventing re-infection and co-infection of HIV among those already living with the virus, as well as among sero-

discordant couples. The group currently has 35 members and a long waiting list of others in the community who would like to join.

Partners are working with the group to strengthen its capacity and assist with ideas for generating income to support their activities, including official registration as a Mozambican NGO.

Conferences, Grants, and Opportunities



22nd Annual Conference of the Association of Nurses in AIDS Care

Nov. 19-22, 2009
Jacksonville, USA

IAPAC '09: Unity in Action

Nov. 29-Dec. 1, 2009
New Orleans, USA

5th SAHARA Conference on the Social Aspects of HIV and AIDS

Nov. 30-Dec. 3, 2009
Johannesburg, South Africa

2nd International Conference on Infectious Disease (EPIDEMICS 2)

Dec. 2-4, 2009
Athens, Greece

Medical Management of HIV/AIDS

Dec. 3-5, 2009
San Francisco, USA

5th African AIDS Vaccine Forum

Dec. 13-15, 2009
Kampala, Uganda

1st Conference on Update of HIV/AIDS in Africa

Dec. 14-17, 2009
Accra, Ghana

4th Africa Conference on Sexual Health and Rights

Feb. 9-12, 2010
Addis Ababa, Ethiopia

2010 National STD Prevention Conference

March 8-11, 2010
Atlanta, USA

14th International Conference on Infectious Diseases (ISID)

March 9-12, 2010
Miami, USA

37th Annual Global Health Council Conference

June 14-18, 2010
Washington, DC, USA

XVIII International AIDS Conference

July 18-23, 2010
Vienna, Austria

HIV/AIDS Twinning Center

American International Health Alliance

1250 Eye Street, NW
Suite 350
Washington, DC 20005

Phone: 202.789.1136
Fax: 202.789.1277

Visit us on the Web at

www.TwinningAgainstAIDS.org

The HIV/AIDS Twinning Center mobilizes and coordinates the resources of healthcare and allied professionals in the United States and abroad to effectively build capacity to reduce HIV infection rates and provide care to those infected with, or affected by, HIV/AIDS in support of the President's Emergency Plan for AIDS Relief (PEPFAR).

Funded by PEPFAR through a cooperative agreement with the US Department of Health and Human Services, Health Resources and Services Administration, the Twinning Center is a project of the American International Health Alliance, a US-based nonprofit dedicated to helping limited-resource communities make positive, sustainable changes that improve accessibility to a broad range of high-quality healthcare services and preventive programs.

The contents of this newsletter are the responsibility of AIHA and the Twinning Center and do not necessarily reflect the views of the United States government or other funding agencies.

