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HRSA Awards New Twinning Program Cooperative Agreement to AIHA

AIHA announced on March 18 that it will continue to manage, strengthen, and expand its Twinning Center Program in support PEPFAR thanks to a new 5-year cooperative agreement with the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services.

"We're thrilled to continue our collaboration with HRSA to provide improved facilitation, management, and technical support for the formation of country-driven, country-owned, and locally sustainable HIV/AIDS responses," says AIHA Executive Director James P. Smith.

AIHA's twinning model uses institution-to-institution partnerships and peer-to-peer relationships to benefit both sides, emphasizing professional exchanges and mentoring for effective knowledge sharing.

With support from PEPFAR, HRSA, and US Government agencies in target countries, AIHA has established 51 partnerships and placed more than 105 highly skilled health and allied professionals in long-term volunteer assignments since the Twinning Program's inception in 2004.

"Over the past 10 years, AIHA has built successful, mutually-supportive relationships with health-sector stakeholders, from

national ministries and schools of the health professions to hospitals, clinics, and grassroots NGOs, in host countries," Smith says.

"Under the leadership of Program Director Carl Henn, we'll work to strengthen these relationships to better ensure that twinning projects promote local ownership and create synergy with host country goals from day one."

Through the new award, AIHA will expand its current twinning and volunteer activities in sub-Saharan Africa and the Caribbean Region to support PEPFAR's strategic vision to create an AIDS-free generation by bolstering existing projects and developing new initiatives that address gaps in HIV-related services.

This includes sharpening our focus on addressing the unmet needs of people living with HIV/AIDS, orphans and vulnerable children, and most at risk populations, as well as increasing integration of gender issues into partnership activities.

AIHA will continue to support partnerships that help expand access to care through health systems strengthening and expanded training of human resources for health, particularly the development and integration of new mid-level cadres, such as clinical associates, pharmacy techni-

cians, and social welfare assistants.

Other areas of focus will be supporting specialized training to incorporate HIV in emergency medicine and obstetrics and strengthening allied fields like laboratory science and biomedical technology, which play critical roles in quality HIV care.

Based on country demand, AIHA will also engage key strategic partners, including the University of Wisconsin Global Health Institute, the National Alliance of State & Territorial AIDS Directors, and the South African Cochrane Centre, who will provide targeted technical assistance in areas such as continuous quality improvement; program integration into national frameworks; and evidence-based clinical practices.

"During the next five years, our goal is to create the requisite capacity to manage twinning projects locally, whether at the country or regional level," Smith explains, concluding, "This represents the ultimate outcome we hope to achieve through all our twinning partnerships — that they have attained and can sustain a level of institutional and human resource capacity that enables them to respond effectively to the health needs of the communities they serve."

Systematic Counseling & Testing Gets More Patients Enrolled in Care in Sofala Province

With an average of 1,200 patients seeking care at Catholic University of Mozambique's São Lucas Health Center in Beira each month, staff and volunteers work tirelessly to ensure that HIV-positive patients have adequate counseling before and after testing, as well as during the treatment.

Staff recognize counseling and testing is not only the gateway to treatment and support for people living with HIV, it is also crucial for improving outcomes and quality of life through adherence to care regimens.

Under the leadership of Clinical Director Dr. Elpidio Demetria, HIV/AIDS Program Coordinator Dr. George Peter manages HIV treatment, care, and support services at São Lucas Health Center, overseeing the work fourth and fifth-year students on rotation from the University's School of Medicine, as well as a dedicated group of volunteers from neighboring communities.

Over the last year, the São Lucas team has systematically scaled up its counseling and testing initiatives as a way to engage patients in an open discussion about HIV, get them tested, and — for those who test positive — get them enrolled in treatment and ongoing care as soon as possible.

"Our goal was to assist more patients living with HIV and enroll them in ART," says Dr. Peter, describing their

strategy of using the medical students and community-based counselors to inform and support patients prior to testing, after the results are delivered, and throughout the treatment period.

"This strategy has proved very effective because most of the patients start ART with solid knowledge and they continue to benefit from ongoing counseling while on treatment," Dr. Peter says.

He goes on to share the story of one of his patients, a 31-year-old woman who was diagnosed positive during her pregnancy with a CD4 count of less than 180. With immediate treatment and ongoing counseling, she gave birth to a healthy baby.

"Today, her CD4 count is 487. She is still on medication and is healthy and happy taking care of her child," Dr. Peter says.

Word of patients like this woman and others who were known to be frail and constantly ill, but are now healthy and robust after enrolling the São Lucas ART program helps reduce stigma and encourages people to seek testing and treatment, he explains, stressing that continuous counseling during treatment helps keep patients adherent even when they start feeling well again.

"We even follow up with patients who have dropped out of care through mobile phones and home visits," he points out.

Between October 2013 and March 2014, São Lucas staff have on average provided counseling and testing services to 458 patients each month, enrolling 42 in pre-ART care and 36 in ART monthly.

Dr. Peter sums things up, saying, "What patients like about our health center is the quality of treatment we provide and the humanity and continuous counseling they get from our students and volunteers."

The São Lucas Health Center was established with support from the PEPFAR and the CDC in Mozambique through a twinning partnership established by AIHA in 2006.

The partnership linked Catholic University of Mozambique with the University of Pittsburgh to strengthen Mozambique's healthcare workforce by providing in-service training in HIV/AIDS care to mid- and lower-level caregivers, as well as opening a model clinic that also serves as a practical training site.

Through this highly successful partnership, institutional and human resource capacity has been sufficiently built at Catholic University's campus in Beira to allow AIHA to continue providing direct funding and support for their medical education and treatment and care activities.



Thanks to support from PEPFAR and CDC in Mozambique, AIHA partners at São Lucas Health Center at Catholic University's Beira campus has been able to ramp up HCT in an effort to engage people living with HIV in a care and treatment program earlier in Mozambique's Sofala Province.

"Our goal was to assist more patients living with HIV and enroll them in ART. This strategy has proved very effective. ... We even follow up with patients who have dropped out of care through mobile phones and home visits."

— Dr. George Peter, HIV/AIDS Program Coordinator, São Lucas Health Center.

Biomedical Engineering & Technology Partners Build Sustainable Training Capacity in Ethiopia

In low-income countries around the world, more than 95 percent of the medical equipment found in hospitals is imported.

Unfortunately, much of this equipment is out of service, but could be easily repaired at minimal cost by trained professionals. Some 85 percent of Africa hospitals surveyed by experts from Carleton University in Canada indicated that their medical device maintenance services had trouble finding qualified engineers and technicians locally.

To a great extent, biomedical engineers and equipment technicians in low-income countries are affected by the same challenges that doctors and nurses face, including inadequate numbers of qualified personnel to meet existing needs, limited educational opportunities, lack of on the job training, absence of regulatory bodies, brain drain to higher-income countries, and competition with the private sector for the limited pool of skilled professionals.

AIHA launched a partnership in January 2013 to engage multiple education institutions in the United States and Ethiopia to rapidly train new

biomedical engineers and equipment technicians, as well as to support the ongoing continuing education needs of existing biomedical technology professionals working in the country.

By linking Jimma University and Tegbare-id with Rice University and Texas Children's Hospital, AIHA is helping the Ethiopian partners build their capacity to produce biomedical engineers and technicians capable of meeting the country's burgeoning demands.

Partners are working together to strengthen pre-service biomedical engineering and equipment technician training programs at both the bachelor and diploma levels by updating curricula, training faculty, and providing evidence-based learning resources.

They are also collaborating to expand local capacity to manage and maintain critical medical equipment through the expansion of practical in-service training opportunities and to establish standardized protocols and processes to ensure ongoing equipment maintenance at the health facility level.

Recently, the US partners

traveled to Ethiopia to conduct two skills-building workshops.

The first, conducted May 19-26, was a week-long Biomedical Engineering Troubleshooting Workshop that was attended by some 83 faculty members and students from local partner institutions, Tegbare-Id Polytechnic College and Jimma University. Biomedical technicians from Debre Berhan Referral Hospital also participated in the training.

This workshop focused on safety and maintenance procedures for anesthesia, defibrillator, and autoclave equipment, as well as for ECG machines.

Rice University partners then conducted a week-long Active Learning Strategies Workshop May 26-31, which was attended by a total of 65 faculty members from various Ethiopian health sciences, agriculture, natural sciences, and engineering schools.

This twinning alliance is supported by PEPFAR and CDC/Ethiopia. It is the first PEPFAR-supported biomedical services strengthening partnership in all of Africa.



With support from PEPFAR and CDC/Ethiopia, experts from Rice University and Texas Children's Hospital traveled to Ethiopia in May to conduct two workshops.

UCLA Conducts Quality Improvement and Research Skills Exchange for Mozambican Team

Three AIHA partners from Edward Mondlane University's Maputo Central Hospital participated in a one-week conference on quality improvement and research methods at UCLA.

As a result of the training, the University is adapting the course and will deliver it to

their entire pediatric department, which includes 45 pediatricians, residents, and nurses.

Partners are also developing a separate research course that will help train healthcare providers in the basics of evidence-based research methods.

In fact, the professional exchange was such a success that partners have decided to extend their collaboration to include pediatric radiology training. They also plan to increase the number of student exchanges in the future.



Together, partners are working to improve pediatric care, including surgical services, at Maputo Central Hospital in Mozambique.

Partners are focusing on training specialists capable of providing quality care to PLHIV and those afflicted with other communicable diseases that pose a public health concern. This program is a model that can be readily replicated elsewhere in the Caribbean Region.

University of the West Indies Launches Regional Infectious Disease Fellowship Program

AIHA twinning partners at the University of the West Indies (UWI) Mona Campus in Jamaica recently secured final approval for the Regional Infectious Disease Fellowship Program they developed jointly with the University of South Carolina School of Medicine in Columbia.

The groundbreaking new program, which commenced in January 2014 at UWI's Mona (Jamaica) campus, was

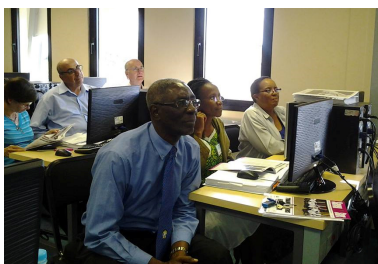
officially approved by the university's Faculty of Medical Sciences Graduate Studies Committee, the Mona Campus Graduate Studies Board, and the Graduate Studies Board for all UWI campuses in October 2013.

With support from PEPFAR and HRSA, AIHA launched this twinning partnership late in 2011, marking our entry into the Caribbean region. At that time, there was only a single

infectious disease specialist in Jamaica.

Together, partners developed this postgraduate training program to build regional capacity to train clinicians to provide improved treatment to people living with HIV, as well as those afflicted with other communicable diseases that pose a public health concern in Jamaica and elsewhere in the Caribbean.

AIHA Continues Evidence-based Clinical Practice Training Series in Namibia



Some 24 health and allied professionals from Southern Africa attended an evidence-based practice workshop conducted by AIHA at the University of Namibia School of Medicine in April.

AIHA recently conducted a workshop on evidence-based practice (EBP) for some 24 health and allied professionals from the Polytechnic of Namibia and the Consortium of New Southern African Medical Schools in Namibia, Mozambique, Botswana, Lesotho.

Held at the University of Namibia School of Medicine April 7-14, the training was the second in a series of PEPFAR-supported EBP trainings conducted in Namibia through our comprehensive Knowledge Management Program (KMP).



Participants were mainly academics, clinicians, researchers, pharmacists, nurses, librarians, and MPH students, according to epidemiologist and AIHA EBP Consultant Dr. Omar Abdulwadud, who served as one of the facilitators.

"The workshop aimed to enhance participant knowledge, understanding of, and capacity to apply EBP in practice, as well as to

improve the quality of patient care," he explains.

Training sessions, which combined presentations, interactive discussions, activities, learning opportunities, and experience sharing, were led by Dr. Abdulwadud; Elizabeth Pienaar, a Senior Scientist at the South African Cochrane Centre; and Sailas Nyareza, AIHA's Regional Coordinator for Learning Resources.

Several topics — including the principles of evidence-based medicine, the five steps to support EBP, the hierarchy of evidence, and how to formulate a clear clinical question — were covered.

Additionally, participants learned about systematic reviews, the Cochrane Library, and resources such as HINARI. They also discussed evidence based clinical practice guidelines and strategies for integrating EBP into undergraduate medical education curricula.

At the conclusion of the

four-day workshop, the facilitators asked participants to complete a self-administered questionnaire to provide feedback on the learning experience.

"The questionnaire consisted of both open-ended and close-ended questions," explains Dr. Abdulwadud, noting that 18 of the 24 workshop participants completed the evaluation tool.

"Overall, the feedback indicated that the training was very successful. Participants reported that the workshop was well-structured, that the sessions were very relevant to their work, and that they learned a great deal about EBP," Dr. Abdulwadud concludes.

With PEPFAR support, AIHA's KMP helps partners build sustainable institutional and human resource capacity by supporting open exchange of knowledge, information, and experience within the context of HIV/AIDS treatment, care, and support services.

Tanzania Partners Conduct Nursing Quad Meeting in Dar es Salaam

AIHA's Tanzania Nursing Initiative (TNI) partners met in Dar es Salaam on Jan. 9 to share crucial updates on a number of issues related to this dynamic, multi-pillared project to strengthen the nursing profession.

Nurses constitute Tanzania's largest healthcare workforce and TNI has adopted a four-pronged approach called the Nursing Quad to bolster the profession by addressing:

- Nursing education and practice;
- Regulation and licensure;
- Association building and advocacy; and
- National-level leadership and policy.

Key topics discussed during the one-day Nursing Quad meeting included project priorities for the coming year, the Nursing Strategic Plan, feedback from donors, the pilot nursing education tablet project, nursing absorption interventions, and faculty development.

"Working together, we feel we are going to effectively upgrade nursing and, by extension, overall healthcare service delivery in Tanzania," said US partnership coordinator Sandra McCormick, President and Chief Executive Officer of World Services of La Crosse, Inc. "We are very appreciative for the support PEPFAR, CDC/Tanzania, and

AIHA provide for TNI. It's what makes this collaboration possible and successful."

TNI evolved from a twinning partnership established in 2005 to strengthen nursing education and integrate HIV/AIDS care into training curricula used by Tanzania's nursing schools. Partners trained some 300 nurse tutors to deliver the new material, which is currently being implemented at more than 70 nursing schools throughout the country.



AIHA's Tanzania Nursing Initiative convened a meeting of Nursing Quad representatives in Dar es Salaam to chart a course of action for the project in 2014.

AIHA's TNI Stakeholders Include:

- Muhimbili University of Health and Allied Sciences School of Nursing
- World Services of La Crosse, Inc.
- Winona State University College of Nursing
- Tanzania Ministry of Health and Social Welfare Nursing Training Unit
- Tanzania Ministry of Health and Social Welfare Chief Nurses Office
- Tanzania National Nurses Association
- Tanzania Nurses and Midwives Council

South Africa Clinical Associates Program Featured in PEPFAR Calendar

AIHA's PEPFAR-supported Clinical Associates partnership that links Walter Sisulu University with the University of Colorado at Denver was showcased in PEPFAR's 2014 calendar.

The calendar features a photo of Sihle Lawana, one of the country's first Clinical Associates, interviewing a patient at Victoria Hospital in Alice, Eastern Cape Province.

"I began working as a Clinical Associate on January 3, 2011. At that time, there were only

eight doctors at the hospital, so I know that they really appreciate the work we are doing," she explains.

"I think the training I received at Walter Sisulu has prepared me to make a difference. This is important to me because I want to be recognized as a skilled professional within the hospital. It's also my goal to help improve the quality of care for people, especially the elderly and those with chronic conditions like HIV who live in rural areas," Lawana says.

Clinical Associates are similar to Physician Assistants in the United States. This mid-level cadre was developed by South Africa's National Department of Health in response to the country's critical shortage of trained human resources for health.

Walter Sisulu was the first South African university to offer the program, accepting its initial cohort of students in 2008. Their partnership with the University of Colorado was established in February 2010.



Since 2010, AIHA has established three Clinical Associates twinning partnerships in South Africa to strengthen local capacity to train this mid-level medical cadre.

Conferences and Opportunities



Joint Council on International Children's Services 38th Annual Child Welfare Symposium

April 7-9, 2014
San Francisco, CA, USA

2014 Global Health & Innovation Conference

April 12-13, 2014
New Haven, CT, USA

Canadian Association of Nurses in AIDS Care 2014 Conference

April 24-26, 2014
Winnipeg, Manitoba, Canada

Ecumenical Pharmaceutical Network Forum 2014

April 28-30, 2014
Nairobi, Kenya

The 3rd World Congress on Controversies in the Management of Viral Hepatitis

May 3-4, 2014
Berlin, Germany

5th Annual CUGH Global Health Conference

May 10-12, 2014
Washington, DC, USA

26th Annual National Conference on Social Work and HIV/AIDS

May 22-25, 2014
Denver, CO

9th International Conference on HIV Treatment and Prevention Adherence

June 8-10, 2014
Miami, FL, USA

6th Conference on Peer Education, Sexuality, HIV & AIDS

June 18-20, 2014
Nairobi, Kenya

CCIH 28th Annual Conference Transforming Lives: Christians in Global Health

June 20-23, 2014
Arlington, VA, USA

Social Work: Courage, Hope & Leadership

July 23-26, 2014
Washington, DC, USA

20th International AIDS Conference (AIDS 2014)

July 20-25, 2014
Melbourne, Australia

American Association of Colleges of Pharmacy Annual Meeting

July 26-30, 2014
Grapevine, TX

AfricaHI 2014: 3rd IASTED African Conference on Health Informatics

September 1-3, 2014
Gaborone, Botswana

2014 Southern African HIV Clinicians Society Conference

September 24-27, 2014
Cape Town, South Africa

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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.

