

HIV/AIDS Twinning Center



Field Notes

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Twinning Center Launches Second Clinical Associates Partnership in South Africa

AIHA announced on June 10 the formation of its second clinical associates partnership in support of PEPFAR's efforts to build health system capacity in South Africa.

Established with support from CDC/South Africa and in close cooperation with the South Africa National Department of Health, this HIV/AIDS Twinning Center partnership links the University of the Witwatersrand in Johannesburg with Emory University School of Medicine's Physician Assistant Program in Atlanta.

Partners are working together to strengthen Witwatersrand's Clinical Associates Program, which was launched under the Faculty of Health Sciences and Centre for Rural Health in 2008.

The partnership will focus on building the capacity of faculty and clinical supervisors to train students in the Clinical Associates Program at Witwatersrand in the provision of quality medical care — including ART and treatment for opportunistic infections — to people living with HIV or AIDS in rural areas in South Africa.

Students complete their clinical training in rural areas of South Africa's Northwestern Province, where many of them will serve after completion of the three-year program.

This is the Twinning Center's sixth partnership in South Africa and the second established this year to bolster the

capacity of local universities to train clinical associates.

Emory University School of Medicine has a strong history of providing care to medically underserved areas through required rotations in rural areas of Georgia and service-learning programs in resource-challenged clinics outside of Atlanta. Their wealth of knowledge and experience in educating mid-level health professionals through the Physician Assistant Program will play a critical role in strengthening the Clinical Associates Program at the University of Witwatersrand.

Hands-on Training Helps Nigerian Social Work Partners Make the Most of New LRCs

Twinning Center ICT experts conducted two trainings on basic computer skills, internet research, search strategies, and other applications for 34 faculty members at the Federal School of Social Work in Enugu and the University of Nigeria-Nsukka School of Social Work in April-May.

The onsite trainings follow

AIHA's establishment of Learning Resource Centers (LRCs) at both partner institutions earlier in the year.

LRCs provide access to a wealth of evidence-based resources, as well as improve communication among partners and professional colleagues around the world.



The LRC training at the Federal School of Social Work in Enugu April 26-30.

Partners Launch Leadership Institute to Help Strengthen Nursing Profession in Mozambique



Nursing Leadership Institute participants focused on mastering leadership skills, promoting clinical knowledge and skills, and improving care outcomes during the five-day workshop in Maputo.

Nurses are frontline health-care workers who provide treatment and related services to the majority of the world's population. This is certainly true in Mozambique, a nation facing an extreme shortage of medical professionals with just 600 physicians and 4,000 nurses providing care for more than 21 million people.

Patient loads have tripled because of HIV/AIDS, so nurses average 60 patient visits per day. In rural areas where 70 percent of the country's inhabitants live, nurses often perform minor surgeries and other advanced clinical procedures in addition to their normal tasks because they are the only medical professionals available.

Currently, there are four levels of nurses in Mozambique: elementary, basic, medium, and superior. There is only one nurse residing in the country who has earned a doctorate degree and professional development opportunities are limited due to the

severe dearth of qualified medical personnel and lack of available continuing education programs.

With support from PEPFAR through CDC/Mozambique, Twinning Center partners at the National Nurses Association of Mozambique (ANEMO) and St. Luke's Hospital School of Nursing at Moravian College in Pennsylvania launched the Mozambique Nursing Leadership Institute this summer. The first session was held August 26-30 in Maputo.

With technical support from the American Organization of Nurse Executives (AONE) and the Twinning Center, partners are implementing the Program to strengthen and expand the role of nurses through access to evidence-based education, ongoing learning opportunities, and skills-based training in targeted clinical fields.

A group of 40 senior-level nursing heads from provincial and regional hospitals in Mozambique were selected to

participate in the 16-month Nursing Leadership Institute. Four Tanzanian nurses, along with representatives from WHO/Ghana and the Southern African Network of Nurses and Midwives also attended and have expressed interest in the model program.

"The Nursing Leadership Institute has taught me how to be the leader I always wanted to be," says Maria Olga Matavel, a superior nurse from Maputo Province.

"Now I know that leadership exists in all of us and it is my turn to put into action what I learned from this course," she explains.

"We all have a responsibility not only to our communities, but to ourselves to take the skills we have learned and apply them to our daily work," agrees Maria Acacia Lourenco of Zambezia Province, who is currently the only PhD nurse in Mozambique.

Tanzania Social Work Partners Publish Article about Their Work Training Community Caregivers



The Twinning Center's Tanzania social work partners train community caregivers to better support orphans and vulnerable children and families.

Trinning Center partners from the Tanzania Institute of Social Work and Jane Addams College of Social Work and the Midwest AIDS Training and Education Center at the University of Illinois-Chicago published an article describing their efforts to train para-social workers in the July issue of the professional journal *Children and Youth Services Review*.

Titled "Para-social work to address most vulnerable children in sub-Saharan Africa:

A case example in Tanzania," the article provides data and background about Tanzania, where more than 1 million children have been orphaned or made vulnerable by the country's HIV/AIDS epidemic.

It then describes the impact losing one or both parents can have on children and young adults before discussing the strategies partners adopted as they worked together to develop a para-social worker curriculum and related training materials.

The article also chronicles the evolution of the program since its launch in late 2006, detailing key aspects such as team building, faculty development, monitoring and evaluation, follow up support, and supervisor training.

This partnership is supported by PEPFAR through funding from USAID/Tanzania.

Ethiopian VCT Partners Discuss Ways of Improving Quality Assurance in HCT Programs

Representatives of the Federal Ministry of Health and AIHA's Twinning Center partnership linking the Ministry's voluntary HIV counseling and testing sites throughout Ethiopia with the Nairobi-based Liverpool VCT gathered in Addis Ababa on February 11 to review existing efforts to strengthen quality assurance within HIV counseling and testing programs in the country.

HIV Counseling and Testing

Advisor Ato Yihalem Tamiru of the Health Promotion and Disease Prevention General Directorate, and Quality Advisor Abiye Kifle of the Medical Services General Directorate provided an overview of current initiatives and shared the Ministry of Health's quality assurance priorities with participants.

The Liverpool VCT partners shared information on Kenya's successful quality assurance program.

Other topics discussed during this one-day workshop included strategies for increasing use of evidence-based clinical practices in counseling and testing and ways to improve communication among various national and international stakeholders.

The US government views HCT programs as key entry points into HIV prevention, care, and treatment services, including referrals to critical PMTCT, ART, OVC, and other care and support services.

Improved Research and Analysis Capacity Helps Drive New Treatment Policies for HIV-TB Patients

Tuberculosis is the most common serious opportunistic infection in individuals living with HIV in Sub-Saharan Africa. In South Africa's Free State Province, more than 70 percent of all patients with active TB are also infected with HIV. Despite high rates of co-morbidity, however, only 65 percent of TB patients are tested for HIV.

Partners at the University of the Free State's Centre for Health Systems Research and Development and the State University of New York (SUNY) Downstate Medical Center have been working together since 2008 to study the evolving HIV-TB epidemic and develop appropriate, effective responses to the public health challenges co-infection presents. This partnership is supported by PEPFAR through CDC/South Africa and is managed by the HIV/AIDS Twinning Center.

"We are a rather small university with only two people who have PhDs in both epidemiology and biostatistics. In fact, there is a real shortage of these

specialists throughout the country," explains Centre Director Christo Heunis.

"Our partnership with SUNY has allowed us to interact with real experts in epidemiology, quantitative analysis, and incremental analysis," he continues.

With the goal of more effectively conducting quality scientific research that informs HIV and TB-related policy and practice in the Free State and all of South Africa, and disseminating research findings to national and international audiences, partners have been working to strengthen the Centre's data management capacity.

They have also focused on strengthening its capacity to develop and implement research protocols, analyze data, and disseminate findings, as well as its capability to design, implement, and evaluate a multi-faceted intervention to improve uptake of HIV counseling and testing in TB patients which will have a positive impact on the development

of TB and HIV policy in the Free State.

This international capacity-building partnership has empowered Centre staff and is helping the local health department create informed, data-driven public health policies related to the care and treatment of HIV and TB. By embracing the concept of implementation science, partners are using a scientific framework to guide program implementation and scale-up that focuses on efficiency, efficacy, and cost-effectiveness.

"When the focus shifted to providing ARV treatment in 2004, the better doctors and nurses were recruited for those programs leaving huge gaps in TB care," Heunis acknowledges. "TB is a curable disease, but thousands of people in South Africa die from it every year. I hope our research and the policies it will lead to will help change this."

More than 70 percent of all patients with active TB in South Africa's Free State Province are also infected with HIV, yet only 65 percent of these patients are ever tested for HIV.

Partner Voices: Helping to Create a New Healthcare Profession in South Africa

Dr. Anita Glicken of the University of Colorado-Denver (UCD) traveled to South Africa in May-June with two of her colleagues on the first exchange launching a new partnership designed to strengthen Walter Sisulu University's nascent Clinical Associates Program. Glicken's blog about her experiences as the UCD team met their counterparts, visited clinics and hospitals, and learned about the newly established program for mid-level medical professionals is excerpted here.

Monday, May 31

Eastern Cape, the province where we will be working, is the poorest in the country and has an overall doctor-to-population ratio of 8-10,000. Some 45 percent of the children who die before the age of 5 are killed by HIV/AIDS — here it is a primary care issue. We've come to learn about the people, their needs, their lives ... and then to figure out how to take this new Clinical Associate profession forward.

We pass gates and security guards as we enter the Walter Sisulu University campus to meet Health Sciences Dean Khaya Mfenyana. He is remarkable — a man devoted to public health who presides over a school that is a prime mover for community-based training with a strong service foundation. His vision pushes community health and the university's involvement to new levels [from] water systems to sanitation to health education.

We bring with us a spirit of enthusiasm, partnership, and experience with a 40-year-old profession that, in the United States, now numbers almost 75,000 providers. I tell him that we came to learn as much as to contribute, stressing that our partnership is an opportunity for both institutions to grow. Khaya smiles and laughs so loud I feel the table shake. "That's why we picked you over the others [offered by the Twinning Center]. You didn't come to tell us what to do."



From left to right, partners and Twinning Center staff during the May exchange: John Capati (AIHA); Khaya Mfenyana (WSU); Loveness Satande (AIHA); Anita Glicken (UCD); Ron Henbest (WSU); Calvin Wilson (UCD); Mukund Khatry-Chhetry (WSU); Jonathan Bowser (UCD).



Partners learned about current teaching methods used in Walter Sisulu's Clinical Associates Program, including sessions in problem-based learning like the one shown here for third-year students at Mthatha General Hospital.

Tuesday, June 1

Today we are off on an hour-long drive to Mount Frere where we visit Madzikane Ka Zulu Memorial Hospital where we meet with students who are already in the Clinical Associates Program. South Africa launched this effort three years ago in three locations. Sisulu's program is farthest along and expects to graduate its first 19 students this fall. In Mount Frere we speak with second-year students who are strikingly polite as they work their way through problem-based learning. The work here is largely conducted in English because most of the faculty are from other countries and don't speak Xhosa [the local language]. The recently built hospital is incredibly clean and smells new, more like a hotel than a place of pain and care in an area where the life expectancy is about 45 years.

Wednesday, June 2

The healthcare system here begins with clinics in far-flung towns. These feed into district hospitals, which feed into regional academic medical centers. Most clinical associates will work in district Hospitals. This day, we start at Mthatha District Hospital, where peeling paint and rust mark the age and wear of the building. As we make our rounds, the staff members are warm, but cautious. They clearly care deeply for the masses of patients that line the rooms. In rural areas like this, people still hike for miles for water, carrying it home in plastic jugs and buckets.

Some families have an out-house on the property. That's a big improvement over the alternative, which is nothing. It's now clear given the rural nature and poverty of the Eastern Cape, why it is not surprising that the public healthcare system is weak — and a major weakness is the lack of healthcare providers.

Friday, June 4

Yesterday we visited St. Barnabas District Hospital in Libode and a clinic in Mgwanyane, a small town surrounded by the round huts typical in Eastern Cape. Today, though, we spend time visioning about the new profession. When they graduate, almost 80 percent of the medical students from outside the area leave; those from the area gravitate to private practice. Clinical associates are expected to stay, building capacity where their strong family bonds and government sponsored posts tie them to the region. They will start out supporting doctors at district hospitals, but we expect they will ultimately do much more to improve quality and access to care throughout South Africa.

Tuesday, June 8

On the plane home now, and I left with more questions than answers. Will our partners allow us to contribute? Will we have the fortitude and wisdom to make informed choices as we learn to trust our work together? Can we overcome the obstacles this new profession faces? My goal is to turn all these challenges into opportunities.

Partners Train Pemba Island Primary Care Providers on Recovery Oriented System of Care

Partners at the Ministry of Health and Social Development Department of Substance Abuse Prevention and Rehabilitation in Zanzibar and the Great Lakes Addiction Technologies Transfer Center conducted two workshops this summer to raise awareness of the recovery oriented system of care (ROSC), which can be effectively integrated into primary level healthcare services in Unguja, Pemba Island.

A total of 30 primary health-care providers participated in

the trainings, which were held August 19-21 and August 23-25. Currently, Unguja has only one worker trained in ROSC, although such services are in high demand.

"It is more cost effective for us to conduct these trainings onsite in Unguja than to transport all the participants to Pemba, where we have already initiated peer meetings for addicts," says Alois Mahmoud Ibrahim Mussa, Coordinator of the Ministry of Health and Social Development's Department of Sub-

stance Abuse Prevention and Rehabilitation in Zanzibar.

With support from PEPFAR through CDC/Tanzania, the partners have been highly successful at introducing the ROSC model in Zanzibar, conducting their first training for peers in recovery in January 2009.

These two trainings mark the expansion of these successful programs to other areas where they are needed.

Their programming focuses on the "12 Steps Recovery Model" and the "Islamic Milati," both of which reflect their commitment to ongoing inter-faith dialogue as a path to better understanding and addressing substance abuse and HIV/AIDS within the local community.

Zanzibar Partners Introduce Recovery Oriented System of Care Model on Mainland Tanzania

Twinning Center partners from the Tanzania Drug Control Commission (DCC), the Ministry of Health and Social Development Department of Substance Abuse Prevention and Rehabilitation (DSAPR) in Zanzibar, and the Great Lakes Addiction Technologies Transfer Center (GLATTC) conducted a two-day sensitization workshop designed to introduce the recovery oriented system of care (ROSC) to some 50 drug addicts and their families in the Kinondoni District of Dar es Salaam.

"Mainland Tanzania does not have these types of programs, so this ROSC workshop was very much needed," says Alois M. Ngonyani, a chemist with the Drug Control Commission.

"Introducing this program in our country will help many addicts and their families ... we want them to know that addiction is a disease just like diabetes or any other condition and, therefore, it can be treated. It is a big

step toward helping to solve substance abuse problems and associated negative outcomes — particularly as we plan to start a methadone assisted treatment program here in October," he explains.

Although there are no official reports on the number of drug addicts in Dar es Salaam, unofficial estimates indicate that more than 2,000 individuals are battling substance abuse issues. Four Alcoholics Anonymous/ Narcotics Anonymous (AA/NA) meetings are held in the city each week, but they are poorly attended, and more comprehensive recovery services are not available.

With support from PEPFAR through CDC/Tanzania, Twinning Center partners at the DCC, DSAPR, and GLATTC joined with recovering peer educators from Drug Free Zanzibar and experts from the Muslim Education and Welfare Association (MEWA) in Mombasa, Kenya, to conduct the sensitization workshop. Three local NGOs —

Changamoto ni Matumaini, AA/NA, and the Tandika Youth Handcraft Group — also helped organize the event.

Partners have been highly successful at introducing the ROSC model in Zanzibar, conducting their first training for peers in recovery in January 2009. Their programming focuses on the "12 Steps Recovery Model" and the "Islamic Milati" — both of which reflect their commitment to ongoing inter-faith dialogue as a path to better understanding and addressing substance abuse and HIV/AIDS within the local community.

In March, partners conducted a mapping assessment to ascertain the availability and scope of available substance abuse services in Dar es Salaam. They anticipate that this first sensitization workshop will help pave the way to the establishment of recovery services on the mainland similar to those currently available in Zanzibar.



Mainland Tanzania lacks services for individuals facing addiction, so the introduction of successful support programs being implemented by partners on Zanzibar represents an important first step toward changing this.

CDC Director Visits Partner-established Emergency Medicine Training Center in Ethiopia



CDC Director Dr. Thomas Frieden at Black Lion Hospital.

Photo Courtesy of Loren Cadena

During his June 2010 visit to Ethiopia, CDC Director Dr. Thomas Frieden presented a lecture on global non-communicable diseases at Addis Ababa University Black Lion Hospital, where he also toured the Emergency Medicine Training Center established by Twinning Center partners at Addis Ababa University Faculty of Medicine and the University of Wisconsin at Madison.

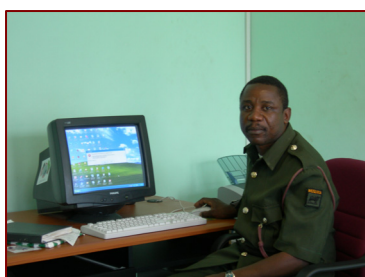
Partners officially opened the Emergency Medicine Training Center — the first of its kind in Ethiopia — on February 15.

Since then, they have provided in-service training to 278 practicing medical professionals, including 45 staff members from Black Lion Hospital who received specialized training in quality improvement to better ensure the provision of quality urgent

care. Pre-service training in basic life support and other aspects of emergency medicine was provided to 160 3rd-year medical students, interns, and residents, bringing the total number of current and future healthcare practitioners to 438 as of August 30.

The training center is supported by PEPFAR through CDC/Ethiopia.

Expanding the LRC Model to Improve Access to Evidence-based Resources in Zambia



As information coordinator at Maina Soko Military Hospital's Learning Resource Center, Tommy Sajisa assists as many as 315 people each month with their requests for information and other info-tech needs. The program's success has prompted expansion to other military medical facilities across Zambia.

The Twinning Center is working with the Zambian Defense Force (ZDF) to overcome a severe lack of access to evidence-based clinical resources at military medical institutions in the country.

In 2006 and 2007, with support from PEPFAR and the US Department of Defense, the Twinning Center helped establish two Learning Resource Centers (LRCs) at Maina Soko Military Hospital and the Defense Force School of Health Sciences in Lusaka.

Since then, these LRCs have played a critical role in improving health professions education and clinical care by strengthening information and communications tech-

nologies at both institutions.

Based on the success of the first two LRCs, the ZDF has launched efforts to replicate the model elsewhere in the country. To this end, Zambian partners and Twinning Center technical experts conducted a nationwide assessment of 16 military medical facilities in 2009-2010 to determine which institutions are best suited to house LRCs.

The need for LRCs is particularly acute in remote areas where healthcare providers generally work in isolation and have limited contact with their peers. The information and communications technologies that form the basis of LRCs can help overcome

this isolation by allowing clinicians to share diagnostic results — such as x-rays, CT scans, and MRIs — as well as audio, video, and case files. Once this information is shared, they can discuss it with other healthcare providers. As a result, they no longer have to diagnose and treat patients, particularly those with complex medical problems, in a vacuum.

Partners completed the assessments and submitted a detailed report, along with site recommendations in spring 2010 and plans are currently underway for establishing LRCs at other military medical facilities spanning Zambia.

The Ryan White HIV/AIDS Program provides HIV-related services in the United States for those who do not have sufficient healthcare coverage or financial resources for coping with HIV disease.



Twinning Center Showcases its Programs at Ryan White Conference in Washington, DC

AIHA staff attended the 2010 Ryan White Care Act All Grantee Meeting and 15th Annual Clinical Conference to share information about the HIV/AIDS Twinning Center's capacity building programs in Africa.

Held August 23-26 in Washington, DC, this event brings together HIV care experts from publicly funded programs spanning the United States.

AIHA Executive Director

James P. Smith presented on the twinning model, while University of Pittsburgh partner Deborah McMahon spoke about her experiences working with counterparts at the Catholic University of Mozambique in Beira.

Media Training Campaign Educates Community Radio Journalists on HIV/AIDS Reporting

Zambia's national HIV/AIDS strategy recognizes the important role the mass media plays in the war against AIDS, says Zambian Ministry of Information and Broadcasting Services HRA Director Ms. Chanda Stella Chishimba.

"We believe the provision of accurate, objective information through the mass media is an important part of the Government's commitment to improving quality of life for its citizens," Chishimba explains.

With funding from PEPFAR and CDC/Zambia, Twinning Center partners at the Zambia Institute of Mass Communication Educational Trust (ZAMCOM) and the University of Kentucky School of Journalism and Telecommunications have been supporting Zambia's multi-sectoral response to AIDS since 2008 by strengthening the capacity of journalists to effectively report on the epidemic.

Together, partners have developed a community media outreach program that provides critical new tools and skills for reporting on

HIV/AIDS to journalists working at community radio stations and community-level print media. These outlets represent a key source of news and information for much of Zambia's population.

First piloted in Chipata in January 2009, the training has evolved based on participant and trainer evaluations and feedback. The most recent workshop was conducted July 19-30, 2010, in Livingstone.

Some 20 journalists from nine community radio stations in Lusaka and the Western and Southern provinces attended the two-week skills-based training, where they gained vital new skills in effective story-telling.

Site visits to community-based HIV/AIDS programs allowed them to put these new skills to work immediately, producing quality reports on mother-to-child transmission, substance abuse, nutrition, and ART.

University of Kentucky Journalism Professor Melvin Coffee has been involved with the community radio outreach program since inception and

served as a trainer at the Livingstone workshop. "Expanding the training to two weeks really made a difference because the participants were able to go out [to the field] twice. On the second time, they really nailed it. I think at least one of the reports was very, very close to NPR quality," he says.

"It also helped that we accompanied them on the field interviews because we could do more coaching on how they were gathering sound and conducting interviews," Coffee notes. "So much of what you need to do this well happens on site, of course. They learned some valuable lessons and were able to put to use what we had reviewed in the workshop sessions. In that second week, we all saw doubt become conviction for several participants who were facing sizable challenges at their stations."

To date, partners have trained 175 community radio journalists through this innovative program.



University of Kentucky Professor Chike Anyaegbunam addresses community members and workshop participants at a meeting with an HIV/AIDS support group at Libuyu Compound near Livingstone.



Workshop participants practice their newly acquired interviewing skills on a community member while Nick Stacy, a University of Kentucky student who is interning at ZAMCOM, watches.

VHC Vols Contribute More Than 23,000 Working Days to Build Health System Capacity in Africa

The Volunteer Healthcare Corps (VHC) is a Twinning Center initiative that provides highly qualified professionals with an opportunity to work on the front lines of the global war against HIV/AIDS.

VHC volunteers help scale up existing services and jump-start new projects through long-term placements at twinning partnership sites and other organizations that

receive PEPFAR support. The VHC recruits individuals with a significant level of expertise in healthcare, HIV/AIDS, or allied professions for volunteer assignments lasting from three months to two years.

Volunteers provide clinical, educational, and capacity-building technical assistance and support to help their host organization achieve concrete, measurable goals.

As of August, 83 highly skilled professionals have contributed 23,018 working days toward strengthening health system capacity to combat HIV/AIDS in Botswana, Ethiopia, Mozambique, South Africa, and Tanzania.

While twinning partnerships focus on institution-to-institution collaboration, the VHC provides a vehicle for individuals to use their own expertise to make a significant impact on the global war against HIV/AIDS.

Conferences, Grants, and Opportunities



4th Global Summit on HIV/AIDS, Traditional Medicine & Indigenous Knowledge

August 2-5, 2010
Cape Coast, Ghana

Open Forum 4: Key Issues in TB Drug Development

August 18-19, 2010
Addis Ababa, Ethiopia

2010 Ryan White Grantee Meeting & 13th Annual Clinical Conference

August 23-26
Washington, DC, USA

25th IUSTI-Europe Conference

September 23-35
Tbilisi, Georgia

International Conference on Opportunistic Pathogens

September 28-30, 2010
New Delhi, India

18th International Congress on Palliative Care

October 5-8, 2010
Montreal, Canada

3rd Access to Healthcare in Africa Conference

October 6-7, 2010
Johannesburg, South Africa

3rd Botswana International HIV Conference

October 13-16, 2010
Gaborone, Botswana

5th South African HIV Drug Resistance and Treatment Monitoring Workshop

October 27-29, 2010
Bloemfontein, South Africa

Don't Turn a Blind Eye: 1st OVC in Africa Conference

Oct. 31-Nov. 3, 2010
Johannesburg, South Africa

International Students Conference on Reproductive Health (ISCORH)

November 18-20, 2010
Kampala, Uganda

Global South-South Development Expo 2010

November 22-26, 2010
Geneva, Switzerland

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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.

