

HIV/AIDS Twinning Center



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AIHA Showcases HIV/AIDS Twinning Center Partnerships and Programs at ICASA 2011

Ethiopia welcomed nearly 10,000 scientists, public health professionals, social service workers, policymakers and others stakeholders December 4-8, 2011, as the country hosted the 16th International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) in Addis Ababa.

AIHA showcased its successful HRSA-supported HIV/AIDS Twinning Center partnerships and related initiatives during the 5-day event, sharing information with participants who hailed from more than 100 countries spanning the globe through scientific presentations, a satellite session, and an informational booth at ICASA's international exhibition.



Ethiopian Minister of Health Dr. Tedros Adhanom, AIHA Executive Director James P. Smith, Clinton Foundation Country Director and 2011 ICASA President Dr. Yigeremu Abebe, and AIHA Country Director for Ethiopia Kidest Hailu posed for a photo at the Twinning Center booth in ICASA's exhibition hall.



Twinning Center partner Augusta Muthigani of the Kenyan Episcopal Conference Catholic Secretariat's Commission for Education (right) presented on KEC's joint work with DePaul University during a session on effective communication methods for HIV prevention.

AIHA co-hosted a satellite session on twinning with the Ensemble pour une Solidarité Thérapeutique Hospitalière en Réseau (ESTHER France), which was held on Dec. 5. John Capati, AIHA's Country Director for South Africa, moderated the event.

AIHA Executive Director James P. Smith provided an overview of AIHA's twinning model, setting the stage for presentations made by Twinning Center partners Dr. Atalay Alem Ejigu, Chief Executive Director, Addis Ababa University College of Health Sciences; Prof. Khaya Mfenyana, Executive Dean, Walter Sisulu University Faculty of Health Sciences; and Dr. Joseph Masci, Medical Director, Elmhurst Hospital Center.



AIHA staff distributed information on its Twinning Center programs throughout Africa to thousands of ICASA delegates who visited our booth at the international exhibit.

Dr. Gilles Raguin, Executive Director, GIP ESTHER, gave an overview of ESTHER's hospital partnerships in Francophone Africa. Programs in Cameroon, Côte d'Ivoire, and Mali were showcased.

Later in the week, Augusta Muthigani of the Kenyan Episcopal Conference (KEC) Catholic Secretariat in Nairobi presented during a panel discussion on Feasible Communication Methods for HIV Prevention. Her presentation, titled "Training and Supporting Kenyan Teachers as HIV Prevention Intervention Facilitators: Collaborating to Combat HIV/AIDS while Working to Achieve Education for All," highlighted the efforts of KEC's ongoing partnership with DePaul University in Chicago.

Ethiopia's First Pediatric Emergency Unit Opens at Addis Ababa University's Black Lion Hospital



When Ethiopia celebrated the opening of its first pediatric emergency room at Tikur Anbessa (Black Lion) Hospital in Addis Ababa on January 25, the healthcare workers staffing the 50-bed facility were well prepared to see their first young patients.

Thanks to the generous support of the American people through PEPFAR and CDC/Ethiopia, healthcare providers at the new Pediatric Emergency Care Unit were trained at Addis Ababa University's Emergency Medicine Training Center.



Tikur Anbessa's new Pediatric Emergency Care Unit is a remarkable change from the old facility. It includes a 50-bed emergency room that offers quality urgent care services in a cheerful, modern setting that makes a difficult and frightening experience as comfortable as possible for young patients and their families. The Unit was renovated by Johns Hopkins University with support from PEPFAR and CDC/Ethiopia. Staff training was carried out through an AIHA twinning partnership between Addis Ababa University School of Medicine and the University of Wisconsin at Madison.



Medical residents participate in a Basic Life Support course at the Addis Ababa University Emergency Medical Training Center.

Established through an AIHA twinning partnership linking Addis Ababa University School of Medicine and the University of Wisconsin at Madison, the Training Center has been supporting Ethiopia's efforts to improve the quality of urgent care for adult and pediatric patients through targeted training for nearly three years.

"Prior to the opening of the Training Center, there was no systematic framework for training on evaluation and management of critically ill children at the undergraduate or residency levels," explains Dr. Muluwork Tefera Dinberu of Tikur Anbessa.

On a practical level, she says, this inadequate training was compounded by a lack of necessary equipment, no systematic triaging protocols, and poor medical record keeping, among other things.

"The concept of teamwork among physicians and nurses even during the worst emergencies did not exist. Staff were not skilled in CPR and the emergency room was by an large considered to be an inpatient ward with an average stay of five days," Dr. Dinberu continues, noting

that some patients remained in the ER as long as a month.

As a result of the partnership, which is managed by AIHA's HIV/AIDS Twinning Center, the Unit's staff have been trained on a broad range of basic and pediatric-specific emergency medicine topics, including Emergency Triage Assessment and Treatment (ETAT); Basic Life Support (BLS); Pediatric Advanced Life Support (PALS); Basic Life Skills & Intensive Care Unit in Pediatrics Management; and Emergency Ultrasound Training.

Because of these trainings, and renovations to the Unit done by Johns Hopkins University with support from PEPFAR and CDC/Ethiopia, the experience for children brought to Tikur Anbessa for urgent care these days is markedly different from what it once was.

Dr. Cynthia Haq, Professor of Family Medicine and Population Health Sciences, and Director of the University of Wisconsin-Madison Center for Global Health, first visited the site in 2009 and returned shortly after the new Unit opened earlier this year.

"In 2009, I was told that many people had tried to improve pediatric emergency services, but none had been very successful. Children were dying there each day under dire circumstances, often in painful, crowded conditions with very inadequate drugs, supplies, and space," Haq recalls, calling that initial visit horrifying.

"When I returned to see the new Pediatric Emergency Care Unit, I could hardly believe my eyes! It was spacious and well-organized, with efficient triage of patients. Parents were at

their children's bedsides and no children were crying in pain," she observed, pointing out that, "It was a remarkable transformation!"

Dr. Dinberu agrees, stressing that care is delivered in a more organized and efficient manner, which has led to less overcrowding and a reduction in mortality rates and average length of stays.

"Our patients and their families seem much happier with the entire experience," she says, concluding, "I believe the Unit is now a model that other developing countries can learn from."

Ethiopia's Minister of Health Dr. Teodros Adhanom Minister has also said that the new facility would serve as a catalyst, inspiring other improvements at the hospital.

During the opening ceremony, he explained that Ethiopia is working very aggressively to produce skilled human resources for the nation's health sector — something the AIHA twinning partnership and the Emergency Medicine Training Center is actively supporting in an effort to improve child health and mitigate the country's burden from HIV/AIDS.

To date, some 400 health and allied professionals have completed pediatric emergency medicine courses at the Center, taking their new-found knowledge and skills back to communities as widespread as Mekele, Gondar, and Jimma.

Combating HIV in Tanzania and Zanzibar through Peer-supported Substance Abuse Recovery

Substance abuse, particularly injecting drug use, is a key driver of the HIV epidemic in many parts of the world.

In Tanzania and elsewhere in sub-Saharan Africa, it takes a back seat to other forms of transmission, but it is still a factor — especially in high-risk border towns, port cities, and resort areas.

All too often, people who inject drugs are stigmatized and driven into the shadows. In many developing countries, there are no systems in place to treat people with addiction to drugs or alcohol, so these individuals are even further marginalized.

"Substance abuse treatment in Tanzania is mainly provided in the psychiatric units of a few hospitals. The use of mental health services for treatment of individuals with drug dependence increases stigma, thus compromising the acceptability of these services," explains Christopher Shekiondo, Tanzania's Drug Control Commissioner.

A model program in Zanzibar, however, is offering a promising alternative that uses a holistic, evidence-based approach called Recovery Oriented System of Care (ROSC).

Under the ROSC framework, services are much broader in scope with the focus of care and support moving beyond symptom reduction and helping people achieve abstinence.

Instead, services are designed to assist people with building individual, social, and community resources to promote long-term recovery.

Sober Houses — community residences where peers in recovery live together and

support one another's journey to sobriety — play a key role in ROSC; Zanzibar now has nine of these, including one for women.

Launched in 2008 with support from PEPFAR and CDC/Tanzania, an HIV/AIDS Twinning Center partnership is implementing the project.

Partners include the Tanzania Ministry of Health and Social Welfare's Zanzibar Department of Substance Abuse and Prevention; the Mainland Non-Communicable Disease, Mental Health, and Substance Abuse Department and Drug Control Commission; and the US-based Great Lakes Addiction Transfer and Technology Center.

In February 2012, partners hosted the Tanzania ROSC Symposium in Dar es Salaam as a way to showcase the successful ROSC model with the goal of replication on Mainland Tanzania. This resulted in greater awareness of ROSC among stakeholders from Arusha, Dar es Salaam, Dodoma, Mwanza, Tanga, and other regions of Tanzania.

Following the symposium, recovering peers from all over the country participated in a 3-day training-of-trainers course and are now training others in their respective communities on the peer-to-peer recovery model that is at the core of ROSC.

"Before the ROSC Symposium, only few people were aware of how different the concept is from existing programs in Tanzania. People were working in isolation," says Drug Control Commission Chemist Alois Ngonyani.

"Afterward, stakeholders understood that there are so many pathways into recovery

and, because of that, there is a need for linking both the clinical and non-clinical elements of treatment to better help addicts to stay clean," he explains.

"We've achieved a tremendous amount since the Zanzibar partnership started and even in the short time since the ROSC Symposium," Ngonyani points out.

"We have witnessed a remarkable transformation in the program in terms of the services we offer in the Sober Houses, moving from basic rehabilitation to equipping the peers with skills to sustain their livelihood. We are using what we've done in Zanzibar as a starting point for expansion of these successful efforts to the Mainland," he continues.

"The ROSC program has been embraced by the Zanzibar community and more people are now aware of the work we do. Some of our recovery peers have suffered gravely and almost lost their lives because of drug abuse. They lost all hope for redemption, but this program has given them a second chance," Ngonyani says.

"The amazing progress toward recovery that has been made by some of these young men and women has reinforced people's belief that recovery is not only a possibility," he concludes, "It is a reality."



Support groups play a critical role in helping people who are working to overcome addiction. Partners have trained more than 50 peer educators as part of their efforts to implement a recovery oriented system of care on Zanzibar.



Through the partnership, a total of nine Sober Houses have been established on Zanzibar, including one facility for women. They offer a strong, supportive community of peers in recovery, who assist one another through the difficult journey to sobriety.

Kentucky Partner Plays Key Role in Efforts to Develop Freedom of Information Policy in Zambia



University of Kentucky partner Al Cross has been providing technical guidance to policymakers looking to draft Freedom of Information Act (FOIA) legislation for Zambia.

A Twinning Center partnership designed to help African journalists cover HIV and AIDS-related topics more effectively has spun off an effort to help Zambian journalists, academics, and politicians pass a Freedom of Information Act (FOIA) that could be the strongest in Africa.

In 2007 thanks to support from PEPFAR and the US Embassy in Lusaka, AIHA launched the partnership, which links the University of Kentucky School of Journalism and Telecommunications with the Lusaka-based Zambia Institute of Mass Communication Educational Trust (ZAMCOM). This partnership later expanded to include the Media Institute of Southern Africa (MISA) in Botswana.

In late 2009, the ruling parties of both countries ramped up conflicts with journalists and began moving toward licensing and regulation of journalists and news outlets.

In response, the University of Kentucky sent veteran journalist and associate professor Al Cross to both nations in May 2010.

There, he facilitated discussions on the importance of press freedom and how journalists and government officials could play their proper roles without enacting regulation that contradicts the traditions of these former British-ruled countries.

"I brought my 30 years of experience as a political and government reporter, as well as my leadership roles in the Society of Professional Journalists, where I was president in 2001-02," explains Cross, who has served as the director of University's Institute of Rural Journalism and Community Issues since 2005.

"After the then-opposition party in Zambia won the national election in September 2011 and said it was still in favor of a FOIA, I spent eight days in Lusaka in November and December meeting with government officials, journalists, academics, and others interested in moving forward with the legislation in Zambia," Cross says.

"I also had meetings with government officials who had no stated position on the issue, but could well be involved in drafting, passing, and administering the law," he continues.

"Two of the major points I made in all these meetings were that any open records law should be designed for use of the people in general — not just for journalists — because most of the people who use such laws around the world are not journalists.

My second point was that, to be effective, such a law needs a simple, uncomplicated, and inexpensive process by which citizens (including journalists) can appeal an official's refusal to grant inspection or copying of records they request," Cross stresses.

In many US states, such appeals are handled by the state attorney general, who in most states is an official elected independently from the governor and other state officials, according to Cross.

"In Kentucky and some other states, the attorney general's decision has the force of law, unless overturned by a court," he says.

To familiarize Zambians interested in a local FOIA with these and other procedures, the University hosted a group from Zambia in March.

"We began with a meeting at the attorney general's office with members of his staff as well as Kentucky journalists who are familiar with the process," Cross notes, explaining, "We hope that our work will result in the Zambian Parliament passing a strong FOIA that will make the national, state, and local governments more open and democratic. In turn, this will provide a good example for other developing nations to follow."

Concluding, Cross stresses that, "Around the world, openness and transparency in government and civil society encourage investment, development, and democracy. We hope to remain a part of that process in Zambia and in other nations that may find our assistance useful."

Launched in 2008, the ZAMCOM/University of Kentucky partnership has trained nearly 200 Zambian journalists on accurate HIV/AIDS reporting. Partners have also conducted workshops in Chipata, Kitwe, and Livingstone to train community members to produce radio programs on HIV and other critical public health issues, and provided training for staff at community radio stations throughout the country.

In October 2011, partners launched the "Newspaper in Education" project in close cooperation with Zambia's Ministry of Education and the Zambia Daily Mail to improve classroom access to reading material and teaching resources — in particular on health topics and gender-based violence.

Volunteer Introduces Experiment Log Book, Improves Practice at AAU Biochem Department

When Dr. Yididya B. Banti arrived at the Addis Ababa University (AAU) School of Medicine in January 2010, the Biochemistry Department was struggling to overcome a significant shortage of qualified lecturers. This lack of experienced faculty was having a serious impact on the University's ability to effectively train students in its graduate programs.

Born and raised in Ethiopia, Dr. Banti immigrated to Australia in 1997. There, she completed high school and earned her Bachelor's degree in applied chemistry. She went on to earn a Doctoral degree, conducting award-winning research in the fields of chemistry and biochemistry.

After 12 years in Australia, Dr. Banti returned to Ethiopia in 2009 for a visit. Eager to use her knowledge and skills to help strengthen the health system in her homeland, she visited a number of local institutions. That's how she learned about the HIV/AIDS Twinning Center's Volunteer Healthcare Corps (VHC).

With support from PEPFAR and CDC/Ethiopia, the VHC placed her in a two-year volunteer assignment as a lecturer and mentor at AAU's School of Medicine.

"The Biochemistry Department was established along with the School of Medicine more than 50 years ago," Dr. Banti explains, noting that in addition to lacking enough qualified instructors, there were other serious challenges.

"The lab did not meet acceptable international quality standards related to its set-up and the availability of necessary instruments and

reagents," she says, citing the quality of seminars, presentations, and thesis papers done by postgraduate students as other concerns.

Another major problem, Dr. Banti points out, was that the Biochemistry Department did not have a standard approved log book for recording experiments and entering raw data. Instead, research students keep all raw data related to their work rather than providing it to the Department along with their final thesis — a practice that can have serious negative consequences, such as precluding publication of research that is not backed up by original data.

It also means that the Biochemistry Department has no "institutional knowledge" that can serve as a strong basis for future research projects.

"One of the most basic requirements for sound scientific research is using an approved log book to capture all experimental procedures and related data, including instruments used and outcomes. Without this tool, there is no acceptable clarity or consistency in record-keeping because everyone just uses his or her own methods," Dr. Banti says, observing that maintaining a standardized log book is an indication of solid, quality laboratory practices.

Although her main duties were associated with lecturing and mentoring students, Dr. Banti says she felt it was her moral obligation to contribute her knowledge and skills in any way she could, particularly when she knew that her input would have a lasting impact. In keeping with this mindset, she served as the chairperson for the

Basic Science Track of the 2011 International Conference on AIDS and STIs in Africa (ICASA), which was held in Addis Ababa in December. She also spearheaded development of an approved laboratory log book — the first of its kind in Ethiopia.

"When I proposed the idea of preparing a log book to the head of the Biochemistry Department, Dr. Daniel Seifu, he was thrilled and very supportive. I presented the first draft of the book to the academic staff and incorporated their suggestions into the final version," Dr. Banti says, explaining that this marked a crucial step toward building the lab's capacity.

"It is also indicative of the sustainability of the Department and its programs ... something I know will be continued even after my assignment has concluded."

Dr. Seifu agrees.

"The content and design of the laboratory log book have already been approved by the Biochemistry Department. The log book was prepared with a high level of professionalism and features all the necessary criteria required for research purposes, so it is of paramount importance for the documentation of experimental data used by our Master's and Doctoral students, as well as for reference within the Department," Dr. Seifu stresses.

"It is our belief that the same document could be adopted by all departments that run postgraduate programs. Because of this, it is important to recognize and appreciate the work done by Dr. Yididya, who relentlessly supported the entire Department."



VHC volunteer Dr. Yididya B. Banti in her office at the AAU Biochemistry Lab.

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— Dr. Yididya B. Banti.

ZDF Military Medical Learning Resources Initiative Launches Telemedicine Program

AIHA twinning partners at the Zambian Defence Forces (ZDF) celebrated the nationwide launch of its Military Medical Learning Resources Initiative March 14 at Maina Soko Military Hospital in Lusaka.

In partnership with local telecommunications company Zamtel, ZDF demonstrated a new telemedicine program that enables Maina Soko experts to conduct live consultations with medical staff in remote locations, such as the Zambia Air Force's Mt. Eugenia Health Center in Lusaka West.

The telemedicine solution provided by Zamtel provides a live video link for real-time healthcare consultation Services and the capture of video and still images and patient data that can then be stored and sent to medical consultants for diagnosis and follow-up treatment at a later time. It allows healthcare providers and patients to interact remotely with medical specialists to improve access to high-quality care. It also provides for e-learning, web conferencing, Internet access, and data transfer.

According to Zamtel Chairman and Acting Chief Executive Officer Dr. Mupanga Mwanakatwe, the telemedicine solution is delivered through a dedicated point-to-point connection and is largely able to eliminate travel between Maina Soko Hospital and remote medical centers for both staff and patients.

"We are delighted to be part of this breakthrough that has successfully demonstrated the delivery of telemedicine solutions that are readily available using our current network infrastructure.

We stand ready to work with the Government and the medical fraternity to bring about the efficient delivery of modern healthcare services in Zambia through telemedicine," Dr. Mwanakatwe said.

AIHA's Zambian Defence Forces Military Medical Learning Resources Initiative is designed to increase access to evidence-based health information for Zambia's military medical personnel throughout the country. Evidence-based resources improve patient care and help

make the most rational use of limited resources.

AIHA has established a network of 10 Learning Resource Centers (LRCs) at military health facilities spanning Zambia to help strengthen continuous clinical education; increase access to the latest proven research and guidelines; and improve the quality of care for military personnel, their families, and the communities they serve.

These information and communications technology centers have the power to change the healthcare landscape in Zambia. The Zambian Defence Force is a pioneer of these efforts and can serve as an important point of reference for others seeking to move in this innovative direction.

This initiative is supported by the American people through PEPFAR and the US Department of Defense in Zambia.



The joint ZDF/AIHA Military Medical Learning Resources Initiative launched their first-ever telemedicine program, piloting a link between Maina Soko Hospital and the Mt. Eugenia Air Force Health Center on March 14.



AIHA Introduces Twinning Center Program at the 2011 Caribbean HIV Conference

With an eye to expanding its Twinning Center programs to the Caribbean Region, AIHA participated in the 2011 Caribbean HIV Conference, which was held Nov. 18-21 in the Bahamas.

More than 2,000 individuals from across the Caribbean attended this event, which was designed to encourage and support the formation of an effective, collaborative,

and sustainable response to the region's HIV epidemic.

AIHA hosted an exhibition booth at the conference to share information about the twinning model and answer questions from delegates whose institutions could greatly benefit from the technical assistance and support a formal twinning partnership can bring to the table.

More than 500 individuals received materials through the exhibit and Twinning Center staff participated in a number of sessions and meetings with potential partners.

In the coming months, staff will pursue opportunities to leverage these activities and establish AIHA's first partnerships in the Caribbean.



AIHA's Learning Resources Project Spearheads Evidence-based Practice at Partner Institutions

AIHA's Learning Resources Project is a coordinated set of strategies designed to assist healthcare and social services institutions and professionals in providing quality care to patients in need.

The overarching goal of the project is to improve the quality of healthcare services provided to patients by expanding institutional access to knowledge resources, implementing evidence-based practice methods, and supporting professional communication and knowledge sharing platforms among healthcare workers and institutions.

To these ends, the Learning Resources Project supplies health professionals with current information on the most effective practices. Within their specialization, while helping these professionals build new programs rooted in evidence-based medicine.

A core component of the model is the Learning Resource Center, which is an institutional technology and ICT hub that includes hardware, software, Internet access, and a comprehensive collection of evidence-based online and offline health and medical databases.

LRCs enable healthcare professionals to access up-to-date information resources and offer new opportunities for continuing education, professional communication, and collaboration within the AIHA partnership network, as well as with the international health community.

In addition to outfitting the LRCs, AIHA trains institutional stakeholders to effectively access, evaluate, and utilize these knowledge resources to inform clinical case reviews,

guideline revisions, curriculum development, and other health systems strengthening interventions as identified by the partner institution.

LRC staffing is tailored to the needs of the institution, with the LRC Coordinator serving as the eyes and ears of the project at each site. LRC Coordinators manage local training activities, recruit healthcare workers to participate in LRC initiatives and activities, and work with leadership to further develop the program within the institution and ensure its progress and sustainability. Therefore, it is imperative that the LRC Coordinator is highly engaged and motivated.

Other key staff resources include IT and evidence-based practice specialists, as well as physicians, nurses, pharmacists, or others drawn from the institution's workforce.

AIHA supports the LRCs and other Learning Resource Project activities by providing comprehensive training and ongoing technical support, particularly with regard to evidence-based practice, telemedicine, distance learning, practice standard reviews, skills labs, warmlines, virtual knowledge hubs, and mHealth initiatives.

AIHA staff offer a variety of distance learning courses that range from two to six weeks in duration. These cover topics such as how to be an effective distance learner, an introduction to evidence-based practice, and guidance on how to research, adapt, and utilize evidence-based patient education materials.

Annual LRC Coordinator meetings are another way that AIHA provides support for the health and allied professionals involved in

making more than 20 LRCs a successful and important resource at Twinning Center partner institutions in Botswana, Ethiopia, Namibia, Nigeria, South Africa, and Zambia.

With support from PEPFAR and HRSA, AIHA conducted a regional meeting to build greater cohesion within AIHA's overall Learning Resources Project March 13-14 in Lusaka, Zambia.

By gathering partnership LRC Coordinators from across Africa together, AIHA's goal was to strengthen not only the individual LRCs and related e-Health programs, but also to encourage more robust cross-partnership collaboration.

The meeting also served as a crucial venue for participants to develop LRC program work plans and related monitoring and evaluation strategies for the coming year — both of which will serve to guide each LRC in its role as an important component of its twinning partnership's efforts to strengthen institutional and human resource capacity.

Meeting sessions provided an opportunity for participants to share strategies for overcoming challenges and shine a spotlight on innovative technologies that had proven successful. They also had a chance to collaborate on the development of common, sustainable, and multidisciplinary strategies that improve access to information among healthcare providers and others working in the field of HIV/AIDS and other key public health priorities.

"I learned so much more than what I thought I would about information management and a number of experiences and skills presented at have definitely encouraged me to proactively improve strategies applied in the monitoring and evaluation of LRC resources at IHSG, as well as provision of quality services for our clientele."

— Tselane C. Selemogwe, Senior Librarian, Gaborone Institute of Health Sciences.



LRC Coordinators from Twinning Center partner institutions across Africa gathered for a two-day meeting in Lusaka, Zambia, to share best practices and lessons learned in information technology and evidence-based practice.

Conferences and Opportunities



ICASA 2011: Own, Scale Up, and Sustain
Dec. 4-8, 2011
Addis Ababa, Ethiopia

Global South-South Development Expo 2011
Dec. 5-9, 2011
Rome, Italy

Fighting the Scourge of TB/HIV Co-Infection: Are Vaccine and Novel Diagnostics the Solution?
March 3, 2012
Munich, Germany

International Conference on Adolescent Sexual and Reproductive Health and HIV/AIDS
March 12-16, 2012
Enugu, Nigeria

28th Annual Scientific Conference and General Meeting of the Association of Public Health Physicians of Nigeria (APHPN)
March 19-23, 2012
Calabar, Nigeria

6th International Workshop on HIV Treatment, Pathogenesis and Prevention Research in Resource-limited Settings (INTEREST)
May 8-11, 2012
Mombasa, Kenya

Turmoil and Tenacity: The Progress of Public Health in Botswana
June 3-12, 2012
Gaborone, Botswana

5th Conference on Peer Education, Sexuality, and HIV & AIDS
June 13-15, 2012
Nairobi, Kenya

Best Practices in Social Work and HIV/AIDS
June 14-15, 2012
Montreal, Canada

39th Annual Conference of the Global Health Council
July 18-21, 2012
Washington, DC, USA

14th International Workshop on Adverse Drug Reactions and Co-morbidities in HIV **
July 19-21, 2012
Washington, DC, USA

4th International Workshop on HIV Pediatrics **
July 20-21, 2012
Washington, DC, USA

XIX International AIDS Conference
July 22-27, 2012
Washington, DC, USA

International Conference on Gender Based Violence
August 1-5, 2012
Nairobi, Kenya

Tuberculosis 2012: Biology, Pathogenesis, Intervention Strategies
September 11-15, 2012
Paris, France

*** These events are officially affiliated with AIDS 2012, the XIX International AIDS Conference.*

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Visit us on the Web at

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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.

