



AUGUST 2007 NEWSLETTER

# The United States President's Emergency Plan for AIDS Relief

A MONTHLY UPDATE ON THE U.S. COMMITMENT  
TO TURN THE TIDE AGAINST GLOBAL HIV/AIDS

## Ethiopia Hosts Third International Muslim Leaders' Consultation on HIV/AIDS



U.S. Ambassador to Ethiopia Donald Yamamoto addressed nearly 150 participants from more than 30 countries on Monday, July 23, 2007 during the opening ceremony of the third International Muslim Leaders' Consultation on HIV/AIDS. He urged religious and community leaders to return to their communities to educate others and bring communities together to fight HIV/AIDS.

"You can shape social values, promote responsible behavior, increase public knowledge and influence opinion, as well as change attitudes, policies and laws," Ambassador Yamamoto said.

"The United States is grateful to you and for being able to support this conference and your continued commitment to this endeavor through the President's Emergency Plan for AIDS Relief, or PEPFAR, and USAID."

The conference in Ethiopia, which has been strongly supported by the Ethiopian Islamic Affairs Supreme Council,



Photo by Ethiopia in-country team

The conference included approximately 150 participants from more than 30 countries and addressed ways to use the Islamic approach to address HIV/AIDS.

### National Testing Campaign Launched

Tanzanian President and First Lady kick-off national testing campaign by being publicly tested for HIV. **P. 2**

### Ambassador Dybul Visits Côte d'Ivoire

On July 16, 2007, Ambassador Mark Dybul arrived in Abidjan, Côte d'Ivoire. **P. 2**

### Safe Medical Injection Training

Kenya holds safe medical injection training for health care workers. **P. 3**

### Guyana Opens Computer Lab

New computer lab at secondary school provides stigma-reducing HIV/AIDS messages to the community. **P. 3**

### Rural Areas Receive Treatment

Botswana rolls out antiretroviral treatment for patients living in remote areas. **P. 4**

cil, is following the theme of "The Islamic Approach to HIV/AIDS: Enhancing the Community Response".

In Ethiopia, PEPFAR partners have been instrumental in addressing HIV/AIDS by educating communities about HIV prevention through local Imams and peer educators, and strengthening anti-AIDS youth clubs.

The U.S. Government (USG) first started supporting Muslim communities to address HIV/AIDS in 1992 through a project entitled, "Family AIDS Education and Prevention Through Imams," implemented by the Islamic Medical Association of Uganda. In 2000, a group of Muslim practitioners decided to articulate an Islamic approach to HIV/AIDS in order to help their religious community respond appropriately. In 2001, the USG supported the Islamic Medical Association of Uganda to organize the first International Muslim Leaders' Consultation on HIV/AIDS in Kampala, Uganda. In 2003, the USG also contributed to organizing the second gathering in Kuala Lumpur, Malaysia.

## September Sneak Peek

**Africa:** Secretary of Health and Human Services, Michael Leavitt, will travel to South Africa, Mozambique, Tanzania and Rwanda Aug. 18-29, 2007.

# Tanzania Launches National HIV/AIDS Testing Campaign



Tanzanian President Kikwete and his wife participated in a public HIV/AIDS test as part of the launch of TUNAJALI — a five-year, \$56 million initiative to prevent HIV/AIDS and provide treatment and care for individuals infected and affected by HIV/AIDS. The HIV test kicked off an ongoing testing campaign in Mwalimy Nyerere Square in Dodoma, Tanzania.

After President Kikwete was tested Prime Minister Lowassa and his wife, Mama Regina, former Speaker of the National Assembly, and Samuel Sitta, a Member of Parliament, and his wife, Margaret Sitta, Minister of Education and Vocational Training were tested. Additionally, 100 members of parliament were publicly tested as part of the launch.

On Aug. 2, 2007, Prime Minister Edward Lowassa; Dodoma Regional Commissioner William Lukuvi; U.S. Ambassador to Tanzania Michael Retzer; USAID Tanzania Director Pamela White; political and government leaders; and civil society representatives participated in the nationwide launch of the campaign, supported by the President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR).

During the event, U.S. Ambassador Retzer reminded the audience of the Tanzanian proverb that charity is a matter of the heart and not of the pocketbook. "It does not require money to overcome stigma and care for the sick," Ambassador Retzer said.

TUNAJALI focuses on both community and facility-based services to ensure long-term quality treatment and care. The Home-based Community Care for People Living with HIV/AIDS and Orphans and Vulnerable Children (HBC/OVC) initiative will take place over five years and the HIV/AIDS Care



Photo by Mpoki Bukuku  
Tanzanian President Kikwete and his wife take an HIV test as part of a new national testing campaign.

and Treatment initiative will take place over four years.

The TUNAJALI HBC/OVC goals are to deliver care and support services to an increasing number of HIV/AIDS-affected households. TUNAJALI will address the health care, psychological, socio-economic and human rights needs of people living with HIV/AIDS (PLWHA). OVC services will cover health, nutrition, psychosocial needs, education, child protection, shelter, income generation and life skills. The HBC/OVC activities, which officially began a few months ago, have already reached 21,000 PLWHAs and registered and pro-

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Photo by Côte d'Ivoire in-country team  
Ambassador Dybul joined the PEPFAR team for tea and a tour of the PEPFAR-funded Projet RETRO-CI laboratory during his visit to Côte d'Ivoire.

## Dybul Visits Côte d'Ivoire

On Monday, July 16, 2007, Ambassador Mark Dybul, U.S. Global AIDS Coordinator, arrived in Abidjan, Côte d'Ivoire to consult with top Ivorian government officials and get a firsthand look at the country's fight against the epidemic. Ambassador Dybul was joined by Michel Kazatchkine, Executive Director of The Global Fund to fight AIDS, TB and Malaria, and U.S. Ambassador to Côte d'Ivoire Aubrey Hooks for visits with President Laurent Gbagbo; Prime Minister Soro Guillaume; Minister of the Fight Against AIDS Christine Adjobi; Minister of Health Allah Kouadio Remy; Minister of National Education Gilbert Bleu Lainé; Minister of Family, Women, and Social Affairs Jeanne Peumond; and representatives of civil society. While in Côte d'Ivoire, Ambassador Dybul also visited PEPFAR-supported HIV/AIDS prevention, treatment and care projects.

## Kenya Holds Training to Prevent Medical Transmission of HIV



The benefits of the U.S. President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR) support for medical transmission prevention efforts are evident at Embu Provincial Hospital in Central Kenya. Through training provided by a PEPFAR partner, health workers learned how reducing the number of unnecessary injections lowers the opportunity for medical transmission of HIV.

Through this project, PEPFAR has supported training for 14,832 health workers in 27 districts and six provinces in Kenya on safe injection procedures. The project is estimated to reach 30,000 health workers nationwide by 2009.

"There were so many things we did not know," Nurse Purity Karanja, who attended the injection safety training, said. She and her colleagues learned how to use syringes with features to disable the device after it is used and syringes with needlestick injury protection features.

In addition to teaching nurses how to reduce occupational risk by safely administering injections and immediately disposing of the resulting sharps waste, the training provided by the Making Medical Injections Safer project also educated doctors about oral treatment options available for most illnesses.

Participants learned that disposing of contaminated needles and syringes in a safety box placed within arms reach is an effective means of preventing needlestick injuries to themselves, their colleagues and patients. "We now have confidence that we do not need to recap (needles) and that we can protect ourselves (from HIV transmission)," Nurse Karanja said.

Following the training in mid-August 2006, the Maternal and Child Health Department staff at Embu Provincial Hospital analyzed its prescribing habits. By May 2007 the number of curative injections given in the department decreased by nearly 95 percent. Health care workers at the facility reported feeling better protected from HIV in their work environments.

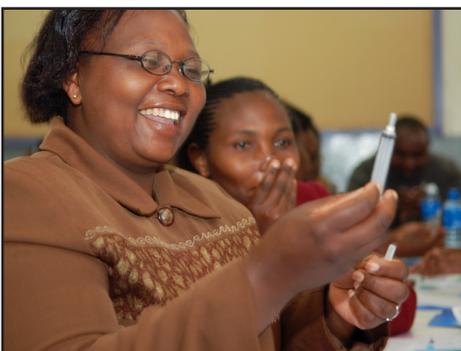


Photo courtesy of M. Wang/MMIS/PATH

During injection safety training, Nurse Consolata Njiru and a colleague test retractable syringe technology designed to prevent HIV transmission caused by needlestick injuries.

To promote sustainability of safe injection practices, injection safety training has also been incorporated into some of Kenya's pre-service medical training institutions, ensuring that the country's future doctors, nurses and other health care providers are trained in safe practices to protect themselves and their patients from medical transmission of HIV.

## Guyana Opens Computer Lab at Local School

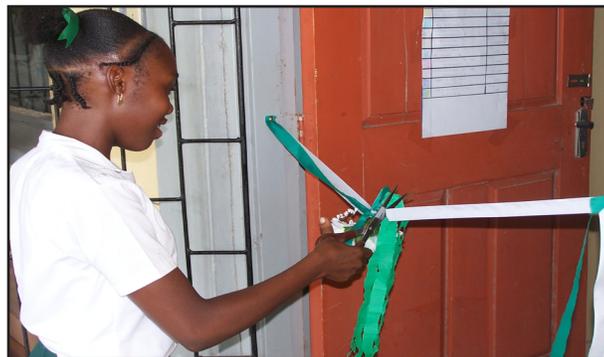


Photo courtesy of Guyana Country team

A student at the Essequibo Islands Secondary School in San Souci, Wakenaam, Guyana cuts the ribbon during the grand opening of the school's new computer lab.



The Essequibo Islands Secondary School in San Souci, Wakenaam, a small island community in Guyana located at the mouth of the Essequibo River, is now home to an information technology laboratory.

The idea of U.S. Peace Corp volunteer Erin Rowe, the project began in 2006 and was officially launched July 20, 2007 by U.S. Ambassador to Guyana, David Robinson. The computer lab offers eight internet-ready workstations — making it the only secondary school on the island with Internet access.

Using a grant obtained from the President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR) and funding from the community, the computer lab provides unlimited resources and research materials for students and community members. After only one week of internet service in the lab, there has been an overwhelming response of interest and excitement from students, teachers and community members.

Computers and the Internet provide a new and creative way to educate users about health topics like HIV/AIDS. One unique feature of the lab is its stigma-reducing HIV/AIDS messages. Each computer desktop displays a different stigma-reducing message, and the homepage of each web browser is set to the Guyana Ministry of Health web page for HIV/AIDS.

Four hundred students are enrolled in the school where they are also exposed to HIV/AIDS education and prevention messages. A community program is also being offered for a small fee to teach marketable computer skills. From these courses, students will gain knowledge about computers and become more competitive in Guyana's workplace.

# Botswana Rolls Out Treatment in Remote Areas



In remote places like Bokspits, Botswana, a growing number of people are accessing antiretroviral therapy (ART) thanks to support from the U.S. President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR). The Kgalahadi District in Botswana was one of the first to roll out treatment to several rural clinics, enabling patients to receive medications where they live instead of traveling long distances.

Out of the 950 people currently on ART in the district, about half reside in remote villages (namely Bokspits, Middelspits and Werda) outside of Tsabong, the district headquarters where antiretroviral drugs (ARVs) are dispensed from the primary hospital. Many people in these areas are unemployed with little or no income and no transportation making it difficult to receive treatment. Recognizing this, district officials pushed for the rollout of treatment to satellite clinics.

The Kgalahadi District began rolling out ART in the village of Middelspits in August 2006. In April 2007, they expanded the program to Werda. A mobile caravan allows the doctors at the two clinics to take treatment to Bokspits

**A mobile caravan allows the doctors at the two clinics to take treatment to Bokspits and other remote places at least once a month.**

and other remote places at least once a month. This expansion has enabled patients enrolled at the primary hospital in Tsabong to be transferred to closer clinics.

Nurses and lay counselors at the clinics and surrounding health posts say the rollout has already made an impact in their communities.

"Word is getting out that ARVs are now available here, so we have seen people come in big numbers to test for HIV," Lenah Metswi, a lay counselor at Middelspits Clinic, said. "I think there is less hesitancy now knowing that they can get this service at home without having to travel so far."

Botswana has been at the forefront of the response, to the HIV/AIDS pandemic. In 2002, it was one of the first countries in Africa to provide its citizens free

HIV/AIDS treatment. Now more than 90 percent (approximately 82,500) of those estimated to need treatment are receiving it. The U.S. Government, through PEPFAR, is supporting Botswana's treatment efforts with more than \$18.5 million in Fiscal Year (FY) 2006 and \$25.1 million in FY 2007.

**View more photos online:**

<http://www.pepfar.gov/press/c19566.htm>



Photo by Botswana in-country team

Nurse Peggy Thumpe dispenses ARVs at the Middelspits Clinic.

Sophia Busang lives in the tiny village of Bokspits, located in the southernmost tip of Botswana. Once

the winner of a local beauty pageant, Sophia's life changed dramatically when she learned she was HIV positive. The disease stripped her health and confidence, but with the help of life-saving ARVs, Sophia once again walks with the poise of a former beauty queen.

"I used to walk like this," she says, demonstrating her illness by

crouching low, holding her stomach and moaning. Then, with a wide and toothy grin, she suddenly stands upright. "Now (with ARVs), I am like this again," she says, marching in big steps with her head held high.

Sophia's story is one of many surfacing in far-off places like Bokspits, one of the most remote villages in the Kalahari where a growing number of people are benefiting from the ART program.

Dr. Mwala, a clinic doctor, attributes the successes of the ART rollout to the motivated workers who support the clinics and health posts at the grassroots level. "Their level of commitment and record keeping is remarkable," Mwala said. "Without them this rollout couldn't have happened."

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vided services to 40,000 OVCs.

The TUNAJALI Care & Treatment program is working to support improved access to antiretroviral treatment (ART) for Tanzanians living with HIV/AIDS. Project goals include enrolling more than 30,000 people in 38 participating hospitals and health centers and ensuring that 15,000 individuals are on ART. Treatment services will be available in all districts of Dodoma, Iringa, Morogoro and Singida.